

PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

# ANNUAL STATEMENT

For the Year Ended December 31, 2016 OF THE CONDITION AND AFFAIRS OF THE

#### NARRAGANSETT BAY INSURANCE COMPANY NAIC Group Code 0497 0497 NAIC Company Code 43001 Employer's ID Number 05-0394576 (Current Period) (Prior Period) Organized under the Laws of Rhode Island Rhode Island State of Domicile or Port of Entry Country of Domicile United States Incorporated/Organized 06/10/1981 04/01/1982 Commenced Business Statutory Home Office 25 Maple Street Pawtucket, RI, US 02860-2104 (Street and Number) (City or Town, State, Country and Zip Code) 401-725-5600 Main Administrative Office 25 Maple Street Pawtucket, RI, US 02860-2104 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number) (Street and Number) Pawtucket, RI, US 02862-0820 Mail Address P. O. Box 820 (Street and Number or P.O. Box) (City or Town, State, Country and Zip Code) 401-725-5600 Primary Location of Books and Records 25 Maple Street Pawtucket, RI, US 02860-2104 (City or Town, State, Country and Zip Code) (Street and Number) (Area Code) (Telephone Number) Internet Web Site Address www.nbic.com Statutory Statement Contact 401-495-6014 Laura Leigh Jones (Name) (Area Code) (Telephone Number) (Extension) NBIC-ComplianceInbox@nbic.com 401-728-0680 (E-Mail Address) (Fax Number) OFFICERS Name Title Name Title Chief Executive Officer Stewart Horner Steffey Jr. Todd Christopher Hart Founder & Executive Chairman Stephen Donald Zubiago Kirk Howard Lusk Chief Financial Officer Secretary **OTHER OFFICERS** DIRECTORS OR TRUSTEES Stewart Horner Steffey Jr. Arnold Larry Chavkin Alex Anatol Fridlyand Srdjan Vukovic Kristin Kelly Gilbert Todd Christopher Hart Dale Stephen Hammond RHODE ISLAND State of ss County of . PROVIDENCE 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 inabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions thereform 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. Stephen Donald Zubiago Todd Christopher Hart Kirk Howard Lusk Secretary Yes [X] No [ ] Chief Executive Officer Chief Financial Officer

Subscribed and sworn to before me this

а.	Is this an original filing?	
b.	If no:	

1. State the amendment number

2. Date filed

3. Number of pages attached

dav of



NAIC Group Code 0497		SS IN THE STATE	OF Connecticut	4	5	L	URING THE YEAR	<b>2016</b> 8	9	10 NAIC	Company Code 4	12
	Membership Fees, L	ess Return Premiums Policies not Taken	Dividends Paid	Direct	Direct Losses	0		Direct Defense and Cost	Direct Defense and Cost	Direct Defense and Cost		12
	1 Direct Premiums	2 Direct Premiums	or Credited to Policyholders on	Unearned Premium	Paid	Direct Losses		Containment Expense	Containment Expense	Containment Expense	Commissions and Brokerage	Taxes,
Line of Business	Written	Earned	Direct Business	Reserves	(deducting salvage)	Incurred	Direct Losses Unpaid	Paid	Incurred	Unpaid	Expenses	Licenses and Fee
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
<ol> <li>Farmowners multiple peril</li> </ol>												
<ol> <li>Homeowners multiple peril</li> </ol>												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
0. Financial guaranty												
1. Medical professional liability												
2. Earthquake												
<ol> <li>Group accident and health (b).</li> </ol>												
<ol> <li>Credit A &amp; H (group and individual)</li> </ol>												
5.1 Collectively renewable A & H (b).												
5.2 Non-cancelable A & H (b)												
5.3 Guaranteed renewable A & H (b)												
5.4 Non-renewable for stated reasons only (b)												
5.4 Non-renewable for stated reasons only (b)												
5.5         Other accident only           5.6         Medicare Title XVIII exempt from state taxes or fees												
5.6 Medicare Title XVIII exempt from state taxes or fees												
5.7 All other A & H (b)												
5.8 Federal Employees Health Benefits Plan premium (b)										•••••		
6. Workers' compensation												
7.1 Other liability-Occurrence												
7.2 Other Liability-Claims-Made												
7.3 Excess workers' compensation												
8. Products liability												
9.1 Private passenger auto no-fault (personal injury protection)												
9.2 Other private passenger auto liability												
9.3 Commercial auto no-fault (personal injury protection)												
9.4 Other commercial auto liability												
1.1 Private passenger auto physical damage												
1.2 Commercial auto physical damage												
2. Aircraft (all perils)												
3. Fidelity												
4. Surety												
6. Burglary and theft												
7. Boiler and machinery												
8. Credit												
0. Warranty												
<ol> <li>Aggregate write-ins for other lines of business</li> </ol>	n	n	n	n	0	 ۱	n	Λ	0	0	Λ	
5. TOTAL (a)	342.161	57.535	0 ^	284.626	0 ^	0 ^	0 n	0 ^	0 ^	0		6.73
TAILS OF WRITE-INS	J42,101	51,555	0	204,020	0	0		0	0	0	50,030	0,73
1AILS OF WRITE-INS 401.												
				-			•					
402 403.												
	······	·····	^	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	·····	^		·····	
498. Summary of remaining write-ins for Line 34 from overflow page		0	Û	0	·	0	0	0	0	0	0	
99. Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	I ()	I 0	0	I ()	0	



NAIC Group Code 0497	BUSINES	S IN THE STATE O	F Massachusetts	5		D	URING THE YEAR	2016		NAIC	Company Code 4	13001
		ncluding Policy and ess Return Premiums Policies pot Taken	3 Dividends Paid	4 Direct	5 Direct Losses	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost	11	12
	1 Direct Premiums	2 Direct Premiums	or Credited to Policyholders on	Unearned Premium	Paid	Direct Losses		Containment Expense	Containment Expense	Containment Expense	Commissions and Brokerage	Taxes,
Line of Business	Written	Earned	Direct Business	Reserves	(deducting salvage)	Incurred	Direct Losses Unpaid		Incurred	Unpaid	Expenses	Licenses and Fee
1. Fire										2,145		
2.1 Allied lines				641,646		(56,373)			6,660	5,648		
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								1, 164, 175	1,116,412		7 ,954 ,935	
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
0. Financial guaranty					<u></u>	, 				, · · · · · · · · · · · · · · · · · · ·	,	
1. Medical professional liability												
2. Earthquake	90.905	.88.709		47.224							13.599	2.55
3. Group accident and health (b).		,		,								,,
<ol> <li>Credit A &amp; H (group and individual)</li> </ol>												
5.1 Collectively renewable A & H (b).												
15.2 Non-cancelable A & H (b)												
5.3 Guaranteed renewable A & H (b)												
5.4 Non-renewable for stated reasons only (b)												
5.5 Other accident only												
5.6 Medicare Title XVIII exempt from state taxes or fees												
5.7 All other A & H (b).				-								
<ul> <li>15.7 All other A &amp; H (b).</li> <li>15.8 Federal Employees Health Benefits Plan premium (b).</li> </ul>				-								
	••									•••••		
	.661,823					(653,830)			(10,361)			
									(10,301)		103,934	
7.2 Other Liability-Claims-Made												
7.3 Excess workers' compensation												
8. Products liability												
9.1 Private passenger auto no-fault (personal injury protection)										•••••		
9.2 Other private passenger auto liability												
9.3 Commercial auto no-fault (personal injury protection)												
9.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
1.2 Commercial auto physical damage												
<ol> <li>Aircraft (all perils)</li> </ol>												
3. Fidelity												
4. Surety												
<ol> <li>Burglary and theft</li> </ol>												
7. Boiler and machinery												
8. Credit												
0. Warranty												
<ol> <li>Aggregate write-ins for other lines of business</li> </ol>		0	0	0	0	0	0	0	0	0	0	
5. TŎTAĽ (a)	52,348,681	49,232,632	0	27,596,507	16,034,040	18,880,709	14,108,945	1,220,805	1,124,273	1,016,564	8,493,334	1,408,27
ETAILS OF WRITE-INS	, , , , , , , , , , , , , , , , , , , ,	, , ,			, , , , , , ,			, , , , , , , , , , , , , , , , , , , ,	, , , , ,	, , , , , ,	, , , , , , , , , , , , , , , , , , , ,	,
402.												
403.												
498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	
499. Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	
a) Finance and service charges not included in Lines 1 to 35 \$	314.302	, i i i i i i i i i i i i i i i i i i i	ů		ů	ő	,	, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,	Ŷ	, i i i i i i i i i i i i i i i i i i i	I



