



QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2015
OF THE CONDITION AND AFFAIRS OF THE

Gateway Insurance Company

NAIC Group Code 04795 , 04795 NAIC Company Code 28339 Employer's ID Number 43-0762309
(Current Period) (Prior Period)

Organized under the Laws of Missouri State of Domicile or Port of Entry Missouri

Country of Domicile United States

Incorporated/Organized 05/21/1986 Commenced Business 12/01/1986

Statutory Home Office 1401 S Brentwood Blvd., Ste 925 , St. Louis, MO, US 63144-1416
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 150 Northwest Point Blvd, 3rd Floor Elk Grove Village, IL, US 60007 847-472-6700
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 150 Northwest Point Blvd, 3rd Floor Elk Grove Village, IL, US 60007
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 150 Northwest Point Blvd, 3rd Floor Elk Grove Village, IL, US 60007 847-700-8603
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address www.atlas-fin.com

Statutory Statement Contact Paul Anthony Romano 847-700-8603
(Name) (Area Code) (Telephone Number) (Extension)

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(E-Mail Address) (Fax Number)

OFFICERS

Name	Title	Name	Title
<u>Scott David Wollney</u>	<u>President, CEO</u>	<u>Paul Anthony Romano</u>	<u>VP, CFO, Treasurer</u>
<u>Leslie Patterson DiMaggio</u>	<u>Secretary, VP Operations</u>		

OTHER OFFICERS

<u>Bruce Wayne Giles</u>	<u>VP Product Development & Underwriting</u>	<u>Joseph Raymond Shugrue</u>	<u>VP Claims</u>
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DIRECTORS OR TRUSTEES

<u>Daniel Joseph Boxell</u>	<u>Leslie Patterson DiMaggio</u>	<u>Bruce Wayne Giles</u>	<u>Serena Marie Lintker</u>
<u>Zenovia Diane Love</u>	<u>Paul Anthony Romano</u>	<u>Joseph Raymond Shugrue</u>	<u>Lyn Dianne Ward</u>
<u>Scott David Wollney</u>			

State of Illinois

County of Cook 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.

Scott David Wollney Paul Anthony Romano Leslie Patterson DiMaggio
President, CEO VP, CFO, Treasurer Secretary, VP Operations

Subscribed and sworn to before me this
9th day of November, 2015

Louis Charouhis, Sr. Staff Accountant
March 1, 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



STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Gateway Insurance Company

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	33,055,879	0	33,055,879	31,257,861
2. Stocks:				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens	0		0	0
3.2 Other than first liens	0		0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$ encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$ encumbrances)	0	0	0	0
5. Cash (\$3,168,469), cash equivalents (\$0) and short-term investments (\$2,000)	3,170,469	0	3,170,469	2,427,670
6. Contract loans (including \$ premium notes)	0		0	0
7. Derivatives	0		0	0
8. Other invested assets	211,378	0	211,378	0
9. Receivables for securities	0		0	0
10. Securities lending reinvested collateral assets	0		0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	36,437,726	0	36,437,726	33,685,531
13. Title plants less \$ charged off (for Title insurers only)	0		0	0
14. Investment income due and accrued	170,822	0	170,822	183,646
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	4,115,710	0	4,115,710	1,730,026
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	16,671,812	0	16,671,812	10,056,768
15.3 Accrued retrospective premiums	0		0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	2,282,416		2,282,416	3,779,012
16.2 Funds held by or deposited with reinsured companies	0		0	0
16.3 Other amounts receivable under reinsurance contracts	0		0	0
17. Amounts receivable relating to uninsured plans	0		0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	0		0	351,145
18.2 Net deferred tax asset	3,584,704	1,557,734	2,026,970	1,071,163
19. Guaranty funds receivable or on deposit	2,052		2,052	3,478
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0		0	0
23. Receivables from parent, subsidiaries and affiliates	1,525		1,525	5,379
24. Health care (\$) and other amounts receivable			0	0
25. Aggregate write-ins for other-than-invested assets	255,015	228,774	26,242	32,197
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	63,521,782	1,786,508	61,735,274	50,898,344
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	63,521,782	1,786,508	61,735,274	50,898,344
DETAILS OF WRITE-INS				
1101.			0	0
1102.			0	0
1103.			0	0
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
2501. Receivable from pools	26,242		26,242	32,197
2502. Prepaid expenses	201,478	201,478	0	0
2503. Other assets - security deposit	23,523	23,523	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	3,772	3,772	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	255,015	228,774	26,242	32,197

