



ANNUAL STATEMENT

For the Year Ended December 31, 2016

of the Condition and Affairs of the

OLYMPUS INSURANCE COMPANY

NAIC Group Code.....0000, 0000 <small>(Current Period) (Prior Period)</small>	NAIC Company Code..... 12954	Employer's ID Number..... 26-0211369
Organized under the Laws of Florida	State of Domicile or Port of Entry Florida	Country of Domicile US
Incorporated/Organized..... May 31, 2007	Commenced Business..... August 8, 2007	
Statutory Home Office	4200 Northcorp Parkway Suite 400..... Palm Beach Gardens FL US 33410 <small>(Street and Number) (City or Town, State, Country and Zip Code)</small>	
Main Administrative Office	4200 Northcorp Parkway Suite 400..... Palm Beach Gardens FL US..... 33410 561-231-5902 <small>(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)</small>	
Mail Address	4200 Northcorp Parkway Suite 400..... Palm Beach Gardens FL US 33410 <small>(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)</small>	
Primary Location of Books and Records	4200 Northcorp Parkway Suite 400..... Palm Beach Gardens FL US 33410561-231-5902 <small>(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)</small>	
Internet Web Site Address	www.olympusinsurance.com	
Statutory Statement Contact	Jennifer Gravelle <small>(Name)</small> jgravelle@oigfl.com <small>(E-Mail Address)</small>	561-231-5902 <small>(Area Code) (Telephone Number) (Extension)</small> 321-558-3967 <small>(Fax Number)</small>

OFFICERS

Name	Title	Name	Title
1. Jeffrey Bernard Scott	CEO, President & Secretary	2. Jennifer Lee Gravelle	CFO
3.		4.	

OTHER

DIRECTORS OR TRUSTEES

Jeffrey Bernard Scott	Alec Isabelle Jean Machiels	Richard H. Davis Jr.	Daniel Benjamin Stencel
Jennifer Lee Gravelle			

State of..... Florida
County of..... Palm Beach

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

_____ (Signature) Jeffrey Bernard Scott	_____ (Signature) Jennifer Lee Gravelle	_____ (Signature)
1. (Printed Name) CEO, President & Secretary	2. (Printed Name) CFO	3. (Printed Name)
_____ (Title)	_____ (Title)	_____ (Title)

Subscribed and sworn to before me
This _____ day of _____ 2017

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 _____

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0000 NAIC Company Code....12954

BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	2,234,531	2,489,716		1,007,605	53,877	34,493	154,860	3,051	32,382	79,425	558,626	39,215
2.1 Allied lines.....	12,711,759	14,477,346		6,745,316	261,222	254,274	193,052	15,428	37,759	97,378	3,177,899	223,085
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
2.5 Private flood.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....	116,658,112	120,638,238		57,891,408	51,325,703	56,404,905	29,419,352	7,406,514	10,519,138	8,395,815	29,164,157	2,047,287
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....	190,362	181,892		91,877							47,590	3,341
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium.....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....	570,847	611,445		288,787	19,043	14,917	243,874	42,346	27,253	49,883	142,710	10,018
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....												
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....												
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	132,365,611	138,398,637	0	66,024,993	51,659,845	56,708,589	30,011,138	7,467,339	10,616,532	8,622,501	33,090,982	2,322,946

DETAILS OF WRITE-INS

3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0000 NAIC Company Code....12954

BUSINESS IN GRAND TOTAL DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
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2.1 Allied lines.....	12,711,759	14,477,346		6,745,316	261,222	254,274	193,052	15,428	37,759	97,378	3,177,899	223,085
2.2 Multiple peril crop.....												
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4. Homeowners multiple peril.....	116,658,112	120,638,238		57,891,408	51,325,703	56,404,905	29,419,352	7,406,514	10,519,138	8,395,815	29,164,157	2,047,287
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15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
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16. Workers' compensation.....												
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17.3 Excess workers' compensation.....												
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19.1 Private passenger auto no-fault (personal injury protection).....												
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19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....												
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
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24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	132,365,611	138,398,637	0	66,024,993	51,659,845	56,708,589	30,011,138	7,467,339	10,616,532	8,622,501	33,090,982	2,322,946

DETAILS OF WRITE-INS

3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

SCHEDULE F - PART 1

Assumed Reinsurance as of December 31, Current Year (000 Omitted)

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held by or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 + 7							
Other U. S. Unaffiliated Insurers														
59-3164851..	10064....	Citizens Property Insurance Corporation.....	FL.....	(1,018)		2,931	2,931		(75)					
0999999.		Other U. S. Unaffiliated Insurers.....		(1,018)	0	2,931	2,931	0	(75)	0	0	0	0	0
9999999.		Totals.....		(1,018)	0	2,931	2,931	0	(75)	0	0	0	0	0

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

1 ID Number	2 NAIC Company Code	3 Name of Company	4 Date of Contract	5 Original Premium	6 Reinsurance Premium
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NONE

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (000 Omitted)

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable on										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Col. 15-[16+17]	19 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			
Authorized Other U.S. Unaffiliated Insurers																			
06-1182357	22730...	Allied World Insurance Company.....	NH.....		11,856	1,219	254	1,394	271	809	527	6,097	-	10,571	974	475	9,122		
47-0574325	32603...	Berkley Insurance Company.....	DE.....		50,627	5,071	1,076	5,710	1,047	3,461	2,368	25,616	-	44,349	3,411	2,230	38,708		
35-2293075	11551...	Endurance Reinsurance Corporation.....	DE.....		249	-	-	4	-	12	-	103	-	119	104	-	15		
22-2005057	26921...	Everest Reinsurance Company.....	DE.....		209	-	-	-	-	-	-	86	-	86	94	-	(8)		
13-6108721	26433...	Harco National Insurance Company.....	IL.....		14,512	1,327	231	1,206	149	895	596	7,882	-	12,286	1,050	623	10,613		
06-0384680	11452...	Hartford Steam Boiler Inspection & Ins Co.....	CT.....		300	-	-	-	-	-	-	151	-	151	20	-	131		
47-0698507	23680...	Odyssey Reinsurance Company.....	CT.....		810	-	-	-	-	-	-	335	-	335	365	-	(30)		
13-3031176	38636...	Partner Reinsurance Company of the US.....	NY.....		404	1	-	7	-	24	-	163	-	195	164	-	31		
52-1952955	10357...	Renaissance Reinsurance U.S. Inc.....	MD.....		(74)	214	106	686	226	114	97	-	-	1,443	-	30	1,413		
13-1675535	25364...	Swiss Reinsurance America Corporation.....	NY.....		1,516	-	-	-	-	-	-	627	-	627	687	-	(60)		
0999999	Total Authorized Other U.S. Unaffiliated Insurers.....				80,409	7,832	1,667	9,007	1,693	5,315	3,588	41,060	0	70,162	6,869	3,358	59,935	0	
Authorized Pools-Mandatory Pools																			
AA-9991310		Florida Hurricane Catastrophe Fund.....	FL.....		15,176	-	-	-	-	-	-	6,278	-	6,278	-	-	6,278	-	
1099999	Total Authorized Pools - Mandatory Pools.....				15,176	0	0	0	0	0	0	6,278	0	6,278	0	0	6,278	0	
Authorized Other Non-U.S. Insurers																			
AA-3194122		Davinci Reinsurance Ltd.....	BMU.....		319	-	-	-	-	-	-	132	-	132	152	-	(20)		
AA-1340125		Hannover Ruckversicherung SE.....	DEU.....		1,606	-	2	4	4	12	-	658	-	680	720	-	(40)		
AA-1120157		Lloyd's Syndicate 1729.....	GBR.....		114	-	-	-	-	-	-	47	-	47	51	-	(4)		
AA-1128001		Lloyd's Syndicate 2001 AML.....	GBR.....		521	-	1	2	2	-	-	216	-	219	236	-	(17)		
AA-1128003		Lloyd's Syndicate 2003 (Catlin Underwriting Inc.).....	GBR.....		6,927	733	183	1,027	279	594	392	-	-	3,208	-	23	3,185		
AA-1128791		Lloyd's Syndicate 2791 MAP.....	GBR.....		1,068	-	3	-	7	-	-	442	-	452	481	-	(29)		
AA-1128987		Lloyd's Syndicate 2987 BRT.....	GBR.....		284	-	-	-	-	-	-	117	-	117	129	-	(12)		
AA-1126382		Lloyd's Syndicate 382 PWH.....	GBR.....		108	-	-	-	-	-	-	45	-	45	49	-	(4)		
AA-1126004		Lloyd's Syndicate 4444 CNP.....	GBR.....		7,923	801	138	715	77	403	279	6,779	-	9,192	1,106	504	7,582		
AA-1126566		Lloyd's Syndicate 566.....	GBR.....		113	-	-	-	-	-	-	47	-	47	51	-	(4)		
AA-3190339		Renaissance Reinsurance, Ltd.....	BMU.....		319	-	-	-	-	-	-	132	-	132	152	-	(20)		
1299998	Total Authorized Other Non-U.S. Insurers (Under \$100,000).....				37	4	4	7	7	14	14	25	0	25	25	0	25	0	
1299999	Total Authorized Other Non-U.S. Insurers.....				19,339	1,534	331	1,746	376	1,009	671	8,629	0	14,296	3,127	527	10,642	0	
1399999	Total Authorized.....				114,924	9,366	1,998	10,753	2,069	6,324	4,259	55,967	0	90,736	9,996	3,885	76,855	0	
Unauthorized Affiliates-Other (Non-U.S.) - Captives																			
45-2453322		Radiant Reinsurance Ltd.....	BMU.....		7,174	76	-	173	22	140	63	2,955	-	3,429	418	-	3,011	-	
1899999	Total Unauthorized Affiliates - Other (Non-U.S.) - Captives.....				7,174	76	0	173	22	140	63	2,955	0	3,429	418	0	3,011	0	
2099999	Total Unauthorized Affiliates - Other (Non-U.S.) - Total.....				7,174	76	0	173	22	140	63	2,955	0	3,429	418	0	3,011	0	
2199999	Total Unauthorized Affiliates.....				7,174	76	0	173	22	140	63	2,955	0	3,429	418	0	3,011	0	
Unauthorized Other U.S. Unaffiliated Insurers																			
39-6040366	19283...	American Standard Ins Co of WI.....	WI.....		81	-	-	-	-	-	-	34	-	34	37	-	(3)		
2299999	Total Unauthorized Other U.S. Unaffiliated Insurers.....				81	0	0	0	0	0	0	34	0	34	37	0	(3)	0	

