



ANNUAL STATEMENT
For the Year Ended December 31, 2015
OF THE CONDITION AND AFFAIRS OF THE
Southern Fidelity Insurance Company

NAIC Group Code 00000, 00000 NAIC Company Code 10136 Employer's ID Number 20-2380774
Organized under the Laws of Florida, State of Domicile or Port of Entry Florida
Country of Domicile United States
Incorporated/Organized 03/15/2005 Commenced Business 04/07/2005
Statutory Home Office 2255 Killearn Center Boulevard, Tallahassee, FL, US 32309
Main Administrative Office 2255 Killearn Center Boulevard, Tallahassee, FL, US 32309 850-521-3080
Mail Address 2255 Killearn Center Boulevard, Tallahassee, FL, US 32309
Primary Location of Books and Records 2255 Killearn Center Boulevard, Tallahassee, FL, US 32309 850-521-3080
Internet Web Site Address www.southernfidelityins.com
Statutory Statement Contact Keith Edward Martin 850-521-3080-1227
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OFFICERS

Table with 4 columns: Name, Title, Name, Title. Officers listed include James Anthony Graganella (President & CEO), Keith Edward Martin (Treasurer), and Kristie Beavers Mock (Secretary).

OTHER OFFICERS

Table with 4 columns: Name, Title, Name, Title. Other officers listed include Keith Edward Martin (Vice President) and Byron Hamelin Wells (Vice President).

DIRECTORS OR TRUSTEES

Table with 4 columns: Name, Name, Name, Name. Directors listed include Catherine Mashburn Amos, Charles Howard Keaton, Byron Hamelin Wells, James Anthony Graganella, Timothy Lee Smith, John Adams Dowdy Jr., Henry Coleman Satterfield III, Ralph Powell, and William Cox Sr., Keith Edward Martin, Charles William Whittaker.

State of Florida

ss

County of Leon

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.

James Anthony Graganella
President & CEO

Keith Edward Martin
Treasurer

Kristie Beavers Mock
Secretary

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

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company

ASSETS

| | Current Year | | | Prior Year |
|--|--------------|-------------------------|---|-----------------------------|
| | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | 4 Net Admitted Assets |
| 1. Bonds (Schedule D)..... | 130,199,383 | | 130,199,383 | 127,872,740 |
| 2. Stocks (Schedule D): | | | | |
| 2.1 Preferred stocks | 0 | | 0 | 0 |
| 2.2 Common stocks | 0 | | 0 | 0 |
| 3. Mortgage loans on real estate (Schedule B): | | | | |
| 3.1 First liens | | | 0 | 0 |
| 3.2 Other than first liens | | | 0 | 0 |
| 4. Real estate (Schedule A): | | | | |
| 4.1 Properties occupied by the company (less \$ encumbrances)..... | 4,797,694 | | 4,797,694 | 4,768,388 |
| 4.2 Properties held for the production of income (less \$ encumbrances) | 5,742,723 | | 5,742,723 | 5,210,086 |
| 4.3 Properties held for sale (less \$ encumbrances) | | | 0 | 0 |
| 5. Cash (\$7,655,617 , Schedule E-Part 1), cash equivalents (\$26,824,131 , Schedule E-Part 2) and short-term investments (\$0 , Schedule DA)..... | 34,479,748 | | 34,479,748 | 34,597,240 |
| 6. Contract loans (including \$ premium notes)..... | | | 0 | 0 |
| 7. Derivatives (Schedule DB)..... | 0 | | 0 | 0 |
| 8. Other invested assets (Schedule BA) | 0 | | 0 | 0 |
| 9. Receivables for securities | | | 0 | 0 |
| 10. Securities lending reinvested collateral assets (Schedule DL)..... | | | 0 | 0 |
| 11. Aggregate write-ins for invested assets | 0 | 0 | 0 | 0 |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) | 175,219,548 | 0 | 175,219,548 | 172,448,454 |
| 13. Title plants less \$ charged off (for Title insurers only)..... | | | 0 | 0 |
| 14. Investment income due and accrued | 676,150 | | 676,150 | 668,847 |
| 15. Premiums and considerations: | | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection | 765,330 | 50,760 | 714,570 | 116,569 |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)..... | 8,076,088 | | 8,076,088 | 8,435,616 |
| 15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$) | | | 0 | 0 |
| 16. Reinsurance: | | | | |
| 16.1 Amounts recoverable from reinsurers | 224,429 | | 224,429 | 60,526 |
| 16.2 Funds held by or deposited with reinsured companies | | | 0 | 0 |
| 16.3 Other amounts receivable under reinsurance contracts | | | 0 | 0 |
| 17. Amounts receivable relating to uninsured plans | | | 0 | 0 |
| 18.1 Current federal and foreign income tax recoverable and interest thereon | | | 0 | 0 |
| 18.2 Net deferred tax asset..... | 4,289,425 | | 4,289,425 | 4,186,384 |
| 19. Guaranty funds receivable or on deposit | | | 0 | 0 |
| 20. Electronic data processing equipment and software..... | | | 0 | 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 | 0 |
| 23. Receivables from parent, subsidiaries and affiliates | | | 0 | 0 |
| 24. Health care (\$) and other amounts receivable..... | | | 0 | 0 |
| 25. Aggregate write-ins for other-than-invested assets | 1,954,756 | 0 | 1,954,756 | 1,455,420 |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)..... | 191,205,726 | 50,760 | 191,154,966 | 187,371,816 |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts..... | | | 0 | 0 |
| 28. Total (Lines 26 and 27) | 191,205,726 | 50,760 | 191,154,966 | 187,371,816 |
| 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. Florida Insurance Guaranty Association Assessment..... | 62,722 | | 62,722 | 151,917 |
| 2502. CSV Life Insurance..... | 1,892,034 | | 1,892,034 | 1,303,503 |
| 2503. | | | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 | 0 | 0 |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) | 1,954,756 | 0 | 1,954,756 | 1,455,420 |

LIABILITIES, SURPLUS AND OTHER FUNDS

| | 1 Current Year | 2 Prior Year |
|--|-------------------|-----------------|
| 1. Losses (Part 2A, Line 35, Column 8) | 22,597,716 | 18,687,819 |
| 2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6) | | 0 |
| 3. Loss adjustment expenses (Part 2A, Line 35, Column 9) | 2,776,052 | 2,627,796 |
| 4. Commissions payable, contingent commissions and other similar charges | 125,540 | 637,222 |
| 5. Other expenses (excluding taxes, licenses and fees) | 162,287 | 439,600 |
| 6. Taxes, licenses and fees (excluding federal and foreign income taxes) | 1,645,732 | 1,643,098 |
| 7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses)) | 324,034 | 507,331 |
| 7.2 Net deferred tax liability | | 0 |
| 8. Borrowed money \$ and interest thereon \$ | | 0 |
| 9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$20,215,055 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) | 52,051,297 | 54,315,426 |
| 10. Advance premium | 4,021,961 | 3,875,791 |
| 11. Dividends declared and unpaid: | | |
| 11.1 Stockholders | | 0 |
| 11.2 Policyholders | | 0 |
| 12. Ceded reinsurance premiums payable (net of ceding commissions) | 19,308,686 | 21,000,713 |
| 13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19) | 573,087 | 651,741 |
| 14. Amounts withheld or retained by company for account of others | 362,092 | 37,181 |
| 15. Remittances and items not allocated | | 0 |
| 16. Provision for reinsurance (including \$42,000 certified) (Schedule F, Part 8) | 42,000 | 0 |
| 17. Net adjustments in assets and liabilities due to foreign exchange rates | | 0 |
| 18. Drafts outstanding | | 0 |
| 19. Payable to parent, subsidiaries and affiliates | | 0 |
| 20. Derivatives | 0 | 0 |
| 21. Payable for securities | | 0 |
| 22. Payable for securities lending | | 0 |
| 23. Liability for amounts held under uninsured plans | | 0 |
| 24. Capital notes \$ and interest thereon \$ | | 0 |
| 25. Aggregate write-ins for liabilities | 313,559 | 652,481 |
| 26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) | 104,304,043 | 105,076,199 |
| 27. Protected cell liabilities | | 0 |
| 28. Total liabilities (Lines 26 and 27) | 104,304,043 | 105,076,199 |
| 29. Aggregate write-ins for special surplus funds | 1,140,956 | 1,140,956 |
| 30. Common capital stock | 1,600,000 | 1,600,000 |
| 31. Preferred capital stock | | 0 |
| 32. Aggregate write-ins for other-than-special surplus funds | 0 | 0 |
| 33. Surplus notes | 12,132,353 | 14,338,235 |
| 34. Gross paid in and contributed surplus | 30,900,000 | 30,900,000 |
| 35. Unassigned funds (surplus) | 41,077,614 | 34,316,426 |
| 36. Less treasury stock, at cost: | | |
| 36.1 shares common (value included in Line 30 \$) | | 0 |
| 36.2 shares preferred (value included in Line 31 \$) | | 0 |
| 37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39) | 86,850,923 | 82,295,617 |
| 38. Totals (Page 2, Line 28, Col. 3) | 191,154,966 | 187,371,816 |
| DETAILS OF WRITE-INS | | |
| 2501. Premium due to Citizens Property Insurance Corp..... | 1,981 | 37,019 |
| 2502. Advance on Louisiana Grant..... | | 0 |
| 2503. Assessment due to Florida Hurricane Catastrophe Fund and Citizens Property Insurance Corp..... | 311,578 | 615,462 |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) | 313,559 | 652,481 |
| 2901. Additional Admitted Deferred Tax Assets..... | 1,140,956 | 1,140,956 |
| 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) | 1,140,956 | 1,140,956 |
| 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 Current Year | 2 Prior Year |
|---|-------------------------------------|-----------------|
| UNDERWRITING INCOME | | |
| 1. Premiums earned (Part 1, Line 35, Column 4) | 109,198,497 | 111,554,484 |
| DEDUCTIONS: | | |
| 2. Losses incurred (Part 2, Line 35, Column 7) | 43,804,928 | 35,063,003 |
| 3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1) | 7,146,187 | 6,401,879 |
| 4. Other underwriting expenses incurred (Part 3, Line 25, Column 2) | 51,088,415 | 55,759,357 |
| 5. Aggregate write-ins for underwriting deductions | 0 | 0 |
| 6. Total underwriting deductions (Lines 2 through 5) | 102,039,530 | 97,224,239 |
| 7. Net income of protected cells | 0 | 0 |
| 8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7) | 7,158,967 | 14,330,245 |
| INVESTMENT INCOME | | |
| 9. Net investment income earned (Exhibit of Net Investment Income, Line 17) | 3,058,641 | 2,985,449 |
| 10. Net realized capital gains (losses) less capital gains tax of \$ | (Exhibit of Capital Gains (Losses)) | 0 |
| 11. Net investment gain (loss) (Lines 9 + 10) | 3,058,641 | 2,985,449 |
| OTHER INCOME | | |
| 12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ | 0 amount | 0 |
| charged off \$ | 32,104) | 20,626 |
| 13. Finance and service charges not included in premiums | 456,287 | 387,058 |
| 14. Aggregate write-ins for miscellaneous income | 0 | 0 |
| 15. Total other income (Lines 12 through 14) | 424,183 | 407,684 |
| 16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15) | 10,641,791 | 17,723,378 |
| 17. Dividends to policyholders | 0 | 0 |
| 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) | 10,641,791 | 17,723,378 |
| 19. Federal and foreign income taxes incurred | 3,933,704 | 7,042,184 |
| 20. Net income (Line 18 minus Line 19) (to Line 22) | 6,708,087 | 10,681,194 |
| CAPITAL AND SURPLUS ACCOUNT | | |
| 21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2) | 82,295,617 | 72,105,801 |
| 22. Net income (from Line 20) | 6,708,087 | 10,681,194 |
| 23. Net transfers (to) from Protected Cell accounts | 0 | 0 |
| 24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ | 0 | 0 |
| 25. Change in net unrealized foreign exchange capital gain (loss) | 0 | 0 |
| 26. Change in net deferred income tax | 103,041 | 321,174 |
| 27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3) | (7,940) | (16,669) |
| 28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1) | (42,000) | 10,000 |
| 29. Change in surplus notes | (2,205,882) | (2,205,883) |
| 30. Surplus (contributed to) withdrawn from protected cells | 0 | 0 |
| 31. Cumulative effect of changes in accounting principles | 0 | 0 |
| 32. Capital changes: | | |
| 32.1 Paid in | 0 | 0 |
| 32.2 Transferred from surplus (Stock Dividend) | 0 | 0 |
| 32.3 Transferred to surplus | 0 | 0 |
| 33. Surplus adjustments: | | |
| 33.1 Paid in | 0 | 0 |
| 33.2 Transferred to capital (Stock Dividend) | 0 | 0 |
| 33.3 Transferred from capital | 0 | 0 |
| 34. Net remittances from or (to) Home Office | 0 | 0 |
| 35. Dividends to stockholders | 0 | 0 |
| 36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1) | 0 | 0 |
| 37. Aggregate write-ins for gains and losses in surplus | 0 | 1,400,000 |
| 38. Change in surplus as regards policyholders for the year (Lines 22 through 37) | 4,555,306 | 10,189,816 |
| 39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37) | 86,850,923 | 82,295,617 |
| DETAILS OF WRITE-INS | | |
| 0501. | 0 | 0 |
| 0502. | 0 | 0 |
| 0503. | 0 | 0 |
| 0598. Summary of remaining write-ins for Line 5 from overflow page | 0 | 0 |
| 0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above) | 0 | 0 |
| 1401. Grant Funds Released by State of Louisiana | 0 | 0 |
| 1402. | 0 | 0 |
| 1403. | 0 | 0 |
| 1498. Summary of remaining write-ins for Line 14 from overflow page | 0 | 0 |
| 1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above) | 0 | 0 |
| 3701. Additional Admitted Deferred Tax Asset | 0 | 0 |
| 3702. Reclassification of Additional Admitted Deferred Tax Assets to Special Surplus Funds | 0 | 0 |
| 3703. Contribution From Louisiana Grant | 0 | 1,400,000 |
| 3798. Summary of remaining write-ins for Line 37 from overflow page | 0 | 0 |
| 3799. Totals (Lines 3701 through 3703 plus 3798) (Line 37 above) | 0 | 1,400,000 |

CASH FLOW

| | 1 Current Year | 2 Prior Year |
|---|-------------------|-----------------|
| Cash from Operations | | |
| 1. Premiums collected net of reinsurance..... | 105,099,278 | 112,522,607 |
| 2. Net investment income | 3,175,904 | 2,956,192 |
| 3. Miscellaneous income | 424,183 | 407,684 |
| 4. Total (Lines 1 through 3) | 108,699,365 | 115,886,483 |
| 5. Benefit and loss related payments | 40,137,588 | 33,697,478 |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts..... | 0 | 0 |
| 7. Commissions, expenses paid and aggregate write-ins for deductions | 58,872,707 | 62,410,375 |
| 8. Dividends paid to policyholders | 0 | 0 |
| 9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)..... | 4,117,001 | 11,680,000 |
| 10. Total (Lines 5 through 9) | 103,127,296 | 107,787,853 |
| 11. Net cash from operations (Line 4 minus Line 10) | 5,572,069 | 8,098,630 |
| Cash from Investments | | |
| 12. Proceeds from investments sold, matured or repaid: | | |
| 12.1 Bonds | 6,625,000 | 5,850,000 |
| 12.2 Stocks | 0 | 0 |
| 12.3 Mortgage loans | 0 | 0 |
| 12.4 Real estate | 0 | 0 |
| 12.5 Other invested assets | 0 | 0 |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | 0 | 0 |
| 12.7 Miscellaneous proceeds | 0 | 0 |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 6,625,000 | 5,850,000 |
| 13. Cost of investments acquired (long-term only): | | |
| 13.1 Bonds | 8,429,234 | 9,646,797 |
| 13.2 Stocks | 0 | 0 |
| 13.3 Mortgage loans | 0 | 0 |
| 13.4 Real estate | 684,100 | 5,210,086 |
| 13.5 Other invested assets | 0 | 0 |
| 13.6 Miscellaneous applications | 0 | 0 |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) | 9,113,334 | 14,856,883 |
| 14. Net increase (decrease) in contract loans and premium notes | 0 | 0 |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) | (2,488,334) | (9,006,883) |
| Cash from Financing and Miscellaneous Sources | | |
| 16. Cash provided (applied): | | |
| 16.1 Surplus notes, capital notes | (2,205,882) | (2,205,882) |
| 16.2 Capital and paid in surplus, less treasury stock..... | 0 | 0 |
| 16.3 Borrowed funds | 0 | 0 |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities | 0 | 0 |
| 16.5 Dividends to stockholders | 0 | 0 |
| 16.6 Other cash provided (applied)..... | (995,345) | (413,818) |
| 17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) | (3,201,227) | (2,619,700) |
| 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) | (117,492) | (3,527,953) |
| 19. Cash, cash equivalents and short-term investments: | | |
| 19.1 Beginning of year | 34,597,240 | 38,125,193 |
| 19.2 End of year (Line 18 plus Line 19.1) | 34,479,748 | 34,597,240 |