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$5,714,662)	13,516,353	14,581,162
2. Reinsurance payable on paid losses and loss adjustment expenses	1,129,484	3,014,075
3. Loss adjustment expenses	3,122,306	2,921,815
4. Commissions payable, contingent commissions and other similar charges	1,980,082	1,046,172
5. Other expenses (excluding taxes, licenses and fees)	320,078	448,481
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	376,342	228,681
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))	175,916	0
7.2 Net deferred tax liability	0	0
8. Borrowed money \$0 and interest thereon \$	0	0
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$20,487,467 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)	14,423,404	11,064,530
10. Advance premium	0	0
11. Dividends declared and unpaid:		
11.1 Stockholders	0	0
11.2 Policyholders	0	0
12. Ceded reinsurance premiums payable (net of ceding commissions)	8,783,033	5,894,202
13. Funds held by company under reinsurance treaties	800,000	800,000
14. Amounts withheld or retained by company for account of others	51,732	80,368
15. Remittances and items not allocated	11,136	8,550
16. Provision for reinsurance (including \$ certified)	153,000	153,000
17. Net adjustments in assets and liabilities due to foreign exchange rates	0	0
18. Drafts outstanding	0	0
19. Payable to parent, subsidiaries and affiliates	85,994	1,073,936
20. Derivatives	0	0
21. Payable for securities	0	0
22. Payable for securities lending	0	0
23. Liability for amounts held under uninsured plans	0	0
24. Capital notes \$ and interest thereon \$	0	0
25. Aggregate write-ins for liabilities	(1,088,068)	(3,310,345)
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	43,840,792	38,004,627
27. Protected cell liabilities		0
28. Total liabilities (Lines 26 and 27)	43,840,792	38,004,627
29. Aggregate write-ins for special surplus funds	0	0
30. Common capital stock	3,815,000	3,815,000
31. Preferred capital stock	0	0
32. Aggregate write-ins for other than special surplus funds	0	0
33. Surplus notes	3,000,000	0
34. Gross paid in and contributed surplus	7,434,572	7,434,572
35. Unassigned funds (surplus)	3,644,910	1,644,145
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)	0	0
36.2 shares preferred (value included in Line 31 \$)	0	0
37. Surplus as regards policyholders (Lines 29 to 35, less 36)	17,894,482	12,893,718
38. Totals (Page 2, Line 28, Col. 3)	61,735,274	50,898,344
DETAILS OF WRITE-INS		
2501. Unearned ceding commissions.....	407,563	87,972
2502. Escheatables.....	93,587	29,238
2503. GAB loss fund.....	89,580	77,384
2598. Summary of remaining write-ins for Line 25 from overflow page	(1,678,798)	(3,504,940)
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	(1,088,068)	(3,310,345)
2901.		0
2902.		0
2903.		0
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0
3201.		0
3202.		0
3203.		0
3298. Summary of remaining write-ins for Line 32 from overflow page	0	0
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)	0	0

STATEMENT OF INCOME

	1	2	3
	Current Year	Prior Year	Prior Year Ended
	to Date	to Date	December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ 29,537,497)	19,205,939	8,761,731	12,855,674
1.2 Assumed (written \$ 21,923,303)	18,558,456	14,097,254	19,572,247
1.3 Ceded (written \$ 29,560,811)	19,223,279	8,692,052	12,803,157
1.4 Net (written \$ 21,899,990)	18,541,115	14,166,933	19,624,764
DEDUCTIONS:			
2. Losses incurred (current accident year \$ 7,953,686):			
2.1 Direct	6,492,109	3,970,667	3,313,514
2.2 Assumed	7,342,156	6,729,018	7,086,579
2.3 Ceded	6,493,710	3,888,219	3,239,993
2.4 Net	7,340,555	6,811,467	7,160,100
3. Loss adjustment expenses incurred	3,376,460	2,035,581	5,055,597
4. Other underwriting expenses incurred	5,504,396	4,399,449	5,776,399
5. Aggregate write-ins for underwriting deductions	13,077	0	0
6. Total underwriting deductions (Lines 2 through 5)	16,234,488	13,246,496	17,992,096
7. Net income of protected cells	0	0	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	2,306,627	920,437	1,632,668
INVESTMENT INCOME			
9. Net investment income earned	299,667	329,802	451,354
10. Net realized capital gains (losses) less capital gains tax of \$ 72,701	(98,806)	(139,693)	(35,825)
11. Net investment gain (loss) (Lines 9 + 10)	200,861	190,109	415,529
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ (33) amount charged off \$ 71,124)	(71,157)	(83,930)	(92,851)
13. Finance and service charges not included in premiums	85,646	63,942	89,708
14. Aggregate write-ins for miscellaneous income	(88,797)	34,441	44,191
15. Total other income (Lines 12 through 14)	(74,308)	14,452	41,048
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	2,433,180	1,124,998	2,089,245
17. Dividends to policyholders	0	0	(391)
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	2,433,180	1,124,998	2,089,635
19. Federal and foreign income taxes incurred	1,144,360	550,556	414,101
20. Net income (Line 18 minus Line 19)(to Line 22)	1,288,820	574,442	1,675,534
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	12,893,718	11,249,572	11,249,572
22. Net income (from Line 20)	1,288,820	574,442	1,675,534
23. Net transfers (to) from Protected Cell accounts	0	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ (30,131)	(58,491)	0	0
25. Change in net unrealized foreign exchange capital gain (loss)	0	0	0
26. Change in net deferred income tax	420,309	355,265	1,618,724
27. Change in nonadmitted assets	350,126	(166,776)	(1,497,113)
28. Change in provision for reinsurance	0	0	(153,000)
29. Change in surplus notes	3,000,000	0	0
30. Surplus (contributed to) withdrawn from protected cells	0	0	0
31. Cumulative effect of changes in accounting principles	0	0	0
32. Capital changes:			
32.1 Paid in	0	0	0
32.2 Transferred from surplus (Stock Dividend)	0	0	0
32.3 Transferred to surplus	0	0	0
33. Surplus adjustments:			
33.1 Paid in	0	0	0
33.2 Transferred to capital (Stock Dividend)	0	0	0
33.3 Transferred from capital	0	0	0
34. Net remittances from or (to) Home Office	0	0	0
35. Dividends to stockholders	0	0	0
36. Change in treasury stock	0	0	0
37. Aggregate write-ins for gains and losses in surplus	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37)	5,000,764	762,931	1,644,146
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	17,894,482	12,012,504	12,893,718
DETAILS OF WRITE-INS			
0501. Premium deficiency expense	13,077	0	0
0502.		0	0
0503.		0	0
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0
0599. TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)	13,077	0	0
1401. Miscellaneous income	3,415	258	646
1402. Fines and penalties	(32,834)	(890)	(929)
1403. Retroactive reinsurance income	(59,378)	33,152	42,553
1498. Summary of remaining write-ins for Line 14 from overflow page	0	1,920	1,920
1499. TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)	(88,797)	34,441	44,191
3701.		0	0
3702.		0	0
3703.		0	0
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0	0
3799. TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above)	0	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.....	15,788,093	17,584,572	21,673,608
2. Net investment income	472,214	490,691	632,719
3. Miscellaneous income	(74,308)	14,452	41,048
4. Total (Lines 1 to 3)	16,185,999	18,089,716	22,347,375
5. Benefit and loss related payments	8,560,599	6,082,046	8,902,389
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	8,289,806	6,948,738	8,481,541
8. Dividends paid to policyholders	0	0	1,562
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses).....	690,000	505,000	935,000
10. Total (Lines 5 through 9)	17,540,406	13,535,784	18,320,492
11. Net cash from operations (Line 4 minus Line 10)	(1,354,407)	4,553,932	4,026,883
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	6,249,561	909,477	4,131,792
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	1	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	6,249,561	909,477	4,131,792
13. Cost of investments acquired (long-term only):			
13.1 Bonds	8,233,408	5,248,859	11,420,787
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	300,000	0	0
13.6 Miscellaneous applications	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	8,533,408	5,248,859	11,420,787
14. Net increase (or decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(2,283,847)	(4,339,382)	(7,288,995)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	3,000,000	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0	0
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	0	0
16.6 Other cash provided (applied).....	1,381,052	2,029,699	2,977,754
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	4,381,052	2,029,699	2,977,754
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)	742,799	2,244,250	(284,358)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	2,427,670	2,712,029	2,712,029
19.2 End of period (Line 18 plus Line 19.1)	3,170,469	4,956,278	2,427,670