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (000 Omitted)

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable on								Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Col. 15-[16+17]	19 Funds Held By Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	16 Ceded Balances Payable			17 Other Amounts Due to Reinsurers
Unauthorized Other Non-U.S. Insurers																		
AA-3190906	Aeolus Reinsurance Ltd.....	BMU.....	.....	11,229	462	-	786	103	628	283	4,585	-	6,847	4,963	-	1,884	.....
AA-3190005	American International Reinsurance Co Ltd.....	BMU.....	.....	333	-	-	-	-	-	-	138	-	138	151	-	(13)	.....
AA-3194161	Catlin Insurance Company Ltd.....	BMU.....	.....	-	(13)	17	49	12	11	11	-	-	87	-	(5)	92	.....
AA-1460018	Catlin Re Switzerland Ltd.....	BMU.....	.....	-	1	4	8	4	11	12	-	-	40	-	45	(5)	.....
AA-3190958	JRG Reinsurance Company, Ltd.....	BMU.....	.....	-	(31)	42	127	32	30	31	-	-	231	-	(15)	246	.....
98-1150502	Oxbridge Reinsurance Limited.....	CYM.....	.....	8,803	895	-	2,592	476	2,151	782	3,834	-	10,730	(9)	-	10,739	.....
AA-5320039	Peak Reinsurance Company Limited.....	HKG.....	.....	98	-	-	-	-	-	-	41	-	41	-	45	(4)	.....
AA-3191179	Third Point Reinsurance Company, Ltd.....	BMU.....	.....	(178)	524	228	1,373	469	234	208	-	-	3,036	-	166	2,870	.....
2599999	Total Unauthorized Other Non-U.S. Insurers.....				20,285	1,838	291	4,935	1,096	3,065	1,327	8,598	0	21,150	5,150	191	15,809	0
2699999	Total Unauthorized.....				27,540	1,914	291	5,108	1,118	3,205	1,390	11,587	0	24,613	5,605	191	18,817	0

Certified Other Non-U.S. Insurers																		
CR-3194128	.....	Allied World Assurance Company, Ltd.....	BMU.....	.....	1,586	-	1	-	2	-	-	656	-	659	710	-	(51)	.....
CR-3194126	.....	Arch Reinsurance Ltd.....	BMU.....	.....	2,691	-	-	-	-	-	-	1,113	-	1,113	1,239	-	(126)	.....
CR-3190770	.....	Chubb Tempest Reinsurance Limited.....	BMU.....	.....	707	-	-	-	-	-	-	293	-	293	320	-	(27)	.....
CR-1460023	.....	Tokio Millennium Re Ltd.....	CHE.....	.....	716	-	-	-	-	-	-	296	-	296	322	-	(26)	.....
3899999	Total Certified Other Non-U.S. Insurers.....				5,700	0	1	0	2	0	0	2,358	0	2,361	2,591	0	(230)	0
3999999	Total Certified.....				5,700	0	1	0	2	0	0	2,358	0	2,361	2,591	0	(230)	0
4099999	Total Authorized, Unauthorized and Certified.....				148,164	11,280	2,290	15,861	3,189	9,529	5,649	69,912	0	117,710	18,192	4,076	95,442	0
9999999	Totals.....				148,164	11,280	2,290	15,861	3,189	9,529	5,649	69,912	0	117,710	18,192	4,076	95,442	0

22.1

Note: A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000.

1 Name of Reinsurer	2 Commission Rate	3 Ceded Premium
(1) Allied World Insurance Company.....	26.0	11,856
(2) Berkley Insurance Company.....	26.0	50,627
(3) Harco National Insurance Company.....	26.0	14,512
(4) Lloyd's Syndicate 2003 (Catlin Underwriting Inc.).....	26.0	6,927
(5) Lloyd's Syndicate 4444 CNP.....	26.0	7,923

B. Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on the total recoverables, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated	
(1) Allied World Insurance Company.....	10,571	11,856	Yes	<input type="checkbox"/>
(2) Berkley Insurance Company.....	44,349	50,627	Yes	<input type="checkbox"/>
(3) Harco National Insurance Company.....	12,286	14,512	Yes	<input type="checkbox"/>
(4) Lloyd's Syndicate 4444 CNP.....	9,192	7,923	Yes	<input type="checkbox"/>
(5) Oxbridge Reinsurance Limited.....	10,730	8,803	Yes	<input checked="" type="checkbox"/>

SCHEDULE F - PART 4

Aging of Ceded Reinsurance as of December 31, Current Year (000 Omitted)

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						11 Total Due Cols. 5 + 10	12 Percentage Overdue Col. 10 / Col. 11	13 Percentage More Than 120 Days Overdue Col. 9 / Col. 11
				Current	Overdue							
					6 1 to 29 Days	7 30 to 90 Days	8 91 to 120 Days	9 Over 120 Days	10 Total Overdue Cols. 6 + 7 + 8 + 9			
Authorized Other U.S. Unaffiliated Insurers												
06-1182357..	22730.....	Allied World Insurance Company.....	NH.....	1,473					0	1,473	0.0	0.0
47-0574325..	32603.....	Berkley Insurance Company.....	DE.....	6,147					0	6,147	0.0	0.0
13-6108721..	26433.....	Harco National Insurance Company.....	IL.....	1,558					0	1,558	0.0	0.0
13-3031176..	38636.....	Partner Reinsurance Company of the US.....	NY.....	1					0	1	0.0	0.0
52-1952955..	10357.....	Renaissance Reinsurance U.S. Inc.....	NY.....	320					0	320	0.0	0.0
0999999		Total Authorized - Other U.S. Unaffiliated Insurers.....		9,499	0	0	0	0	0	9,499	0.0	0.0
Authorized Other Non-U.S. Insurers												
AA-1340125..		Hannover Ruckversicherung SE.....	DEU.....	2					0	2	0.0	0.0
AA-1128001..		Lloyd's Syndicate 2001 AML.....	GBR.....	1					0	1	0.0	0.0
AA-1128003..		Lloyd's Syndicate 2003 (Catlin Underwriting Inc.).....	GBR.....	916					0	916	0.0	0.0
AA-1128791..		Lloyd's Syndicate 2791 MAP.....	GBR.....	3					0	3	0.0	0.0
AA-1126004..		Lloyd's Syndicate 4444 CNP.....	GBR.....	939					0	939	0.0	0.0
AA-3194129..		Montpelier Reinsurance Ltd.....	BMU.....	4					0	4	0.0	0.0
1299999		Total Authorized - Other Non-U.S. Insurers.....		1,865	0	0	0	0	0	1,865	0.0	0.0
1399999		Total Authorized.....		11,364	0	0	0	0	0	11,364	0.0	0.0
Unauthorized Affiliates-Other (Non-U.S.) - Captives												
45-2453322..		Radiant Reinsurance Ltd.....	BMU.....	76					0	76	0.0	0.0
1899999		Total Unauthorized - Affiliates - Other (Non-U.S.) - Captives.....		76	0	0	0	0	0	76	0.0	0.0
2099999		Total Unauthorized - Affiliates - Other (Non-U.S.) - Total.....		76	0	0	0	0	0	76	0.0	0.0
2199999		Total Unauthorized - Affiliates.....		76	0	0	0	0	0	76	0.0	0.0
Unauthorized Other Non-U.S. Insurers												
AA-3190906..		Aeolus Reinsurance Ltd.....	BMU.....	462					0	462	0.0	0.0
AA-3194161..		Catlin Insurance Company Ltd.....	BMU.....	4					0	4	0.0	0.0
AA-1460018..		Catlin Re Switzerland Ltd.....	BMU.....	5					0	5	0.0	0.0
AA-3190958..		JRG Reinsurance Company, Ltd.....	BMU.....	11					0	11	0.0	0.0
98-1150502..		Oxbridge Reinsurance Limited.....	CYM.....	895					0	895	0.0	0.0
AA-3191179..		Third Point Reinsurance Company, Ltd.....	BMU.....	752					0	752	0.0	0.0
2599999		Total Unauthorized - Other Non-U.S. Insurers.....		2,129	0	0	0	0	0	2,129	0.0	0.0
2699999		Total Unauthorized.....		2,205	0	0	0	0	0	2,205	0.0	0.0
Certified Other Non-U.S. Insurers												
CR-3194128..		Allied World Assurance Company, Ltd.....	BMU.....	1					0	1	0.0	0.0
3899999		Total Certified - Other Non-U.S. Insurers.....		1	0	0	0	0	0	1	0.0	0.0
3999999		Total Certified.....		1	0	0	0	0	0	1	0.0	0.0
4099999		Total Authorized, Unauthorized and Certified.....		13,570	0	0	0	0	0	13,570	0.0	0.0
9999999		Totals.....		13,570	0	0	0	0	0	13,570	0.0	0.0