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

| Line of Business | | 1 | 2 | 3 | 4 |
|-----------------------------|--|--|--|--|---|
| | | Net Premiums Written per Column 6, Part 1B | Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1 | Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A | Premiums Earned During Year (Cols. 1 + 2 - 3) |
| 1. | Fire | 36,488,516 | 20,241,276 | 18,971,676 | 37,758,116 |
| 2. | Allied lines | 0 | 0 | 0 | 0 |
| 3. | Farmowners multiple peril | 0 | 0 | 0 | 0 |
| 4. | Homeowners multiple peril | 70,430,097 | 34,061,948 | 33,068,730 | 71,423,315 |
| 5. | Commercial multiple peril | 15,755 | 12,202 | 10,891 | 17,066 |
| 6. | Mortgage guaranty | 0 | 0 | 0 | 0 |
| 8. | Ocean marine | 0 | 0 | 0 | 0 |
| 9. | Inland marine | 0 | 0 | 0 | 0 |
| 10. | Financial guaranty | 0 | 0 | 0 | 0 |
| 11.1 | Medical professional liability-occurrence | 0 | 0 | 0 | 0 |
| 11.2 | Medical professional liability-claims-made | 0 | 0 | 0 | 0 |
| 12. | Earthquake | 0 | 0 | 0 | 0 |
| 13. | Group accident and health | 0 | 0 | 0 | 0 |
| 14. | Credit accident and health (group and individual) | 0 | 0 | 0 | 0 |
| 15. | Other accident and health | 0 | 0 | 0 | 0 |
| 16. | Workers' compensation | 0 | 0 | 0 | 0 |
| 17.1 | Other liability-occurrence | 0 | 0 | 0 | 0 |
| 17.2 | Other liability-claims-made | 0 | 0 | 0 | 0 |
| 17.3 | Excess workers' compensation | 0 | 0 | 0 | 0 |
| 18.1 | Products liability-occurrence | 0 | 0 | 0 | 0 |
| 18.2 | Products liability-claims-made | 0 | 0 | 0 | 0 |
| 19.1,19.2 | Private passenger auto liability | 0 | 0 | 0 | 0 |
| 19.3,19.4 | Commercial auto liability | 0 | 0 | 0 | 0 |
| 21. | Auto physical damage | 0 | 0 | 0 | 0 |
| 22. | Aircraft (all perils) | 0 | 0 | 0 | 0 |
| 23. | Fidelity | 0 | 0 | 0 | 0 |
| 24. | Surety | 0 | 0 | 0 | 0 |
| 26. | Burglary and theft | 0 | 0 | 0 | 0 |
| 27. | Boiler and machinery | 0 | 0 | 0 | 0 |
| 28. | Credit | 0 | 0 | 0 | 0 |
| 29. | International | 0 | 0 | 0 | 0 |
| 30. | Warranty | 0 | 0 | 0 | 0 |
| 31. | Reinsurance-nonproportional assumed property | 0 | 0 | 0 | 0 |
| 32. | Reinsurance-nonproportional assumed liability | 0 | 0 | 0 | 0 |
| 33. | Reinsurance-nonproportional assumed financial lines | 0 | 0 | 0 | 0 |
| 34. | Aggregate write-ins for other lines of business | 0 | 0 | 0 | 0 |
| 35. | TOTALS | 106,934,368 | 54,315,426 | 52,051,297 | 109,198,497 |
| DETAILS OF WRITE-INS | | | | | |
| 3401. | ..... |  |  |  |  |
| 3402. | ..... |  |  |  |  |
| 3403. | ..... |  |  |  |  |
| 3498. | Sum. of remaining write-ins for Line 34 from overflow page | 0 | 0 | 0 | 0 |
| 3499. | Totals (Lines 3401 through 3403 plus 3498) (Line 34 above) | 0 | 0 | 0 | 0 |

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS

| Line of Business | | 1 Amount Unearned (Running One Year or Less from Date of Policy) (a) | 2 Amount Unearned (Running More Than One Year from Date of Policy) (a) | 3 Earned but Unbilled Premium | 4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience | 5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4 |
|-----------------------------|--|---|---|--|---|---|
| 1. | Fire | 18,971,676 | | | | 18,971,676 |
| 2. | Allied lines | | | | | 0 |
| 3. | Farmowners multiple peril | | | | | 0 |
| 4. | Homeowners multiple peril | 33,068,730 | | | | 33,068,730 |
| 5. | Commercial multiple peril | 10,891 | | | | 10,891 |
| 6. | Mortgage guaranty | | | | | 0 |
| 8. | Ocean marine | | | | | 0 |
| 9. | Inland marine | | | | | 0 |
| 10. | Financial guaranty | | | | | 0 |
| 11.1 | Medical professional liability-occurrence | | | | | 0 |
| 11.2 | Medical professional liability-claims-made | | | | | 0 |
| 12. | Earthquake | | | | | 0 |
| 13. | Group accident and health | | | | | 0 |
| 14. | Credit accident and health (group and individual) | | | | | 0 |
| 15. | Other accident and health | | | | | 0 |
| 16. | Workers' compensation | | | | | 0 |
| 17.1 | Other liability-occurrence | | | | | 0 |
| 17.2 | Other liability-claims-made | | | | | 0 |
| 17.3 | Excess workers' compensation | | | | | 0 |
| 18.1 | Products liability-occurrence | | | | | 0 |
| 18.2 | Products liability-claims-made | | | | | 0 |
| 19.1,19.2 | Private passenger auto liability | | | | | 0 |
| 19.3,19.4 | Commercial auto liability | | | | | 0 |
| 21. | Auto physical damage | | | | | 0 |
| 22. | Aircraft (all perils) | | | | | 0 |
| 23. | Fidelity | | | | | 0 |
| 24. | Surety | | | | | 0 |
| 26. | Burglary and theft | | | | | 0 |
| 27. | Boiler and machinery | | | | | 0 |
| 28. | Credit | | | | | 0 |
| 29. | International | | | | | 0 |
| 30. | Warranty | | | | | 0 |
| 31. | Reinsurance-nonproportional assumed property | | | | | 0 |
| 32. | Reinsurance-nonproportional assumed liability | | | | | 0 |
| 33. | Reinsurance-nonproportional assumed financial lines | | | | | 0 |
| 34. | Aggregate write-ins for other lines of business | 0 | 0 | 0 | 0 | 0 |
| 35. | TOTALS | 52,051,297 | 0 | 0 | 0 | 52,051,297 |
| 36. | Accrued retrospective premiums based on experience | | | | | |
| 37. | Earned but unbilled premiums | | | | | |
| 38. | Balance (Sum of Lines 35 through 37) | | | | | 52,051,297 |
| DETAILS OF WRITE-INS | | | | | | |
| 3401. | ..... |  |  |  |  | 0 |
| 3402. | ..... |  |  |  |  | 0 |
| 3403. | ..... |  |  |  |  | 0 |
| 3498. | Sum. of remaining write-ins for Line 34 from overflow page | 0 | 0 | 0 | 0 | 0 |
| 3499. | Totals (Lines 3401 through 3403 plus 3498) (Line 34 above) | 0 | 0 | 0 | 0 | 0 |

(a) State here basis of computation used in each case.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

| Line of Business | 1 Direct Business (a) | Reinsurance Assumed | | Reinsurance Ceded | | 6 Net Premiums Written Cols. 1 + 2 + 3 - 4 - 5 |
|--|--------------------------------|-------------------------|-----------------------------|-----------------------|---------------------------|---|
| | | 2 From Affiliates | 3 From Non-Affiliates | 4 To Affiliates | 5 To Non-Affiliates | |
| 1. Fire | 53,151,901 | | (177,417) | | 16,485,968 | 36,488,516 |
| 2. Allied lines | 14,619 | | | | 14,619 | 0 |
| 3. Farmowners multiple peril | | | | | | 0 |
| 4. Homeowners multiple peril | 102,816,940 | | (302,001) | | 32,084,842 | 70,430,097 |
| 5. Commercial multiple peril | 15,755 | | | | | 15,755 |
| 6. Mortgage guaranty | | | | | | 0 |
| 8. Ocean marine | | | | | | 0 |
| 9. Inland marine | | | | | | 0 |
| 10. Financial guaranty | | | | | | 0 |
| 11.1 Medical professional liability-occurrence | | | | | | 0 |
| 11.2 Medical professional liability-claims-made | | | | | | 0 |
| 12. Earthquake | | | | | | 0 |
| 13. Group accident and health | | | | | | 0 |
| 14. Credit accident and health (group and individual) | | | | | | 0 |
| 15. Other accident and health | | | | | | 0 |
| 16. Workers' compensation | | | | | | 0 |
| 17.1 Other liability-occurrence | | | | | | 0 |
| 17.2 Other liability-claims-made | | | | | | 0 |
| 17.3 Excess workers' compensation | | | | | | 0 |
| 18.1 Products liability-occurrence | | | | | | 0 |
| 18.2 Products liability-claims-made | | | | | | 0 |
| 19.1,19.2 Private passenger auto liability | | | | | | 0 |
| 19.3,19.4 Commercial auto liability | | | | | | 0 |
| 21. Auto physical damage | | | | | | 0 |
| 22. Aircraft (all perils) | | | | | | 0 |
| 23. Fidelity | | | | | | 0 |
| 24. Surety | | | | | | 0 |
| 26. Burglary and theft | | | | | | 0 |
| 27. Boiler and machinery | | | | | | 0 |
| 28. Credit | | | | | | 0 |
| 29. International | | | | | | 0 |
| 30. Warranty | | | | | | 0 |
| 31. Reinsurance-nonproportional assumed property | XXX | | | | | 0 |
| 32. Reinsurance-nonproportional assumed liability | XXX | | | | | 0 |
| 33. Reinsurance-nonproportional assumed financial lines | XXX | | | | | 0 |
| 34. Aggregate write-ins for other lines of business | 0 | 0 | 0 | 0 | 0 | 0 |
| 35. TOTALS | 155,999,215 | 0 | (479,418) | 0 | 48,585,429 | 106,934,368 |
| DETAILS OF WRITE-INS | | | | | | |
| 3401. | | | | | | 0 |
| 3402. | | | | | | 0 |
| 3403. | | | | | | 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 above) | 0 | 0 | 0 | 0 | 0 | 0 |

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X]

If yes: 1. The amount of such installment premiums \$

2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

| Line of Business | Losses Paid Less Salvage | | | | 5 Net Losses Unpaid Current Year (Part 2A, Col. 8) | 6 Net Losses Unpaid Prior Year | 7 Losses Incurred Current Year (Cols. 4 + 5 - 6) | 8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1) |
|--|--------------------------|-----------------------------|-------------------------------|--|--|---|---|---|
| | 1 Direct Business | 2 Reinsurance Assumed | 3 Reinsurance Recovered | 4 Net Payments (Cols. 1 + 2 - 3) | | | | |
| 1. Fire | 12,307,363 | 261,838 | 57,271 | 12,511,930 | 6,067,538 | 5,580,473 | 12,998,995 | 34.4 |
| 2. Allied lines | | | | .0 | 0 | 0 | 0 | .0 |
| 3. Farmowners multiple peril | | | | .0 | 0 | 0 | 0 | .0 |
| 4. Homeowners multiple peril | 27,674,163 | 165,805 | 456,867 | 27,383,101 | 16,530,178 | 13,107,346 | 30,805,933 | 43.1 |
| 5. Commercial multiple peril | | | | .0 | 0 | 0 | 0 | .0 |
| 6. Mortgage guaranty | | | | .0 | 0 | 0 | 0 | .0 |
| 8. Ocean marine | | | | .0 | 0 | 0 | 0 | .0 |
| 9. Inland marine | | | | .0 | 0 | 0 | 0 | .0 |
| 10. Financial guaranty | | | | .0 | 0 | 0 | 0 | .0 |
| 11.1 Medical professional liability-occurrence | | | | .0 | 0 | 0 | 0 | .0 |
| 11.2 Medical professional liability-claims-made | | | | .0 | 0 | 0 | 0 | .0 |
| 12. Earthquake | | | | .0 | 0 | 0 | 0 | .0 |
| 13. Group accident and health | | | | .0 | 0 | 0 | 0 | .0 |
| 14. Credit accident and health (group and individual) | | | | .0 | 0 | 0 | 0 | .0 |
| 15. Other accident and health | | | | .0 | 0 | 0 | 0 | .0 |
| 16. Workers' compensation | | | | .0 | 0 | 0 | 0 | .0 |
| 17.1 Other liability-occurrence | | | | .0 | 0 | 0 | 0 | .0 |
| 17.2 Other liability-claims-made | | | | .0 | 0 | 0 | 0 | .0 |
| 17.3 Excess workers' compensation | | | | .0 | 0 | 0 | 0 | .0 |
| 18.1 Products liability-occurrence | | | | .0 | 0 | 0 | 0 | .0 |
| 18.2 Products liability-claims-made | | | | .0 | 0 | 0 | 0 | .0 |
| 19.1,19.2 Private passenger auto liability | | | | .0 | 0 | 0 | 0 | .0 |
| 19.3,19.4 Commercial auto liability | | | | .0 | 0 | 0 | 0 | .0 |
| 21. Auto physical damage | | | | .0 | 0 | 0 | 0 | .0 |
| 22. Aircraft (all perils) | | | | .0 | 0 | 0 | 0 | .0 |
| 23. Fidelity | | | | .0 | 0 | 0 | 0 | .0 |
| 24. Surety | | | | .0 | 0 | 0 | 0 | .0 |
| 26. Burglary and theft | | | | .0 | 0 | 0 | 0 | .0 |
| 27. Boiler and machinery | | | | .0 | 0 | 0 | 0 | .0 |
| 28. Credit | | | | .0 | 0 | 0 | 0 | .0 |
| 29. International | | | | .0 | 0 | 0 | 0 | .0 |
| 30. Warranty | | | | .0 | 0 | 0 | 0 | .0 |
| 31. Reinsurance-nonproportional assumed property | XXX | | | .0 | 0 | 0 | 0 | .0 |
| 32. Reinsurance-nonproportional assumed liability | XXX | | | .0 | 0 | 0 | 0 | .0 |
| 33. Reinsurance-nonproportional assumed financial lines | XXX | | | .0 | 0 | 0 | 0 | .0 |
| 34. Aggregate write-ins for other lines of business | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 |
| 35. TOTALS | 39,981,526 | 427,643 | 514,138 | 39,895,031 | 22,597,716 | 18,687,819 | 43,804,928 | 40.1 |
| DETAILS OF WRITE-INS | | | | | | | | |
| 3401. | | | | .0 | 0 | 0 | 0 | .0 |
| 3402. | | | | .0 | 0 | 0 | 0 | .0 |
| 3403. | | | | .0 | 0 | 0 | 0 | .0 |
| 3498. Sum. of remaining write-ins for Line 34 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | .0 |
| 3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 |