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies:

A. Accounting Practices

The accompanying financial statements of Gateway Insurance Company (the Company) have been prepared in conformity with accounting practices prescribed or permitted by the Missouri Department of Insurance.

The Missouri Department of Insurance recognizes only statutory accounting practices (SAP) prescribed or permitted by the State of Missouri for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Missouri Insurance Law. The National Association of Insurance Commissioners’ (NAIC) *Accounting Practices and Procedures manual*, (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Missouri.

The Missouri Department of Insurance has adopted certain prescribed accounting practices that differ from those found in the NAIC SAP. The company did not utilize any of the Missouri prescribed or permitted accounting practices that depart from NAIC SAP during 2015 or 2014.

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

NET INCOME		State of Domicile	2015	2014
(1)	Missouri Company state basis (page 4, line 20, columns 1 & 3)	MO	\$ 1,288,820	\$ 1,675,534
(2)	State prescribed practices that increase/(decrease) NAIC SAP:	MO	\$ 0	\$ 0
(3)	NAIC SAP (1-2=3)	MO	\$ 1,288,820	\$ 1,675,534
SURPLUS				
(4)	Missouri Company state basis (page 3, line 37, columns 1 & 2)	MO	\$ 17,894,482	\$ 12,893,718
(5)	State prescribed practices that increase/(decrease) NAIC SAP:	MO	\$ 0	\$ 0
(6)	NAIC SAP (4-5=6)	MO	\$ 17,894,482	\$ 12,893,718

C. Accounting Policy

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

No significant changes to the remainder of the note.

2. Accounting Changes and Corrections of Errors:

No significant changes.

3. Business Combinations and Goodwill:

No significant changes.

4. Discontinued Operations:

No significant changes.

5. Investments:

D. Loan-Backed Securities

- 1) Prepayment assumptions were obtained from Bloomberg market data and the Company’s investment manager’s internal estimates.

2) The Company does not have any loan-backed securities with a recognized other-than-temporary impairment.

3) The Company does not have any loan-backed securities with a recognized other-than-temporary impairment.

4) All impaired securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss are as follows:

(a) The aggregate amount of unrealized losses:

1. Less than 12 Months

\$ 2,587

2. 12 Months or Longer

\$ 23,657

(b) The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months

\$ 1,589,954

2. 12 Months or Longer

\$ 2,824,312

5) Bonds in an unrealized loss position are regularly reviewed for other-than-temporary declines in value. Factors considered in determining whether a decline is other-than-temporary include the length of time a bond has been in an unrealized loss position and the reasons for the decline in value. Assessments include judgments about an obligor’s or guarantor’s current and projected financial position, projected ability to service and repay its debt obligations, the existence of, and realizable value for, any collateral backing the obligations, and the macro-economic and micro-economic outlooks for specific industries and issuers. Estimating the future cash flows of loan-
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NOTES TO FINANCIAL STATEMENTS

backed securities also involves assumptions regarding the underlying collateral such as prepayment rates, default and recovery rates, existence of subordinated classes capable of absorbing losses, and third-party servicing abilities.

E. Repurchase Agreements

The Company does not have any repurchase agreements.

I. Working Capital Finance Investments

The Company does not have any working capital finance investments.

J. Offsetting and Netting of Assets and Liabilities

The Company does not have offsetting or netting to report.

No significant changes to the remainder of the note.

6. Joint Ventures, Partnerships, and Limited Liability Companies:

No significant changes.

7. Investment Income:

No significant changes.

8. Derivative Investments:

No significant changes.

9. Income Taxes:

No significant changes.

10. Information Concerning Parent, Subsidiaries and Affiliates:

A. On March 11, 2015, Atlas Financial Holdings, Inc. (AFH) and American Insurance Acquisition, Inc. (AIA), the Company's ultimate parent and direct parent, respectively, acquired Anchor Holdings Group, Inc. (AHG), the parent company of Global Liberty Insurance Company of New York (GLI) along with its affiliated underwriting and premium finance companies. AFH and AIA purchased all the outstanding common shares of AHG, GLI, and affiliates for a combination of cash and AFH preferred shares subject to final adjustment based on year-end financial results.