SCHEDULE F - PART 5

Provision for Unauthorized Reinsurance as of December 31, Current Year (000 Omitted)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Special Code	Reinsurance Recoverable all Items Schedule F, Part 3, Col. 15	Funds Held By Company Under Reinsurance Treaties	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Ceded Balances Payable	Miscellaneous Balances Payable	Trust Funds and Other Allowed Offset Items	Total Collateral and Offsets Allowed (Cols. 7+8+10 + 11 + 12 but not in Excess of Col. 6)	Provision for Unauthorized Reinsurance (Col. 6 minus Col. 13)	Recoverable Paid Losses & LAE Expenses Over 90 Days Past Due not in Dispute	20% of Amount in Col. 15	20% of Amount in Dispute Included in Col. 6	Provision for Overdue Reinsurance (Col. 16 plus Col. 17)	Total Provision for Reinsurance Ceded to Unauthorized Reinsurers (Col. 14 plus Col. 18 but not in Excess of Col. 6)
Affiliates-Other Non-U.S. Insurers - Captive																		
45-2453322		Radiant Reinsurance Ltd.	BMU		3,429				418		14,234	3,429	0	0	0	0	0	0
0599999		Total Affiliates - Other Non-U.S. Insurers - Captive			3,429	0	0	XXX	418	0	14,234	3,429	0	0	0	0	0	0
0799999		Total Affiliates - U.S. Non-Pool - Total			3,429	0	0	XXX	418	0	14,234	3,429	0	0	0	0	0	0
0899999		Total Affiliates			3,429	0	0	XXX	418	0	14,234	3,429	0	0	0	0	0	0
Other U.S. Unaffiliated Insurers																		
39-6040366	19283	American Standard Ins Co of WI	WI		34				37			34	0	0	0	0	0	0
0999999		Total Other U.S. Unaffiliated Insurers			34	0	0	XXX	37	0	0	34	0	0	0	0	0	0
Other Non-U.S. Insurers																		
AA-3190906		Aeolus Reinsurance Ltd.	BMU		6,847				4,963		36,456	6,847	0	0	0	0	0	0
AA-3190005		American International Reinsurance Co Ltd.	BMU		138				151			138	0	0	0	0	0	0
AA-3194161		Catlin Insurance Company Ltd.	BMU		87		300	30901750		(5)		87	0	0	0	0	0	0
AA-1460018		Catlin Re Switzerland Ltd.	BMU		40		300	30903555		45		40	0	0	0	0	0	0
AA-3190958		JRG Reinsurance Company, Ltd.	BMU		231		500	644650-01		(15)		231	0	0	0	0	0	0
98-1150502		Oxbridge Reinsurance Limited.	CYM		10,730				(9)		11,924	10,730	0	0	0	0	0	0
AA-5320039		Peak Reinsurance Company Limited.	HKG		41				45			41	0	0	0	0	0	0
AA-3191179		Third Point Reinsurance Company, Ltd.	BMU		3,036		5,000	NYSB2015068		166		3,036	0	0	0	0	0	0
1299999		Total Other Non-U.S. Insurers			21,150	0	6,100	XXX	5,150	191	48,380	21,150	0	0	0	0	0	0
1399999		Total Affiliates and Others			24,613	0	6,100	XXX	5,605	191	62,614	24,613	0	0	0	0	0	0
9999999		Totals			24,613	0	6,100	XXX	5,605	191	62,614	24,613	0	0	0	0	0	0

- Amounts in dispute totaling \$.....0 are included in Column 6.
- Amounts in dispute totaling \$.....0 are excluded from Column 15.

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
30901750	1	021000089	Citibank, N. A.	300
30903555	1	021000089	Citibank, N. A.	300
644650-01	1	067012099	Comerica	500
NYSB2015068	1	021000089	Lloyds Bank plc.	5,000

SCHEDULE F - PART 6 - SECTION 1

Provision for Reinsurance Ceded to Certified Reinsurers as of December 31, Current Year (000 Omitted)

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Certified Reinsurer Rating (1 through 6)	6 Effective Date of Certified Reinsurer Rating	7 Percent Collateral Required for Full Credit (0% - 100%)	8 Net Amount Recoverable from Reinsurers (Sch F Part 3 Col. 18)	9 Catastrophe Recoverables Qualifying for Collateral Deferral	10 Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 8 - Col. 9)	11 Dollar Amount of Collateral Required (Col. 10 x Col. 7)	Collateral Provided					18 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements (Col. 17 / Col. 10)	19 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 18/Col. 7, not to exceed 100%)	20 Amount of Credit Allowed for Net Recoverables (Col 9 + (Col. 10 x Col. 19))	21 Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col 8 - Col. 20)	
											12 Multiple Beneficiary Trust	13 Funds Held by Company Under Reinsurance Treaties	14 Letters of Credit	15 Issuing or Confirming Bank Reference Number (a)	16 Other Allowable Collateral					17 Total Collateral Provided (Cols. 12 + 13 + 14 + 16)
Other Non-U.S. Insurers																				
CR-3194128		Allied World Assurance Company, Ltd.	BMU.....	3	03/31/2011.	0.20	(51)		(51)	(10)			15	30903611		15	(0.29)	(1.47)	75	0
CR-3194126		Arch Reinsurance Ltd.....	BMU.....	3	03/31/2011.	0.20	(126)		(126)	(25)						0	0.00	0.00	0	0
CR-3190770		Chubb Tempest Reinsurance Limited	BMU.....	2	03/27/2013.	0.10	(27)		(27)	(3)						0	0.00	0.00	0	0
CR-1460023		Tokio Millennium Re Ltd.....	CHE.....	3	02/25/2011.	0.20	(26)		(26)	(5)						0	0.00	0.00	0	0
1299999		Total Other Non-U.S. Insurers.....					(230)	0	(230)	(43)	0	0	15	XXX	0	15	XXX	XXX	75	0
1399999		Total Affiliates and Others.....					(230)	0	(230)	(43)	0	0	15	XXX	0	15	XXX	XXX	75	0
9999999		Totals.....					(230)	0	(230)	(43)	0	0	15	XXX	0	15	XXX	XXX	75	0

25

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
30903611.....	1.....	021000089.....	Citibank, N. A.....	15

SCHEDULE F - PART 6 - SECTION 2

Provision for Overdue Reinsurance Ceded to Certified Reinsurers as of December 31, Current Year (000 Omitted)

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Recoverable on Paid Loss and LAE More than 90 Days Overdue (a)	6 Total Reinsurance Recoverable on Paid Losses and LAE (b)	7 Amounts Received Prior 90 Days	8 Percent More than 90 Days Overdue	9 20% of Amounts in Col. 5	10 20% of Amounts in Dispute Excluded from Col. 5	11 Amount of Credit Allowed for Net Recoverables (Sch F Part 6 Section 1 Col. 20)	Complete if Column 8 is 20% or Greater			15 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of Col. 9 + Col. 10 or Col. 14) not to Exceed Col. 11
											12 Total Collateral Provided (Sch F Part 6 Section 1 Col. 17) not to Exceed Col. 11	13 Net Unsecured Recoverable for Which Credit is Allowed (Col. 11 - Col. 12)	14 20% of Amount in Col. 13	
Other Non-U.S. Insurers														
CR-3194128		Allied World Assurance Company, Ltd.....	BMU.....	.....	.....1	.....1	.....0.00	.....0	.....0	.....75	.....	.....0	.....0	.....0
CR-3194126		Arch Reinsurance Ltd.....	BMU.....	.....	.....	.....	.....0.00	.....0	.....0	.....	.....	.....0	.....0	.....0
CR-3190770		Chubb Tempest Reinsurance Limited.....	BMU.....	.....	.....	.....	.....0.00	.....0	.....0	.....	.....	.....0	.....0	.....0
CR-1460023		Tokio Millennium Re Ltd.....	CHE.....	.....	.....	.....	.....0.00	.....0	.....0	.....	.....	.....0	.....0	.....0
1299999		Total Other Non-U.S. Insurers.....		.....0	.....1	.....1	.....XXX	.....0	.....0	.....75	.....0	.....0	.....0	.....0
1399999		Total Affiliates and Others.....		.....0	.....1	.....1	.....XXX	.....0	.....0	.....75	.....0	.....0	.....0	.....0
9999999		Totals.....		.....0	.....1	.....1	.....XXX	.....0	.....0	.....75	.....0	.....0	.....0	.....0

(a) From Schedule F-Part 4 Columns 8 + 9, total certified, less \$.....0 in dispute.
 (b) From Schedule F-Part 3 Columns 7 + 8, total certified, less \$.....0 in dispute.

