Form	990-T	Ex	empt Organiz			siness Inco der section 6			rn	ОМВ	No 1545-0687	
. 0		For cale	darid Pi ndar year 2018 or other ta						2018	9) @1Ω	
Depart	ment of the Treasury		► Go to www.irs.go							<u> </u>		
	I Revenue Service	▶ Do	not enter SSN numbers of						(c)(3)	Open to F 501(c)(3)	Public Inspection for Organizations Only	
A	Check box if address changed	(Emplo									cation number	
		AMERICAN INSTITUTE FOR CHARTERED PROPERTY										
	mpt under section	CASUALTY UNDERWRITERS										
X	501(C)(3)	Print or	25 2502012									
\vdash	408(e) 220(e)	l i y pe	720 DECUTERN	structions)	ess activity code							
\vdash	408A530(a)	720 PROVIDENCE ROAD City or town, state or province, country, and ZIP or foreign postal code										
C Boo	C Book value of all assets MALVERN, PA 19355-0716 541800											
	at end of year F Group exemption number (See instructions)											
24	19,250,145.		ck organization type				501(c)	trust	401(a)	trust	Other trust	
H Er	iter the number of		nization's unrelated trade				1. +			(or first) u		
	ide or business her						ıly one, d	complete Parts		•		
			end of the previous se	entence, cor	nplete	Parts I and II, comp	lete a Sc	chedule M for ea	ich additio	nal		
tra	ide or business, th	en comple	ete Parts III-V									
I Du	uring the tax year,	was the	corporation a subsidiar	y ın an affılı	ated g	roup or a parent-sub	sidiary c	ontrolled group?	'. <i></i>	▶∟	Yes X No	
			identifying number of th		rporation							
			FFREY A. SCHEI					e number ▶ 63	10-644	-2100		
Par	Unrelated	Trade o	or Business Incom	е	ſ	(A) Income		(B) Expe	nses		(C) Net	
1a	Gross receipts or :	sales						•				
	Less returns and allowa	_		c Balance				7		<u> </u>		
2	-	-	ule A, line 7)		2					+		
3			2 from line 1c		3			DEC	EIVE	12 181		
4a			ttach Schedule D)		4a		<u> </u>	KLU		1 18		
Ь			Part II, line 17) (attach For		4b 4c			12/ 1/1/	9 1 20	13 /2	!	
С 5	-		rusts		5		1	18/ NOA	7		<u> </u>	
6					6			1 20	SEN			
7			come (Schedule E)		7			<u> 1 00</u>				
8			nts from a controlled organization		8							
9	•		1(c)(7), (9), or (17) organization		9							
10	Exploited exempt	activity in	ncome (Schedule I)	. .	10	819,	422.	86	1,743.			
11	Advertising incom	ne (Sched	ule J)		11	480,	505.	45	5,282.		25,223.	
12			tions, attach schedule) .		12							
13	Total. Combine lin	nes 3 thro	ough 12		13	1,299,		•	7 , 025.		25,223.	
Par			Taken Elsewhere (•					Except	or contri	butions,	
			be directly connec							1		
14			directors, and trustees (\$							1	_	
15										-		
16										 		
17 18			see instructions)							-		
19										-		
20			see instructions for limita									
21	•		4562)									
22			on Schedule A and else						22b			
23												
24	Contributions to d	leferred o	compensation plans						24			
25												
26			Schedule I)									
27	~~~		chedule J)							1	19,670.	
28			chedule)							<u> </u>		
29	~		s 14 through 28								19,670.	
30	, <u>=</u>		le income before net	-						-	5,553.	
31		-	g loss arising in tax yea	-	-	-				+	, ,	
32 For P			e income Subtract line lotice, see instructions.		30 .		· · · · ·		32	<u> </u>	5,553.	
8X2740	180232G 146	ion act N :7	ouce, see mouructions.		τ 7 1	8-7.6F				Fo	m 990-T (2018)	
	302326 140	•			A T	J /. UE					_	