On May 1, 2015, the Company received a contribution of \$3.0 million in the form of a surplus note from its parent, AIA.

No significant changes for the remainder of the note.

11. Debt:

During the period covered by this statement, the Company had no outstanding debt.

12. Retirement Plans, Deferred Compensation, Post-employment Benefits and Compensated Absences and Other Post-retirement Benefit Plans:

A. Defined Benefit Plan

The Company does not participate in a defined benefit plan.

No significant changes to the remainder of the note.

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations:

11) The Company issued the following surplus debentures or similar obligations:

<u>Date Issued</u>	<u>Interest Rate</u>	<u>Par Value (Face Amount of Note)</u>	<u>Carrying Value of Note</u>	<u>Principal and/or Interest Paid Current Year</u>	<u>Total Principal and/or Interest Paid</u>	<u>Unapproved Principal and/or Interest</u>	<u>Date of Maturity</u>
May 1, 2015	Prime + 2% not to exceed 10%	\$3,000,000	\$3,000,000	\$66,021	\$66,021	\$3,000,000	May 1, 2020

A surplus note in the amount of \$3,000,000 was issued to AIA in exchange for cash.

The surplus note has the following repayment conditions and restrictions: Each payment of interest on and principal of the surplus note may be made only with the prior approval of the Missouri Department of Insurance and only to the extent the Company has sufficient surplus earnings to make such payment. In addition, no principal or interest shall be paid if the payment reduces the Company’s surplus below \$12,900,000.

The surplus note has the following subordination terms: Repayment of the principal and interest shall be and is hereby subordinated to the prior payment of, or provision for, all general liabilities of the Company and the claims of policyholders and creditors of the Company, but shall rank superior to the claim, interest and equity of the shares or shareholders of the Company, and such subordination shall be equally applicable in the case of any merger,

NOTES TO FINANCIAL STATEMENTS

consolidation, liquidation, rehabilitation, reorganization, dissolution, sale or other disposal of all, or substantially all, of the assets of the Company.

No significant changes for the remainder of the note.

14. Liabilities, Contingencies and Assessments:

No significant changes.

15. Leases:

No significant changes.

16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk:

No significant changes.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishment of Liabilities:

The Company had no transfers of receivables reported as sales, no transfers and servicing of financial assets and no wash sales.

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

No significant changes.

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

No significant changes.

20. Fair Value Measurement:

A. The Company does not have any assets or liabilities that are measured at fair value at September 30, 2015.

C.

Type of Financial Instrument	Aggregate		Admitted Assets	Level 1	Level 2	Level 3	Not Practicable (Carrying Value)
	Fair Value						
Long Term Bonds	\$33,255,594	\$33,055,879	\$4,183,546	\$29,072,047	\$0	\$0	\$0
Short Term Bonds	\$2,000	\$2,000	\$2,000	\$0	\$0	\$0	\$0

D. The Company does not have any assets that are not practicable to estimate fair value as of September 30, 2015.

21. Other Items:

I. Risk Sharing Provisions of the Affordable Care Act

The Company does not transact any accident and health business.

No significant changes for the remainder of the note.

22. Events Subsequent:

There are no material subsequent events.

23. Reinsurance:

No significant changes.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination:

No significant changes.

25. Change in Incurred Losses and Loss Adjustment Expenses:

Reserves as of December 31, 2014 were \$17.5 million. As of September 30, 2015, \$8.5 million has been paid for incurred losses and loss adjustment expenses attributable to insured events of prior accident years. Reserves remaining for prior years are now \$8.2 million as a result of re-estimation of unpaid claims and claim adjustment expenses principally on private passenger and commercial auto lines of business. Therefore, there has been favorable prior-year development of \$811,000 from December 31, 2014 to September 30, 2015. Any 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.

26. Intercompany Pooling Arrangements:

No significant changes.

27. Structured Settlements:

No significant changes.

NOTES TO FINANCIAL STATEMENTS

28.

Health Care Receivables:

No significant changes.
29.

Participating Policies:

No significant changes.
30.

Premium Deficiency Reserves:

No significant changes.
31.

High Deductibles:

No significant changes.
32.

Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses:

No significant changes.
33.

Asbestos/Environmental Reserves:

No significant changes.
34.

Subscriber Savings Accounts:

No significant changes.
35.

Multiple Peril Crop Insurance:

No significant changes.
36.

Financial Guaranty Insurance:

The Company does not transact any financial guaranty business.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

- 1.1

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

Yes ☐ No ☒
- 1.2

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

Yes ☐ No ☐
- 2.1

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

Yes ☐ No ☒
- 2.2

If yes, date of change:
- 3.1

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

Yes ☒ No ☐
- If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2

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

Yes ☐ No ☒
- 3.3

If the response to 3.2 is yes, provide a brief description of those changes.
- 4.1

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

Yes ☐ No ☒
- 4.2

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

1 Name of Entity	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?

Yes ☐ No ☒ NA ☐
- If yes, attach an explanation.
- 6.1

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

12/31/2011
- 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.

12/31/2011
- 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).

05/16/2013
- 6.4

By what department or departments?

Missouri Department of Insurance
- 6.5

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

Yes ☒ No ☐ NA ☐
- 6.6

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

Yes ☒ No ☐ NA ☐
- 7.1

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

Yes ☐ No ☒
- 7.2

If yes, give full information:
- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes ☐ No ☒
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes ☐ No ☒
- 8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

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

GENERAL INTERROGATORIES

9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(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:.....\$30

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:\$

13.

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

14.1

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

Yes [] No [X]

14.2

If yes, please complete the following:

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

If no, attach a description with this statement.