Sch. F - Pt. 7
NONE

Sch. F - Pt. 8
NONE

SCHEDULE F - PART 9

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	44,199,695		44,199,695
2. Premiums and considerations (Line 15).....	5,120,521		5,120,521
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	13,570,536	(13,570,536)	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....			0
5. Other assets.....	2,138,469		2,138,469
6. Net amount recoverable from reinsurers.....		99,517,631	99,517,631
7. Protected cell assets (Line 27).....			0
8. Totals (Line 28).....	65,029,221	85,947,095	150,976,316
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	10,332,863	34,229,010	44,561,873
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	4,803,308		4,803,308
11. Unearned premiums (Line 9).....	(3,885,925)	69,910,917	66,024,992
12. Advance premiums (Line 10).....	2,933,691		2,933,691
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....	18,192,832	(18,192,832)	0
15. Funds held by company under reinsurance treaties (Line 13).....			0
16. Amounts withheld or retained by company for account of others (Line 14).....			0
17. Provision for reinsurance (Line 16).....			0
18. Other liabilities.....	2,232,263		2,232,263
19. Total liabilities excluding protected cell business (Line 26).....	34,609,032	85,947,095	120,556,127
20. Protected cell liabilities (Line 27).....			0
21. Surplus as regards policyholders (Line 37).....	30,420,188	XXX	30,420,188
22. Totals (Line 38).....	65,029,220	85,947,095	150,976,315

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?..Yes [] No [X]

If yes, give full explanation:

Sch. H - Pt. 1
NONE

Sch. H - Pt. 2
NONE

Sch. H - Pt. 3
NONE

Sch. H - Pt. 4
NONE

Sch. H - Pt. 5
NONE

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....								0	XXX.....
2. 2007.....	5,006.....	3,829.....	1,177.....	712.....		28.....		243.....		21.....	983.....	64.....
3. 2008.....	43,550.....	20,759.....	22,791.....	11,862.....		1,166.....		1,868.....		178.....	14,896.....	1,038.....
4. 2009.....	60,705.....	48,776.....	11,929.....	15,049.....	3,548.....	1,417.....	349.....	2,259.....	436.....	167.....	14,393.....	1,446.....
5. 2010.....	76,783.....	97,560.....	(20,777).....	21,761.....	14,753.....	2,854.....	2,285.....	2,444.....	1,944.....	58.....	8,078.....	1,941.....
6. 2011.....	91,374.....	115,381.....	(24,007).....	35,795.....	24,379.....	4,967.....	4,005.....	3,550.....	2,841.....	111.....	13,087.....	2,853.....
7. 2012.....	91,881.....	117,271.....	(25,390).....	24,137.....	16,868.....	3,049.....	2,288.....	2,518.....	1,789.....	194.....	8,759.....	2,725.....
8. 2013.....	92,898.....	120,607.....	(27,709).....	24,906.....	19,695.....	2,809.....	2,165.....	1,681.....	1,312.....	119.....	6,224.....	2,663.....
9. 2014.....	117,542.....	135,426.....	(17,884).....	38,511.....	28,461.....	4,221.....	2,937.....	2,346.....	1,723.....	86.....	11,957.....	3,650.....
10. 2015.....	131,490.....	150,782.....	(19,292).....	41,979.....	30,487.....	7,044.....	4,212.....	3,572.....	2,636.....	167.....	15,260.....	4,341.....
11. 2016.....	121,622.....	145,256.....	(23,634).....	37,478.....	31,952.....	3,384.....	2,839.....	6,821.....	5,836.....	212.....	7,056.....	5,424.....
12. Totals.....	XXX.....	XXX.....	XXX.....	252,190.....	170,143.....	30,939.....	21,080.....	27,302.....	18,516.....	1,313.....	100,692.....	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. Prior.....												0	
2. 2007.....												0	
3. 2008.....			6.....				2.....		1.....			9	1
4. 2009.....			8.....	(1).....			6.....	(1).....	3.....			19	
5. 2010.....	165.....	84.....	52.....	13.....	26.....	13.....	27.....	7.....	12.....	3.....		162	4
6. 2011.....	293.....	114.....	150.....	100.....	141.....	32.....	54.....	47.....	62.....	31.....		376	17
7. 2012.....	112.....	70.....	95.....	(8).....	46.....	35.....	76.....	25.....	38.....	35.....		210	12
8. 2013.....	421.....	293.....	125.....	87.....	70.....	48.....	92.....	71.....	66.....	51.....		224	15
9. 2014.....	1,721.....	1,109.....	419.....	266.....	621.....	405.....	217.....	146.....	120.....	82.....		1,090	90
10. 2015.....	5,506.....	3,257.....	1,124.....	745.....	2,047.....	1,085.....	645.....	433.....	313.....	201.....		3,914	384
11. 2016.....	12,831.....	10,737.....	8,968.....	8,100.....	1,581.....	1,344.....	3,800.....	3,204.....	1,571.....	1,323.....		4,043	1,184
12. Totals.....	21,049.....	15,664.....	10,947.....	9,302.....	4,532.....	2,962.....	4,919.....	3,932.....	2,186.....	1,726.....	0	10,047	1,707

	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. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0	0
2. 2007.....	983.....	0.....	983.....	19.6.....	0.0.....	83.5.....				0	0
3. 2008.....	14,905.....	0.....	14,905.....	34.2.....	0.0.....	65.4.....				6	3
4. 2009.....	18,742.....	4,331.....	14,412.....	30.9.....	8.9.....	120.8.....				9	10
5. 2010.....	27,341.....	19,102.....	8,240.....	35.6.....	19.6.....	(39.7).....				120	42
6. 2011.....	45,012.....	31,549.....	13,463.....	49.3.....	27.3.....	(56.1).....				229	147
7. 2012.....	30,071.....	21,102.....	8,969.....	32.7.....	18.0.....	(35.3).....				145	65
8. 2013.....	30,170.....	23,722.....	6,448.....	32.5.....	19.7.....	(23.3).....				166	58
9. 2014.....	48,176.....	35,129.....	13,047.....	41.0.....	25.9.....	(73.0).....				765	325
10. 2015.....	62,230.....	43,056.....	19,174.....	47.3.....	28.6.....	(99.4).....				2,628	1,286
11. 2016.....	76,434.....	65,335.....	11,099.....	62.8.....	45.0.....	(47.0).....				2,962	1,081
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	7,030	3,017

Sch. P - Pt. 1B
NONE

Sch. P - Pt. 1C
NONE

Sch. P - Pt. 1D
NONE

Sch. P - Pt. 1E
NONE

Sch. P - Pt. 1F - Sn. 1
NONE

Sch. P - Pt. 1F - Sn. 2
NONE

Sch. P - Pt. 1G
NONE

SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....								0	XXX.....
2. 2007.....			0								0	
3. 2008.....			0								0	
4. 2009.....	71	33	38					1			1	1
5. 2010.....	327	262	65	82	66						16	
6. 2011.....	475	380	95	58	46	164	130	14	11		49	12
7. 2012.....	498	399	99	2	1	12	10	4	2		5	6
8. 2013.....	454	363	91	20	16	75	60	4	3		20	5
9. 2014.....	477	381	96	306	245	49	38	5	4		73	3
10. 2015.....	569	443	126	14	10	32	24	16	11		17	7
11. 2016.....	611	434	177	9	6	7	5	9	6		8	5
12. Totals.....	XXX.....	XXX.....	XXX.....	491	390	339	267	53	37	0	189	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. Prior.....											0		
2. 2007.....											0		
3. 2008.....											0		
4. 2009.....											0		
5. 2010.....											0		
6. 2011.....	90	72			11	9					20		
7. 2012.....											0		
8. 2013.....											0		
9. 2014.....	1	1	1	1			1				1		
10. 2015.....	33	26	3	2	6	5	2	1	2	1	11	1	
11. 2016.....	101	71	16	10	23	16	7	5	3	2	46	1	
12. Totals.....	225	170	20	13	40	30	10	6	5	3	78	2	

	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. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0	0
2. 2007.....	0	0	0	0.0	0.0	0.0				0	0
3. 2008.....	0	0	0	0.0	0.0	0.0				0	0
4. 2009.....	1	0	1	1.4	0.0	2.6				0	0
5. 2010.....	82	66	16	25.1	25.2	24.6				0	0
6. 2011.....	337	268	69	70.9	70.5	72.6				18	2
7. 2012.....	18	13	5	3.6	3.3	5.1				0	0
8. 2013.....	99	79	20	21.8	21.8	22.0				0	0
9. 2014.....	363	289	74	76.1	75.9	77.1				0	1
10. 2015.....	108	80	28	19.0	18.1	22.2				8	3
11. 2016.....	175	121	54	28.6	27.9	30.5				36	10
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	62	16

SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	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				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX								0	XXX
2. 2007.....			.0								0	0
3. 2008.....			.0								0	0
4. 2009.....			.0								0	0
5. 2010.....			.0								0	0
6. 2011.....			.0								0	0
7. 2012.....			.0								0	0
8. 2013.....			.0								0	0
9. 2014.....			.0								0	0
10. 2015.....			.0								0	0
11. 2016.....			.0								0	0
12. Totals.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	0	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. Prior.....												0	
2. 2007.....												0	
3. 2008.....												0	
4. 2009.....												0	
5. 2010.....												0	
6. 2011.....												0	
7. 2012.....												0	
8. 2013.....												0	
9. 2014.....												0	
10. 2015.....												0	
11. 2016.....												0	
12. Totals.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	.0

NONE

	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. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX	0	0
2. 2007.....	.0	.0	.0	.0	.0	.0				0	0
3. 2008.....	.0	.0	.0	.0	.0	.0				0	0
4. 2009.....	.0	.0	.0	.0	.0	.0				0	0
5. 2010.....	.0	.0	.0	.0	.0	.0				0	0
6. 2011.....	.0	.0	.0	.0	.0	.0				0	0
7. 2012.....	.0	.0	.0	.0	.0	.0				0	0
8. 2013.....	.0	.0	.0	.0	.0	.0				0	0
9. 2014.....	.0	.0	.0	.0	.0	.0				0	0
10. 2015.....	.0	.0	.0	.0	.0	.0				0	0
11. 2016.....	.0	.0	.0	.0	.0	.0				0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	0	0

**SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)**
(\$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.....	.....278	.....222	.....10	.....8				.....58	.....XXX.....
2. 2015.....	.....23,932	.....11,155	.....12,777	.....47	.....14	.....12	.....7	.....4	.....2		.....40	.....XXX.....
3. 2016.....	.....17,866	.....11,992	.....5,874	.....29	.....9	.....2	.....1	.....11	.....7		.....25	.....XXX.....
4. Totals....	.....XXX.....	.....XXX.....	.....XXX.....	.....354	.....245	.....24	.....16	.....15	.....9	.....0	.....123	.....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. Prior.....	.....19	.....15	.....35	.....20	.....7	.....5	.....19	.....12	.....9	.....6		.....31	.....2
2. 2015.....	.....15	.....12	.....47	.....30	.....10	.....7	.....27	.....18	.....12	.....8		.....36	.....3
3. 2016.....	.....4		.....248	.....166	.....4	.....3	.....119	.....81	.....51	.....35		.....141	.....6
4. Totals..	.....38	.....27	.....330	.....216	.....21	.....15	.....165	.....111	.....72	.....49	.....0	.....208	.....11

	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. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....			.....XXX.....	.....19	.....12
2. 2015.	.....174	.....98	.....76	.....0.7	.....0.9	.....0.6				.....20	.....16
3. 2016.	.....468	.....302	.....166	.....2.6	.....2.5	.....2.8				.....86	.....55
4. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....125	.....83

Sch. P - Pt. 1J
NONE

Sch. P - Pt. 1K
NONE

Sch. P - Pt. 1L
NONE

Sch. P - Pt. 1M
NONE

Sch. P - Pt. 1N
NONE

Sch. P - Pt. 1O
NONE

Sch. P - Pt. 1P
NONE

Sch. P - Pt. 1R - Sn. 1
NONE

Sch. P - Pt. 1R - Sn. 2
NONE

Sch. P - Pt. 1S
NONE

Sch. P - Pt. 1T
NONE

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

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	
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year	
1. Prior.....											0	0	
2. 2007.....	1,103	860		835	736	740	740	740	740	740	0	0	
3. 2008.....	XXX	13,873	13,394	13,116	12,523	12,664	12,758	12,837	13,054	13,036	(18)	199	
4. 2009.....	XXX	XXX	12,504	11,854	11,968	12,019	12,672	12,627	12,613	12,585	(28)	(42)	
5. 2010.....	XXX	XXX	XXX	5,019	4,164	6,447	6,814	7,206	7,263	7,730	467	524	
6. 2011.....	XXX	XXX	XXX	XXX	8,454	9,823	12,504	12,486	12,507	12,723	216	237	
7. 2012.....	XXX	XXX	XXX	XXX	XXX	6,142	8,783	7,974	7,906	8,237	331	263	
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	5,391	6,682	6,125	6,064	(61)	(618)	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,188	12,999	12,386	(613)	198	
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,916	18,126	(790)	XXX	
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,866	XXX	XXX	
											12. Totals	(496)	761

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....											0	0	
2. 2007.....											0	0	
3. 2008.....	XXX										0	0	
4. 2009.....	XXX	XXX									0	0	
5. 2010.....	XXX	XXX	XXX								0	0	
6. 2011.....	XXX	XXX	XXX	XXX							0	0	
7. 2012.....	XXX	XXX	XXX	XXX	XXX						0	0	
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0	
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX	
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	
											12. Totals	0	0

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....											0	0	
2. 2007.....											0	0	
3. 2008.....	XXX										0	0	
4. 2009.....	XXX	XXX									0	0	
5. 2010.....	XXX	XXX	XXX								0	0	
6. 2011.....	XXX	XXX	XXX	XXX							0	0	
7. 2012.....	XXX	XXX	XXX	XXX	XXX						0	0	
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0	
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX	
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	
											12. Totals	0	0

SCHEDULE P - PART 2D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior.....											0	0	
2. 2007.....											0	0	
3. 2008.....	XXX										0	0	
4. 2009.....	XXX	XXX									0	0	
5. 2010.....	XXX	XXX	XXX								0	0	
6. 2011.....	XXX	XXX	XXX	XXX							0	0	
7. 2012.....	XXX	XXX	XXX	XXX	XXX						0	0	
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0	
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX	
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	
											12. Totals	0	0

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....											0	0	
2. 2007.....											0	0	
3. 2008.....	XXX										0	0	
4. 2009.....	XXX	XXX									0	0	
5. 2010.....	XXX	XXX	XXX								0	0	
6. 2011.....	XXX	XXX	XXX	XXX							0	0	
7. 2012.....	XXX	XXX	XXX	XXX	XXX						0	0	
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0	
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX	
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	
											12. Totals	0	0

SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

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
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year
1. Prior.....											0	0
2. 2007.....											0	0
3. 2008.....	XXX										0	0
4. 2009.....	XXX	XXX									0	0
5. 2010.....	XXX	XXX	XXX								0	0
6. 2011.....	XXX	XXX	XXX	XXX							0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....											0	0
2. 2007.....											0	0
3. 2008.....	XXX										0	0
4. 2009.....	XXX	XXX									0	0
5. 2010.....	XXX	XXX	XXX								0	0
6. 2011.....	XXX	XXX	XXX	XXX							0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER & MACHINERY)

1. Prior.....											0	0
2. 2007.....											0	0
3. 2008.....	XXX										0	0
4. 2009.....	XXX	XXX									0	0
5. 2010.....	XXX	XXX	XXX								0	0
6. 2011.....	XXX	XXX	XXX	XXX							0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....											0	0
2. 2007.....											0	0
3. 2008.....	XXX										0	0
4. 2009.....	XXX	XXX									0	0
5. 2010.....	XXX	XXX	XXX	17	16	16	16	16	16	16	0	0
6. 2011.....	XXX	XXX	XXX	XXX	6	8	40	50	62	66	4	16
7. 2012.....	XXX	XXX	XXX	XXX	XXX	24	3	4	3	3	0	(1)
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	30	27	19	19	0	(8)
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	63	98	73	(25)	10
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	22	(11)	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50	XXX	XXX
12. Totals											(32)	17

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....											0	0
2. 2007.....											0	0
3. 2008.....	XXX										0	0
4. 2009.....	XXX	XXX									0	0
5. 2010.....	XXX	XXX	XXX								0	0
6. 2011.....	XXX	XXX	XXX	XXX							0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	11 One Year	12 Two Year
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,101	96	116	20	(985)
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	167	70	(97)	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	146	XXX	XXX
4. Totals											(77)	(985)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4. Totals											0	0

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4. Totals											0	0

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4. Totals											0	0

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....											0	0
2. 2007.....											0	0
3. 2008.....	XXX										0	0
4. 2009.....	XXX	XXX									0	0
5. 2010.....	XXX	XXX	XXX								0	0
6. 2011.....	XXX	XXX	XXX	XXX							0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

Sch. P - Pt. 2N
NONE

Sch. P - Pt. 2O
NONE

Sch. P - Pt. 2P
NONE

Sch. P - Pt. 2R - Sn. 1
NONE

Sch. P - Pt. 2R - Sn. 2
NONE

Sch. P - Pt. 2S
NONE

Sch. P - Pt. 2T
NONE

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016			
1. Prior.....	.000.....												
2. 2007.....	200.....	.690.....		.732.....	.732.....	.740.....	.740.....	.740.....	.740.....	.740.....	.47.....	.17.....	
3. 2008.....	.XXX.....	8,088.....	11,212.....	12,008.....	12,213.....	12,432.....	12,627.....	12,687.....	13,023.....	13,028.....	.816.....	.221.....	
4. 2009.....	.XXX.....	.XXX.....	9,361.....	11,067.....	11,785.....	11,947.....	12,451.....	12,568.....	12,568.....	12,569.....	1,097.....	349.....	
5. 2010.....	.XXX.....	.XXX.....	.XXX.....	2,710.....	3,980.....	5,814.....	6,642.....	7,092.....	7,142.....	7,577.....	1,467.....	470.....	
6. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	4,934.....	8,357.....	10,895.....	12,189.....	12,318.....	12,378.....	2,217.....	619.....	
7. 2012.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	5,036.....	6,819.....	7,440.....	7,684.....	8,030.....	1,986.....	727.....	
8. 2013.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	3,890.....	5,426.....	5,770.....	5,855.....	2,017.....	631.....	
9. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	7,346.....	10,597.....	11,334.....	2,688.....	872.....	
10. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	9,548.....	14,324.....	2,822.....	1,135.....	
11. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	6,071.....	2,791.....	1,449.....	

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	.000.....											
2. 2007.....												
3. 2008.....	.XXX.....											
4. 2009.....	.XXX.....	.XXX.....										
5. 2010.....	.XXX.....	.XXX.....	.XXX.....									
6. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....								
7. 2012.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....							
8. 2013.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....						
9. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....					
10. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....				
11. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....			

NONE

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	.000.....											
2. 2007.....												
3. 2008.....	.XXX.....											
4. 2009.....	.XXX.....	.XXX.....										
5. 2010.....	.XXX.....	.XXX.....	.XXX.....									
6. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....								
7. 2012.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....							
8. 2013.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....						
9. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....					
10. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....				
11. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....			

NONE

**SCHEDULE P - PART 3D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....	.000.....											
2. 2007.....												
3. 2008.....	.XXX.....											
4. 2009.....	.XXX.....	.XXX.....										
5. 2010.....	.XXX.....	.XXX.....	.XXX.....									
6. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....								
7. 2012.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....							
8. 2013.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....						
9. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....					
10. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....				
11. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....			

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	.000.....											
2. 2007.....												
3. 2008.....	.XXX.....											
4. 2009.....	.XXX.....	.XXX.....										
5. 2010.....	.XXX.....	.XXX.....	.XXX.....									
6. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....								
7. 2012.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....							
8. 2013.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....						
9. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....					
10. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....				
11. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....			