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

| Line of Business | Reported Losses | | | | Incurred But Not Reported | | | 8 Net Losses Unpaid (Cols. 4 +5 + 6 - 7) | 9 Net Unpaid Loss Adjustment Expenses |
|--|-----------------|--------------------------|-------------------------------------|---|---------------------------|--------------------------|------------------------|--|--|
| | 1 Direct | 2 Reinsurance Assumed | 3 Deduct Reinsurance Recoverable | 4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3) | 5 Direct | 6 Reinsurance Assumed | 7 Reinsurance Ceded | | |
| 1. Fire | 3,522,191 | 99,500 | 111,406 | 3,510,285 | 2,546,618 | 10,635 | | 6,067,538 | 950,200 |
| 2. Allied lines | | | | .0 | | | | .0 | |
| 3. Farmowners multiple peril | | | | .0 | | | | .0 | |
| 4. Homeowners multiple peril | 10,059,853 | 82,510 | 171,030 | 9,971,333 | 6,525,746 | 33,099 | | 16,530,178 | 1,825,852 |
| 5. Commercial multiple peril | | | | .0 | | | | .0 | |
| 6. Mortgage guaranty | | | | .0 | | | | .0 | |
| 8. Ocean marine | | | | .0 | | | | .0 | |
| 9. Inland marine | | | | .0 | | | | .0 | |
| 10. Financial guaranty | | | | .0 | | | | .0 | |
| 11.1 Medical professional liability-occurrence | | | | .0 | | | | .0 | |
| 11.2 Medical professional liability-claims-made | | | | .0 | | | | .0 | |
| 12. Earthquake | | | | .0 | | | | .0 | |
| 13. Group accident and health | | | | .0 | | | | (a) .0 | |
| 14. Credit accident and health (group and individual) | | | | .0 | | | | (a) .0 | |
| 15. Other accident and health | | | | .0 | | | | (a) .0 | |
| 16. Workers' compensation | | | | .0 | | | | .0 | |
| 17.1 Other liability-occurrence | | | | .0 | | | | .0 | |
| 17.2 Other liability-claims-made | | | | .0 | | | | .0 | |
| 17.3 Excess workers' compensation | | | | .0 | | | | .0 | |
| 18.1 Products liability-occurrence | | | | .0 | | | | .0 | |
| 18.2 Products liability-claims-made | | | | .0 | | | | .0 | |
| 19.1,19.2 Private passenger auto liability | | | | .0 | | | | .0 | |
| 19.3,19.4 Commercial auto liability | | | | .0 | | | | .0 | |
| 21. Auto physical damage | | | | .0 | | | | .0 | |
| 22. Aircraft (all perils) | | | | .0 | | | | .0 | |
| 23. Fidelity | | | | .0 | | | | .0 | |
| 24. Surety | | | | .0 | | | | .0 | |
| 26. Burglary and theft | | | | .0 | | | | .0 | |
| 27. Boiler and machinery | | | | .0 | | | | .0 | |
| 28. Credit | | | | .0 | | | | .0 | |
| 29. International | | | | .0 | | | | .0 | |
| 30. Warranty | | | | .0 | | | | .0 | |
| 31. Reinsurance-nonproportional assumed property | XXX | | | .0 | XXX | | | .0 | |
| 32. Reinsurance-nonproportional assumed liability | XXX | | | .0 | XXX | | | .0 | |
| 33. Reinsurance-nonproportional assumed financial lines | XXX | | | .0 | XXX | | | .0 | |
| 34. Aggregate write-ins for other lines of business | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 35. TOTALS | 13,582,044 | 182,010 | 282,436 | 13,481,618 | 9,072,364 | 43,734 | 0 | 22,597,716 | 2,776,052 |
| 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 | .0 | .0 | .0 | .0 | .0 | .0 |
| 3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

(a) Including \$ for present value of life indemnity claims.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

| | 1 Loss Adjustment Expenses | 2 Other Underwriting Expenses | 3 Investment Expenses | 4 Total |
|---|----------------------------------|-------------------------------------|-----------------------------|----------------|
| 1. Claim adjustment services: | | | | |
| 1.1 Direct | 345,137 | | | 345,137 |
| 1.2 Reinsurance assumed | | | | 0 |
| 1.3 Reinsurance ceded | 345,137 | | | 345,137 |
| 1.4 Net claim adjustment services (1.1 + 1.2 - 1.3) | 0 | 0 | 0 | 0 |
| 2. Commission and brokerage: | | | | |
| 2.1 Direct, excluding contingent | | 18,146,404 | | 18,146,404 |
| 2.2 Reinsurance assumed, excluding contingent | | | | 0 |
| 2.3 Reinsurance ceded, excluding contingent | | | | 0 |
| 2.4 Contingent-direct | | | | 0 |
| 2.5 Contingent-reinsurance assumed | | | | 0 |
| 2.6 Contingent-reinsurance ceded | | | | 0 |
| 2.7 Policy and membership fees | | 1,715,025 | | 1,715,025 |
| 2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7) | 0 | 19,861,429 | 0 | 19,861,429 |
| 3. Allowances to manager and agents | | | | 0 |
| 4. Advertising | 457 | 1,410 | | 1,867 |
| 5. Boards, bureaus and associations | 75,122 | 744,976 | | 820,098 |
| 6. Surveys and underwriting reports | | | | 0 |
| 7. Audit of assureds' records | | | | 0 |
| 8. Salary and related items: | | | | |
| 8.1 Salaries | 4,576,509 | 14,934,177 | | 19,510,686 |
| 8.2 Payroll taxes | 389,752 | 1,245,447 | | 1,635,199 |
| 9. Employee relations and welfare | 656,467 | 2,023,094 | | 2,679,561 |
| 10. Insurance | 41,675 | 168,267 | | 209,942 |
| 11. Directors' fees | | 183,500 | | 183,500 |
| 12. Travel and travel items | 445,453 | 1,456,072 | | 1,901,525 |
| 13. Rent and rent items | | | | 0 |
| 14. Equipment | 594,275 | 1,841,790 | | 2,436,065 |
| 15. Cost or depreciation of EDP equipment and software | | | | 0 |
| 16. Printing and stationery | 784 | 4,211 | | 4,995 |
| 17. Postage, telephone and telegraph, exchange and express | 235,144 | 727,617 | | 962,761 |
| 18. Legal and auditing | 130,549 | 534,046 | | 664,595 |
| 19. Totals (Lines 3 to 18) | 7,146,187 | 23,864,607 | 0 | 31,010,794 |
| 20. Taxes, licenses and fees: | | | | |
| 20.1 State and local insurance taxes deducting guaranty association credits of \$ | | 5,560,853 | | 5,560,853 |
| 20.2 Insurance department licenses and fees | | | | 0 |
| 20.3 Gross guaranty association assessments | | | | 0 |
| 20.4 All other (excluding federal and foreign income and real estate) | | 40,807 | | 40,807 |
| 20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4) | 0 | 5,601,660 | 0 | 5,601,660 |
| 21. Real estate expenses | | | | 0 |
| 22. Real estate taxes | | | | 0 |
| 23. Reimbursements by uninsured plans | | | | 0 |
| 24. Aggregate write-ins for miscellaneous expenses | 0 | 1,760,719 | 0 | 1,760,719 |
| 25. Total expenses incurred | 7,146,187 | 51,088,415 | 0 | (a) 58,234,602 |
| 26. Less unpaid expenses-current year | 2,776,052 | 1,933,559 | | 4,709,611 |
| 27. Add unpaid expenses-prior year | 2,627,796 | 2,719,920 | | 5,347,716 |
| 28. Amounts receivable relating to uninsured plans, prior year | 0 | 0 | 0 | 0 |
| 29. Amounts receivable relating to uninsured plans, current year | | | | 0 |
| 30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29) | 6,997,931 | 51,874,776 | 0 | 58,872,707 |
| DETAILS OF WRITE-INS | | | | |
| 2401. Miscellaneous | | 65,188 | | 65,188 |
| 2402. Policy Processing & Production | | 1,695,531 | | 1,695,531 |
| 2403. | | | | |
| 2498. Summary of remaining write-ins for Line 24 from overflow page | 0 | 0 | 0 | 0 |
| 2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above) | 0 | 1,760,719 | 0 | 1,760,719 |

(a) Includes management fees of \$ to affiliates and \$ to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

| | 1 Collected During Year | 2 Earned During Year |
|---|-------------------------------|----------------------------|
| 1. U.S. Government bonds | (a) 4,041,970 | 4,047,347 |
| 1.1 Bonds exempt from U.S. tax | (a) | |
| 1.2 Other bonds (unaffiliated) | (a) | |
| 1.3 Bonds of affiliates | (a) 0 | |
| 2.1 Preferred stocks (unaffiliated) | (b) 0 | |
| 2.11 Preferred stocks of affiliates | (b) 0 | |
| 2.2 Common stocks (unaffiliated) | 0 | |
| 2.21 Common stocks of affiliates | 0 | |
| 3. Mortgage loans | (c) | |
| 4. Real estate | (d) 125,190 | 125,190 |
| 5. Contract loans | | |
| 6. Cash, cash equivalents and short-term investments | (e) 17,560 | 17,359 |
| 7. Derivative instruments | (f) | |
| 8. Other invested assets | | |
| 9. Aggregate write-ins for investment income | 0 | 0 |
| 10. Total gross investment income | 4,184,720 | 4,189,896 |
| 11. Investment expenses | | (g) 641,893 |
| 12. Investment taxes, licenses and fees, excluding federal income taxes | | (g) 74,782 |
| 13. Interest expense | | (h) 292,423 |
| 14. Depreciation on real estate and other invested assets | | (i) 122,157 |
| 15. Aggregate write-ins for deductions from investment income | | 0 |
| 16. Total deductions (Lines 11 through 15) | | 1,131,255 |
| 17. Net investment income (Line 10 minus Line 16) | | 3,058,641 |
| DETAILS OF WRITE-INS | | |
| 0901. | | |
| 0902. | | |
| 0903. | | |
| 0998. Summary of remaining write-ins for Line 9 from overflow page | 0 | 0 |
| 0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above) | 0 | 0 |
| 1501. | | |
| 1502. | | |
| 1503. | | |
| 1598. Summary of remaining write-ins for Line 15 from overflow page | | 0 |
| 1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15 above) | | 0 |

(a) Includes \$ 4,819 accrual of discount less \$ 2,410 amortization of premium and less \$ 7,206 paid for accrued interest on purchases.
 (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
 (c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ paid for accrued interest on purchases.
 (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
 (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
 (f) Includes \$ accrual of discount less \$ amortization of premium.
 (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
 (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
 (i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

| | 1 Realized Gain (Loss) On Sales or Maturity | 2 Other Realized Adjustments | 3 Total Realized Capital Gain (Loss) (Columns 1 + 2) | 4 Change in Unrealized Capital Gain (Loss) | 5 Change in Unrealized Foreign Exchange Capital Gain (Loss) |
|--|---|---------------------------------------|---|---|---|
| 1. U.S. Government bonds | | | 0 | | |
| 1.1 Bonds exempt from U.S. tax | | | 0 | | |
| 1.2 Other bonds (unaffiliated) | | | 0 | | |
| 1.3 Bonds of affiliates | 0 | 0 | 0 | 0 | 0 |
| 2.1 Preferred stocks (unaffiliated) | 0 | 0 | 0 | 0 | 0 |
| 2.11 Preferred stocks of affiliates | 0 | 0 | 0 | 0 | 0 |
| 2.2 Common stocks (unaffiliated) | 0 | 0 | 0 | 0 | 0 |
| 2.21 Common stocks of affiliates | 0 | 0 | 0 | 0 | 0 |
| 3. Mortgage loans | 0 | 0 | 0 | 0 | 0 |
| 4. Real estate | 0 | 0 | 0 | 0 | 0 |
| 5. Contract loans | | | 0 | | |
| 6. Cash, cash equivalents and short-term investments | | | 0 | 0 | 0 |
| 7. Derivative instruments | | | 0 | | |
| 8. Other invested assets | 0 | 0 | 0 | 0 | 0 |
| 9. Aggregate write-ins for capital gains (losses) | 0 | 0 | 0 | 0 | 0 |
| 10. Total capital gains (losses) | 0 | 0 | 0 | 0 | 0 |
| DETAILS OF WRITE-INS | | | | | |
| 0901. | | | 0 | | |
| 0902. | | | 0 | | |
| 0903. | | | 0 | | |
| 0998. Summary of remaining write-ins for Line 9 from overflow page | 0 | 0 | 0 | 0 | 0 |
| 0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above) | 0 | 0 | 0 | 0 | 0 |

NONE

EXHIBIT OF NONADMITTED ASSETS

| | 1 | 2 | 3 |
|--|--|--|--|
| | Current Year Total Nonadmitted Assets | Prior Year Total Nonadmitted Assets | Change in Total Nonadmitted Assets (Col. 2 - Col. 1) |
| 1. Bonds (Schedule D)..... | .0 | .0 | .0 |
| 2. Stocks (Schedule D): | | | |
| 2.1 Preferred stocks | .0 | .0 | .0 |
| 2.2 Common stocks | .0 | .0 | .0 |
| 3. Mortgage loans on real estate (Schedule B): | | | |
| 3.1 First liens | .0 | .0 | .0 |
| 3.2 Other than first liens | .0 | .0 | .0 |
| 4. Real estate (Schedule A): | | | |
| 4.1 Properties occupied by the company | .0 | .0 | .0 |
| 4.2 Properties held for the production of income..... | .0 | .0 | .0 |
| 4.3 Properties held for sale | .0 | .0 | .0 |
| 5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA)..... | .0 | .0 | .0 |
| 6. Contract loans | .0 | .0 | .0 |
| 7. Derivatives (Schedule DB)..... | .0 | .0 | .0 |
| 8. Other invested assets (Schedule BA) | .0 | .0 | .0 |
| 9. Receivables for securities | .0 | .0 | .0 |
| 10. Securities lending reinvested collateral assets (Schedule DL)..... | .0 | .0 | .0 |
| 11. Aggregate write-ins for invested assets | .0 | .0 | .0 |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) | .0 | .0 | .0 |
| 13. Title plants (for Title insurers only)..... | .0 | .0 | .0 |
| 14. Investment income due and accrued | .0 | .0 | .0 |
| 15. Premiums and considerations: | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection..... | 50,760 | 42,820 | (7,940) |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due..... | .0 | .0 | .0 |
| 15.3 Accrued retrospective premiums and contracts subject to redetermination | .0 | .0 | .0 |
| 16. Reinsurance: | | | |
| 16.1 Amounts recoverable from reinsurers | .0 | .0 | .0 |
| 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 | .0 |
| 18.2 Net deferred tax asset..... | .0 | .0 | .0 |
| 19. Guaranty funds receivable or on deposit | .0 | .0 | .0 |
| 20. Electronic data processing equipment and software..... | .0 | .0 | .0 |
| 21. Furniture and equipment, including health care delivery assets | .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 | .0 | .0 | .0 |
| 24. Health care and other amounts receivable..... | .0 | .0 | .0 |
| 25. Aggregate write-ins for other-than-invested assets | .0 | .0 | .0 |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)..... | 50,760 | 42,820 | (7,940) |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts..... | 0 | 0 | 0 |
| 28. Total (Lines 26 and 27) | 50,760 | 42,820 | (7,940) |
| DETAILS OF WRITE-INS | | | |
| 1101. | | | |
| 1102. | | | |
| 1103. | | | |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | .0 | .0 | .0 |
| 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) | 0 | 0 | 0 |
| 2501. | | | |
| 2502. | | | |
| 2503. | | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | .0 | .0 | .0 |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) | 0 | 0 | 0 |

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company, Inc.