GENERAL INTERROGATORIES

- 16 For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

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

16.3 Total payable for securities lending reported on the liability page
- \$

\$

\$

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
Fifth Third Bank.....	222 South Riverside Plaza, 29th Floor, Chicago, IL 60606.....

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 [X] No []

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

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
Bank of America.....	Fifth Third Bank.....	08/10/2015.....	Cost efficiency.....

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

1 Central Registration Depository	2 Name(s)	3 Address
109875.....	Asset Allocation & Management Company, LLC.....	30 W Monroe Street, 3rd Floor, Chicago, IL 60603.....

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

Yes [X] No []

18.2 If no, list exceptions:
.....

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

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

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

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

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

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

4.2 If yes, complete the following schedule:

			TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
1	2	3	4	5	6	7	8	9	10	11
Line of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL
TOTAL			0	0	0	0	0	0	0	0

5. Operating Percentages:

5.1 A&H loss percent

5.2 A&H cost containment percent

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

%

%

%

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

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

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

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

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Gateway Insurance Company

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

[illegible]

6

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Gateway Insurance Company

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

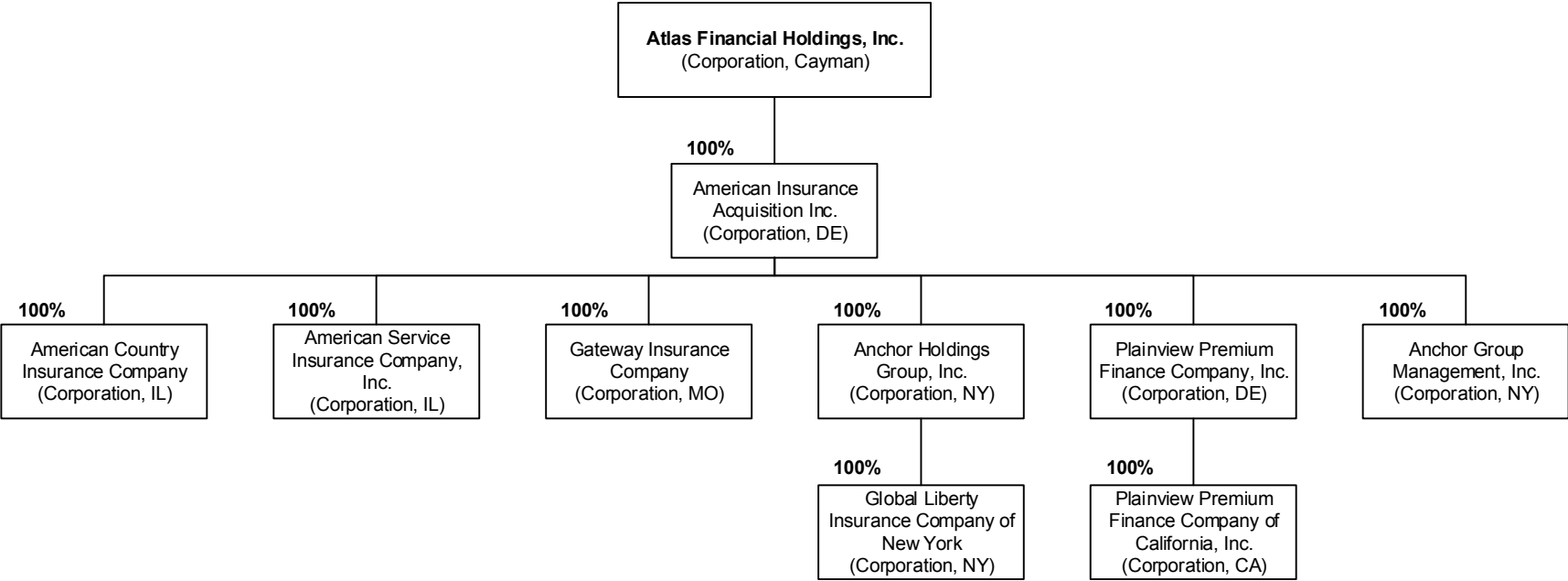
Current Year to Date - Allocated by States and Territories								
		1	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
			2	3	4	5	6	7
States, etc.		Active Status	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date
1. Alabama	AL	L	103,612	63,320	232,500	722	(1,487)	199,230
2. Alaska	AK	L	0	(36,567)	0	0	0	20,724
3. Arizona	AZ	L	304,036	125,544	146,893	80,220	113,340	409,842
4. Arkansas	AR	L	275,148	0	0	239	77,252	56,525
5. California	CA	L	11,059,282	5,897,006	2,018,233	1,145,747	3,818,228	2,787,688
6. Colorado	CO	L	354,692	314,435	25,172	379,815	130,812	6,883
7. Connecticut	CT	N	0	0	0	0	0	0
8. Delaware	DE	L	0	0	0	0	0	16,727
9. Dist. Columbia	DC	L	0	0	0	0	0	0
10. Florida	FL	L	0	26,571	497,226	813,616	691,642	2,023,735
11. Georgia	GA	L	83,474	13,588	7,741	0	440,936	375,540
12. Hawaii	HI	L	0	0	82,527	128,370	14,546	425,411
13. Idaho	ID	L	76,460	19,215	40,000	0	693	73,685
14. Illinois	IL	L	31,278	112,347	892,827	1,076,458	1,949,330	2,979,028
15. Indiana	IN	L	41,598	(15,285)	171,548	269,447	962,231	567,076
16. Iowa	IA	L	63,159	6,509	54,324	237,885	73,607	476,260
17. Kansas	KS	L	214,215	273,979	8,042	77,584	96,779	220,467
18. Kentucky	KY	L	486,810	348,796	152,336	133,925	235,661	388,127
19. Louisiana	LA	L	2,735,245	311,448	356,310	194,067	484,153	274,499
20. Maine	ME	L	402,164	449,883	80,100	11,816	199,674	117,591
21. Maryland	MD	L	553,476	9,218	108,507	5,985	71,301	307,066
22. Massachusetts	MA	N	0	0	0	0	0	0
23. Michigan	MI	L	0	(28,637)	0	0	0	6,328
24. Minnesota	MN	L	3,189,799	99,179	113,139	104,795	1,053,181	364,610
25. Mississippi	MS	L	267,613	185,211	74,498	86,733	285,419	490,208
26. Missouri	MO	L	1,469,971	373,506	512,665	471,650	785,305	1,520,457
27. Montana	MT	L	0	0	0	0	0	44,365
28. Nebraska	NE	L	219,123	210,228	86,725	47,251	355,204	303,615
29. Nevada	NV	L	506,451	(1,044)	0	0	18,743	37,437
30. New Hampshire	NH	N	0	0	0	0	0	0
31. New Jersey	NJ	N	0	0	0	0	0	0
32. New Mexico	NM	L	64,938	33,199	377	0	14,434	56,789
33. New York	NY	L	0	(46,939)	242,781	49,883	249,906	757,102
34. No. Carolina	NC	L	0	(6,184)	0	4,000	0	17,479
35. No. Dakota	ND	L	40,454	45,318	8,207	10,418	32,861	25,990
36. Ohio	OH	L	0	7,909	259,688	62,576	200,994	637,899
37. Oklahoma	OK	L	214,878	(28,136)	42,478	160,681	73,309	269,350
38. Oregon	OR	L	102,574	0	0	2,548	2,995	(2,548)
39. Pennsylvania	PA	L	0	(18,762)	192,623	438,689	(91,765)	1,690,657
40. Rhode Island	RI	L	0	0	0	0	0	0
41. So. Carolina	SC	L	1,142,058	341,837	194,123	163,067	419,688	326,562
42. So. Dakota	SD	L	43,931	39,077	3,302	5,465	33,668	213,690
43. Tennessee	TN	L	204,825	96,674	36,080	432,212	851,217	575,568
44. Texas	TX	L	1,657,138	612,588	1,191,884	509,021	639,342	2,283,770
45. Utah	UT	L	38,120	0	0	0	158,489	250,436
46. Vermont	VT	L	0	0	0	0	0	0
47. Virginia	VA	L	381,149	11,595	29,668	72,133	63,040	139,631
48. Washington	WA	L	2,373,908	851,222	211,630	160,484	565,568	216,800
49. West Virginia	WV	L	324,288	314,424	39,689	125,788	171,632	104,999
50. Wisconsin	WI	L	511,629	216,257	304,764	206,328	2,300,549	1,243,530
51. Wyoming	WY	L	0	0	0	0	0	0
52. American Samoa	AS	N	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0
54. Puerto Rico	PR	N	0	0	0	0	0	0
55. U.S. Virgin Islands	VI	N	0	0	0	0	0	0
56. Northern Mariana Islands	MP	N	0	0	0	0	0	0
57. Canada	CAN	N	0	0	0	0	0	0
58. Aggregate Other Alien	OT	XXX	0	0	0	0	0	0
59. Totals	(a)	47	29,537,497	11,228,531	8,418,606	7,669,617	17,542,475	23,300,828
DETAILS OF WRITE-INS								
58001.		XXX						
58002.		XXX						
58003.		XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page		XXX	0	0	0	0	0	0
58999. TOTALS (Lines 58001 through 58003 plus 58998) (Line 58 above)		XXX	0	0	0	0	0	0