NONE

SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016			
1. Prior.....	.000.....												
2. 2007.....													
3. 2008.....	.XXX.....												
4. 2009.....	.XXX.....	.XXX.....											
5. 2010.....	.XXX.....	.XXX.....	.XXX.....										
6. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....									
7. 2012.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....								
8. 2013.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....							
9. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....						
10. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....					
11. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....				

NONE

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....	.000.....												
2. 2007.....													
3. 2008.....	.XXX.....												
4. 2009.....	.XXX.....	.XXX.....											
5. 2010.....	.XXX.....	.XXX.....	.XXX.....										
6. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....									
7. 2012.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....								
8. 2013.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....							
9. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....						
10. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....					
11. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....				

NONE

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....	.000.....											.XXX.....	.XXX.....
2. 2007.....												.XXX.....	.XXX.....
3. 2008.....	.XXX.....											.XXX.....	.XXX.....
4. 2009.....	.XXX.....	.XXX.....										.XXX.....	.XXX.....
5. 2010.....	.XXX.....	.XXX.....	.XXX.....									.XXX.....	.XXX.....
6. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....								.XXX.....	.XXX.....
7. 2012.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....							.XXX.....	.XXX.....
8. 2013.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....						.XXX.....	.XXX.....
9. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....					.XXX.....	.XXX.....
10. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....				.XXX.....	.XXX.....
11. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....			.XXX.....	.XXX.....

NONE

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	.000.....												
2. 2007.....													
3. 2008.....	.XXX.....												
4. 2009.....	.XXX.....	.XXX.....											1
5. 2010.....	.XXX.....	.XXX.....	.XXX.....	.16.....	.16.....	.16.....	.16.....	.16.....	.16.....	.16.....	.16.....		
6. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.2.....	.2.....	.32.....	.41.....	.42.....	.46.....	.4.....		8
7. 2012.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.1.....	.3.....	.3.....	.3.....	.3.....	.1.....		5
8. 2013.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.8.....	.17.....	.19.....	.19.....	.19.....		5
9. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.1.....	.71.....	.72.....	.2.....		1
10. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.5.....	.12.....	.2.....		4
11. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.5.....	.3.....		1

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....	.000.....												
2. 2007.....													
3. 2008.....	.XXX.....												
4. 2009.....	.XXX.....	.XXX.....											
5. 2010.....	.XXX.....	.XXX.....	.XXX.....										
6. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....									
7. 2012.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....								
8. 2013.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....							
9. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....						
10. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....					
11. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....				

NONE

SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	30	88	XXX	XXX
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	38	XXX	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000				
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000			XXX	XXX
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000			XXX	XXX
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	.000										XXX	XXX
2. 2007.....											XXX	XXX
3. 2008.....	XXX										XXX	XXX
4. 2009.....	XXX	XXX									XXX	XXX
5. 2010.....	XXX	XXX	XXX								XXX	XXX
6. 2011.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2012.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

**Sch. P - Pt. 3N
NONE**

**Sch. P - Pt. 3O
NONE**

**Sch. P - Pt. 3P
NONE**

**Sch. P - Pt. 3R - Sn. 1
NONE**

**Sch. P - Pt. 3R - Sn. 2
NONE**

**Sch. P - Pt. 3S
NONE**

**Sch. P - Pt. 3T
NONE**

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)

Years in Which Losses Were Incurred	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....										
2. 2007.....	.618	.75	.16	.53						
3. 2008.....	XXX	2,794	.623	.87			106	13	18	.8
4. 2009.....	XXX	XXX	1,173	.96			191	49	45	16
5. 2010.....	XXX	XXX	XXX	1,223		589	146	62	73	59
6. 2011.....	XXX	XXX	XXX	XXX	2,852	.914	1,557	139	138	.57
7. 2012.....	XXX	XXX	XXX	XXX	XXX	.628	1,817	348	106	154
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	892	772	120	59
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,285	1,201	224
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,212	591
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,464

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

**SCHEDULE P - PART 4D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

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
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX	1					
7. 2012.....	XXX	XXX	XXX	XXX	XXX	23				
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	14			
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	3	1
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	2
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

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
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,075	57	22
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	145	26
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	120

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

**Sch. P - Pt. 4N
NONE**

**Sch. P - Pt. 4O
NONE**

**Sch. P - Pt. 4P
NONE**

**Sch. P - Pt. 4R - Sn. 1
NONE**

**Sch. P - Pt. 4R - Sn. 2
NONE**

**Sch. P - Pt. 4S
NONE**

**Sch. P - Pt. 4T
NONE**

SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....		42	46	47	46	47	47	47	47	47
3. 2008.....	XXX	626	793	807	811	814	816	816	816	816
4. 2009.....	XXX	XXX	856	1,062	1,075	1,087	1,090	1,094	1,097	1,097
5. 2010.....	XXX	XXX	XXX	1,157	1,422	1,441	1,457	1,464	1,465	1,467
6. 2011.....	XXX	XXX	XXX	XXX	1,732	2,114	2,192	2,213	2,216	2,217
7. 2012.....	XXX	XXX	XXX	XXX	XXX	1,541	1,923	1,969	1,980	1,986
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	1,645	1,946	2,000	2,017
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,955	2,610	2,688
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,030	2,822
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,791

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....	40	4	1	1	1					
3. 2008.....	XXX	156	25	11	5	4	2	2	1	1
4. 2009.....	XXX	XXX	226	29	20	7	6	4		
5. 2010.....	XXX	XXX	XXX	273	43	24	12	7	7	4
6. 2011.....	XXX	XXX	XXX	XXX	394	84	28	15	13	17
7. 2012.....	XXX	XXX	XXX	XXX	XXX	406	48	22	14	12
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	230	48	30	15
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	545	165	90
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,048	384
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,184

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....	40	60	62	63	63	64	64	64	64	64
3. 2008.....	XXX	945	1,023	1,034	1,035	1,037	1,037	1,038	1,038	1,038
4. 2009.....	XXX	XXX	1,336	1,419	1,439	1,443	1,444	1,445	1,446	1,446
5. 2010.....	XXX	XXX	XXX	1,779	1,917	1,932	1,939	1,941	1,941	1,941
6. 2011.....	XXX	XXX	XXX	XXX	2,587	2,801	2,833	2,840	2,850	2,853
7. 2012.....	XXX	XXX	XXX	XXX	XXX	2,516	2,689	2,713	2,721	2,725
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	2,395	2,612	2,653	2,663
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,163	3,634	3,650
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,002	4,341
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,424

**Sch. P - Pt. 5B - Sn. 1
NONE**

**Sch. P - Pt. 5B - Sn. 2
NONE**

**Sch. P - Pt. 5B - Sn. 3
NONE**

**Sch. P - Pt. 5C - Sn. 1
NONE**

**Sch. P - Pt. 5C - Sn. 2
NONE**

**Sch. P - Pt. 5C - Sn. 3
NONE**

**Sch. P - Pt. 5D - Sn. 1
NONE**

**Sch. P - Pt. 5D - Sn. 2
NONE**

**Sch. P - Pt. 5D - Sn. 3
NONE**

**Sch. P - Pt. 5E - Sn. 1
NONE**

**Sch. P - Pt. 5E - Sn. 2
NONE**

**Sch. P - Pt. 5E - Sn. 3
NONE**

**Sch. P - Pt. 5F - Sn. 1A
NONE**

**Sch. P - Pt. 5F - Sn. 2A
NONE**

**Sch. P - Pt. 5F - Sn. 3A
NONE**

**Sch. P - Pt. 5F - Sn. 1B
NONE**

**Sch. P - Pt. 5F - Sn. 2B
NONE**

**Sch. P - Pt. 5F - Sn. 3B
NONE**

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	.XXX									
4. 2009.....	.XXX	.XXX								
5. 2010.....	.XXX	.XXX	.XXX							
6. 2011.....	.XXX	.XXX	.XXX	.XXX	.1	.1	.3	.4	.4	.4
7. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.1	.1	.1	.1	.1
8. 2013.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.1	.1	.2
10. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.1	.2
11. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.3

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	.XXX									
4. 2009.....	.XXX	.XXX								
5. 2010.....	.XXX	.XXX	.XXX							
6. 2011.....	.XXX	.XXX	.XXX	.XXX	.1	.4	.3	.1		
7. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.1				
8. 2013.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.4	.2		
9. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.1	.1	
10. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.3	.1
11. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.1

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	.XXX									
4. 2009.....	.XXX	.XXX						.1	.1	.1
5. 2010.....	.XXX	.XXX	.XXX							
6. 2011.....	.XXX	.XXX	.XXX	.XXX	.7	.11	.12	.12	.12	.12
7. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.5	.6	.6	.6	.6
8. 2013.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.5	.5	.5	.5
9. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.2	.3	.3
10. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.4	.7
11. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.5