NOTES TO FINANCIAL STATEMENTS

These items are based on illustrations taken from the NAIC Annual Statement Instructions

1. Summary of Significant Accounting Policies

A. Accounting Practices

| | <u>State of Domicile</u> | <u>2015</u> | <u>2014</u> |
|---|------------------------------|----------------------------|----------------------------|
| NET INCOME | | | |
| (1) Company state basis (Page 4, Line 20, Columns 1 & 2) |FL | \$ 6,708,087 | \$ 10,681,194 |
| (2) State Prescribed Practices that increase/(decrease) NAIC SAP: | ..... | ..... | ..... |
| (3) State Permitted Practices that increase/(decrease) NAIC SAP: | ..... | ..... | ..... |
| (4) NAIC SAP (1-2-3=4) |FL | \$ <u>6,708,087</u> | \$ <u>10,681,194</u> |
| SURPLUS | | | |
| (5) Company state basis (Page 3, Line 37, Columns 1 & 2) |FL | \$ 86,850,923 | \$ 82,295,617 |
| (6) State Prescribed Practices that increase/(decrease) NAIC SAP: | ..... | ..... | ..... |
| (7) State Permitted Practices that increase/(decrease) NAIC SAP: | ..... | ..... | ..... |
| (8) NAIC SAP (5-6-7=8) |FL | \$ <u>86,850,923</u> | \$ <u>82,295,617</u> |

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. Actual results could differ from those estimates. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period.

C. Accounting Policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are maintained to cover the unexpired portion of premiums written. Such reserves are computed using pro-rata methods for direct business and are based on reports received from ceding entities for reinsurance.

Expenses incurred in connection with acquiring new business are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the company uses the following accounting policies:

1. Short term investments are stated at amortized cost
2. Bonds not backed by other loans are stated at amortized cost using the pro-rata method
3. When applicable, common stocks are stated at market
4. When applicable, preferred stocks are stated at cost
5. The Company has no mortgage loans
6. The Company has no loan backed securities
7. The Company has no investments in subsidiaries, controlled or affiliated companies
8. The Company has no investments in joint ventures, partnerships or limited liability companies
9. The Company has no investments in derivatives
10. The Company has no premium deficiency calculations
11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss data and an amount based on historical data, for losses incurred but not reported. Such liabilities are based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be either in excess of, or less than the amount provided. The methodologies for making such estimates and for establishing the resulting liability are continually monitored and any adjustments are recorded in the period determined. The company has no environmental remediation, toxic waste or asbestos exposures.
12. The Company has not modified its capitalization policy from the prior period.
13. The Company has no pharmaceutical rebate receivables.

D. Going Concern

There are no issues that would cause management to believe there is any reason or doubt that the Company will continue as a going concern.

2. Accounting Changes and Corrections of Errors

A. There were no material changes in accounting principles and/or corrections of errors during the current period.

3. Business Combinations and Goodwill

A. Statutory Purchase Method

The Company had no business combinations.

B. Statutory Merger

The Company had no business combinations taking the form of a statutory merger.

C. Impairment Loss

The Company had no business combinations.

4. Discontinued Operations

The Company had no discontinued operations.

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company has no mortgage loans.

B. Debt Restructuring

The Company has no restructured debt.

C. Reverse Mortgages

The Company has no reverse mortgages.

D. Loan-Backed Securities

The Company has no Loan-Backed securities.

E. Repurchase Agreements and/or Securities Lending Transactions

The Company has no repurchase agreements.

F. Real Estate

1. The Company had no impairment losses related to owned real estate.
2. Real Estate Available For Sale
None
3. The Company has no real estate transactions related to the sale of real estate.
4. The Company does not participate in retail land sales operations.
5. The Company does not hold any real estate with participating mortgage loan features.

G. Investments in Low Income Housing Tax Credits (LIHTC)

The Company has no investments in low income housing tax credits.

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company, Inc.

NOTES TO FINANCIAL STATEMENTS

These items are based on illustrations taken from the NAIC Annual Statement Instructions

H. Restricted Assets

(1) Restricted Assets (Including Pledged)

| Restricted Asset Category | Gross Restricted | | | | | 6 | 7 | 8 | Percentage | |
|-----------------------------------|-----------------------------|--|--|---|---------------------|-----------------------|----------------------------------|--|----------------------------------|--|
| | Current Year | | | | | | | | 9 | 10 |
| | 1 | 2 | 3 | 4 | 5 | | | | | |
| | Total General Account (G/A) | G/A Supporting Protected Cell Account Activity (a) | Total Protected Cell Account Restricted Assets | Protected Cell Account Assets Supporting G/A Activity (b) | Total (1 plus 3) | Total From Prior Year | Increase/ (Decrease) (5 minus 6) | Total Current Year Admitted Restricted | Gross Restricted to Total Assets | Admitted Restricted to Total Admitted Assets |
| i. On deposit with states | 2,002,759 | | | | 2,002,759 | 1,997,994 | 4,765 | 2,002,759 | .01% | .01% |
| n. Other restricted assets | | | | | 0 | 0 | 0 | | 0.0 | 0.0 |
| o. Total Restricted Assets | \$ 2,002,759 | \$ 0 | \$ 0 | \$ 0 | \$ 2,002,759 | \$ 1,997,994 | \$ 4,765 | \$ 2,002,759 | .01% | .01% |

(2) Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

None

(3) Detail of Other Restricted Assets (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

None

I. Working Capital Finance Investments

None

J. Offsetting and Netting of Assets and Liabilities

None

K. Structured Notes

None

6. Joint Ventures, Partnerships and Limited Liability Companies

- A. The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10% of its admitted assets.
- B. The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies and had no impairment write downs.

7. Investment Income

- A. No investment income was excluded from any investment income due and accrued.
- B. None

8. Derivative Instruments

- A. The Company has no derivative instruments.
- B. The Company has no derivative instruments.
- C. The Company has no derivative instruments.
- D. The Company has no derivative instruments.
- E. The Company has no derivative instruments.
- F. The Company has no derivative instruments.

9. Income Taxes

A. The components of the net deferred tax asset/(liability) at December 31 are as follows:

1.

| | 12/31/2015 | | |
|--|--------------|-----------|-----------------|
| | (1) | (2) | (3) |
| | Ordinary | Capital | (Col 1+2) Total |
| (a) Gross Deferred Tax Assets | \$ 4,248,757 | \$ 79,528 | \$ 4,328,285 |
| (b) Statutory Valuation Allowance Adjustments | \$ 0 | \$ 0 | \$ 0 |
| (c) Adjusted Gross Deferred Tax Assets (1a - 1b) | \$ 4,248,757 | \$ 79,528 | \$ 4,328,285 |
| (d) Deferred Tax Assets Nonadmitted | \$ 14,817 | \$ 0 | \$ 14,817 |
| (e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d) | \$ 4,233,940 | \$ 79,528 | \$ 4,313,468 |
| (f) Deferred Tax Liabilities | \$ 24,043 | \$ 0 | \$ 24,043 |
| (g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f) | \$ 4,209,897 | \$ 79,528 | \$ 4,289,425 |

| | 12/31/2014 | | |
|--|--------------|-----------|-----------------|
| | (4) | (5) | (6) |
| | Ordinary | Capital | (Col 4+5) Total |
| (a) Gross Deferred Tax Assets | \$ 4,169,860 | \$ 79,528 | \$ 4,249,388 |
| (b) Statutory Valuation Allowance Adjustments | \$ 0 | \$ 0 | \$ 0 |
| (c) Adjusted Gross Deferred Tax Assets (1a - 1b) | \$ 4,169,860 | \$ 79,528 | \$ 4,249,388 |
| (d) Deferred Tax Assets Nonadmitted | \$ 0 | \$ 0 | \$ 0 |
| (e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d) | \$ 4,169,860 | \$ 79,528 | \$ 4,249,388 |
| (f) Deferred Tax Liabilities | \$ 63,004 | \$ 0 | \$ 63,004 |
| (g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f) | \$ 4,106,856 | \$ 79,528 | \$ 4,186,384 |

| | Change | | |
|--|--------------------|-------------------|-----------------|
| | (7) | (8) | (9) |
| | (Col 1-4) Ordinary | (Col 2-5) Capital | (Col 7+8) Total |
| (a) Gross Deferred Tax Assets | \$ 78,897 | \$ 0 | \$ 78,897 |
| (b) Statutory Valuation Allowance Adjustments | \$ 0 | \$ 0 | \$ 0 |
| (c) Adjusted Gross Deferred Tax Assets (1a - 1b) | \$ 78,897 | \$ 0 | \$ 78,897 |
| (d) Deferred Tax Assets Nonadmitted | \$ 14,817 | \$ 0 | \$ 14,817 |
| (e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d) | \$ 64,080 | \$ 0 | \$ 64,080 |
| (f) Deferred Tax Liabilities | \$ (38,961) | \$ 0 | \$ (38,961) |
| (g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f) | \$ 103,041 | \$ 0 | \$ 103,041 |

2.

| | 12/31/2015 | | |
|--|------------|---------|-----------------|
| | (1) | (2) | (3) |
| | Ordinary | Capital | (Col 1+2) Total |

Admission Calculation Components SSAP No. 101

| | | | |
|---|--------------|-----------|--------------|
| (a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks. | \$ 4,188,700 | \$ 79,528 | \$ 4,268,228 |
| (b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The | \$ 21,197 | \$ 0 | \$ 21,197 |

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company, Inc.

NOTES TO FINANCIAL STATEMENTS

These items are based on illustrations taken from the NAIC Annual Statement Instructions

Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)

| | | | |
|---|--------------|-----------|---------------|
| 1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date. | \$ 21,197 | \$ XXX | \$ 21,197 |
| 2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold. | \$ XXX | \$ XXX | \$ 12,406,904 |
| (c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities. | \$ 24,043 | \$ | \$ 24,043 |
| (d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. | \$ 4,233,940 | \$ 79,528 | \$ 4,313,468 |
| Total (2(a) + 2(b) + 2(c)) | | | |

| 12/31/2014 | | |
|------------|---------|--------------------|
| (4) | (5) | (6) |
| Ordinary | Capital | (Col 4+5) Total |

| | | | |
|---|--------------|-----------|---------------|
| (a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks. | \$ 4,110,229 | \$ 79,528 | \$ 4,189,757 |
| (b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below) | \$ 21,046 | \$ 0 | \$ 21,046 |
| 1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date. | \$ 21,046 | \$ 0 | \$ 21,046 |
| 2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold. | \$ XXX | \$ XXX | \$ 10,121,065 |
| (c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities. | \$ 38,585 | \$ 0 | \$ 38,585 |
| (d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. | \$ 4,169,860 | \$ 79,528 | \$ 4,249,388 |
| Total (2(a) + 2(b) + 2(c)) | | | |

| Change | | |
|-----------------------|----------------------|--------------------|
| (7) | (8) | (9) |
| (Col 1-4) Ordinary | (Col 2-5) Capital | (Col 7+8) Total |

| | | | |
|---|-------------|--------|--------------|
| (a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks. | \$ 78,471 | \$ 0 | \$ 78,471 |
| (b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below) | \$ 151 | \$ 0 | \$ 151 |
| 1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date. | \$ 151 | \$ 0 | \$ 151 |
| 2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold. | \$ XXX | \$ XXX | \$ 2,285,839 |
| (c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities. | \$ (14,542) | \$ 0 | \$ (14,542) |
| (d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. | \$ 64,080 | \$ 0 | \$ 64,080 |
| Total (2(a) + 2(b) + 2(c)) | | | |

3.

| 2015 | 2014 |
|------|------|
|------|------|

| | | |
|---|-------------------|-------------------|
| (a) Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount. | 607.000 | 322.000 |
| (b) Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above. | \$ 82,712,694.000 | \$ 67,473,769.000 |

4.

| 12/31/2015 | |
|------------|---------|
| (1) | (2) |
| Ordinary | Capital |

Impact of Tax-Planning Strategies

| | | | |
|---|-----------|--------|--|
| (a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage. | | | |
| 1. Adjusted Gross DTAs Amount From Note 9A1(c) | 4,248,757 | 79,528 | |
| 2. Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies | 0.0 | | |
| 3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e) | 4,233,940 | 79,528 | |
| 4. Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies | 0.0 | | |

| 12/31/2014 | |
|------------|---------|
| (3) | (4) |
| Ordinary | Capital |

| | | | |
|---|-----------|--------|--|
| (a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage. | | | |
| 1. Adjusted Gross DTAs Amount From Note 9A1(c) | 4,169,860 | 79,528 | |
| 2. Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies | 0.0 | | |
| 3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e) | 4,169,860 | 79,528 | |
| 4. Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies | 0.0 | | |

| Change | |
|-----------------------|----------------------|
| (5) | (6) |
| (Col 1-3) Ordinary | (Col 2-4) Capital |

| | | | |
|---|--------|---|--|
| (a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage. | | | |
| 1. Adjusted Gross DTAs Amount From Note 9A1(c) | 78,897 | 0 | |
| 2. Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies | 0.0 | | |
| 3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e) | 64,080 | 0 | |
| 4. Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies | 0.0 | | |

(b) Does the Company's tax-planning strategies include the use of reinsurance? Yes No X

C. Current income taxes incurred consist of the following major components:

| (1) | (2) | (3) |
|------------|------------|---------------------|
| 12/31/2015 | 12/31/2014 | (Col 1-2) Change |

1. Current Income Tax

| | | | |
|--|----------------|----------------|----------------|
| (a) Federal | \$ 3,779,592.0 | \$ 7,042,171.0 | \$ (3,262,579) |
| (b) Foreign | \$ | \$ 0.0 | \$ 0 |
| (c) Subtotal | \$ 3,779,592.0 | \$ 7,042,171.0 | \$ (3,262,579) |
| (d) Federal income tax on net capital gains | \$ | \$ 0.0 | \$ 0 |
| (e) Utilization of capital loss carry-forwards | \$ | \$ 0.0 | \$ 0 |
| (f) Other | \$ 154,111.0 | \$ 13.0 | \$ 154,098 |
| (g) Federal and foreign income taxes incurred | \$ 3,933,703.0 | \$ 7,042,184.0 | \$ (3,108,481) |

2. Deferred Tax Assets:

| | | | |
|------------------------------------|--------------|--------------|--------------|
| (a) Ordinary | | | |
| (1) Discounting of unpaid losses | \$ 590,180 | \$ 350,772 | \$ 239,408 |
| (2) Unearned premium reserve | \$ 3,643,590 | \$ 3,802,079 | \$ (158,489) |
| (3) Policyholder reserves | \$ | \$ 0 | \$ 0 |
| (4) Investments | \$ | \$ 0 | \$ 0 |
| (5) Deferred acquisition costs | \$ | \$ 0 | \$ 0 |
| (6) Policyholder dividends accrual | \$ | \$ 0 | \$ 0 |

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company, Inc.