	NAIC Group Code 0497	BUSINE Gross Premiums, Ir	SS IN THE STATE	OF New Jersey		5				9	10 NAIC	Company Code 4	
		Membership Fees, Le and Premiums on	ess Return Premiums Policies not Taken	3 Dividends Paid	4 Direct	5 Direct Losses	6	7	8 Direct Defense and Cost	Direct Defense and Cost	Direct Defense and Cost	11	12
	Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Unearned Premium Reserves	Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fee
1. Fire				Direct Dubiness								5,971	Electroco and rec
2.1 Allied	lines	27,174						972		2.655		2.280	
	le peril crop	,											
	al flood												
	e crop												
	e flood												
	owners multiple peril												
	owners multiple peril	.65,623,143							2.359.005	1,832,417	1,701,474		
	nercial multiple peril (non-liability portion)												
5.2 Comm	nercial multiple peril (liability portion)												
	age guaranty												
	n marine	705 000	700 470		070 700	244,000	070 474		4.040	(4, 4,40)		400,000	
	I marine		730,173						1,019	(1,148)		102,206	
	cial guaranty												
	al professional liability												
12. Earthq												4,726	4
	accident and health (b)												
	A & H (group and individual)												
	ctively renewable A & H (b)												
	ancelable A & H (b).												
15.3 Guara	anteed renewable A & H (b)												
15.4 Non-re	enewable for stated reasons only (b)												
	accident only												
15.6 Medica	are Title XVIII exempt from state taxes or fees.												
	ner A & H (b).												
	al Employees Health Benefits Plan premium (b)												
	ers' compensation												
	liability-Occurrence				114.681		(107,778)			(49,029)			
	Liability-Occurrence						(107,770)				10,700		Z,9
	s workers' compensation												
	cts liability												
	e passenger auto no-fault (personal injury protection)												
19.2 Other	private passenger auto liability												
19.3 Comm	nercial auto no-fault (personal injury protection)												
19.4 Other	commercial auto liability												
21.1 Private	e passenger auto physical damage												
	nercial auto physical damage												
<ol><li>Aircraf</li></ol>	ft (all perils)												
23. Fidelity	ly												
24. Surety	V												
26. Burgla	ary and theft												
	and machinery												
28. Credit		, , , , , ,	, , , ,				, -					,	
30. Warra													
	gate write-ins for other lines of business	0	0	0	0	0	0	0	0	0		0	
5. TOTA		68.093.540	65.322.166	0	35.319.180	23.737.460	22.271.761	14.696.652	2.370.199	1.792.360	1.723.016	10.357.497	914.3
ETAILS OF WRIT		30,000,040	55,0LL,100	0	50,010,100	20,101,100	,,	. 1,000,002	2,010,100	1,102,000	1,720,010	.0,007,107	011,0
	12-110												
3403.								1			-		
	nary of remaining write-ins for Line 34 from overflow page	0	·····		0	0	0	0	0	0	0	<u>۸</u>	
	(Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	U	0	0	0	U	0	0	0	0		
	and service charges not included in Lines 1 to 35 \$		0	0	0	0	0	0	0	0	0	0	



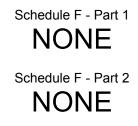
N/	AIC Group Code 0497	BUSINE Gross Premiums, Ir	ESS IN THE STATE	E OF New York	4	5	D	URING THE YEAR	<b>2016</b> 8	q	10 NAIC	Company Code 4	12
		Membership Fees, Le and Premiums on	ess Return Premiums Policies not Taken	Dividends Paid	Direct	Direct Losses	0	, ,	Direct Defense and Cost	Direct Defense and Cost	Direct Defense and Cost		12
	Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Unearned Premium Reserves	Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fee
I. Fire		Willen	Lameu	Direct Dusiness	IXESCIVES			1, 150		828		LAPENSES	LICENSES and I ee
2.1 Allied line	es												
	peril crop												
2.3 Federal f													
2.4 Private ci													
2.5 Private fl													
	ners multiple peril												
	ners multiple peril	160,870,856	153.699.512				.58,990,205		4,926,139				
	cial multiple peril (non-liability portion)												
	cial multiple peril (liability portion)												
	e quaranty												
	arine												
). Inland ma			1.782.570							14.699			
	l quaranty												
	professional liability												
2. Earthqua		33.657	33.512		17.532							4.344	
	ccident and health (b).												Ω
	& H (group and individual)												
	ely renewable A & H (b)												
	celable A & H (b)												
	eed renewable A & H (b)												
	ewable for stated reasons only (b)												
5.5 Other acc	cident only												
	e Title XVIII exempt from state taxes or fees												
5.7 All other	A & H (b)												
	Employees Health Benefits Plan premium (b)												
	compensation												
	bility-Occurrence								7,470				
	ability-Claims-Made												
	vorkers' compensation												
<ol><li>Products</li></ol>													
	bassenger auto no-fault (personal injury protection)												
	ivate passenger auto liability												
9.3 Commerc	cial auto no-fault (personal injury protection)												
9.4 Other cor	mmercial auto liability												
1.1 Private pa	assenger auto physical damage												
I.2 Commerce	cial auto physical damage												
<ol> <li>Aircraft (a)</li> </ol>	all perils)												
B. Fidelity	· ,												
I. Surety													
<ol><li>Burglary</li></ol>	and theft												
<ol> <li>Boiler and</li> </ol>	d machinery	2,401,607	2.097.355		1,255,680	.149,956	.206.793						. 59,2
. Credit		. , . ,	,,. <del></del>		. , ,								
	/												
	te write-ins for other lines of business	0	0				0	0				0	
. TOTAL (a		165,944,403	158,360,894	0	86,875,175	55,153,096	60,925,449	36,889,131	4,942,107	5,889,861	5,422,757	26,988,256	4,092,20
AILS OF WRITE-I		,		Ů	,,	,,	, ,	,	.,,	1,000,001	.,,	,,,_00	.,
					.				l				
103.													
	y of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	
	ines 3401 through 3403 Plus 3498) (Line 34 above)	0	0		0	0		0	0			0	



	NAIC Group Code 0497	BUSINES	S IN THE STATE (	OF Rhode Island		ID LOSSES (Statu		URING THE YEAR	2016		NAIC	Company Code 4	13001
		Gross Premiums, Ir Membership Fees, Le and Premiums on I	ess Return Premiums	3 Dividends Paid	4 Direct	5 Direct Losses	6	7	8 Direct Defense and Cost	Cost	10 Direct Defense and Cost	11	12
	Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Unearned Premium Reserves	Paid (deducting salvage)	Direct Losses	Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire			2.000.200.000									
2.1	Allied lines	1,559,651	1,551,731		1,000,897	.626,750	.559,101	135,623		43,921		,229,289	
	Multiple peril crop	,,.	,,								,,		
2.3	Federal flood												
2.4	Private crop												
2.5	Private flood												
3.	Farmowners multiple peril												
4.	Homeowners multiple peril					7,233,473		4,096,372				2,545,553	
5.1	Commercial multiple peril (non-liability portion)												
5.2	Commercial multiple peril (liability portion)												
6.	Mortgage guaranty												
8.	Ocean marine												
9.	Inland marine												
10.	Financial guaranty		, , , , , , , , , , , , , , , , , , ,				<i>.</i>						
11.	Medical professional liability												
12.	Earthquake											3,271	
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 (b)												
16.	Workers' compensation												
17.1	Other liability-Occurrence.	405.274	.411.547		211.254					(433, 170)		.59.098	8.745
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	286.875	207.392		144.178	46.542	74.310	28.902				.41.393	7.181
28.	Credit				, .		,,					,	,
30.	Warranty												
34.	Aggregate write-ins for other lines of business		.0	0	0	0	0	0	0	0	0	0	
35.	TOTAL (a)	19.892.759	19.749.387	0	10.404.551	8.304.205	5,966,168	5,173,520	729.091	48.318	783.748	3.002.671	475.887
ETAILS	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	
	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0			0			0					