**Sch. P - Pt. 5H - Sn. 1B
NONE**

**Sch. P - Pt. 5H - Sn. 2B
NONE**

**Sch. P - Pt. 5H - Sn. 3B
NONE**

**Sch. P - Pt. 5R - Sn. 1A
NONE**

**Sch. P - Pt. 5R - Sn. 2A
NONE**

**Sch. P - Pt. 5R - Sn. 3A
NONE**

**Sch. P - Pt. 5R - Sn. 1B
NONE**

**Sch. P - Pt. 5R - Sn. 2B
NONE**

**Sch. P - Pt. 5R - Sn. 3B
NONE**

**Sch. P - Pt. 5T - Sn. 1
NONE**

**Sch. P - Pt. 5T - Sn. 2
NONE**

**Sch. P - Pt. 5T - Sn. 3
NONE**

**Sch. P - Pt. 6C - Sn. 1
NONE**

**Sch. P - Pt. 6C - Sn. 2
NONE**

**Sch. P - Pt. 6D - Sn. 1
NONE**

**Sch. P - Pt. 6D - Sn. 2
NONE**

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior.....											.0	
2. 2007.....											.0	
3. 2008.....	XXX										.0	
4. 2009.....	XXX	XXX									.0	
5. 2010.....	XXX	XXX	XXX								.0	
6. 2011.....	XXX	XXX	XXX	XXX							.0	
7. 2012.....	XXX	XXX	XXX	XXX	XXX						.0	
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.0	
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Prems.(P-Pt 1)												XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior.....											.0	
2. 2007.....											.0	
3. 2008.....	XXX										.0	
4. 2009.....	XXX	XXX									.0	
5. 2010.....	XXX	XXX	XXX								.0	
6. 2011.....	XXX	XXX	XXX	XXX							.0	
7. 2012.....	XXX	XXX	XXX	XXX	XXX						.0	
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.0	
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Prems.(P-Pt 1)												XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior.....											.0	
2. 2007.....											.0	
3. 2008.....	XXX										.0	
4. 2009.....	XXX	XXX									.0	
5. 2010.....	XXX	XXX	XXX	327	327	327	327	327	327	327	327	
6. 2011.....	XXX	XXX	XXX	XXX	475	475	475	475	475	475	475	
7. 2012.....	XXX	XXX	XXX	XXX	XXX	498	498	498	498	498	498	
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	454	454	454	454	454	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	477	477	477	477	
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	569	569	569	
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	611	611	611
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	611
13. Earned Prems.(P-Pt 1)			71	327	475	498	454	477	569	611	611	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior.....											.0	
2. 2007.....											.0	
3. 2008.....	XXX										.0	
4. 2009.....	XXX	XXX									.0	
5. 2010.....	XXX	XXX	XXX	262	262	262	262	262	262	262	262	
6. 2011.....	XXX	XXX	XXX	XXX	380	380	380	380	380	380	380	
7. 2012.....	XXX	XXX	XXX	XXX	XXX	399	399	399	399	399	399	
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	363	363	363	363	363	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	381	381	381	381	
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	443	443	443	
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	433	433	433
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	433
13. Earned Prems.(P-Pt 1)			33	262	380	399	363	381	443	434	434	XXX

Sch. P - Pt. 6H - Sn. 1B
NONE

Sch. P - Pt. 6H - Sn. 2B
NONE

Sch. P - Pt. 6M - Sn. 1
NONE

Sch. P - Pt. 6M - Sn. 2
NONE

Sch. P - Pt. 6N - Sn. 1
NONE

Sch. P - Pt. 6N - Sn. 2
NONE

Sch. P - Pt. 6O - Sn. 1
NONE

Sch. P - Pt. 6O - Sn. 2
NONE

Sch. P - Pt. 6R - Sn. 1A
NONE

Sch. P - Pt. 6R - Sn. 2A
NONE

Sch. P - Pt. 6R - Sn. 1B
NONE

Sch. P - Pt. 6R - Sn. 2B
NONE

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 Omitted)

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/farmowners.....	10,047		0.0	(21,357)		0.0
2. Private passenger auto liability/medical.....			0.0			0.0
3. Commercial auto/truck liability/medical.....			0.0			0.0
4. Workers' compensation.....			0.0			0.0
5. Commercial multiple peril.....			0.0			0.0
6. Medical professional liability - occurrence.....			0.0			0.0
7. Medical professional liability - claims-made.....			0.0			0.0
8. Special liability.....			0.0			0.0
9. Other liability - occurrence.....	78		0.0	172		0.0
10. Other liability - claims-made.....			0.0			0.0
11. Special property.....	208		0.0	4,370		0.0
12. Auto physical damage.....			0.0			0.0
13. Fidelity/surety.....			0.0			0.0
14. Other.....			0.0			0.0
15. International.....			0.0			0.0
16. Reinsurance - nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX
19. Products liability - occurrence.....			0.0			0.0
20. Products liability - claims-made.....			0.0			0.0
21. Financial guaranty/mortgage guaranty.....			0.0			0.0
22. Warranty.....			0.0			0.0
23. Totals.....	10,333	0	0.0	(16,816)	0	0.0

SECTION 2

Years in Which Policies Were Issued	Incurred Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	Bulk and Incurred But Not Reported Reserves for Losses and Defense and Cost Containment Expenses at Year End (\$000 omitted)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (continued)

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums Reported at Year End (\$000 omitted)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SECTION 5

Years in Which Policies Were Issued	Net Reserve for Premium Adjustments and Accrued Retrospective Premiums at Year End (\$000 omitted)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS

(\$000 Omitted)

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/farmowners.....	10,047		0.0	(21,357)		0.0
2. Private passenger auto liability/medical.....			0.0			0.0
3. Commercial auto/truck liability/medical.....			0.0			0.0
4. Workers' compensation.....			0.0			0.0
5. Commercial multiple peril.....			0.0			0.0
6. Medical professional liability - occurrence.....			0.0			0.0
7. Medical professional liability - claims-made.....			0.0			0.0
8. Special liability.....			0.0			0.0
9. Other liability - occurrence.....	78		0.0	172		0.0
10. Other liability - claims-made.....			0.0			0.0
11. Special property.....	208		0.0	4,370		0.0
12. Auto physical damage.....			0.0			0.0
13. Fidelity/surety.....			0.0			0.0
14. Other.....			0.0			0.0
15. International.....			0.0			0.0
16. Reinsurance - nonproportional assumed property.....			0.0			0.0
17. Reinsurance - nonproportional assumed liability.....			0.0			0.0
18. Reinsurance - nonproportional assumed financial lines.....			0.0			0.0
19. Products liability - occurrence.....			0.0			0.0
20. Products liability - claims-made.....			0.0			0.0
21. Financial guaranty/mortgage guaranty.....			0.0			0.0
22. Warranty.....			0.0			0.0
23. Totals	10,333	0	0.0	(16,816)	0	0.0

SECTION 2

Years in Which Policies Were Issued	Incurred Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	Bulk and Incurred But Not Reported Reserves for Losses and Defense and Cost Containment Expenses at Year End (\$000 omitted)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	XXX									
4. 2009.....	XXX	XXX								
5. 2010.....	XXX	XXX	XXX							
6. 2011.....	XXX	XXX	XXX	XXX						
7. 2012.....	XXX	XXX	XXX	XXX	XXX					
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (continued)

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums Reported At Year End (\$000 Omitted)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	.XXX									
4. 2009.....	.XXX	.XXX								
5. 2010.....	.XXX	.XXX	.XXX							
6. 2011.....	.XXX	.XXX	.XXX	.XXX						
7. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2013.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 5

Years in Which Policies Were Issued	Net Reserve For Premium Adjustments And Accrued Retrospective Premiums At Year End (\$000 Omitted)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	.XXX									
4. 2009.....	.XXX	.XXX								
5. 2010.....	.XXX	.XXX	.XXX							
6. 2011.....	.XXX	.XXX	.XXX	.XXX						
7. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2013.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 6

Years in Which Policies Were Issued	Incurred Adjustable Commissions Reported At Year End (\$000 Omitted)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	.XXX									
4. 2009.....	.XXX	.XXX								
5. 2010.....	.XXX	.XXX	.XXX							
6. 2011.....	.XXX	.XXX	.XXX	.XXX						
7. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2013.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 7

Years in Which Policies Were Issued	Reserves For Commission Adjustments At Year End (\$000 Omitted)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior.....										
2. 2007.....										
3. 2008.....	.XXX									
4. 2009.....	.XXX	.XXX								
5. 2010.....	.XXX	.XXX	.XXX							
6. 2011.....	.XXX	.XXX	.XXX	.XXX						
7. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2013.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims-Made insurance policies. EREs provided for reasons other than DDR are not be included.
- 1.1 Does the company issue Medical Professional Liability Claims-Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
 If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions.
- 1.2 What is the total amount of the reserve for that provision (DDR reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No [X]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A[X]
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior.....	.....	.....
1.602	2007.....	.....	.....
1.603	2008.....	.....	.....
1.604	2009.....	.....	.....
1.605	2010.....	.....	.....
1.606	2011.....	.....	.....
1.607	2012.....	.....	.....
1.608	2013.....	.....	.....
1.609	2014.....	.....	.....
1.610	2015.....	.....	.....
1.611	2016.....	.....	.....
1.612	Totals.....	.....0	.....0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this statement? Yes [X] No []

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]
- If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.

Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for: (in thousands of dollars)
- 5.1 Fidelity
- 5.2 Surety

6. Claim count information is reported per claim or per claimant. (Indicate which). PER CLAIM
 If not the same in all years, explain in Interrogatory 7.

- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [X] No []

- 7.2 An extended statement may be attached.
For the period September 30, 2009, through May 31, 2015, the Company had an 80% quota share reinsurance agreement in place. Effective, June 1, 2015, the quota share decreased to 70%. Also, in 2016, historical claim counts have been changed to more accurately reflect the counts used by the actuary in his analysis.