Form	990-T (2018)		Page Z
Pai	t III Total Unrelated Business Taxable Income		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see		
	instructions)	33	5,553.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		-
	instructions).	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum	1	
30	of lines 33 and 34	36	5,553.
		T	1,000.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	31	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,		4 552
	enter the smaller of zero or line 36	38	4,553.
Par	t IV Tax Computation	T T	05.6
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0 21)	39	956.
40	Trusts Taxable at Trust Rates. See instructions for tax computation Income tax on		
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)	40	-
41	Proxy tax. See instructions	41	<u> </u>
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies		956.
Par			
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a	1	
	Other credits (see instructions)	1	
	General business credit Attach Form 3800 (see instructions)	1	
ں ۔	Credit for prior year minimum tax (attach Form 8801 or 8827)	1	
u	Total credits Add lines 45a through 45d	150	
		1 1	956.
46	Subtract line 45e from line 44		
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule) .		956.
48	Total tax. Add lines 46 and 47 (see instructions)		
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	
	Payments A 2017 overpayment credited to 2018	4	
	2018 estimated tax payments	4	
С	Tax deposited with Form 8868	1 1	
d	Foreign organizations Tax paid or withheld at source (see instructions)]	
е	Backup withholding (see instructions)		
f	Credit for small employer health insurance premiums (attach Form 8941) 50f]	
g	Other credits, adjustments, and payments Form 2439		
•	Form 4136 Other Total ▶ 50g		
51	Total payments. Add lines 50a through 50g	51	
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached	52	41.
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	997.
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid		
	· · · · · · · · · · · · · · · · · · ·		
55 Par	Enter the amount of line 54 you want Credited to 2019 estimated tax Refunded Kefunded Kefunded		•
			authority Yes No
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature of		
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization m	•	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	roreign	
	here N/A		X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore	ign trust?	X
	If "Yes," see instructions for other forms the organization may have to file		
58	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		
	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the true, correct, and conseque Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	best of my	knowledge and belief, it is
Sigi		ay the IE	RS discuss this return
Her		•	reparer shown below
		-	ns)? X Yes No
	Print/Type preparer's name Preparer's signature Date		PTIN
Paid	O 0.4 200 00 1 10 1445 10040	ck L if employed	P00460263
Prep	arer		13-4008324
Use			7-330-3000
	Filling address 2001 PARKET ST, SOTTE 1000, FRIDADEDFRITA, FA 19103 Phor	E 10 40	, 550 5000

Schedule A - Cost of Go	ods Sold. E	nter method	d of invento	ry valuation	>					
1 Inventory at beginning of ye	ear . 1			6 Inventory	at end of yea	ar	6			
2 Purchases	2			7 Cost of	goods so	ld. Subtract line				
3 Cost of labor	3			6 from	line 5 En	iter here and in				
4a Additional section 263A co	sts			Part I, line	2		7			
(attach schedule)	4a					section 263A (w	ith resi	pect to	Yes	No
b Other costs (attach schedul				property produced or acquired for resale) apply						
5 Total. Add lines 1 through				to the orga	anization?	<u> </u>		<u></u>		Х
Schedule C - Rent Income (see instructions)	(From Real I	Property a	nd Person	al Property	Leased V	Vith Real Proper	ty)			
1. Description of property					· · · · · · · · · · · · · · · · · · ·					
(1)					·	.				
(2)	-									
(3)										
(4)										
(4)	2. Rent rece	ived or accrue	ed		.					
(a) From personal property (if the				personal property	(fiths 3/a) Deductions directly connected to				e inco	nme
for personal property is more than 10% but not percentage of r				personal property pased on profit or	exceeds in columns 2(a) and 2(b) (attach schedu					лпс
(1)										
(2)					_					
(3)										
(4)										
Total		Total								
(c) Total income. Add totals of co	_			(b) Total deduction Enter here and on						
here and on page 1, Part I, line 6,			_			Part I, line 6, colum				
Schedule E - Unrelated De	ebt-Financed	Income (se	e instructio	ns)						
1 Description of deb	t-financed property			ncome from or debt-financed	debt-fina		connected with or allocable to anced property (b) Other deductions			
·	. , ,		pro	operty	(a) Straight line depreciation (attach schedule)		(attach schedule)			
(1)										
(2)										
(3)										
(4)										
4 Amount of average 5 Average adjusted basis acquisition debt on or allocable to debt-financed property (attach schedule) 5 Average adjusted basis of rallocable to debt-financed property (attach schedule)			4 d	Column Iivided olumn 5		7 Gross income reportable (column 2 x column 6) 8 Allocable dedu (column 6 x total or 3(a) and 3(b)			colum	
(1)				%						
(2)				%	•					
(3)	· -			%						
(4)				%						
			•			re and on page 1, se 7, column (A)		nere and on line 7, colui		
Totals					<u>,</u>					