NAIC Group Code 0497	BUSINES	S IN THE STATE	OF Consolidated			C	URING THE YEAR	2016		NAIC	Company Code 4	43001
	Membership Fees, L	ncluding Policy and ess Return Premiums Policies not Taken	3 Dividends Paid	4 Direct	5 Direct Losses	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost	11	12
	1 Direct Premiums	2 Direct Premiums	or Credited to Policyholders on	Unearned Premium	Paid	Direct Losses		Containment Expense	Containment Expense	Containment Expense	Commissions and Brokerage	Taxes,
Line of Business 1. Fire	Written 	Earned	Direct Business	Reserves	(deducting salvage)	Incurred 	Direct Losses Unpaid	Paid	Incurred 	Unpaid 11,364	Expenses 	Licenses and Fee
1. Fire 2.1 Allied lines			0					73,615				
2.2 Multiple peril crop		2,472,037	0	1,000,904	072,940					10,455		
2.2 Nulliple peril clop		0	0	0	0	0 0	0	0	0	0	0	
2.4 Private crop		0	0	0	0	0 0	0	0	0	0	0	
2.5 Private flood	0	0	0	0	0	00	0	0	0	0	0	
3. Farmowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners multiple peril			0		100,466,296			9.016.767	9,185,280	8.349.962	.46.837.059	
5.1 Commercial multiple peril (non-liability portion)		0	0		0	0	0	0	0	0	0	
5.2 Commercial multiple peril (liability portion)	0	0	0	0	0	0	0	0	0	0	0	
<ol> <li>Mortgage guaranty</li> </ol>	0	0	0	0	0	0	0	0	0	0	0	
3. Ocean marine	0	0	0	0	0	0	0	0	0	0	0	
9. Inland marine			0									
D. Financial guaranty			0	0		0				0	.0	
1. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	
2. Earthquake			0		0	0	0	0	0	0		
3. Group accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	
<ol> <li>Credit A &amp; H (group and individual)</li> </ol>	0	0	0	0	0	0	0	0	0	0	0	
5.1 Collectively renewable A & H (b)	0	0	0	0	0	0	0	0	0	0	0	
5.2 Non-cancelable A & H (b)	0	0	0	0	0	0	0	0	0	0	0	
5.3 Guaranteed renewable A & H (b)	0	0	0	0	0	0	0	0	0	0	0	
5.4 Non-renewable for stated reasons only (b)	0	0	0	0	0	0	0	0	0	0	0	
5.5 Other accident only	0	0	0	0	0	0	0	0	0	0	0	
5.6 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0	0	0	0	0	0	0	
5.7 All other A & H (b)	0	0	0	0	0	0	0	0	0	0	0	
5.8 Federal Employees Health Benefits Plan premium (b)	0	0	0	0	0	0	0	0	0	0	0	
<ol><li>Workers' compensation</li></ol>	0	0	0	0	0	0	0	0	0	0	0	
7.1 Other liability-Occurrence			0	1,060,142					(435,042)			
7.2 Other Liability-Claims-Made	0	0	0	0	0	0	0	0	0	0	0	
7.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	
<ol> <li>Products liability</li> </ol>	0	0	0	0	0	0	0	0	0	0	0	
9.1 Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	
9.2 Other private passenger auto liability	0	0	0	0	0	0	0	0	0	0	0	
9.3 Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	
9.4 Other commercial auto liability	0	0	0	0	0	0	0	0	0	0	0	
1.1 Private passenger auto physical damage	0	0	0	0	0	0	0	0	0	0	0	
1.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	
2. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	
3. Fidelity	0	0	0	0	0	0	0	0	0	0	0	
4. Surety	0	0	0	0	0	0	0	0	0	0	0	
<ol><li>Burglary and theft</li></ol>	0	0	0	0	0	0	0	0	0	0	0	
7. Boiler and machinery			0	2,527,910				0	0	0		
3. Credit	0	0	0	0	0	0	ļ0	0	J0	0	0	
D. Warranty	0	0	0	0	0	0	ļ0	0	ļ0	0	0	
<ol> <li>Aggregate write-ins for other lines of business</li> </ol>		0	0	0	0	0	0	0	0	0	0	
5. TOTAL (a)	306,621,544	292,722,614	0	160,480,039	103,228,801	108,044,086	70,868,247	9,262,203	8,854,812	8,946,086	48,898,588	6,897,48
TAILS OF WRITE-INS												
401.												
402.												
403.							· · · · · · · · · · · · · · · · · · ·				·	
498. Summary of remaining write-ins for Line 34 from overflow pa	ge	0	l0	Ô	0	Ô	0	0	Q	0	ļ0	
499. Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	I ()	0	0	0	I ()	1 0	I 0	I ()	0	1



# **SCHEDULE F - PART 3**

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

4	<u>^</u>	0		Ceded Reinsurance as of December 31, Current Year (000 Omitted)           5         6         Reinsurance Recoverable On         Reinsurance Payable													10	10
1	2	3	4	5	σ	7	8	9	10	ance Recover	12	13	14	15	16	e Payable 17	18	19
						1	0	9	10	11	12	13	14	15	10	17	Net Amount	
																		Funds Held
																Other	From	By Company
	NAIC				Reinsurance			Known Case	Known Case				Contingent	Cols.	Ceded	Amounts	Reinsurers	Under
ID	Company		Domiciliary	Special	Premiums	Paid	Paid	Loss	LAE	IBNR Loss	IBNR LAE	Unearned	Commis-	7 through 14	Balances	Due to	Cols. 15 -	Reinsurance
Number	Code	Name of Reinsurer	Jurisdiction	Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	sions	Totals	Payable	Reinsurers	[16 + 17]	Treaties
Authorized -	Other U.S. U	naffiliated Insurers								•								
95-2371728		ACE AMER INS CO	PA			5,049	1,214		279	3,478	550						23,647	
06-0237820		ACE PROP & CAS INS CO	PA		7 ,794	710									1,686			
06-1182357		ALLIED WORLD INS CO.	NH		1,257			1,332		713			2	2,743	15			
36-2661954 47-0574325		AMERICAN AGRICULTURAL INS CO BERKLEY INS CO.	IN DE	•••••				2.303	0 			13.689			6.913			
42-0234980		EMPLOYERS MUT CAS CO.	IA						2		1	10,000	1		1			
22-2005057		EVEREST REINS CO.	DE															
06-0384680		HARTFORD STEAM BOIL INSPEC & INS CO	CT		4,048							2,170					2,047	
43-1898350		MAIDEN REINS N AMER INC	MO				5	226	9	169				355			355	
06-1481194 13-4924125		MARKEL GLOBAL REINS CO MUNICH REINS AMER INC	DE DE			1,065	0 		0 .52		0 							
47-0698507		ODYSSEY REINS CO.	CT									5,439						
13-3031176		PARTNER REINS CO OF THE US			1,239	.605			.43									
35-6021485		PROTECTIVE INS CO	IN					,						0			0	
23-1641984		QBE REINS CORP	PA		15,626	1,467		1,177					3		3,468		8,604	
75-1444207		SCOR REINS CO	NY NY			1,725		1,450	94 41	1,249 947			3					
13-1675535 13-2918573		SWISS REINS AMER CORP TOA RE INS CO OF AMER.	DE	•••••	6,371 										(189) 255		2,984	
13-5616275		TRANSATLANTIC REINS CO.	NY	•••••		1, 309 13			125				4					
		zed - Other U.S. Unaffiliated Insurers		••••••	149,231	21,126	4,752		1,242	18,350	2,418	81,187	13		34,900	0	115,605	0
Authorized -					110,201	21,120	.,	,	.,2.2	10,000	2,110	01,107		100,000	01,000			Ů,
AA-9991213		MASSACHUSETTS FAIR PLAN	MA											0			0	
AA-9991225	00000	RHODE ISLAND FAIR PLAN	RI											0			0	
		zed – Pools – Mandatory Pools			524	0	0	0	0	0	0	0	0	0	0	0	0	0
Authorized -			DUIU		10.1	c .			^						(00)			
AA-3194168 AA-1120337		Aspen Bermuda Ltd ASPEN INS UK LTD	BMU GBR			5	1	2	0	5	1							
AA-3194139		ASPEN INS OK LID Axis Specialty Ltd	BMU			.2.156												
AA-3194161		Catlin Ins Co Ltd.	BMU						137	1,451		13.597			9.518			
AA-3194122		DaVinci Reins Ltd	BMU				1		0	4	1							
AA-1340125		HANNOVER RUECK SE	DEU		6,005		18		13			80	2	814	(502)		1,316	
AA-3190871	00000	LANCASHIRE INS CO LTD.	BMU	••••••										0	(16)			
AA-1126033 AA-1126382		LLOYD'S SYNDICATE NUMBER 33 LLOYD'S SYNDICATE NUMBER 382	GBR GBR		2,203 		<u>3</u>		4		11				(194)			
AA-1126362		LLOYD'S SYNDICATE NUMBER 302	GBR				∠ ∩		1	10	2				(18) (59)			
AA-1126623		LLOYD'S SYNDICATE NUMBER 623	GBR			3			0		0				(33)			
AA-1127084	00000	LLOYD'S SYNDICATE NUMBER 1084	GBR				1	2	0		1			14	(105)			
AA-1127183		LLOYD'S SYNDICATE NUMBER 1183	GBR		155	11	2	4	1	10	2							l
AA-1127225 AA-1127301		LLOYD'S SYNDICATE NUMBER 1225 LLOYD'S SYNDICATE NUMBER 1301	GBR				1	2	0	6	······1						17	
AA-1127301 AA-1127414		LLOYD'S SYNDICATE NUMBER 1301 Lloyd's Syndicate Number 1414	GBR			3		1	0	3	۵			8 0	····· 2			
AA-1127414		LLOYD'S SYNDICATE NUMBER 1458			224			4	1		2				·····2			
AA-1120084	00000	Lloyd's Syndicate Number 1955	GBR				1		0									
AA-1128001		LLOÝD'S SÝNDICATE NUMBER 2001	GBR		1,376		0	6	0	12	0			21	(318)			
AA-1120071		Lloyd's Syndicate Number 2007	GBR				2	4	1	10	2							
AA-1128010		LLOYD'S SYNDICATE NUMBER 2010	GBR GBR			11	2	4	1	10	2							
AA-1120158 AA-1128623		LLOYD'S SYNDICATE NUMBER 2014 Lloyd's Syndicate Number 2623	GBR					Λ			2				(8) (31)			
AA-1128791		LLOYD'S SYNDICATE NUMBER 2791							2		4				(145)			
AA-1128987	00000	Lloyd's Syndicate Number 2987	GBR						£					0	(33)			
AA-1120116		Lloýd's Sýndicate Number 3902	GBR			11	2	4	1	10	2				·			
AA-1126005		Lloyd's Syndicate Number 4000	GBR				2	4	1	10	2							
AA-1126004 AA-1840000		LLOÝD'S SÝNDICATE NUMBER 4444 MAPFRE RE COMPANIA DE REASEGUROS SA	GBR ESP				2 19	<u>4</u> 70	1	10 47	2				(16)			
AA - 1840000		Partner Reins Co Ltd.	ESP BMU				د 19		4	4/ 17	2				(16) (29)			
AA-3190080		RENAISSANCE REINS LTD.	BMU				دی 1			6	1							
		zed – Other Non-U.S. Insurers	Dino		51,049	5,523	1,301	4,052	289	3,576	561	21,726	2	37,030	11,818	0	25,212	0
					01,010	0,020	.,001	1,002	200	0,0.0		21,120	<u> </u>	0.,000	,0.0	0	20,212	Ů