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

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

As At:
September 30, 2015



Atlas Ownership Percentages	
Public Shareholders Holding Less Than 10% Each	100%
Total	100%

12

12

12

1212

PART 1 - LOSS EXPERIENCE

Line of Business		Current Year to Date			4 Prior Year to Date Direct Loss Percentage
		1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1.	Fire	0	0	0.0	0.0
2.	Allied lines	0	0	0.0	0.0
3.	Farmowners multiple peril	0	0	0.0	0.0
4.	Homeowners multiple peril	0	0	0.0	0.0
5.	Commercial multiple peril	0	0	0.0	0.0
6.	Mortgage guaranty	0	0	0.0	0.0
8.	Ocean marine	0	0	0.0	0.0
9.	Inland marine	0	0	0.0	31.7
10.	Financial guaranty	0	0	0.0	0.0
11.1	Medical professional liability -occurrence	0	0	0.0	0.0
11.2	Medical professional liability -claims made	0	0	0.0	0.0
12.	Earthquake	0	0	0.0	0.0
13.	Group accident and health	0	0	0.0	0.0
14.	Credit accident and health	0	0	0.0	0.0
15.	Other accident and health	0	0	0.0	0.0
16.	Workers' compensation	0	(64,057)	0.0	83.6
17.1	Other liability occurrence	153,751	77,194	50.2	(104.5)
17.2	Other liability-claims made	0	0	0.0	0.0
17.3	Excess Workers' Compensation	0	0	0.0	0.0
18.1	Products liability-occurrence	0	0	0.0	0.0
18.2	Products liability-claims made	0	0	0.0	0.0
19.1,19.2	Private passenger auto liability	0	0	0.0	0.0
19.3,19.4	Commercial auto liability	18,071,572	5,707,388	31.6	46.1
21.	Auto physical damage	980,616	771,585	78.7	49.5
22.	Aircraft (all perils)	0	0	0.0	0.0
23.	Fidelity	0	0	0.0	0.0
24.	Surety	0	0	0.0	0.0
26.	Burglary and theft	0	0	0.0	0.0
27.	Boiler and machinery	0	0	0.0	0.0
28.	Credit	0	0	0.0	0.0
29.	International	0	0	0.0	0.0
30.	Warranty	0	0	0.0	0.0
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0.0	0.0
35.	TOTALS	19,205,939	6,492,109	33.8	45.3
DETAILS OF WRITE-INS					
3401.				0.0	0.0
3402.				0.0	0.0
3403.				0.0	0.0
3498.	Sum. of remaining write-ins for Line 34 from overflow page	0	0	0.0	0.0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34)	0	0	0.0	0.0