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.		Direct Business Only					Totals
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1.	Alabama.....AL						0
2.	Alaska.....AK						0
3.	Arizona.....AZ						0
4.	Arkansas.....AR						0
5.	California.....CA						0
6.	Colorado.....CO						0
7.	Connecticut.....CT						0
8.	Delaware.....DE						0
9.	District of Columbia.....DC						0
10.	Florida.....FL						0
11.	Georgia.....GA						0
12.	Hawaii.....HI						0
13.	Idaho.....ID						0
14.	Illinois.....IL						0
15.	Indiana.....IN						0
16.	Iowa.....IA						0
17.	Kansas.....KS						0
18.	Kentucky.....KY						0
19.	Louisiana.....LA						0
20.	Maine.....ME						0
21.	Maryland.....MD						0
22.	Massachusetts.....MA						0
23.	Michigan.....MI						0
24.	Minnesota.....MN						0
25.	Mississippi.....MS						0
26.	Missouri.....MO						0
27.	Montana.....MT						0
28.	Nebraska.....NE						0
29.	Nevada.....NV						0
30.	New Hampshire.....NH						0
31.	New Jersey.....NJ						0
32.	New Mexico.....NM						0
33.	New York.....NY						0
34.	North Carolina.....NC						0
35.	North Dakota.....ND						0
36.	Ohio.....OH						0
37.	Oklahoma.....OK						0
38.	Oregon.....OR						0
39.	Pennsylvania.....PA						0
40.	Rhode Island.....RI						0
41.	South Carolina.....SC						0
42.	South Dakota.....SD						0
43.	Tennessee.....TN						0
44.	Texas.....TX						0
45.	Utah.....UT						0
46.	Vermont.....VT						0
47.	Virginia.....VA						0
48.	Washington.....WA						0
49.	West Virginia.....WV						0
50.	Wisconsin.....WI						0
51.	Wyoming.....WY						0
52.	American Samoa.....AS						0
53.	Guam.....GU						0
54.	Puerto Rico.....PR						0
55.	US Virgin Islands.....VI						0
56.	Northern Mariana Islands.....MP						0
57.	Canada.....CAN						0
58.	Aggregate Other Alien.....OT						0
59.	Totals.....	0	0	0	0	0	0

NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
Members															
		00000..	87-0795862..				Gemini Financial Holdings LLC.....	DE.....	UIP.....					.....N.....	
		00000..	87-0795865..				Gemini Financial Holdings Corp.....	DE.....	UDP.....	Gemini Financial Holdings LLC.....	Ownership.....	100.000	Gemini Financial Holdings LLC.....	.....N.....	
		00000..	45-2453232..				Radiant Holding Corp.....	DE.....	NIA.....	Gemini Financial Holdings Corp.....	Ownership.....	100.000	Gemini Financial Holdings LLC.....	.....N.....	
		00000..	20-8959760..				Gemini Financial Services Corp.....	NJ.....	NIA.....	Gemini Financial Holdings Corp.....	Ownership.....	100.000	Gemini Financial Holdings LLC.....	.....N.....	
		00000..	26-0184529..				Olympus MGA Corp.....	FL.....	NIA.....	Gemini Financial Holdings Corp.....	Ownership.....	100.000	Gemini Financial Holdings LLC.....	.....N.....	
		12954..	26-0211369..				Olympus Insurance Company.....	FL.....	RE.....	Gemini Financial Holdings Corp.....	Ownership.....	100.000	Gemini Financial Holdings LLC.....	.....N.....	
		00000..	45-2453322..				Radiant Ltd.....	BMU.....	IA.....	Radiant Holdings Corp.....	Ownership.....	100.000	Gemini Financial Holdings LLC.....	.....N.....	
		00000..	45-4977222..				Buildpay LLC.....	DE.....	NIA.....	Gemini Financial Services Corp.....	Ownership.....	100.000	Gemini Financial Holdings LLC.....	.....N.....	
		00000..	45-3902376..				Radiant Insurance Agency, Inc.....	FL.....	NIA.....	Gemini Financial Holdings Corp.....	Ownership.....	100.000	Gemini Financial Holdings LLC.....	.....N.....	
		00000..	81-1431137..				Technology Enhanced Claims Handling, Inc.....	FL.....	NIA.....	Gemini Financial Holdings Corp.....	Ownership.....	100.000	Gemini Financial Holdings LLC.....	.....N.....	

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000.....	87-0795862.....	Gemini Financial Holdings LLC.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....
00000.....	87-0795865.....	Gemini Financial Holdings Corp.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....
00000.....	45-2453232.....	Radiant Holding Corp.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....
00000.....	20-8959760.....	Gemini Financial Services Corp.....	.....	.....	.....	.....	175,000	.....	.....	.....	175,000	.....
00000.....	26-0184529.....	Olympus MGA Corp.....	.....	.....	.....	.....	33,090,982	.....	.....	.....	33,090,982	.....
12954.....	26-0211369.....	Olympus Insurance Company.....	.....	.....	.....	.....	(33,265,982)	(7,173,954)	.....	.....	(40,439,936)	474,119
00000.....	45-2453322.....	Radiant Ltd.....	.....	.....	.....	.....	.....	7,173,954	.....	.....	7,173,954	.....
00000.....	45-4977222.....	Buildpay LLC.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....
00000.....	45-3902376.....	Radiant Insurance Agency, Inc.....	.....	.....	.....	.....	.....	.....	.....	.....	0	(474,119)
00000.....	81-1431137.....	Technology Enhanced Claims Handling, Inc.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....
9999999.....	Control Totals.....	.....	0	0	0	0	0	0	XXX	0	0	0

OLYMPUS INSURANCE COMPANY SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING

	Responses
1. Will an actuarial opinion be filed by March 1?	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3. Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
4. Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES

APRIL FILING

5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6. Will the Management's Discussion and Analysis be filed by April 1?	YES
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES

MAY FILING

8. Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	NO
---	----

JUNE FILING

9. Will an audited financial report be filed by June 1?	YES
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

AUGUST FILING

11. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES
---	-----

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

MARCH FILING

12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	YES
23. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
25. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partners be filed electronically with the NAIC by March 1?	NO
26. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
27. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
28. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?	NO

APRIL FILING

29. Will the Credit Insurance Experience Exhibit be filed with state of domicile and the NAIC by April 1?	NO
30. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
31. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
32. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
33. Will the regulator-only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
34. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	NO

AUGUST FILING

35. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES
--	-----

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

EXPLANATIONS:

BAR CODE:

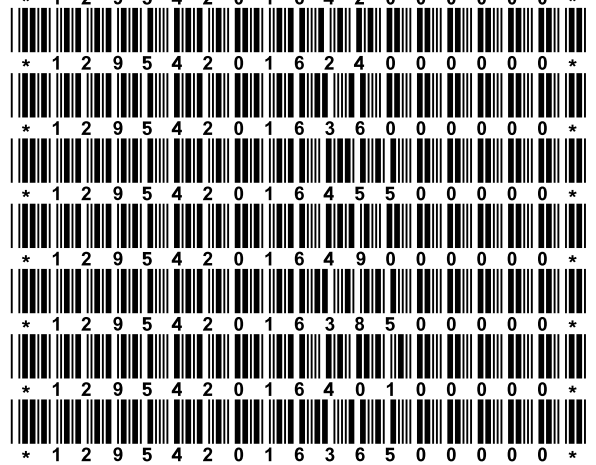
- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8. The data for this supplement is not required to be filed.



- 9.
- 10.
- 11.
- 12. The data for this supplement is not required to be filed.



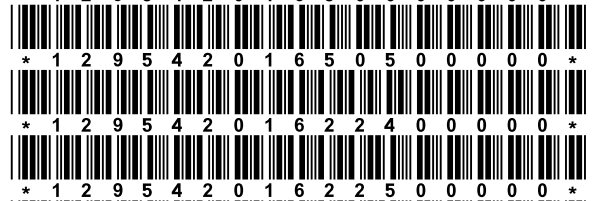
- 13. The data for this supplement is not required to be filed.
- 14. The data for this supplement is not required to be filed.
- 15. The data for this supplement is not required to be filed.
- 16. The data for this supplement is not required to be filed.
- 17. The data for this supplement is not required to be filed.
- 18. The data for this supplement is not required to be filed.
- 19. The data for this supplement is not required to be filed.



- 20.
- 21.
- 22.
- 23. The data for this supplement is not required to be filed.



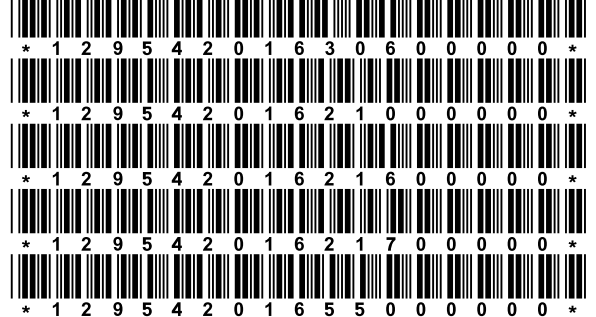
- 24. The data for this supplement is not required to be filed.
- 25. The data for this supplement is not required to be filed.
- 26. The data for this supplement is not required to be filed.
- 27. The data for this supplement is not required to be filed.



- 28. The data for this supplement is not required to be filed.
- 29. The data for this supplement is not required to be filed.
- 30. The data for this supplement is not required to be filed.
- 31. The data for this supplement is not required to be filed.



- 32. The data for this supplement is not required to be filed.
- 33. The data for this supplement is not required to be filed.
- 34. The data for this supplement is not required to be filed.



Overflow Page for Write-Ins

Additional Write-ins for Underwriting and Investment Exhibit-Part 3:

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
2404. Surplus Note Interest.....	.....	.....167,916	.....	.....167,916
2405. Affiliate Investment Management Services.....	.....	.....	.....175,000	.....175,000
2497. Summary of remaining write-ins for Line 24.....	.....0	.....167,916	.....175,000	.....342,916

Overflow Page for Write-Ins

100L

NONE

2016 ALPHABETICAL INDEX -- PROPERTY & CASUALTY ANNUAL STATEMENT BLANK

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