## **SCHEDULE F - PART 3**

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

1	2 3	4	5	6	7	8	9		ance Recover					Reinsurand		18	19
					7	8	0	40									
						0	9	10	11	12	13	14	15	16	17		· · · ·
																Net Amount	'
																Recoverable	Funds Held
															Other	From	By Company
	NAIC			Reinsurance			Known Case	Known Case				Contingent	Cols.	Ceded	Amounts	Reinsurers	Under
	Company	Domiciliary	Special	Premiums	Paid	Paid	Loss	LAE	IBNR Loss	IBNR LAE	Unearned	Commis-	7 through 14	Balances	Due to	Cols. 15 -	Reinsurance
-	Code Name of Reinsurer	Jurisdiction	Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	sions	Totals	Payable	Reinsurers	[16 + 17]	Treaties
	al Authorized - Total Authorized	Jungalotion	Code	200.804	26.649	6.053	25,469	1.531	21.926	2,979	102.913	15	187.535	46.718	Ttellisuleis	140.817	
	Other U.S. Unaffiliated Insurers			200,004	20,043	0,000	20,409	1,001	21,920	2,313	102,913	15	107,333	40,710	0	140,017	
39-6040366	19283 AMERICAN STANDARD INS CO OF WI	WI		1	11	0	4	1	10	2	[		20			20	
30-0703280		NY		8.874										.2.847			<sup>1</sup>
		INY	•••••		,							0		2,847			
	al Unauthorized - Other U.S. Unaffiliated Insurers			8,874	1,479	355	1,042	82	1,021	162	5,620	0	9,761	2,847	0	6,914	0
	Other non-U.S. Insurers	DMU		4 447 1	00.1	0	10	0	00				07	(070)		007	·'
AA-3194128		BMU				b	16	Z		4				(270)			<i>!</i>
AA-3190005 AA-3194126		BMU	••••••					·····	20					(9)			/
	00000 Arch Reins Ltd	BMU				D	11			4				(160)			J
AA-3190770 AA-3191239	00000 Chubb Tempest Reins Ltd	BMU BMU				11		4	60	ð				(299)			<sup>1</sup>
AA-3191269	00000 Collateralised Re (P) Ltd 00000Elementum Re Ltd.	BMU	••••••										0			63	
AA-3191289		BMU	••••••										0	(49)		0 49	
AA-5340310		IND.	•••••										0	(49)			
AA-3770280		CYM	•••••	10.895	1,805	434	1.127			198	7.770			6,990			
AA-3190060	00000 Hannover Re (Bermuda) Ltd	BMU	•••••	4,256	1,005	404 2											
AA-3190875		BMU		1.899	13			1						(168)			
AA-3191284		BMU	••••••	402		<i>L</i>							0	(100)			
AA-8310006	00000 Kelvin Re Ltd	GGY		50	39		27			4			108	(12)		120	
AA-5420050	00000 KOREAN REINS CO	KOR			822		579			90	3.211		5.512	.1.608			
AA-1440060	00000 LANSFORSAKRINGSBOLAGENS AB	SWE	•••••	53													
AA-3190829		BMU				3	4	1		2				(0)			
AA - 1460019	.00000 MS Amlin AG	CHE		793	36	7	16	2	41	5			107	(165)		272	1
AA-3194200		BMU	••••••										0	(48)			
AA-5320039	00000 Peak Reins Co Ltd	HKG		649									Õ	(64)		64	1
AA-3191298	.00000. Qatar Reins Co Ltd	BMU		239		0		0	2	0				(34)			
AA-1340004	.00000. R V VERSICHERUNG AG	DEU.						1									
AA-1320031		FRA												(148)			
AA-1440076	OOOOOSIRIUS INTL INS CORP	SWE			8	2	3	0	8	1							
AA-3191179		BMU				6	16	1								66	0
AA-1460023	OOOOO Tokio Millennium Re AG	CHE				17		6	131					(368)			!
AA-1460006	00000 Validus Reins (Switzerland) Ltd	CHE											0				<sup>1</sup>
AA-3190870	00000 Validus Reins Ltd	BMU				17		6	101					(917)		1,178	'
AA-3190757	00000 XL Re Ltd	BMU			112		41	7	120	13				(474)		792	!
	al Unauthorized – Other Non–U.S. Insurers			41,656	3,235	757	1,986	165	2,624	380	10,981	0	20,128	5,250	0	14,878	54
2699999 - Tota	al Unauthorized – Total Unauthorized			50,530	4,714	1,112	3,028	247	3,645	542	16,601	0	29,889	8,097	0	21,792	54
	ner Non-U.S. Insurers																
AA-3194130	194130					6		3			0	0		(716)	0		0
	399999 – Total Certified – Other Non-U.S. Insurers			3,652	36	6	24	3	55	5	0	0	129	(716)	0	845	0
	3999999 - Total Certified - Total Certified			3,652	36	6	24	3	55			0	129	(716)	0	845	
	1099999 - Total Authorized. Unauthorized and Certified			254,986	31,399	7.171	28.521	1.781	25,626	3,526	119,514	15	217,553	54.099	0	163,454	54
9999999 Tota				254,986	31,399	7,171	28,521	1,781	25,626	3,526	119,514	15	217,553	54.099	0	163,454	54
	eport the five largest provisional commission rates included in th	a andontia reime	wanaa traati	. ,	. ,	/	- 7 -	, -			113,014	15	217,000	04,000	0	100,404	

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:

	I	2	5
	Name of Reinsurer	Commission Rate	Ceded Premium
1.	Catlin Ins Co. Ltd		
2.	Axis Specialty Ltd		
3.	Korean Reinsurance Co		
4.	Kelvin Reinsurance Co		
5.	Berkley Insurance Co		

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	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
1.	ACE America Ins. Co			Yes [ ] No [ X ]
2.	Everest Reinsurance Co			Yes [ ] No [ X ]