Page 4

Schedule F-Interest, Annu	uities, Royalties						atio	ns (see	instruction	ons)	<u> </u>	
		Exem	Exempt Controlled Organizations 5 Part of column 4 that is 6 Deductions							0.000		
1 Name of controlled organization	2 Employer identification numb		3 Net unrelated income (loss) (see instructions)		4 Total of specified payments made		- 1			6 Deductions directly connected with income in column 5		
(1)	•											
(2)												
(3)												
(4)												
Nonexempt Controlled Organia	zations											
7 Taxable Income 8 Net unrelated income (loss) (see instructions)		I	9 Total of specified payments made			10 Part of column 9 that is included in the controlling organization's gross income				11 Deductions directly connected with income in column 10		
(1)												
(2)												
(3)										_		
(4)												
Totals		tion 501(c	 :)(7), (9), or (17	▶) Orga	En Pá	iter he	elumns 5 al ere and on l ine 8, colur see inst	page 1, nn (A)	En	dd columns 6 and 11 ter here and on page art I, line 8, column (B	1,
1 Description of income	3 Deductions 4 Set-asides					5 Total deductions and set-asides (col. 3 plus col. 4)						
(1)												
(2)												
(3)												
(4)												
Totals ▶ Schedule I-Exploited Exe	Enter here and of Part I, line 9, co	olumn (A)	er Tha	n Adverti	sina Ir	com	P (SE	e instru	ctions)		Enter here and on pa Part I, line 9, column	
Ochedale i Exploited Exc		oome, our	0				<u> </u>	,	[
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expens directly connected production unrelated business inc	with of	4 Net inconfrom unrelated or business 2 minus colling a gain, colling 5 three colling 5 three colling 6 three	ed tradé (column umn 3) ompute	5 Gross from acti is not un		ity that attribut		able to	7 Excess exen expenses (column 6 min column 5, but more than column 4)	ıus
(1) ATCH 1							-					
(2)												
(3)												
(4)												
Totals	Enter here and on page 1, Part I, line 10, col (A) 819, 422.	Enter here ar page 1, Pa line 10, col 861,	irt I, (B)						-	Enter here an on page 1, Part II, line 26		
Schedule J-Advertising Ir	ncome (see instri	uctions)										
Part I Income From Per	iodicals Report	ed on a Co	onsoli	dated Bas	sis							
1 Name of periodical	2 Gross advertising income	3 Direct advertising of	t	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7		5 Circulation income			6 Readership costs		7 Excess reader costs (column minus column 5 not more that column 4)	6 b, but
(1)												
(2)	_						_					
(3)	_		$\neg \neg$				_					
(4)	<u> </u>		$\neg \neg$,
<u></u>	 											
Totals (carry to Part II, line (5))											5 000 T "	

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)CLM MAGAZINE	480,505	455,282	25,223	6,349	26,019	19,670
(2)						
(3)				-		
(4)			_			
Totals from Part I ▶						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)	,	•	t	Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶	480,505.	455,282.				19,670.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14			