PART 2 - DIRECT PREMIUMS WRITTEN

Line of Business		1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire	0	0	0
2.	Allied lines	0	0	0
3.	Farmowners multiple peril	0	0	0
4.	Homeowners multiple peril	0	0	0
5.	Commercial multiple peril	0	0	0
6.	Mortgage guaranty	0	0	0
8.	Ocean marine	0	0	0
9.	Inland marine	0	0	78
10.	Financial guaranty	0	0	0
11.1	Medical professional liability-occurrence	0	0	0
11.2	Medical professional liability-claims made	0	0	0
12.	Earthquake	0	0	0
13.	Group accident and health	0	0	0
14.	Credit accident and health	0	0	0
15.	Other accident and health	0	0	0
16.	Workers' compensation	0	0	(157,211)
17.1	Other liability occurrence	74,891	219,665	58,210
17.2	Other liability-claims made	0	0	0
17.3	Excess Workers' Compensation	0	0	0
18.1	Products liability-occurrence	0	0	0
18.2	Products liability-claims made	0	0	0
19.1,19.2	Private passenger auto liability	0	0	0
19.3,19.4	Commercial auto liability	15,783,905	27,675,738	10,775,524
21.	Auto physical damage	990,399	1,642,094	551,930
22.	Aircraft (all perils)	0	0	0
23.	Fidelity	0	0	0
24.	Surety	0	0	0
26.	Burglary and theft	0	0	0
27.	Boiler and machinery	0	0	0
28.	Credit	0	0	0
29.	International	0	0	0
30.	Warranty	0	0	0
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0
35.	TOTALS	16,849,194	29,537,497	11,228,531
DETAILS OF WRITE-INS				
3401.		0		0
3402.		0		0
3403.		0		0
3498.	Sum. of remaining write-ins for Line 34 from overflow page	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34)	0	0	0

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2015 Loss and LAE Payments on Claims Reported as of Prior Year-End	2015 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2015 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11 + 12)
1. 2012 + Prior	4,534	1,059	5,593	2,662	296	2,958	2,623	291	(560)	2,354	751	(1,032)	(281)
2. 2013	3,360	99	3,459	1,900	211	2,111	2,582	287	(1,905)	964	1,122	(1,506)	(384)
3. Subtotals 2013 + prior	7,894	1,158	9,052	4,562	507	5,069	5,205	578	(2,465)	3,318	1,873	(2,538)	(665)
4. 2014	2,861	5,590	8,451	3,067	341	3,408	3,156	351	1,390	4,897	3,362	(3,508)	(146)
5. Subtotals 2014 + prior	10,755	6,748	17,503	7,629	848	8,477	8,361	929	(1,075)	8,215	5,235	(6,046)	(811)
6. 2015	XXX	XXX	XXX	XXX	3,104	3,104	XXX	2,068	6,357	8,425	XXX	XXX	XXX
7. Totals	10,755	6,748	17,503	7,629	3,952	11,581	8,361	2,997	5,282	16,640	5,235	(6,046)	(811)
8. Prior Year-End Surplus As Regards Policy-holders	12,894										Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7
											1. 48.7	2. (89.6)	3. (4.6)
											Col. 13, Line 7 Line 8		
											4. (6.3)		

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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


	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	.....NO.....
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	.....NO.....
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	.....NO.....
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	.....NO.....

Explanation:

1.
2.
3.
4.


Bar Code:

1.




28339201549000003

2.




28339201545500003

3.



28339201536500003

4.



28339201550500003

OVERFLOW PAGE FOR WRITE-INS

PQ002 Additional Aggregate Lines for Page 02 Line 25.
*ASSETS

	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
2504. Other receivables.....	3,772	3,772	0	0
2505.			0	0
2597. Summary of remaining write-ins for Line 25 from Page 02	3,772	3,772	0	0

PQ003 Additional Aggregate Lines for Page 03 Line 25.
*LIAB

	1	2
	Current Statement Date	December 31, Prior Year
2504. Other liability - premium deficiency reserve.....	1,700	
2505. Miscellaneous payable.....	214	446
2506. Retroactive reinsurance reserve ceded.....	(1,680,712)	(3,505,385)
2597. Summary of remaining write-ins for Line 25 from Page 03	(1,678,798)	(3,504,940)

PQ004 Additional Aggregate Lines for Page 04 Line 14.
*STMTINCOME

	1	2	3
	Current Year to Date	Prior Year to Date	Prior Year Ended December 31
1404. Gain/loss on sale of fixed assets.....		1,920	1,920
1497. Summary of remaining write-ins for Line 14 from Page 04	0	1,920	1,920

SCHEDULE A – VERIFICATION

Real Estate

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	.0	.0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		.0
2.2 Additional investment made after acquisition .....		.0
3. Current year change in encumbrances .....		.0
4. Total gain (loss) on disposals .....		.0
5. Deduct amounts received on disposals .....		.0
6. Total foreign exchange change in book/adjusted carrying value .....		.0
7. Deduct current year's other-than-temporary impairment recognized .....		.0
8. Deduct current year's depreciation .....		.0
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) .....	.0	.0
10. Deduct total nonadmitted amounts .....	.0	.0
11. Statement value at end of current period (Line 9 minus Line 10)	0	0