# **SCHEDULE F - PART 3**

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

2	3	4	5	6				Reinsur	ance Recover	rable On				Reinsuran	ce Payable	18	19
				[	7	8	9	10	11	12	13	14	15	16	17		
																Net Amount	
																Recoverable	Funds Held
															Other	From	By Company
NAIC				Reinsurance			Known Case	Known Case				Contingent	Cols.	Ceded	Amounts	Reinsurers	Under
Company		Domiciliary	Special	Premiums	Paid	Paid	Loss	LAE	IBNR Loss	IBNR LAE	Unearned	Commis-	7 through 14	Balances	Due to	Cols. 15 -	Reinsurance
Code	Name of Reinsurer	Jurisdiction	Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	sions	Totals	Payable	Reinsurers	[16 + 17]	Treaties
Berkley Insur	ance Co			1	15,886		28 Yes [	] No [ X ]									
Catlin Ins. C	0						19 Yes [	] No [ X ]									
xis Specialt	y Ltd			1	10,253		70 Yes [	] No [ X ]									
Be	Company Code erkley Insur itlin Ins. C	Company	Company Code         Domiciliary Jurisdiction           rrkley         Insurance         Co	Company Code         Dame of Reinsurer         Domiciliary Jurisdiction         Special Code           rrkley         Insurance Co	Company Code         Name of Reinsurer         Domiciliary Jurisdiction         Special Code         Premiums Ceded           rrkley         Insurance         Co	Company Code         Name of Reinsurer         Domiciliary Jurisdiction         Special Code         Premiums Ceded         Paid Losses           rrkley Insurance Co.         15,886         11,657         11,657         11,657	Company Code         Name of Reinsurer         Domiciliary Jurisdiction         Special Code         Premiums Ceded         Paid Losses         Paid LAE           rrkley Insurance Co.         15,886	Company Code     Name of Reinsurer     Domiciliary Jurisdiction     Special Code     Premiums Ceded     Paid Losses     Paid LAE     Loss Reserves       rrkley Insurance Co.     15,886	NAIC Company Code     Domiciliary Name of Reinsurer     Domiciliary Jurisdiction     Special Code     Reinsurance Premiums Code     Paid Losses     Paid Las Reserves     Known Case Las Reserves     Known Case LAE       rrkley Insurance Co.     Name of Reinsurer     15,886	NAIC Company Code     Domiciliary Name of Reinsurer     Domiciliary Jurisdiction     Special Code     Reinsurance Premiums Code     Paid Losses     Known Case LAE     Known Case LAE     IBNR Loss Reserves       rkley Insurance Co.     Name of Reinsurer     Jurisdiction     Special Code     Special Code     To     11       rkley Insurance Co.     15,886	Company Code     Name of Reinsurer     Domiciliary Jurisdiction     Special Code     Premiums Ceded     Paid Losses     Paid LAE     Loss Reserves     LAE     IBNR Loss Reserves     IBNR LAE       rrkley Insurance Cothin Ins. Co	NAIC Company Code     Domiciliary Name of Reinsurer     Domiciliary Jurisdiction     Special Code     Reinsurance Premiums Ceded     Paid Losses     Paid Losse     Known Case LAE     IBNR Loss     IBNR LAE     Unearned       rkley Insurance Co	NAIC Company Code       Domiciliary Name of Reinsurer       Domiciliary Jurisdiction       Special Code       Reinsurance Premiums Ceded       Paid Losses       Paid Losses       Known Case LAE       IBNR Loss       IBNR LAE       Unearned Premiums       Contingent Commis- sions         rrkley Insurance Co	NAIC       Domiciliary       Special       Reinsurance       Paid       Loss       Known Case       IBNR Loss       IBNR LAE       Unearned       Contingent       Cols.         Company       Name of Reinsurer       Jurisdiction       Special       Code       Paid       Losses       LAE       IBNR LAE       IBNR LAE       Unearned       Contingent       Cols.         rrkley       Insurance Co	NAIC Company Code       Domiciliary Name of Reinsurer       Domiciliary Jurisdiction       Special Code       Reinsurance Premiums Code       Paid Losses       Paid Losses       Nown Case LAE       Known Case LAE       IBNR LAE       IBNR LAE       Unearned Premiums       Contingent Code       Cols.       Ceded Balances Payable         rrkley Insurance Co	NAIC       Domiciliary       Special       Reinsurance       Paid       Paid       Paid       Loss       Known Case       IBNR LAE       IBNR LAE       Unearned       Contingent       Cols.       Ceded       Amounts         r/l lg       Name of Reinsurer       Jurisdiction       Special       Code       Paid       Losse       Loss       LAE       IBNR LAE       Unearned       Contingent       Cols.       Ceded       Amounts         r/l lg       Instruction       Special       Code       Paid       Losse       Known Case       IBNR LAE       IBNR LAE       Unearned       Contingent       Cols.       Ceded       Amounts         r/l lg       Instruction       Special       Code       Paid       Losse       Yes       I ls       No [X]       Yes       I ls       No [X]         tit in Ins. Co.       11.657       23,419       Yes       No [X]       No [X]       Yes       No [X]       No [X]       No [X]	NAIC       NAIC       Domiciliary       Special       Reinsurance       Paid       Paid       Paid       Loss       Known Case       IBNR LAE       IBNR LAE       Unearned       Contingent       Cols.       Ceded       Amounts       Reinsurance       Reinsurance       Paid       Loss       LAE       IBNR LAE       IBNR LAE       Unearned       Contingent       Cols.       Ceded       Amounts       Reinsurance       Premiums       Code       Value to       Cols.       Ceded       Amounts       Reinsurers       Cols.       Cols.       Ceded       Amounts       Reinsurers       Cols.       Cols.       Ceded       Amounts       Cols.       Cols.       Cols.       Ceded       Amounts       Cols.       Cols.       Ceded       Amounts       Cols.       Cols.       Ceded       Amounts       Cols.       Cols.       Cols.       Ceded       Amounts       Cols.       Cols.       Cols.       Ceded       Amounts       Cols.

# **SCHEDULE F - PART 4**

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

1	2	3	4		Reinsi	Irance Recoverable or	n Paid Losses and Paid	a Loss Adjustment Ex	penses		12	13
				5			Overdue			11		
					6	7	8	9	10			
												Percentage More
	NAIC										Percentage	Than 120 Days
ID	Company		Domiciliary						Total Overdue	Total Due	Overdue	Overdue Col. 9 /
Number	Code	Name of Reinsurer	Jurisdiction	Current	1 to 29 Days	30 - 90 Days	91 - 120 Days	Over 120 Days	Cols. 6 + 7 + 8 + 9	Cols. 5 + 10	Col. 10/Col. 11	Col. 11
Authorized - C	ther U.S. Una	affiliated Insurers	-11-				· · · · · ·	· · · · · ·				
95-2371728		ACE AMER INS CO	PA									
06-0237820		ACE PROP & CAS INS CO.		.868								.0.0
06-1182357		ALLIED WORLD INS CO	NH									0.0
36-2661954		AMERICAN AGRICULTURAL INS CO	IN							7	0.0	0.0
47-0574325		BERKLEY INS CO	DE						0			0.0
42-0234980		EMPLOYERS MUT CAS CO	I.A						0			
22-2005057		EVEREST REINS CO.	DE						0		0.0	0.0
06-0384680 43-1898350	11452 11054	HARTFORD STEAM BOIL INSPEC & INS CO MAIDEN REINS N AMER INC	CT								0.0	
43-1898350		MATDEN REINS N AMER INC									0.0 .0.0	
47 - 0698507		ODYSSEY REINS CO							0	1,302 6	0.0	
13-3031176		PARTNER REINS CO OF THE US	NY						0		0.0	0.0
23-1641984		QBE REINS CORP.	PA	1.779					0	1.779	0.0	0.0
75-1444207		SCOR REINS CO	NY	2,093					0	2,093	0.0	0.0
13-1675535	25364	SWISS REINS AMER CORP.	NY								0.0	0.0
13-2918573		TOA RE INS CO OF AMER.	DE									0.0
13-5616275	19453	TRANSATLANTIC REINS CO	NY								.0.0	.0.0
0999999 - To	otal Authorize	ed – Other U.S. Unaffiliated Insurers		25,877	0	0	0	0	0	25,877	0.0	0.0
Authorized – C	ther Non-U.S.	Insurers										
AA-3194168		Aspen Bermuda Ltd	BMU	7					0	7		0.0
AA-3194139		Axis Specialty Ltd	BMU						0		0.0	0.0
AA-3194161		Catlin Ins Co Ltd	BMU						0			0.0
AA-3194122		DaVinci Reins Ltd	BMU						0	5	0.0	0.0
AA-1340125		HANNOVER RUECK SE	DEU								0.0	0.0
AA-3190871 AA-1126033	00000	LANCASHIRE INS CO LTD LLOYD'S SYNDICATE NUMBER 33	BMU .GBR						0	0 21	0.0 .0.0	
AA-1120035	00000	LLOYD'S SYNDICATE NUMBER 382									0.0	0.0
AA-1126435	00000	LLOYD'S SYNDICATE NUMBER 435	GBR						0		0.0	0.0
AA-1126623		LLOYD'S SYNDICATE NUMBER 623	GBR	4					0	4	0.0	0.0
AA-1127084		LLOYD'S SYNDICATE NUMBER 1084	GBR	7					0		0.0	0.0
AA-1127183	00000	LLOYD'S SYNDICATE NUMBER 1183	GBR								0.0	0.0
AA-1127225	00000	LLOYD'S SYNDICATE NUMBER 1225	GBR						0	8		0.0
AA-1127301		LLOYD'S SYNDICATE NUMBER 1301	GBR	4					0	4	0.0	
AA-1120102		LLOYD'S SYNDICATE NUMBER 1458	GBR								0.0	0.0
AA-1120084	00000	Lloyd's Syndicate Number 1955	GBR								0.0	0.0
AA-1128001	00000	LLOÝD'S SÝNDICATE NUMBER 2001							·+0		0.0	0.0
AA-1120071	00000	Lloyd's Syndicate Number 2007	GBR								0.0 .0.0	
AA-1128010 AA-1128623	00000	LLOYD'S SYNDICATE NUMBER 2010 Lloyd's Syndicate Number 2623	GBR									
AA-1120025	00000	LLOYD'S SYNDICATE NUMBER 2791	GBR				·····				0.0	0.0
AA-1120116		Lloyd's Syndicate Number 3902.							0		.0.0	.0.0
AA-1126005		Lloyd's Syndicate Number 3302	GBR	13					0		0.0	0.0
AA-1126004		LLOYD'S SYNDICATE NUMBER 4444	GBR	.13				[	0	.13	0.0	0.0
AA-1840000	00000	MAPFRE RE COMPANIA DE REASEGUROS SA	ESP						0		.0.0	.0.0
AA-3190686	00000	Partner Reins Co Ltd	BMU									0.0
AA-3190339	00000	RENAISSANCE REINS LTD	BMU				<u></u>	<u> </u>				.0.0
	otal Authorize	ed – Other Non-U.S. Insurers		6,826	0	0	0	0	0	.,	0.0	0.0
		ed – Total Authorized		32,703	0	0	0	0	0	32,703	0.0	0.0
		Inaffiliated Insurers										
39-6040366	19283	AMERICAN STANDARD INS CO OF WI							0			0.0
30-0703280		TOKIO MILLENNIUM RE AG (US BRANCH)	NY						0		0.0	
2299999 - To	otal Unauthor	ized - Other U.S. Unaffiliated Insurers		1,834	0	0	0	0	0	1,834	0.0	0.0
Unauthorized -												
AA-3194128		Allied World Assurance Co Ltd	BMU						0		.0.0	.0.0
AA-3194126		Arch Reins Ltd	BMU					ļ			0.0	0.0
AA-3190770	00000	Chubb Tempest Reins Ltd	BMU						0			.0.0