NOTES TO FINANCIAL STATEMENTS

These items are based on illustrations taken from the NAIC Annual Statement Instructions

| | | | |
|---|-------------------|-------------------|------------------|
| (7) Fixed assets | \$ | \$0 | \$0 |
| (8) Compensation and benefits accrual | \$ | \$0 | \$0 |
| (9) Pension accrual | \$ | \$0 | \$0 |
| (10) Receivables - nonadmitted | \$ | \$0 | \$0 |
| (11) Net operating loss carry-forward | \$ | \$0 | \$0 |
| (12) Tax credit carry-forward | \$ | \$0 | \$0 |
| (13) Other (including items <5% of total ordinary tax assets) | \$14,987 | \$17,009 | \$(2,022) |
| (99) Subtotal | \$4,248,757 | \$4,169,860 | \$78,897 |
| | | | |
| (b) Statutory valuation allowance adjustment | \$ | \$0 | \$0 |
| (c) Nonadmitted | \$14,817 | \$0 | \$14,817 |
| | | | |
| (d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c) | \$4,233,940 | \$4,169,860 | \$64,080 |
| | | | |
| (e) Capital: | | | |
| (1) Investments | \$79,528 | \$79,528 | \$0 |
| (2) Net capital loss carry-forward | \$ | \$0 | \$0 |
| (3) Real estate | \$ | \$0 | \$0 |
| (4) Other (including items <5% of total capital tax assets) | \$ | \$0 | \$0 |
| (99) Subtotal | \$79,528 | \$79,528 | \$0 |
| | | | |
| (f) Statutory valuation allowance adjustment | \$ | \$0 | \$0 |
| (g) Nonadmitted | \$ | \$0 | \$0 |
| | | | |
| (h) Admitted capital deferred tax assets (2e99 - 2f - 2g) | \$79,528 | \$79,528 | \$0 |
| | | | |
| (i) Admitted deferred tax assets (2d + 2h) | \$4,313,468 | \$4,249,388 | \$64,080 |
| | | | |
| 3. Deferred Tax Liabilities: | | | |
| (a) Ordinary | | | |
| (1) Investments | \$ | \$0 | \$0 |
| (2) Fixed assets | \$2,090 | \$10,295 | \$(8,205) |
| (3) Deferred and uncollected premium | \$ | \$0 | \$0 |
| (4) Policyholder reserves | \$ | \$0 | \$0 |
| (5) Other (including items <5% of total ordinary tax liabilities) | \$21,953 | \$52,709 | \$(30,756) |
| (99) Subtotal | \$24,043 | \$63,004 | \$(38,961) |
| | | | |
| (b) Capital: | | | |
| (1) Investments | \$ | \$0 | \$0 |
| (2) Real estate | \$ | \$0 | \$0 |
| (3) Other (including items <5% of total capital tax liabilities) | \$ | \$0 | \$0 |
| (99) Subtotal | \$0 | \$0 | \$0 |
| | | | |
| (c) Deferred tax liabilities (3a99 + 3b99) | \$24,043 | \$63,004 | \$(38,961) |
| | | | |
| 4. Net deferred tax assets/liabilities (2i - 3c) | \$4,289,425 | \$4,186,384 | \$103,041 |

D Among the more significant book to tax adjustments were the following:

| | Amount | Effective Rate |
|---|---------------------|----------------|
| Income before taxes | \$11,023,548 | |
| Tax at statutory rates | \$ 3,724,627 | 35.0% |
| Effect of Rate Difference | \$ | |
| Effect of Prior Tax True Up | \$ 9,999 | (.1%) |
| Effect of Other Adjustments | \$ 81,218 | .8% |
| Total | \$ 3,815,844 | 35.9% |
| | | |
| Federal and foreign income taxes incurred | \$ 3,933,704 | 37.0% |
| Change in Net Deferred Income Taxes | \$ (117,860) | (1.1%) |
| Total income tax expense | <u>\$ 3,815,844</u> | <u>35.9%</u> |

E. Operating Loss and Tax Credit Carry-forward and Protective Tax Deposits:

- a. At December 31, 2015, the company did not have any operating loss carry-forwards available to offset against future taxable income. The Company did have \$227,223 of capital loss carry-forwards available to offset against future taxable capital gain income.
- b. The company had the following income tax expense that is available for recoupment in the event of future net losses.

| | | |
|--|------|-------------|
| | 2015 | \$3,563,616 |
| | 2014 | \$6,785,066 |

- c. The company did not have any protective tax deposits under IRC Section 6603.

F. Consolidated Federal Income Tax Return

- a. The company's federal income tax return is consolidated with Southern Fidelity Holding Company
- b. The method of allocation between the Companies is adjusted to written agreements approved by the Board of Directors. Allocation is based upon separate return calculation with current credit for net loss. Any intercompany balances are settled as soon as practicable.

G. The Company has no tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A,B,C

Southern Fidelity Insurance Company Inc. issued 15,000 shares of common stock to Southern Fidelity Holding LLC for cash in the amount of \$7,500,000 during March 2005. In addition, Southern Fidelity issued 1000 shares of common stock to Southern Fidelity Holding LLC for cash in the amount of \$25,000,000 during September 2006. Southern Fidelity Insurance Company paid \$51,096,095 and \$53,279,510 during 2015 and 2014, respectively to its affiliate, Southern Fidelity Managing LLC under the terms of its managing general agency contract.

- D. At December 31, 2015 and 2014, 125,540 and \$637,222, respectively was reported as commission payable to Southern Fidelity Managing Agency, Inc. There are no guarantees or undertakings, written or otherwise, for the benefit of an affiliate or related party that results in a material contingent exposure of the reporting entity's or any related party's assets or liabilities.
- E. There are no guarantees or undertakings, written or otherwise, for the benefit of an affiliate or related party that results in a material contingent exposure of the reporting entity's or any related party's assets or liabilities.
- F. The Company has a managing general agency agreement with Southern Fidelity Managing Agency, Inc.
- G. 100% of the outstanding shares of the Company are owned by SFPC Holding LLC, a Florida Corporation.
- H. The Company has no stock ownership in any affiliated entity or parent.
- I. The Company has no investment in a SCA entity that exceeds 10% of admitted assets of the insurer.
- J. The Company has no investments in impaired SCA entities.
- K. The Company has no investments in a foreign insurance subsidiary.
- L. The company has no investments in any downstream non-insurance holding companies.
- M. The company has no SCA investments.
- N. The company has no SCA investments.

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company, Inc.

NOTES TO FINANCIAL STATEMENTS

These items are based on illustrations taken from the NAIC Annual Statement Instructions

| Date Issued | Interest Rate | Par Value face amount of Note | Carrying value of Note | Principal and/or interest paid CY | Total Principal and/or interest paid on Surplus Notes | Unapproved Principal and/or Interest | Date of Maturity | Holder |
|-------------|---------------|-------------------------------------|---------------------------|---|---|--|------------------|-------------|
| 9/12/2006 | 2.64% | \$25,000,000 | \$12,132,353 | \$2,498,306 | \$21,926,371 | 0 | 9/12/2021 | Florida SBA |

The Company has an outstanding liability for a Surplus Note in the amount of \$12,132,353 due to the State Board of Administration of Florida. The Surplus Note was issued with cash proceeds on September 12, 2006 under the provisions of the Insurance Capital Build-Up Incentive Program for a term of 20 years with interest charged at a rate equivalent to the 10-year U.S. Treasury Bond rate. At the option of the Company and with regulatory approval, early repayment can be made. Interest in the aggregate amount of \$292,424 and \$429,389 was approved and paid during 2015 and 2014, respectively. Principal payments in the amount of \$2,205,882 and \$2,205,882 was approved and paid during 2015 and 2014, respectively. The Company is required for the term of the Note to maintain minimum required surplus of \$50 million.

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

A.B.C.D. Defined Benefit Plan

None

E. Defined Contribution Plan

None

F. Multiemployer Plans

None

G. Consolidated/Holding Company Plans

The Company has no such plans in place.

H. Postemployment Benefits & Compensation Absences

The Company has no obligations for postemployment benefits or compensated absences.

I. Impact of Medicare Modernization Act on Postretirement Benefits

None. The Company does not have any postretirement plans or benefits.

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

1. The Company has 20,000 shares authorized and 16,000 shares issued and outstanding of its \$100 par value common stock.
2. The Company has no preferred stock.
3. The maximum amount of dividends which can be paid by State of Florida insurance companies to shareholders without prior approval of the Insurance Commissioner is subject to restrictions relating to statutory surplus. Cash dividends may only be paid out of accumulated surplus funds derived from net operating profits and realized capital gains not exceeding 10% of such surplus in any one year, although there are no restrictions on cash dividend payments out of profits and gains derived during the immediately preceding calendar year.
4. No dividends have been paid by the Company.
5. Refer to the limitations of (3) above.
6. There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.
7. Not applicable.
8. No stock is held by the Company, including stock of affiliated companies for special purposes.
 - a. none
 - b. none
 - c. none
9. No changes in balances of special surplus funds.
10. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$ 0
11. Surplus Notes

| Date Issued | Interest Rate | Par Value face amount of Note | Carrying value of Note | Principal and/or interest paid CY | Total Principal and/or interest paid on Surplus Notes | Unapproved Principal and/or Interest | Date of Maturity | Holder |
|-------------|---------------|-------------------------------------|---------------------------|---|---|--|------------------|-------------|
| 9/12/2006 | 2.64% | \$25,000,000 | \$12,132,353 | \$2,498,306 | \$21,926,371 | 0 | 9/12/2021 | Florida SBA |

12 The impact of any restatement due to prior quasi-reorganizations is as follows:

None

13. The Company has had no quasi-reorganizations in the prior 10 years.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

The company has no commitments or contingent commitments to a SCA entity, joint venture, partnership, or limited liability company.

B. Assessments

(2)

- a. Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end \$0
- b. None
- c. None
- d. Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end \$0

C. Gain Contingencies

The Company had no gain contingencies during the periods covered by this statement.

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits

The company paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits.

| | Direct |
|--|--------|
| Claims related ECO and bad faith losses paid during the reporting period | \$0 |

Number of claims where amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits during the reporting period.

| (a) 0-25 Claims | (b) 26-50 Claims | (c) 51-100 Claims | (d) 101-500 Claims | (e) More than 500 Claims |
|--------------------|---------------------|----------------------|-----------------------|-----------------------------|
| 0 | 0 | 0 | 0 | 0 |

Indicate whether claim count information is disclosed per claim or per claimant.

(f) Per Claim [x] (g) Per Claimant []

E. Product Warranties

The Company has no product warranty liabilities

F. Joint and Several Liabilities

None

G. All Other Contingencies

Various lawsuits against the Company have arisen in the normal course of the Company's business. Contingent liabilities from litigation and other matters are not considered material in relation to the financial position of the company.

15. Leases

A. Lessee Operating Lease

None

B. Lessor Leases

None

16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company, Inc.

NOTES TO FINANCIAL STATEMENTS

These items are based on illustrations taken from the NAIC Annual Statement Instructions

Risk

The Company has no financial instruments with off-balance sheet risk.

1. None
2. None
3. None
4. None

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

The Company had no transfers of receivables reported as sales.

B. Transfer and Servicing of Financial Assets

The Company had no transactions within this category.

C. Wash Sales

1. The Company had no securities sold and reacquired within 30 days of the sale date to enhance the Company's investment portfolio yield.
2. The Company had no NAIC designation 3 or below securities transactions during the reporting period.

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

A. ASO Plans

None

B. ASC Plans

None

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contracts

None

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

| MGA | FEIN | Excl Contract | Types of Bus Written | Types of Auth Granted | Total Direct Prem Written/Prod By |
|---------------------------------------|------------|---------------|----------------------|-----------------------|-----------------------------------|
| Southern Fidelity Managing Agency Inc | 20-2462153 | Y | HO/DF/Surety | U, CA, B, C | \$155,984,596 |

Tallahassee, FL

20. Fair Value Measurements

A.

(1) Fair Value Measurements at Reporting Date

| Description for each class of asset or liability | (Level 1) | (Level 2) | (Level 3) | Total |
|--|-----------|-----------|-----------|----------|
| Preferred Stock | 0 | 0 | 0 | 0 |
| Common Stock | 0 | 0 | 0 | 0 |
| Industrial & Misc. | 0 | 0 | 0 | 0 |
| Derivative Assets | 0 | 0 | 0 | 0 |
| Separate Account Assets | 0 | 0 | 0 | 0 |
| | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> |
| Liabilities at Fair Value | 0 | 0 | 0 | 0 |

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

| | Balance 1/1/2015 | Transfers in Level 3 | Transfers out of Level 3 | Total gains (losses) in net income | Total gains (losses) in surplus | Purchases, issuance, settlements | Balance 12/31/2015 |
|-------------------------|---------------------|-------------------------|-----------------------------|--|---------------------------------------|--|-----------------------|
| Equity Securities | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Separate account assets | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Derivative Liabilities | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

B. None

C. The Company's policy is to recognize transfers in and out as of the actual date of the event or change in circumstances.

D. Not Practicable to Estimate Fair Value

21. Other Items

A. Unusual or Infrequent Items

There were no unusual or infrequent items during 2015 and 2014.

B. Troubled Debt Restructuring

The Company had no troubled debt restructuring.

C. Other Disclosures

Assets, consisting of cash, certificates of deposit, and U.S. Government bonds in the amounts of \$2,002,759 and \$1,997,994 at December 31, 2015 and 2014, respectively were on deposit with the State of Florida, South Carolina, and Louisiana, as required for statutory deposits as required by law. These are reported in Schedule E Part 3 Special Deposits. The Company has no business interruption insurance reserves received during the reporting period.

Agents' Balances

| | |
|--|-----------|
| Agents' Balances or Uncollected Premiums per Statement- before reduction for ceded reinsurance balances payable | \$714,570 |
| Premiums Collected from "Controlled" or "Controlling" persons | \$0 |
| Premiums Collected from "Controlled" or "Controlling" persons within 15 working days immediately preceding reporting period; | |
| F.S. 625.012 (5) (a) 1. | \$0 |
| *Amount if Applicable | |
| Trust Fund | \$0 |
| Letter of Credit | \$0 |
| Financial Guaranty Bond | \$0 |
| Total of lines (4), (5) & (6) | \$0 |
| (2) minus (3) minus (7); should not exceed zero | \$0 |

D. Business Interruption Insurance Recoveries

The Company had no business interruption recoveries during the reporting period.

E. State Transferable Tax Credit

The Company does not have any transferable tax credits.

F. Subprime Mortgage Related Risk Exposure

The Company has no direct or indirect investments in subprime or subprime backed securities

G. The company has no insurance-linked securities.

22. Events Subsequent

There have been no known events subsequent to December 31, 2015 which may have a material effect on the financial condition of the Company.

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company, Inc.

NOTES TO FINANCIAL STATEMENTS

These items are based on illustrations taken from the NAIC Annual Statement Instructions

23. Reinsurance

A. Unsecured Reinsurance Recoverable

| | |
|---|-------------------|
| Company Florida Hurricane Catastrophe Fund | Recoverable \$ |
|---|-------------------|

B. Reinsurance Recoverable in Dispute

C. Reinsurance Assumed and Ceded

(1)

| | <u>Assumed Reinsurance</u> | | <u>Ceded Reinsurance</u> | | <u>Net</u> | |
|------------------------------------|--------------------------------|------------------------------|------------------------------|------------------------------|----------------------------|------------------------------|
| | <u>Premium Reserve</u> | <u>Commission Equity</u> | <u>Premium Reserve</u> | <u>Commission Equity</u> | <u>Premium Reserve</u> | <u>Commission Equity</u> |
| a. Affiliates | \$ | \$ | \$ | \$ | \$0 | \$0 |
| b. All Other | \$0 | \$ | \$20,215,055 | \$ | \$20,215,055 | \$0 |
| c. TOTAL | \$0 | \$0 | \$20,215,055 | \$0 | \$20,215,055 | \$0 |
| d. Direct Unearned Premium Reserve | | | \$72,259,916 | | | |

Line (c) of Ceded Reinsurance Premium Reserve Column must equal Page 3, Line 9, first inside amount.

(2)

REINSURANCE

| | Direct | Assumed | Ceded | Net |
|---|-----------|-----------|-----------|-----------|
| a. Contingent Commission | \$ | \$ | \$ | \$0 |
| b. Sliding Scale Adjustments | \$ | \$ | \$ | \$0 |
| c. Other Profit Commission Arrangements | \$ | \$ | \$ | \$0 |
| d. TOTAL | \$0 | \$0 | \$0 | \$0 |

(3)

D. Uncollectible Reinsurance

(1) The Company has written off in the current year reinsurance balances due (from the companies listed below) in the amount of \$, which is reflected as:

| | |
|--------------------------------------|----------|
| a. Losses incurred | \$ |
| b. Loss adjustment expenses incurred | \$ |
| c. Premiums earned | \$ |
| d. Other | \$ |

E. Commutation of Ceded Reinsurance

The Company has reported in its operations in the current year as a result of commutation of reinsurance with the companies listed below, amounts that are reflected as:

| | |
|---------------------------------------|----------|
| (1) Losses incurred | \$ |
| (2) Loss adjustment expenses incurred | \$ |
| (3) Premiums earned | \$ |
| (4) Other | \$ |

F. Retroactive Reinsurance

The Company has no retroactive reinsurance agreements.