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

SCHEDULE BA – VERIFICATION

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 .....	.0	.0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	300,000	.0
2.2 Additional investment made after acquisition .....		.0
3. Capitalized deferred interest and other .....		.0
4. Accrual of discount .....		.0
5. Unrealized valuation increase (decrease)	(88,622)	.0
6. Total gain (loss) on disposals .....		.0
7. Deduct amounts received on disposals .....		.0
8. Deduct amortization of premium and depreciation .....		.0
9. Total foreign exchange change in book/adjusted carrying value .....		.0
10. Deduct current year's other-than-temporary impairment recognized .....		.0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	211,378	.0
12. Deduct total nonadmitted amounts .....	.0	.0
13. Statement value at end of current period (Line 11 minus Line 12)	211,378	0

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	31,257,856	24,079,338
2. Cost of bonds and stocks acquired	8,233,405	11,420,787
3. Accrual of discount	5,257	5,443
4. Unrealized valuation increase (decrease) .....		.0
5. Total gain (loss) on disposals	(26,105)	88,732
6. Deduct consideration for bonds and stocks disposed of	6,249,558	4,131,792
7. Deduct amortization of premium	164,976	204,652
8. Total foreign exchange change in book/adjusted carrying value .....		.0
9. Deduct current year's other-than-temporary impairment recognized .....		.0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	33,055,879	31,257,856
11. Deduct total nonadmitted amounts .....	.0	.0
12. Statement value at end of current period (Line 10 minus Line 11)	33,055,879	31,257,856

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Gateway Insurance Company

SCHEDULE D - PART 1B

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a).....	28,063,473	2,934,234	3,036,891	(45,262)	26,965,429	28,063,473	27,915,554	28,028,610
2. NAIC 2 (a).....	5,483,437	199,216	530,866	(9,461)	4,117,205	5,483,437	5,142,326	3,925,304
3. NAIC 3 (a).....	0				0	0	0	0
4. NAIC 4 (a).....	0				0	0	0	0
5. NAIC 5 (a).....	0				0	0	0	0
6. NAIC 6 (a).....	0				0	0	0	0
7. Total Bonds	33,546,910	3,133,450	3,567,757	(54,723)	31,082,634	33,546,910	33,057,880	31,953,914
PREFERRED STOCK								
8. NAIC 1	0				0	0	0	0
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4	0				0	0	0	0
12. NAIC 5	0				0	0	0	0
13. NAIC 6	0				0	0	0	0
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	33,546,910	3,133,450	3,567,757	(54,723)	31,082,634	33,546,910	33,057,880	31,953,914

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

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

SCHEDULE DA - PART 1
Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
9199999	2,000	XXX	2,000		

SCHEDULE DA - VERIFICATION
Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	696,053	243,106
2. Cost of short-term investments acquired	5,824,328	11,457,698
3. Accrual of discount		0
4. Unrealized valuation increase (decrease).....		0
5. Total gain (loss) on disposals		0
6. Deduct consideration received on disposals	6,518,381	11,004,750
7. Deduct amortization of premium.....		0
8. Total foreign exchange change in book/adjusted carrying value.....		0
9. Deduct current year's other-than-temporary impairment recognized.....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	2,000	696,053
11. Deduct total nonadmitted amounts.....		0
12. Statement value at end of current period (Line 10 minus Line 11)	2,000	696,053

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

Schedule E - Verification

NONE

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

E04

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 - U.S. States, Territories and Possessions									
.000000-00-0									
Bonds - U.S. Political Subdivisions of States, Territories and Possessions									
.591852-YY-4	MET COUNCIL MINNEAPOLIS-SAINTPAUL MN		07/09/2015	BANK OF AMERICA		306,363	250,000		1FE
2499999 - Bonds - U.S. Political Subdivisions of States, Territories and Possessions						306,363	250,000	0	XXX
Bonds - U.S. Special Revenue									
.162393-E6-3	CHATTANOOGA TN ELEC REVENUE		07/23/2015	BANK OF AMERICA		121,550	100,000		1FE
.190760-GY-8	COBB-MARIETTA COLISEUM & EXHIBIT HALL		08/25/2015	WELLS FARGO		350,000	350,000		1FE
.31307N-YP-3	FG J32518		09/04/2015	ROBERT W. BARID & CO.		722,099	694,431	926	1
3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions						1,193,649	1,144,431	926	XXX
Bonds - Industrial and Miscellaneous (Unaffiliated)									
.00842A-AD-1	ABMT 2015-A A4		07/07/2015	JP MORGAN SECURITIES		248,550	247,930	313	1FE
.17305E-FS-9	CCCIT 2014-A6 A6		09/22/2015	MERRILL LYNCH		508,906	500,000	2,090	1FE
.27806Z-AB-0	EATON CORP		09/02/2015	US BANK		199,216	200,000	1,050	2FE
.98160V-AD-3	WOLS 2015-A A3		07/22/2015	CREDIT SUISSE FIRST BOSTON		299,940	300,000		1FE
.000000-00-0									
.000000-00-0									
.000000-00-0									
.000000-00-0									
.000000-00-0									
3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated)						1,256,612	1,247,930	3,453	XXX
8399997 - Subtotals - Bonds - Part 3						2,756,624	2,642,361	4,379	XXX
8399999 - Subtotals - Bonds						2,756,624	2,642,361	4,379	XXX
9999999 Totals						2,756,624	XXX	4,379	XXX

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

E05

E05

E05

E05

E05

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Gateway Insurance Company

SCHEDULE E - PART 1 - CASH

[illegible]

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter							
1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
NONE							
8699999 Total Cash Equivalents					0	0	0