# **SCHEDULE F - PART 4**

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

ID Company Domiciliary Domiciliary Total Overdue Total Due	4		<u>^</u>	4	Aging of	Ceded Reinsurance				10	10		
NAIC UD         NAIC Company Code         Name of Reinsurer         Domiciliary Jurisdiction         Current         1 to 29 Days         30 - 90 Days         91 - 120 Days         Over 120 Days         Total Overdue Cols. 6 + 7 + 8 + 9         Total Due Cols. 5 + 10           AA.5340310	1	2	3	4		Reinst	ITATICE RECOVERABLE O		a Loss Adjustment Exp	enses		12	13
ID Number         NAIC Code         Name of Reinsurer         Domiciliary Jurisdiction         Current         1 to 29 Days         30 - 90 Days         91 - 120 Days         Over 120 Days         Total Overdue Cols. 6 + 7 + 8 + 9         Total Due Cols. 5 + 10         C           An-5300360         00000         Hiscox Ins Co (Bernuda) Ltd.         BMU         223         0         0         2.23           An-31003675         00000         Hiscox Ins Co (Bernuda) Ltd.         BMU         75         0         0         2.23           An-31003675         00000         Hiscox Ins Co (Bernuda) Ltd.         BMU         75         0         0         2.23           An-31003675         00000         Hiscox Ins Co (Bernuda) Ltd.         BMU         75         0         0         75           An-3100259         00000         Markel Bernuda Ltd.         BMU         76         44         66         44           An-3100269         000000         Markel Bernuda Ltd.         BMU         16         4140076         0         16           An-1300040         Outout         KR PER UPER VAR         P8         0         0         16           An-1300041         000000         R V ERSIOFERMS A6         DEU         26         0					5			Overdue			11		
NAIC Number         Name of Reinsurer         Domiciliary Jurisdiction         Current         1 to 29 Days         91 - 120 Days         Over 120 Days         Total Due Cols. 6 + 7 + 8 + 9         Total Due Cols. 5 + 10           An-5300060         000000         HBK NORP OF INDIA         IND         2.239         0         0         2.239           An-3100050         00000         Hiscox Ins Co (Bernuda) Ltd         BMU         20         0         2.239           An-3100757         00000         Hiscox Ins Co (Bernuda) Ltd         BMU         76													
D         Company Number         Name of Reinsurer         Domiciliary Unrisolation         Current         1 to 29 Days         30 - 90 Days         91 - 120 Days         Total Overdue Cols. 6 + 7 + 8 + 9         Total Due Cols. 5 + 10         CO           AA-530030         00000         Hamover Re (Bernuda) Ltd         BMU         20         0         0         20           AA-3100860         00000         Hamover Re (Bernuda) Ltd         BMU         20         0         0         20           AA-3100860         00000         Hiscox Ins Co (Bernuda) Ltd         BMU         15         0         0         20           AA-310086         00000         KREAN REINS CO.         KREAN REINS CO.         KREAN REINS CO.         0         .48           AA-4500050         000000         Markel Bernuda Ltd.         BMU         .16		I				6	7	8	9	10			
ID         Company Code         Name of Reinsurer         Domiciliary Linsidiction         Current         1 to 29 Days         30 - 90 Days         91 - 120 Days         Total Overdue Cols. 6 + 7 + 8 + 9         Total Due Cols. 5 + 10         CO           AA-390060         000000         Hanover Re (Bernuda) Ltd         BMU         20         0         0         20           AA-3190075         00000         Hiscox Ins Co (Bernuda) Ltd         BMU         15         0         0         20           AA-3190076         00000         Kiscox (All Cold Cold Cold Cold Cold Cold Cold Co		I											Percentage More
Number         Code         Name of Reinsurer         Jurisdiction         Current         1 to 29 Days         30 - 90 Days         91 - 120 Days         Coles. 6 + 7 + 8 + 9         Coles. 5 + 10         C           AA-334030         0.00000.         GEN INS CORP OF INDIA         IND         2,239         0         2,209         0         2,209         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         2,200         0         0         3,200         0         3,200         0         3,200         0         3,200         0         3,200         0         3,200         0         3,200         0         3,200         3,200         3,200         3,200         3,200         3,200         3,200         3,200         3,200         3,200         3,200         3,200         3,200         3,200         3,200		NAIC										Percentage	Than 120 Days
Number         Code         Name of Reinsurer         Jurisdiction         Current         1 to 29 Days         91 - 120 Days         Over 120 Days         Cols. 6 + 7 + 8 + 9         Cols. 5 + 10         C           AA-3340310         .00000.         GEN INS CORP OF INDIA         .ND         .239	ID C	Company		Domiciliary						Total Overdue	Total Due	Overdue	Overdue Col. 9 /
AA-3340310       100000       CEN INS CORP OF INDIA       IND       2,239         AA-3190060       000000       Harnover Re (Bernuda) Ltd.       BNU       20         AA-3190060       00000       Hiscox Ins Co (Bernuda) Ltd.       BNU       20         AA-3190060       00000       Kelvin Re Ltd       GGY       48         AA-310026       00000       Kelvin Re Ltd       GGY       48         AA-4540050       00000       KoRean Re INS CO       0       48         AA-4540050       00000       Warkel Bernuda Ltd.       BNU       16         AA-3190289       00000       Warkel Bernuda Ltd.       BNU       16         AA-3190289       00000       Warkel Bernuda Ltd.       BNU       1         AA-3190289       00000       Quarkel Bernuda Ltd.       BNU       1         AA-3190289       00000       Quarkel Bernuda Ltd.       BNU       1         AA-3190289       00000       Quarkel Bernuda Ltd.       BNU       1       0       1         AA-319029       000000       Quarkel Bernuda Ltd.       BNU       1       0       1       1         AA-319129       00000       R Keins Co Ltd.       BNU       1       0       1<	Number		Name of Reinsurer	Jurisdiction	Current	1 to 29 Days	30 - 90 Days	91 - 120 Days	Over 120 Days	Cols. 6 + 7 + 8 + 9	Cols. 5 + 10	Col. 10/Col. 11	Col. 11
AA-8310006       00000       Kelvin Re Ltd.       GGY       48         AA-5420050       00000       KOREAN RE INS CO       CO       0       100         AA-34200529       00000       Market Bermuda Ltd.       BMU       16       0       16         AA-319029       00000       MS Aml in AG.       CHE       43       0       0       43         AA-1460019       00000       Rarket Bermuda Ltd.       BMU       1       0       0       43         AA-3191298       00000       Rarket Bermuda Ltd.       BMU       1       0       0       43         AA-3191298       00000       Rarket Bermuda Ltd.       BMU       1       0       0       43         AA-3191298       00000       Rarket Bermuda Ltd.       BMU       1       0       0       0       1         AA-1340004       00000       RV VERSICHERUNG AG.       DEU       26       0       0       26       0       26         AA-13400076       00000       SCR GLOBAL P & C.       FRA       54       0       0       10       0       0       10       0       10       10       10       10       10       10       10       10	-5340310									0		0.0	
AA-8310006       00000       Kelvin Re Ltd.       GGY       48         AA-8340050       00000       KOREAN RE INS CO       GGY       48         AA-3420050       00000       Korkel Bermuda Ltd       BMU       16         AA-319029       00000       Ms Aml in AG       O       0       16         AA-1460019       00000       Ms Aml in AG       O       0       43         AA-3191298       00000       R v Kersi De Euroda Ltd       BMU       1       0       0       43         AA-1340004       O0000       R v Kersi De Euroda GG       DEU       26       0       0       26         AA-1320031       000000       SCOR GLOBAL P & C       FRA       54       0       0       26         AA-1340076       00000       SIRUS INTL INS CORP       SWE       10       0	-3190060	00000	Hannover Re (Bermuda) Ltd	BMU						0		.0.0	
AA-8310006       00000       Kelvin Re Ltd.       GGY.	-3190875	00000	Hiscox Ins Co (Bermuda) Ltd	BMU						0			
AA-3190829       .00000       Markel Bernuda Ltd       BMU       .16         AA-1460019       .00000       MS Amlin AG	-8310006	00000	Kelvin Re Ltd.							0			
AA-1460019       .00000       NS Aml in AG	-5420050	00000	KOREAN REINS CO	KOR						0			0.0
AA-3191298       .00000       Qatar Reins Co Ltd       BMU       .1         AA-1340004       .00000       R V VERSICHERUNG AG       DEU       .26         AA-1320031       .00000       SCOR GLOBAL P & C.       FRA       .54         AA-1320031       .00000       SIRIUS INTL INS CORP.	-3190829	00000	Markel Bermuda Ltd	BMU						0			0.0
AA-1340004.       .00000.       R V VERSICHERUNG AG.       DEU       .26         AA-1320031.       .00000.       SCOR GLOBAL P & C.       FRA       .54         AA-1320031.       .00000.       SCOR GLOBAL P & C.       FRA       .54         AA-1440076.       .00000.       SIRIUS INTL INS CORP.       .0000.       .10         AA-1460023.       .00000.       THIRD POINT REINS CO LTD.       BMU       .29         AA-1460023.       .00000.       Tok io Millennium Re AG.										0			0.0
AA-1320031.       .00000.       SCR & GLOBAL P & C.       .FRA.       .54         AA-1320031.       .00000.       SIR IUS INTL INS CORP.       .SWE       .0	-3191298	00000	Qatar Keins Co Ltd	BMU						0	1	0.0	0.0
AA-1440076.       .00000.       ISIRIUS INTL INS CORP.	A-1340004	00000	R V VERSICHERUNG AG	DEU						0		0.0	0.0
AA-3191179.       .00000.       THIRD POINT REINS C0 LTD.	A-1320031	00000	SCUR GLUBAL P & C							0		0.0	0.0
AA-1460023       00000       Tokio Nillennium Re AG       0		00000	STRIUS INIL INS CORP							0		0.0 0.0	0.0
AA-3190870.     .00000.     Validus Reins Ltd.	1460022	00000	THIKU PUINI KEINS LU LIU	BIMU						0			0.0 .0.0
AA-3190757.										0		0.0	.0.0
2599999 - Total Unauthorized - Other Non-U.S. Insurers         3,989         0         0         0         0         3,989           2699999 - Total Unauthorized - Total Unauthorized         5,823         0         0         0         0         5,823	3100757									0		0.0	0.0
2699999 - Total Unauthorized - Total Unauthorized 5,823 0 0 0 0 0 0 5,823				DINU		0	 0	0	Λ	0		0.0	0.0
						0	0	0	0	0		0.0	0.0
						0	0	0	0	0		0.0	
	4033333 - 1014				30,320	0	0	0	0	0	30,320	0.0	0.0
								1					
9999999 Totals 38,526 0 0 0 0 0 0 38,526	9999999 Tota	als			38,526	0	0	0	0	0	38,526	0.0	0.0