G. Reinsurance Accounted for as a Deposit

None

H. Disclosures for the transfer of property and casualty run-off agreements

None

J. Reinsurance Agreements Qualifying for Reinsurance Aggregation

The company has no retroactive reinsurance agreement covering asbestos and pollution liabilities which qualify for reinsurer aggregation in accordance with SSAP No. 62R-Property and Casualty Reinsurance

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

(1) Reporting Entity Ceding to Certified Reinsurer Whose Rating Was Downgraded or Status Subject to Revocation

a. None

(2) Reporting Entity's Certified Reinsurer Rating Downgraded or Status Subject to Revocation

a. None

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

The Company has no retrospectively rated contracts

25. Changes in Incurred Losses and Loss Adjustment Expenses

Reserves as of December 31, 2014 were \$19,271,661. As of December 31, 2015, \$13,208,383 has been paid for incurred loss and loss adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$8,131,014 as a result of re-estimation of unpaid claims and claims adjustment expenses. Therefore, there has been \$(2,067,736) favorable (unfavorable) prior-year development since December 31, 2014. This increase is generally the result of ongoing analysis of recent loss development trends and original estimates are increased or decreased as additional information becomes available.

26. Intercompany Pooling Arrangements

The Company has no intercompany pooling arrangements.

27. Structured Settlements

A.

| | |
|--|--------------------------------------|
| <u>Loss Reserves Eliminated by Annuities</u> | <u>Unrecorded Loss Contingencies</u> |
| \$0 | \$0 |

28. Health Care Receivables

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company, Inc.

NOTES TO FINANCIAL STATEMENTS

These items are based on illustrations taken from the NAIC Annual Statement Instructions

The Company has no health care receivables.

29. Participating Policies

The Company has no participating policies.

30. Premium Deficiency Reserves

- | | | | |
|----|--|---|---------------------------------|
| 1. | Liability carried for premium deficiency reserves | \$ | 0 |
| 2. | Date of the most recent evaluation of this liability | ..... | 12/31/2015 |
| 3. | Was anticipated investment income utilized in the calculation? | Yes [<input checked="" type="checkbox"/>] | No [<input type="checkbox"/>] |

31. High Deductibles

The Company has no reserve credits recorded for high deductibles on unpaid claims and no amounts have been billed or are recoverable.

32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

A. Tabular Discount

None

B. Nontabular Discount

None

33. Asbestos/Environmental Reserves

- A. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of, a liability due to asbestos losses? Yes () No ()

(1) Direct -

| | <u>2010</u> | <u>2011</u> | <u>2012</u> | <u>2014</u> | <u>2015</u> |
|--|-------------|-------------|-------------|-------------|-------------|
| a. Beginning reserves: | \$ | \$ | \$ | \$ | \$ |
| b. Incurred losses and loss adjustment expense: | \$ | \$ | \$ | \$ | \$ |
| c. Calendar year payments for losses and loss adjustment expenses: | \$ | \$ | \$ | \$ | \$ |
| d. Ending reserves: | \$ | \$ | \$ | \$ | \$ |

(2) Assumed Reinsurance -

| | <u>2010</u> | <u>2011</u> | <u>2012</u> | <u>2014</u> | <u>2015</u> |
|--|-------------|-------------|-------------|-------------|-------------|
| a. Beginning reserves: | \$ | \$ | \$ | \$ | \$ |
| b. Incurred losses and loss adjustment expense: | \$ | \$ | \$ | \$ | \$ |
| c. Calendar year payments for losses and loss adjustment expenses: | \$ | \$ | \$ | \$ | \$ |
| d. Ending reserves: | \$ | \$ | \$ | \$ | \$ |

(3) Net of Ceded Reinsurance -

| | <u>2010</u> | <u>2011</u> | <u>2012</u> | <u>2014</u> | <u>2015</u> |
|--|-------------|-------------|-------------|-------------|-------------|
| a. Beginning reserves: | \$ | \$ | \$ | \$ | \$ |
| b. Incurred losses and loss adjustment expense: | \$ | \$ | \$ | \$ | \$ |
| c. Calendar year payments for losses and loss adjustment expenses: | \$ | \$ | \$ | \$ | \$ |
| d. Ending reserves: | \$ | \$ | \$ | \$ | \$ |

- B. State the amount of the ending reserves for Bulk + IBNR included in A (Loss & LAE):

| | |
|-------------------------------------|----------|
| (1) Direct Basis: | \$ |
| (2) Assumed Reinsurance Basis: | \$ |
| (3) Net of Ceded Reinsurance Basis: | \$ |

- C. State the amount of the ending reserves for loss adjustment expenses included in A (Case, Bulk + IBNR):

| | |
|-------------------------------------|----------|
| (1) Direct Basis: | \$ |
| (2) Assumed Reinsurance Basis: | \$ |
| (3) Net of Ceded Reinsurance Basis: | \$ |

- D. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of, a liability due to environmental losses? Yes () No ()

(1) Direct -

| | <u>2010</u> | <u>2011</u> | <u>2012</u> | <u>2014</u> | <u>2015</u> |
|--|-------------|-------------|-------------|-------------|-------------|
| a. Beginning reserves: | \$ | \$ | \$ | \$ | \$ |
| b. Incurred losses and loss adjustment expense: | \$ | \$ | \$ | \$ | \$ |
| c. Calendar year payments for losses and loss adjustment expenses: | \$ | \$ | \$ | \$ | \$ |
| d. Ending reserves: | \$ | \$ | \$ | \$ | \$ |

(2) Assumed Reinsurance -

| | <u>2010</u> | <u>2011</u> | <u>2012</u> | <u>2014</u> | <u>2015</u> |
|--|-------------|-------------|-------------|-------------|-------------|
| a. Beginning reserves: | \$ | \$ | \$ | \$ | \$ |
| b. Incurred losses and loss adjustment expense: | \$ | \$ | \$ | \$ | \$ |
| c. Calendar year payments for losses and loss adjustment expenses: | \$ | \$ | \$ | \$ | \$ |
| d. Ending reserves: | \$ | \$ | \$ | \$ | \$ |

(3) Net of Ceded Reinsurance -

| | <u>2010</u> | <u>2011</u> | <u>2012</u> | <u>2014</u> | <u>2015</u> |
|--|-------------|-------------|-------------|-------------|-------------|
| a. Beginning reserves: | \$ | \$ | \$ | \$ | \$ |
| b. Incurred losses and loss adjustment expense: | \$ | \$ | \$ | \$ | \$ |
| c. Calendar year payments for losses and loss adjustment expenses: | \$ | \$ | \$ | \$ | \$ |
| d. Ending reserves: | \$ | \$ | \$ | \$ | \$ |

- E. State the amount of the ending reserves for Bulk + IBNR included in D (Loss & LAE):

| | |
|-------------------------------------|----------|
| (1) Direct Basis: | \$ |
| (2) Assumed Reinsurance Basis: | \$ |
| (3) Net of Ceded Reinsurance Basis: | \$ |

- F. State the amount of the ending reserves for loss adjustment expenses included in D (Case, Bulk + IBNR):

| | |
|-------------------------------------|----------|
| (1) Direct Basis: | \$ |
| (2) Assumed Reinsurance Basis: | \$ |
| (3) Net of Ceded Reinsurance Basis: | \$ |

34. Subscriber Savings Accounts

Not Applicable

35. Multiple Peril Crop Insurance

The Company has no multi-peril crop insurance policies.

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company, Inc.
NOTES TO FINANCIAL STATEMENTS

These items are based on illustrations taken from the NAIC Annual Statement Instructions

36. Financial Guaranty Insurance

The Company has no financial guaranty insurance contracts.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 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, 1A and 2.
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []
- 1.3 State Regulating? Florida.....
- 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 State as of what date the latest financial examination of the reporting entity was made or is being made.12/31/2013
- 3.2 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.12/31/2013
- 3.3 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).05/22/2015
- 3.4 By what department or departments? Florida Office of Insurance Regulations.....
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] N/A []
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
- 4.11 sales of new business? Yes [X] No []
- 4.12 renewals? Yes [X] No []
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
- 4.21 sales of new business? Yes [] No [X]
- 4.22 renewals? Yes [] No [X]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 5.2 If yes, provide the name of the 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 |
|---------------------|------------------------|------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

- 6.1 Has the 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]
- 6.2 If yes, give full information
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]
- 7.2 If yes,

- 7.21 State the percentage of foreign control
- 7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

| 1 Nationality | 2 Type of Entity |
|------------------|---------------------|
| | |
| | |
| | |
| | |
| | |

GENERAL INTERROGATORIES

- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
 8.4 If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial 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. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
 Russell Perkins, Thomas Howell Ferguson, Tallahassee, Florida.....
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]
 10.2 If the response to 10.1 is yes, provide information related to this exemption:
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
 10.4 If the response to 10.3 is yes, provide information related to this exemption:
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []
 10.6 If the response to 10.5 is no or n/a, please explain
11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
 Arthur Randolph, Senior Consulting Actuary, Pinnacle Actuarial Resources, Roswell, Georgia.....
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
 12.11 Name of real estate holding company
 12.12 Number of parcels involved
 12.13 Total book/adjusted carrying value \$.....
- 12.2 If yes, provide explanation
13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []
 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []
 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []
- 14.1 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.
- 14.11 If the response to 14.1 is no, please explain:
- 14.2 Has the code of ethics for senior managers been amended? Yes [] No [X]
 14.21 If the response to 14.2 is yes, provide information related to amendment(s)
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

| 1 American Bankers Association (ABA) Routing Number | 2 Issuing or Confirming Bank Name | 3 Circumstances That Can Trigger the Letter of Credit | 4 Amount |
|--|--------------------------------------|--|-------------|
| | | | |
| | | | |
| | | | |

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers \$.....
 - 20.12 To stockholders not officers \$.....
 - 20.13 Trustees, supreme or grand (Fraternal only) \$.....
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers \$.....
 - 20.22 To stockholders not officers \$.....
 - 20.23 Trustees, supreme or grand (Fraternal only) \$.....
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others \$.....
 - 21.22 Borrowed from others \$.....
 - 21.23 Leased from others \$.....
 - 21.24 Other \$.....
- 22.1 Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments? Yes [] No [X]
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment \$.....
 - 22.22 Amount paid as expenses \$.....
 - 22.23 Other amounts paid \$.....
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$.....

INVESTMENT

- 24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03) Yes [X] No []
- 24.02 If no, give full and complete information, relating thereto
- 24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
- 24.04 Does the company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? Yes [] No [] NA [X]
- 24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. \$.....
- 24.06 If answer to 24.04 is no, report amount of collateral for other programs. \$.....
- 24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] NA [X]
- 24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] NA [X]
- 24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes [] No [] NA [X]
- 24.10 For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:
- 24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$.....
 - 24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$.....
 - 24.103 Total payable for securities lending reported on the liability page \$.....

GENERAL INTERROGATORIES

- 25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03). Yes [X] No []
- 25.2 If yes, state the amount thereof at December 31 of the current year:
- 25.21 Subject to repurchase agreements \$
 - 25.22 Subject to reverse repurchase agreements \$
 - 25.23 Subject to dollar repurchase agreements \$
 - 25.24 Subject to reverse dollar repurchase agreements \$
 - 25.25 Placed under option agreements \$
 - 25.26 Letter stock or securities restricted as to sale – excluding FHLB Capital Stock \$
 - 25.27 FHLB Capital Stock \$
 - 25.28 On deposit with states \$2,002,759
 - 25.29 On deposit with other regulatory bodies \$
 - 25.30 Pledged as collateral – excluding collateral pledged to an FHLB \$
 - 25.31 Pledged as collateral to FHLB – including assets backing funding agreements \$
 - 25.32 Other \$

25.3 For category (25.26) provide the following:

| 1 Nature of Restriction | 2 Description | 3 Amount |
|----------------------------|------------------|-------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

- 26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]
- 26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A []
If no, attach a description with this statement.
- 27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]
- 27.2 If yes, state the amount thereof at December 31 of the current year. \$
28. 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 []

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

| 1 Name of Custodian(s) | 2 Custodian's Address |
|-------------------------------|---|
| SunTrust Capital Markets..... | 200 S. Orange Avenue, Orlando, FL 32801..... |
| Branch Banking & Trust..... | 3233 Thomasville Road, Tallahassee, FL 32308..... |
| Merrill Lynch..... | 215 S. Monroe Street, Tallahassee, FL 32301..... |

28.02 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) |
|--------------|------------------|------------------------------|
| | | |
| | | |
| | | |
| | | |

- 28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? Yes [] No [X]
- 28.04 If yes, give full and complete information relating thereto:

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

GENERAL INTERROGATORIES

28.05 Identify all investment advisors, brokers/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 Number(s) | 2 Name | 3 Address |
|--|-----------|--------------|
| | | |
| | | |
| | | |

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D - Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])? Yes [] No []

29.2 If yes, complete the following schedule:

| 1 CUSIP # | 2 Name of Mutual Fund | 3 Book/Adjusted Carrying Value |
|---------------|--------------------------|-----------------------------------|
| | | |
| | | |
| | | |
| 29.2999 TOTAL | | 0 |

29.3 For each mutual fund listed in the table above, complete the following schedule:

| 1 Name of Mutual Fund (from above table) | 2 Name of Significant Holding of the Mutual Fund | 3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding | 4 Date of Valuation |
|--|--|---|------------------------|
| | | | |
| | | | |
| | | | |

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

| | 1 Statement (Admitted) Value | 2 Fair Value | 3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+) |
|----------------------------|------------------------------------|-----------------|---|
| 30.1 Bonds..... | 157,023,514 | 151,353,775 | (5,669,739) |
| 30.2 Preferred Stocks..... | 0 | | 0 |
| 30.3 Totals | 157,023,514 | 151,353,775 | (5,669,739) |

30.4 Describe the sources or methods utilized in determining the fair values:

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [] No []

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [] No []

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

32.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? Yes [] No []

32.2 If no, list exceptions:

GENERAL INTERROGATORIES

OTHER

- 33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$513,015
- 33.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

| 1 Name | 2 Amount Paid |
|-------------------------------|------------------|
| Insurance Service Office..... | \$.....422,272 |
| Demotech..... | \$.....55,000 |

- 34.1 Amount of payments for legal expenses, if any? \$68,318
- 34.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

| 1 Name | 2 Amount Paid |
|-----------|------------------|
| | \$..... |
| | \$..... |
| | \$..... |

- 35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$
- 35.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

| 1 Name | 2 Amount Paid |
|-----------|------------------|
| | \$..... |
| | \$..... |
| | \$..... |

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No [X]
 1.2 If yes, indicate premium earned on U. S. business only. \$0
 1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$

1.3.1 Reason for excluding

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. \$
 1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$0

1.6 Individual policies:

Most current three years:

1.6.1 Total premium earned \$0
 1.6.2 Total incurred claims \$0
 1.6.3 Number of covered lives

All years prior to most current three years:

1.6.4 Total premium earned \$0
 1.6.5 Total incurred claims \$0
 1.6.6 Number of covered lives

1.7 Group policies:

Most current three years:

1.7.1 Total premium earned \$0
 1.7.2 Total incurred claims \$0
 1.7.3 Number of covered lives

All years prior to most current three years:

1.7.4 Total premium earned \$0
 1.7.5 Total incurred claims \$0
 1.7.6 Number of covered lives

2. Health Test:

| | | 1 | | 2 |
|-----|-------------------------|---------------------|----|------------------|
| | | Current Year | | Prior Year |
| 2.1 | Premium Numerator | \$0 | \$ |0 |
| 2.2 | Premium Denominator | \$109,198,497 | \$ |111,554,484 |
| 2.3 | Premium Ratio (2.1/2.2) |0.000 | |0.000 |
| 2.4 | Reserve Numerator | \$0 | \$ |0 |
| 2.5 | Reserve Denominator | \$77,425,065 | \$ |75,631,041 |
| 2.6 | Reserve Ratio (2.4/2.5) |0.000 | |0.000 |

3.1 Does the reporting entity issue both participating and non-participating policies? Yes [] No [X]

3.2 If yes, state the amount of calendar year premiums written on:

3.2.1 Participating policies \$
 3.2.2 Non-participating policies \$

4. For Mutual reporting entities and Reciprocal Exchanges only:

4.1 Does the reporting entity issue assessable policies?..... Yes [] No []
 4.2 Does the reporting entity issue non-assessable policies?..... Yes [] No []
 4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders?..... %
 4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. \$

5. For Reciprocal Exchanges Only:

5.1 Does the exchange appoint local agents?..... Yes [] No []
 5.2 If yes, is the commission paid:
 5.2.1 Out of Attorney's-in-fact compensation..... Yes [] No [] N/A []
 5.2.2 As a direct expense of the exchange..... Yes [] No [] N/A []

5.3 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?