# **SCHEDULE F - PART 5**

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

									Unauthorized Reins				1						
	1	2	3	4	5	6	7	8	9	10	11	12	13 Total	14	15	16	17	18	19 Total Provision
													Collateral		Recoverable		20% of		for Reinsurance Ceded to
						Reinsurance	Eurode Hald		lasuina an			Truck Forda	and Offsets	Provision for	Paid Losses		Amount	Description for	Unauthorized
						Recoverable All Items	Funds Held By Company		Issuing or Confirming			Trust Funds and Other	Allowed (Cols. 7+8+10+11+12	Unauthorized Reinsurance	& LAE Expenses Over		In Dispute	Provision for Overdue	Reinsurers (Col. 14 plus
		NAIC	Name			Schedule F	Under	Letters	Bank	Ceded	Miscellaneous	Allowed	but not in	(Col. 6	90 Days past	20% of	Included	Reinsurance	Col. 18 but not
	ID Number	Company Code	of Reinsurer	Domiciliary Jurisdiction	Code	Part 3, Col. 15	Reinsurance Treaties	of Credit	Reference Number (a)	Balances Payable	Balances Payable	Offset Items	Excess of Col. 6)	Minus Col. 13)	Due not in Dispute	Amount in Col. 15	in Column 6	(Col. 16 plus Col. 17)	in Excess of Col. 6)
	Other U.S. Una		nsurers							<b>,</b>	1 - 7		1	,					
	39-6040366	19283	AMERICAN STANDARD INS CO OF WI	WI			0		1		0			0		0	0	0	0
	30-0703280	15529	TOKIO MILLENNIUM RE AG (US BRANCH)	NY		.9,730	0		1		0		.9,730	0		0		0	0
	0999999 - To	otal Other U	S. Unaffiliated Insurers			9,759	0	11,881	XXX	2,847	0	0	9,759	0	0	0	0	0	0
	Other Non-U.S	. Insurers	Allied World Assurance Co								1		1						
	AA-3194128	00000	Ltd	BMU			0		1	(270)	0			0		0	0	0	0
	AA-3190005	00000	AMERICAN INTL REINS CO LTD.	BMU			0			(9)	0			9		0	0	0	0
	AA-3194126	00000	Arch Reins Ltd	BMU			0		1	(160)	0			0		0	0	0	0
	AA-3190770	00000	Chubb Tempest Reins Ltd	BMU			0	.946		(299)	0			0		0	0	0	0
	AA-3191239	00000	Collateralised Re (P) Ltd	BMU			0			(63)	0					0	0	0	0
	AA-3191289		Fidelis Ins Bermuda Ltd	BMU			0	939	2	(49)			0	0		0	0	0	0
24	AA-5340310	00000	GEN INS CORP OF INDIA	IND.					£	(43)	0					0	0	0	
-4	AA-3770280	00000	GREENLIGHT REINS LTD	CYM					1	6,990	0					0	0	0	0
	AA-3190060	00000	Hannover Re (Bermuda) Ltd.	BMU					1									0	0
		00000	Hiscox Ins Co (Bermuda)	BMU										0				0	0
	AA-3190875		Ltd							(168)				0			0	0	0
	AA-8310006	00000	Kelvin Re Ltd	GGY			0 .	2,407	1	(12)	0			0		0	0	0	0
	AA-5420050	00000	KOREAN REINS CO	KOR		5,513	0		1	1,608	0			0		0	0	0	0
	AA-1440060	00000	LANSFORSAKRINGSBOLAGENS AB.	SWE			0			(5)	0		(5)	5		0	0	0	0
	AA-3190829	00000	Markel Bermuda Ltd	BMU		35	0		1		0			0		0	0	0	0
	AA-1460019	00000	MS Amlin AG	CHE			0		1	(165)	0			0		0	0	0	0
	AA-3194200	00000	MS FRONTIER REINS LTD	BMU			0			(48)	0					0	0	0	0
	AA-5320039	00000	Peak Reins Co Ltd	HKG			0			(64)	0						0	0	0
	AA-3191298		Qatar Reins Co Ltd	BMU		4	.0			(34)	0					0	0	.0	
	AA-1340004		R V VERSICHERUNG AG	DEU		.58	0	.3.645		, ,	0		.58	0		0	0	0	0
	AA - 1320031	00000	SCOR GLOBAL P & C	FRA			0		1	(148)	0			0		0	0	0	0
	AA - 1440076	00000	SIRIUS INTL INS CORP	SWE			54		1		0			0		0	0	o	0
	AA-3191179	00000	THIRD POINT REINS CO LTD	BMU			0		1		0			0		0	0		0
	AA-1460023		Tokio Millennium Re AG	CHE					1	(368)	0					 م		0	0
	AA-1400023		IUNIU WITTEHITTUIII NE AU	UNE					1	(300)	J							0	0