5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred?..... Yes [] No []

5.5 If yes, give full information

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

- 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss:
 The company does not write this coverage.....
- 6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:
 Calculations using the 1/100 year model, the calculations is derived from the company's database reflecting exposure by locating constructing and value.....
- 6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?.....
 The company maintains 100% CAT protection in excess of \$6 million each occurrence.....
- 6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?..... Yes [X] No []
- 6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss.....
- 7.1 Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?..... Yes [] No [X]
- 7.2 If yes, indicate the number of reinsurance contracts containing such provisions.....
- 7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?..... Yes [] No []
- 8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?..... Yes [] No [X]
- 8.2 If yes, give full information.....
- 9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
 (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;
 (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
 (c) Aggregate stop loss reinsurance coverage;
 (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
 (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
 (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity..... Yes [X] No []
- 9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
 (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
 (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract..... Yes [] No [X]
- 9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
 (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
 (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
 (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.
- 9.4 Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
 (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
 (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?..... Yes [] No [X]
- 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.
- 9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
 (a) The entity does not utilize reinsurance; or,..... Yes [] No [X]
 (b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or..... Yes [] No [X]
 (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement..... Yes [] No [X]
10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?..... Yes [X] No [] N/A []

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

- 11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force:..... Yes [] No [X]
- 11.2 If yes, give full information
-
- 12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
- 12.11 Unpaid losses..... \$.....
- 12.12 Unpaid underwriting expenses (including loss adjustment expenses)..... \$.....
- 12.2 Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?..... \$.....
- 12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes [] No [] N/A [X]
- 12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
- 12.41 From..... %
- 12.42 To..... %
- 12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? Yes [] No [X]
- 12.6 If yes, state the amount thereof at December 31 of current year:
- 12.61 Letters of Credit..... \$.....
- 12.62 Collateral and other funds..... \$.....
- 13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$.....500,000
- 13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes [] No [X]
- 13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.
- 14.1 Is the company a cedant in a multiple cedant reinsurance contract?..... Yes [] No [X]
- 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:
-
- 14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?..... Yes [] No []
- 14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?..... Yes [] No []
- 14.5 If the answer to 14.4 is no, please explain:
-
- 15.1 Has the reporting entity guaranteed any financed premium accounts?..... Yes [] No [X]
- 15.2 If yes, give full information
-
- 16.1 Does the reporting entity write any warranty business? Yes [] No [X]
- If yes, disclose the following information for each of the following types of warranty coverage:

| | 1 Direct Losses Incurred | 2 Direct Losses Unpaid | 3 Direct Written Premium | 4 Direct Premium Unearned | 5 Direct Premium Earned |
|------------------------|--------------------------------|------------------------------|--------------------------------|---------------------------------|-------------------------------|
| 16.11 Home | \$ | \$ | \$ | \$ | \$ |
| 16.12 Products | \$ | \$ | \$ | \$ | \$ |
| 16.13 Automobile | \$ | \$ | \$ | \$ | \$ |
| 16.14 Other* | \$ | \$ | \$ | \$ | \$ |

* Disclose type of coverage:

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F – Part 3 that it excludes from Schedule F – Part 5. Yes [] No [X]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F – Part 5. Provide the following information for this exemption:

- 17.11 Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5..... \$.....
- 17.12 Unfunded portion of Interrogatory 17.11..... \$.....
- 17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11 \$.....
- 17.14 Case reserves portion of Interrogatory 17.11..... \$.....
- 17.15 Incurred but not reported portion of Interrogatory 17.11..... \$.....
- 17.16 Unearned premium portion of Interrogatory 17.11..... \$.....
- 17.17 Contingent commission portion of Interrogatory 17.11..... \$.....

Provide the following information for all other amounts included in Schedule F – Part 3 and excluded from Schedule F – Part 5, not included above.

- 17.18 Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5..... \$.....
- 17.19 Unfunded portion of Interrogatory 17.18..... \$.....
- 17.20 Paid losses and loss adjustment expenses portion of Interrogatory 17.18 \$.....
- 17.21 Case reserves portion of Interrogatory 17.18..... \$.....
- 17.22 Incurred but not reported portion of Interrogatory 17.18..... \$.....
- 17.23 Unearned premium portion of Interrogatory 17.18..... \$.....
- 17.24 Contingent commission portion of Interrogatory 17.18..... \$.....

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

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e., 17.6.

| | 1 2015 | 2 2014 | 3 2013 | 4 2012 | 5 2011 |
|---|-------------|-------------|-------------|-------------|-------------|
| Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3) | | | | | |
| 1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) | 0 | 0 | 0 | 0 | 0 |
| 2. Property lines (Lines 1, 2, 9, 12, 21 & 26) | 52,989,103 | 57,670,398 | 53,613,165 | 54,551,231 | 50,816,686 |
| 3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) | 102,530,694 | 109,166,147 | 116,851,882 | 119,199,609 | 104,752,843 |
| 4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) | 0 | 0 | 0 | 0 | 0 |
| 5. Nonproportional reinsurance lines (Lines 31, 32 & 33) | 0 | 0 | 0 | 0 | 0 |
| 6. Total (Line 35) | 155,519,797 | 166,836,545 | 170,465,047 | 173,750,840 | 155,569,529 |
| Net Premiums Written (Page 8, Part 1B, Col. 6) | | | | | |
| 7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) | 0 | 0 | 0 | 0 | 0 |
| 8. Property lines (Lines 1, 2, 9, 12, 21 & 26) | 36,488,516 | 40,667,184 | 35,867,446 | 33,345,793 | 32,213,192 |
| 9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) | 70,445,852 | 72,809,421 | 75,273,354 | 69,729,963 | 62,675,333 |
| 10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) | 0 | 0 | 0 | 0 | 0 |
| 11. Nonproportional reinsurance lines (Lines 31, 32 & 33) | 0 | 0 | 0 | 0 | 0 |
| 12. Total (Line 35) | 106,934,368 | 113,476,605 | 111,140,800 | 103,075,756 | 94,888,525 |
| Statement of Income (Page 4) | | | | | |
| 13. Net underwriting gain (loss) (Line 8) | 7,158,967 | 14,330,245 | 11,708,221 | (516,746) | (3,286,063) |
| 14. Net investment gain (loss) (Line 11) | 3,058,641 | 2,985,449 | 3,091,106 | 2,734,110 | 2,655,813 |
| 15. Total other income (Line 15) | 424,183 | 407,684 | 358,174 | 692,596 | 2,340,845 |
| 16. Dividends to policyholders (Line 17) | 0 | 0 | 0 | 0 | 0 |
| 17. Federal and foreign income taxes incurred (Line 19) | 3,933,704 | 7,042,184 | 5,920,054 | 434,871 | 1,018,580 |
| 18. Net income (Line 20) | 6,708,087 | 10,681,194 | 9,237,447 | 2,475,089 | 692,015 |
| Balance Sheet Lines (Pages 2 and 3) | | | | | |
| 19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3) | 191,154,966 | 187,371,816 | 182,635,028 | 181,776,907 | 174,084,147 |
| 20. Premiums and considerations (Page 2, Col. 3) | | | | | |
| 20.1 In course of collection (Line 15.1) | 714,570 | 116,569 | 765,137 | 689,301 | 909,171 |
| 20.2 Deferred and not yet due (Line 15.2) | 8,076,088 | 8,435,616 | 8,901,465 | 9,418,063 | 9,035,487 |
| 20.3 Accrued retrospective premiums (Line 15.3) | 0 | 0 | 0 | 0 | 0 |
| 21. Total liabilities excluding protected cell business (Page 3, Line 26) | 104,304,043 | 105,076,199 | 110,529,227 | 117,477,903 | 111,896,583 |
| 22. Losses (Page 3, Line 1) | 22,597,716 | 18,687,819 | 17,322,294 | 23,568,160 | 26,441,969 |
| 23. Loss adjustment expenses (Page 3, Line 3) | 2,776,052 | 2,627,796 | 1,949,367 | 2,126,900 | 2,259,817 |
| 24. Unearned premiums (Page 3, Line 9) | 52,051,297 | 54,315,426 | 52,393,305 | 49,550,285 | 46,057,838 |
| 25. Capital paid up (Page 3, Lines 30 & 31) | 1,600,000 | 1,600,000 | 1,600,000 | 1,600,000 | 1,600,000 |
| 26. Surplus as regards policyholders (Page 3, Line 37) | 86,850,923 | 82,295,617 | 72,105,801 | 64,299,004 | 62,187,564 |
| Cash Flow (Page 5) | | | | | |
| 27. Net cash from operations (Line 11) | 5,572,069 | 8,098,630 | 2,803,717 | 9,193,204 | 10,048,670 |
| Risk-Based Capital Analysis | | | | | |
| 28. Total adjusted capital | 86,850,923 | 82,295,617 | 72,105,801 | 64,299,004 | 62,187,564 |
| 29. Authorized control level risk-based capital | 12,432,389 | 13,643,021 | 20,981,311 | 19,001,961 | 14,563,134 |
| Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3)(Item divided by Page 2, Line 12, Col. 3) x 100.0 | | | | | |
| 30. Bonds (Line 1) | 74.3 | 74.2 | 74.3 | 72.5 | 70.5 |
| 31. Stocks (Lines 2.1 & 2.2) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 32. Mortgage loans on real estate (Lines 3.1 and 3.2) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 33. Real estate (Lines 4.1, 4.2 & 4.3) | 6.0 | 5.8 | 2.9 | 3.0 | 3.2 |
| 34. Cash, cash equivalents and short-term investments (Line 5) | 19.7 | 20.1 | 22.8 | 24.5 | 26.2 |
| 35. Contract loans (Line 6) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 36. Derivatives (Line 7) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 37. Other invested assets (Line 8) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 38. Receivables for securities (Line 9) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 39. Securities lending reinvested collateral assets (Line 10) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 40. Aggregate write-ins for invested assets (Line 11) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| 41. Cash, cash equivalents and invested assets (Line 12) | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 |
| Investments in Parent, Subsidiaries and Affiliates | | | | | |
| 42. Affiliated bonds, (Sch. D, Summary, Line 12, Col. 1) | 0 | 0 | 0 | 0 | 0 |
| 43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1) | 0 | 0 | 0 | 0 | 0 |
| 44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1) | 0 | 0 | 0 | 0 | 0 |
| 45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10) | 0 | 0 | 0 | 0 | 0 |
| 46. Affiliated mortgage loans on real estate | 0 | 0 | 0 | 0 | 0 |
| 47. All other affiliated | 0 | 0 | 0 | 0 | 0 |
| 48. Total of above Lines 42 to 47 | 0 | 0 | 0 | 0 | 0 |
| 49. Total Investment in parent included in Lines 42 to 47 above | 0 | 0 | 0 | 0 | 0 |
| 50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0) | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |

FIVE-YEAR HISTORICAL DATA

(Continued)

| | 1 2015 | 2 2014 | 3 2013 | 4 2012 | 5 2011 |
|--|------------|------------|------------|------------|------------|
| Capital and Surplus Accounts (Page 4) | | | | | |
| 51. Net unrealized capital gains (losses) (Line 24) | 0 | 0 | 0 | 0 | 0 |
| 52. Dividends to stockholders (Line 35) | 0 | 0 | 0 | 0 | 0 |
| 53. Change in surplus as regards policyholders for the year (Line 38) | 4,555,306 | 10,189,816 | 7,806,797 | 2,111,440 | (903,388) |
| Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2) | | | | | |
| 54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) | 0 | 0 | 0 | 0 | 0 |
| 55. Property lines (Lines 1, 2, 9, 12, 21 & 26) | 12,569,201 | 9,937,661 | 18,083,466 | 23,198,479 | 16,692,861 |
| 56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) | 27,839,968 | 25,237,473 | 40,485,901 | 44,232,062 | 30,067,208 |
| 57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) | 0 | 0 | 0 | 0 | 0 |
| 58. Nonproportional reinsurance lines (Lines 31, 32 & 33) | 0 | 0 | 0 | 0 | 0 |
| 59. Total (Line 35) | 40,409,169 | 35,175,134 | 58,569,367 | 67,430,541 | 46,760,069 |
| Net Losses Paid (Page 9, Part 2, Col. 4) | | | | | |
| 60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) | 0 | 0 | 0 | 0 | 0 |
| 61. Property lines (Lines 1, 2, 9, 12, 21 & 26) | 12,511,930 | 9,475,510 | 12,185,967 | 16,068,775 | 16,026,576 |
| 62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) | 27,383,101 | 24,221,968 | 27,342,038 | 29,381,480 | 28,076,383 |
| 63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) | 0 | 0 | 0 | 0 | 0 |
| 64. Nonproportional reinsurance lines (Lines 31, 32 & 33) | 0 | 0 | 0 | 0 | 0 |
| 65. Total (Line 35) | 39,895,031 | 33,697,478 | 39,528,005 | 45,450,255 | 44,102,959 |
| Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0 | | | | | |
| 66. Premiums earned (Line 1) | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 |
| 67. Losses incurred (Line 2) | 40.1 | 31.4 | 30.7 | 42.8 | 50.4 |
| 68. Loss expenses incurred (Line 3) | 6.5 | 5.7 | 4.9 | 5.9 | 6.5 |
| 69. Other underwriting expenses incurred (Line 4) | 46.8 | 50.0 | 53.6 | 51.9 | 46.8 |
| 70. Net underwriting gain (loss) (Line 8) | 6.6 | 12.8 | 10.8 | (0.5) | (3.7) |
| Other Percentages | | | | | |
| 71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0) | 47.4 | 48.8 | 51.9 | 49.5 | 41.9 |
| 72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0) | 46.7 | 37.2 | 35.6 | 48.6 | 56.9 |
| 73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0) | 123.1 | 137.9 | 154.1 | 160.3 | 152.6 |
| One Year Loss Development (000 omitted) | | | | | |
| 74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) | 298 | 1,181 | (4,011) | (4,199) | (3,752) |
| 75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) | 0.4 | 1.6 | (6.2) | (6.8) | (5.9) |
| Two Year Loss Development (000 omitted) | | | | | |
| 76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) | 995 | (3,427) | (4,537) | (4,007) | (9,145) |
| 77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0) | 1.4 | (5.3) | (7.3) | (6.4) | (14.5) |

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [] No []

If no, please explain

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES
SCHEDULE P - PART 1 - SUMMARY

(\$000 Omitted)

| Years in Which Premiums Were Earned and Losses Were Incurred | Premiums Earned | | | Loss and Loss Expense Payments | | | | | | | 12 Number of Claims Reported Direct and Assumed | |
|--|-------------------------|------------|------------------------|--------------------------------|------------|---------------------------------------|------------|------------------------------|------------|--|--|--|
| | 1 Direct and Assumed | 2 Ceded | 3 Net (Cols. 1 - 2) | Loss Payments | | Defense and Cost Containment Payments | | Adjusting and Other Payments | | 10 Salvage and Subrogation Received | | 11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9) |
| | | | | 4 Direct and Assumed | 5 Ceded | 6 Direct and Assumed | 7 Ceded | 8 Direct and Assumed | 9 Ceded | | | |
| | | | | | | | | | | | | |
| 1. Prior | XXX | XXX | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX |
| 2. 2006 | 24,917 | 9,469 | 15,448 | 6,513 | 0 | 0 | 0 | 1,012 | 0 | 27 | 7,525 | XXX |
| 3. 2007 | 92,124 | 27,338 | 64,786 | 20,569 | 397 | 0 | 0 | 1,277 | 22 | 323 | 21,427 | XXX |
| 4. 2008 | 112,384 | 35,427 | 76,957 | 50,717 | 14,024 | 1 | 0 | 7,497 | 3,602 | 441 | 40,589 | XXX |
| 5. 2009 | 115,277 | 40,450 | 74,827 | 36,202 | 5 | 59 | 0 | 4,421 | 0 | 227 | 40,677 | XXX |
| 6. 2010 | 128,355 | 47,673 | 80,682 | 45,276 | 10 | 65 | 2 | 5,839 | 0 | 50 | 51,168 | XXX |
| 7. 2011 | 145,946 | 55,994 | 89,952 | 46,529 | 2,188 | 19 | 4 | 6,630 | 844 | 222 | 50,142 | XXX |
| 8. 2012 | 165,793 | 66,209 | 99,584 | 69,265 | 27,281 | 416 | 6 | 12,001 | 6,169 | 291 | 48,226 | XXX |
| 9. 2013 | 173,120 | 64,822 | 108,298 | 50,953 | 15,168 | 308 | 2 | 7,479 | 2,111 | 310 | 41,459 | XXX |
| 10. 2014 | 166,983 | 55,428 | 111,555 | 32,352 | 23 | 1,081 | 30 | 3,481 | 0 | 343 | 36,861 | XXX |
| 11. 2015 | 159,700 | 50,502 | 109,198 | 27,947 | 161 | 311 | 98 | 5,543 | 0 | 176 | 33,542 | XXX |
| 12. Totals | XXX | XXX | XXX | 386,323 | 59,257 | 2,260 | 142 | 55,180 | 12,748 | 2,410 | 371,616 | XXX |

| | Losses Unpaid | | | | Defense and Cost Containment Unpaid | | | | Adjusting and Other Unpaid | | 23 Salvage and Subrogation Anticipated | 24 Total Net Losses and Expenses Unpaid | 25 Number of Claims Outstanding Direct and Assumed |
|----------|--------------------------|-------------|--------------------------|-------------|-------------------------------------|-------------|--------------------------|-------------|----------------------------|-------------|---|--|---|
| | Case Basis | | Bulk + IBNR | | Case Basis | | Bulk + IBNR | | 21 Direct and Assumed | 22 Ceded | | | |
| | 13 Direct and Assumed | 14 Ceded | 15 Direct and Assumed | 16 Ceded | 17 Direct and Assumed | 18 Ceded | 19 Direct and Assumed | 20 Ceded | | | | | |
| | | | | | | | | | | | | | |
| 1. | 10 | 10 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX |
| 2. | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX |
| 3. | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX |
| 4. | 26 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 9 | 0 | 0 | 35 | XXX |
| 5. | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 7 | 0 | 0 | 16 | XXX |
| 6. | 184 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 27 | 0 | 0 | 213 | XXX |
| 7. | 787 | 0 | 13 | 0 | 5 | 0 | 0 | 0 | 65 | 0 | 0 | 870 | XXX |
| 8. | 1,334 | 209 | 161 | 0 | 9 | 0 | 0 | 0 | 99 | 17 | 0 | 1,377 | XXX |
| 9. | 1,416 | 63 | 307 | 0 | 5 | 0 | 0 | 0 | 117 | 5 | 0 | 1,777 | XXX |
| 10. | 2,386 | 0 | 926 | 0 | 44 | 0 | 0 | 0 | 486 | 0 | 0 | 3,842 | XXX |
| 11. | 7,612 | 0 | 7,709 | 0 | 147 | 0 | 0 | 0 | 1,776 | 0 | 0 | 17,244 | XXX |
| 12. | 13,764 | 282 | 9,116 | 0 | 212 | 0 | 0 | 0 | 2,586 | 22 | 0 | 25,374 | XXX |

| | Total Losses and Loss Expenses Incurred | | | Loss and Loss Expense Percentage (Incurred/Premiums Earned) | | | Nontabular Discount | | 34 Inter-Company Pooling Participation Percentage | Net Balance Sheet Reserves After Discount | |
|----------|---|-------------|-----------|---|-------------|-----------|---------------------|--------------------|--|---|----------------------------|
| | 26 Direct and Assumed | 27 Ceded | 28 Net | 29 Direct and Assumed | 30 Ceded | 31 Net | 32 Loss | 33 Loss Expense | | 35 Losses Unpaid | 36 Loss Expenses Unpaid |
| | | | | | | | | | | | |
| 1. | XXX | XXX | XXX | XXX | XXX | XXX | 0 | 0 | XXX | 0 | 0 |
| 2. | 7,525 | 0 | 7,525 | 30.2 | 0.0 | 48.7 | 0 | 0 | | 0 | 0 |
| 3. | 21,846 | 419 | 21,427 | 23.7 | 1.5 | 33.1 | 0 | 0 | | 0 | 0 |
| 4. | 58,250 | 17,626 | 40,624 | 51.8 | 49.8 | 52.8 | 0 | 0 | | 26 | 9 |
| 5. | 40,698 | 5 | 40,693 | 35.3 | 0.0 | 54.4 | 0 | 0 | | 9 | 7 |
| 6. | 51,393 | 12 | 51,381 | 40.0 | 0.0 | 63.7 | 0 | 0 | | 184 | 29 |
| 7. | 54,048 | 3,036 | 51,012 | 37.0 | 5.4 | 56.7 | 0 | 0 | | 800 | 70 |
| 8. | 83,285 | 33,682 | 49,603 | 50.2 | 50.9 | 49.8 | 0 | 0 | | 1,286 | 91 |
| 9. | 60,585 | 17,349 | 43,236 | 35.0 | 26.8 | 39.9 | 0 | 0 | | 1,660 | 117 |
| 10. | 40,756 | 53 | 40,703 | 24.4 | 0.1 | 36.5 | 0 | 0 | | 3,312 | 530 |
| 11. | 51,045 | 259 | 50,786 | 32.0 | 0.5 | 46.5 | 0 | 0 | | 15,321 | 1,923 |
| 12. | XXX | XXX | XXX | XXX | XXX | XXX | 0 | 0 | XXX | 22,598 | 2,776 |

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements, which will reconcile Part 1 with Parts 2 and 4.

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE Southern Fidelity Insurance Company

SCHEDULE P - PART 2 - SUMMARY

| Years in Which Losses Were Incurred | INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED) | | | | | | | | | | DEVELOPMENT | |
|-------------------------------------|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------------|----------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | One Year | Two Year |
| 1. Prior | 196 | 420 | 619 | 1,016 | 1,155 | 858 | 916 | 916 | 916 | 916 | 0 | 0 |
| 2. 2006 | 7,037 | 6,721 | 6,644 | 6,568 | 6,500 | 6,513 | 6,513 | 6,513 | 6,513 | 6,513 | 0 | 0 |
| 3. 2007 | XXX | 30,843 | 21,213 | 20,224 | 20,110 | 20,393 | 20,329 | 20,189 | 20,172 | 20,172 | 0 | (17) |
| 4. 2008 | XXX | XXX | 45,377 | 39,110 | 37,531 | 36,994 | 37,016 | 36,925 | 36,983 | 36,720 | (263) | (205) |
| 5. 2009 | XXX | XXX | XXX | 43,522 | 37,367 | 36,537 | 36,464 | 36,302 | 36,266 | 36,265 | (1) | (37) |
| 6. 2010 | XXX | XXX | XXX | XXX | 47,868 | 45,484 | 45,286 | 45,232 | 45,481 | 45,515 | 34 | 283 |
| 7. 2011 | XXX | XXX | XXX | XXX | XXX | 49,075 | 45,131 | 45,240 | 45,252 | 45,161 | (91) | (79) |
| 8. 2012 | XXX | XXX | XXX | XXX | XXX | XXX | 46,776 | 43,103 | 43,421 | 43,689 | 268 | 586 |
| 9. 2013 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 37,292 | 37,889 | 37,756 | (133) | 464 |
| 10. 2014 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 36,252 | 36,736 | 484 | XXX |
| 11. 2015 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 43,467 | XXX | XXX |
| | | | | | | | | | | | 12. Totals | |
| | | | | | | | | | | | 298 995 | |

SCHEDULE P - PART 3 - SUMMARY

| Years in Which Losses Were Incurred | CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED) | | | | | | | | | | 11 | 12 |
|-------------------------------------|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|---|--|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Number of Claims Closed With Loss Payment | Number of Claims Closed Without Loss Payment |
| | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | | |
| 1. Prior | 000 | 114 | 181 | 721 | 1,072 | 837 | 916 | 916 | 916 | 916 | XXX | XXX |
| 2. 2006 | 3,606 | 5,827 | 6,490 | 6,500 | 6,500 | 6,513 | 6,513 | 6,513 | 6,513 | 6,513 | XXX | XXX |
| 3. 2007 | XXX | 14,603 | 18,521 | 19,463 | 19,925 | 20,027 | 20,194 | 20,189 | 20,172 | 20,172 | XXX | XXX |
| 4. 2008 | XXX | XXX | 24,683 | 34,571 | 35,745 | 36,209 | 36,442 | 36,553 | 36,553 | 36,694 | XXX | XXX |
| 5. 2009 | XXX | XXX | XXX | 23,195 | 33,167 | 34,798 | 35,850 | 35,858 | 36,149 | 36,256 | XXX | XXX |
| 6. 2010 | XXX | XXX | XXX | XXX | 28,900 | 39,512 | 42,353 | 44,206 | 44,902 | 45,329 | XXX | XXX |
| 7. 2011 | XXX | XXX | XXX | XXX | XXX | 31,516 | 40,310 | 42,576 | 43,320 | 44,356 | XXX | XXX |
| 8. 2012 | XXX | XXX | XXX | XXX | XXX | XXX | 32,284 | 39,933 | 41,380 | 42,394 | XXX | XXX |
| 9. 2013 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 27,646 | 34,362 | 36,091 | XXX | XXX |
| 10. 2014 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 25,632 | 33,380 | XXX | XXX |
| 11. 2015 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 27,999 | XXX | XXX |

SCHEDULE P - PART 4 - SUMMARY

| Years in Which Losses Were Incurred | BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED) | | | | | | | | | |
|-------------------------------------|---|--------|-------|-------|-------|-------|-------|-------|-------|-------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 |
| 1. Prior | 103 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2. 2006 | 1,510 | 192 | 96 | 68 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3. 2007 | XXX | 10,646 | 908 | 444 | 10 | 0 | 0 | 0 | 0 | 0 |
| 4. 2008 | XXX | XXX | 8,780 | 1,750 | 234 | 13 | 32 | 32 | 0 | 0 |
| 5. 2009 | XXX | XXX | XXX | 8,290 | 624 | 151 | 95 | 51 | 0 | 0 |
| 6. 2010 | XXX | XXX | XXX | XXX | 5,763 | 566 | 303 | 190 | 37 | 0 |
| 7. 2011 | XXX | XXX | XXX | XXX | XXX | 7,029 | 941 | 609 | 267 | 13 |
| 8. 2012 | XXX | XXX | XXX | XXX | XXX | XXX | 6,472 | 838 | 570 | 161 |
| 9. 2013 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 4,105 | 753 | 307 |
| 10. 2014 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 3,938 | 926 |
| 11. 2015 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 7,709 |

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated By States And Territories

| States, etc. | 1 Active Status | Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken | | 4 Dividends Paid or Credited to Policyholders on Direct Business | 5 Direct Losses Paid (Deducting Salvage) | 6 Direct Losses Incurred | 7 Direct Losses Unpaid | 8 Finance and Service Charges Not Included in Premiums | 9 Direct Premium Written for Federal Purchasing Groups (Included in Col. 2) |
|---|--------------------|--|-----------------------------|---|---|-----------------------------|---------------------------|---|--|
| | | 2 Direct Premiums Written | 3 Direct Premiums Earned | | | | | | |
| 1. Alabama | AL N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 2. Alaska | AK N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 3. Arizona | AZ N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 4. Arkansas | AR N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 5. California | CA N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 6. Colorado | CO N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 7. Connecticut | CT N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 8. Delaware | DE N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 9. Dist. Columbia | DC N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 10. Florida | FL L | 94,267,710 | 96,681,210 | .0 | 28,309,245 | 31,154,542 | 18,103,380 | 143,742 | .0 |
| 11. Georgia | GA N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 12. Hawaii | HI N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 13. Idaho | ID N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 14. Illinois | IL N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 15. Indiana | IN N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 16. Iowa | IA N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 17. Kansas | KS N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 18. Kentucky | KY N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 19. Louisiana | LA L | 44,934,037 | 45,592,957 | .0 | 7,519,889 | 7,977,166 | 3,166,130 | 278,269 | .0 |
| 20. Maine | ME N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 21. Maryland | MD N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 22. Massachusetts | MA N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 23. Michigan | MI N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 24. Minnesota | MN N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 25. Mississippi | MS L | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 26. Missouri | MO N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 27. Montana | MT N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 28. Nebraska | NE N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 29. Nevada | NV N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 30. New Hampshire | NH N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 31. New Jersey | NJ N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 32. New Mexico | NM N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 33. New York | NY N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 34. No. Carolina | NC N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 35. No. Dakota | ND N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 36. Ohio | OH N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 37. Oklahoma | OK N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 38. Oregon | OR N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 39. Pennsylvania | PA N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 40. Rhode Island | RI N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 41. So. Carolina | SC L | 16,797,469 | 15,572,595 | .0 | 4,152,391 | 4,460,295 | 1,384,898 | 34,276 | .0 |
| 42. So. Dakota | SD N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 43. Tennessee | TN N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 44. Texas | TX N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 45. Utah | UT N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 46. Vermont | VT N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 47. Virginia | VA N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 48. Washington | WA N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 49. West Virginia | WV N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 50. Wisconsin | WI N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 51. Wyoming | WY N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 52. American Samoa | AS N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 53. Guam | GU N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 54. Puerto Rico | PR N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 55. U.S. Virgin Islands | VI N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 56. Northern Mariana Islands | MP N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 57. Canada | CAN N | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 58. Aggregate other alien | OT XXX | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 59. Totals | (a) 4 | 155,999,216 | 157,846,762 | 0 | 39,981,525 | 43,592,003 | 22,654,408 | 456,287 | 0 |
| DETAILS OF WRITE-INS | | | | | | | | | |
| 58001. | XXX | | | | | | | | |
| 58002. | XXX | | | | | | | | |
| 58003. | XXX | | | | | | | | |
| 58998. Sum. of remaining write-ins for Line 58 from overflow page | XXX | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 58999. Totals (Lines 58001 through 58003 + 58998) (Line 58 above) | XXX | 0 | 0 | 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.

Explanation of basis of allocation of premiums by states, etc.

Risk location at inception of policy.

(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

Thomas Becnel

33% - No other entity or individual owns 10% or more voting control

29.5% - No other entity or individual owns 10% or more voting control

SOUTHERN FIDELITY HOLDING, LLC
20-1640941

SOUTHERN FIDELITY MANAGING AGENCY
20-2462153

100%

SOUTHERN FIDELITY INSURANCE COMPANY
20-2380774 NAIC#10136

Affiliates as a result of common management.

SFPC HOLDING COMPANY LLC
45-3014596

SOUTHERN FIDELITY RISK MANAGERS LLC
45-3014437

PREFERRED MANAGING AGENCY
59-3480242

PREFERRED HOLDING COMPANY
59-3485499

SOUTHERN FIDELITY PROPERTY & CASUALTY
45-4180375 NAIC#14166

CAPITOL PREFERRED INSURANCE COMPANY
59-3499140 NAIC#10908

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