# **SCHEDULE F - PART 5**

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

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
																		Total Provision
												Total						for Reinsurance
														<b>D</b>		000/ 15		
												Collateral		Recoverable		20% of		Ceded to
					Reinsurance							and Offsets	Provision for	Paid Losses		Amount		Unauthorized
					Recoverable	Funds Held		Issuing or			Trust Funds	Allowed (Cols.	Unauthorized	& LAE		In	Provision for	Reinsurers
													Dilautionzeu					
					All Items	By Company		Confirming			and Other	7+8+10+11+12	Reinsurance	Expenses Over		Dispute	Overdue	(Col. 14 plus
	NAIC	Name			Schedule F	Under	Letters	Bank	Ceded	Miscellaneous	Allowed	but not in	(Col. 6	90 Days past	20% of	Included	Reinsurance	Col. 18 but not
ID	Company	of	Domiciliary	Special	Part 3,	Reinsurance	of	Reference	Balances	Balances	Offset	Excess	Minus	Due not in	Amount	in	(Col. 16 plus	in Excess
	Code	Reinsurer	Jurisdiction	Code	Col. 15	Treaties	Credit		Payable	Payable		of Col. 6)	Col. 13)	Dispute	in Col. 15	Column 6	Col. 17)	of Col. 6)
Number			Junsaiction	Code	C0I. 15	Treaties	Credit	Number (a)	Payable	Payable	Items		COI. 13)	Dispute	III COI. 15	Column 6		
		Validus Reins																
AA-1460006	00000	(Switzerland) Ltd	CHE			0			(38)	0					0	0	0	0
AA-3190870	00000	Validus Reins Ltd	BMU			0				0			0		0	0	0	0
							,											
AA-3190757		XL Re Ltd	BMU			0							0		0	0	0	0
		n-U.S. Insurers			20,141		36,602	ХХХ	5,250	0	n	19.862	279	∩	0			A
											0						· · ·	4
138888 - 10	iai Affiliat	es and Others			29,900	54	48,483	XXX	8,097	0	0	29,621	279	0	0	0	0	4
<u> </u>				L	<u> </u>									<u> </u>			<u> </u>	
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														+			+	-+
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<b>-</b>				ļ														
														· · · · · · · · · · · · · · · · · · ·				
				<u>+</u>								+					+	-+
9999999 Tota	als				29,900	54	48,483	XXX	8,097	0	0	29,621	279	0	0	0	0	4
1 Δmou					led in Column 6		,		•			•						

24.1

(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
``'F		1	075000022	U.S. BANK NATIONAL ASSOCIATION	
ľ	0002	1	026004307	Mizuho Bank, LTD	14.391
ľ		1		Bank of America, N.A	
		1		Uni Credit	
		1		Citibank N.A	
		11			
		1			
		1		Citibank N.A	
		1	021000089	Citibank N.A	
		1	021000089	Citibank N.A	
	0011	1	021000089		
	0012	2		JP Morgan Chase Bank, N.A	
	0013	2		JP Morgan Chase Bank, N.A	
	0014	1		Citibank	
		1	026002574	Barclays Bank PLC	
				NATIONAL AUSTRALIA BANK LIMITED	
	0015	2		BNP PARIBAS	445
	0015	2		COMMERZBANK AKTIENGESELLSCHAFT	
		1		Citibank Europe PLC	
	0017	1		Citibank, N.A.	
		ļ1	021000089	Citibank, N.A	

# **SCHEDULE F - PART 6 - SECTION 1**

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

			Provision for Reinsurance Ceded to Certified Reinsurers as of December 31, Current Year (000 Omitted)																		
	1	2	3	4	5	6	7	8	9	10	11				I Provided			18	19	20	21
						1						12	13	14	15	16	17		Percent		
						1													Credit		
						1												Percent of	Allowed on		Provision for
	I					1												Collateral	Net		Reinsurance
						1				Net								Provided for	Recoverables	Amount of	With
	I					1				Recoverables								Net	Subject to	Credit	Certified
	I					1	Dereent	Not Amount		Subject to								Recoverables	Collateral	Allowed for	Reinsurers
	I					<b>F</b> # - + + + - +	Percent	Net Amount	Ostastast				Evends I I also		I to a star a second		Tatal				
	I				0.00	Effective		Recoverable	Catastrophe	Collateral			Funds Held		Issuing or		Total	Subject to	Requirements	Net	Due to
					Certified		Required	from	Recoverables	Requirements	Dollar Amount of		by Company		Confirming		Collateral	Collateral	(Col. 18 /	Recoverables	Collateral
	_	NAIC			Reinsurer		for Full	Reinsurers	Qualifying	for Full Credit	Collateral	Multiple	Under		Bank	Other	Provided	Requirements	Col. 7, not to	(Col. 9 +	Deficiency
	D	Company	Name of	Domiciliary	Rating (1	Reinsurer	Credit (0% -	(Sch. F Part 3	for Collateral	(Col. 8 –	Required (Col.	Beneficiary	Reinsurance	Letters of	Reference	Allowable	(Col. 12 + 13 +	(Ċol. 17 /	Exceed	(Col. 10 x	(Col. 8 –
	mber	Code		Jurisdiction	through 6)	Rating	100%)	Col. 18)	Deferral	Col .9)	10 x Col. 7)	Trust	Treaties	Credit	Number (a)	Collateral	14 + 16)	Col. 10)	100%)	Col. 19))	Col. 20)
Oth	er Non-	U.S. Insurer																			
			Endurance Specialty Ins																		
AA-31	4130	00000	Ltd	BMU	4		0.5				4		0								0
1299	999 - To	otal Other No	n-U.S. Insurers						0		4	0	0		ХХХ	0		XXX	ХХХ		0
1399	999 - To	otal Affiliates	and Others						0		4	0	0			0	939	XXX			0
						. <b>.</b>															
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						+															
						+															
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						+															
						1	1							1			1	1	1	1	
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						. <b> </b>															
					l		L														
9999	999 Tota	als							0			0	0		XXX	0		XXX	XXX		0

	Issuing or Confirming Bank Reference	Letters of Credit	American Bankers Association (ABA)		Letters of Credit
(a)	Number	Code	Routing Number	Issuing or Confirming Bank Name	Amount
		2		AUSTRALIA AND NEW ZELAND	
				BANKING GROUP LIMITED	
				BANK OF MONTREAL	
				BARCLAYS BANK PLC	
		2		DEUTSCHE BANK AG,	

(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
[				HSBC BANK USA, N.A	
				JP MORGAN CHASE BANK, N.A.	
		2		LLOYDS TSB BANK PLC.	
		2	121000248		

Schedule F - Part 6 - Section 2 NONE Schedule F - Part 7 NONE

# **SCHEDULE F - PART 8**

Provision for Overdue Reinsurance as of December 31, Current Year

Provision for Overdue Reinsurance as of December 31, Current Year           1         2         3         4         5         6         7         8         9         10         11         12																
1 ID	2 NAIC Company	3	4 Reinsurance Recoverable	5 Funds Held By Company Under	6	7 Ceded Balances	8 Other Miscellaneous	9 Other Allowed	10 Sum of Cols. 5 through 9 but not in	11	12 Greater of Col. 11 or Schedule F - Part 4					
Number	Code	Name of Reinsurer	All Items	Reinsurance Treaties	Letters of Credit	Payable	Balances	Offset Items	Excess of Col. 4	Col. 4 minus Col. 10	Cols. 8 + 9					
	++															
						<u> </u>										
	1										1					
									1		<u>+</u>					
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9999999 To	tale		0	0	0	0	0	0	0	0						
000000010	lais		0	0	0	1. Total	0	0	0	0						
						2. Line 1 x .20										
						3. Schedule F - Part 7	Col. 11									
						<ol> <li>Provision for Overdu</li> </ol>	e Authorized Reinsurand rance Ceded to Unautho	ce (Lines 2 + 3)								
						5. Provision for Reinsu	rance Ceded to Unautho	rized Reinsurers (Scho	edule F - Part 5, Col. 19	x 1000)	4,00					
						6. Provision for Reinsu	rance Ceded to Certified	Reinsurers (Schedule	F. Part 6, Section 1 Co	), 21 x 1000)	,					
						7 Provision for Overdu	e Reinsurance Ceded to	Certified Reinsurers (	Schedule E Part 6 Sec	tion 2 Col 15 x 1000)						

7. Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Schedule F, Part 6, Section 2, Col. 15 x 1000)

4,000

8. Provision for Reinsurance (sum Lines 4 + 5 + 6 + 7) (Enter this amount on Page 3, Line 16)

# **SCHEDULE F - PART 9**

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	Restatement of Balance Sheet to Identify Net Credit	for Reinsurance		
		1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSET	<u>'S</u> (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)			
2.	Premiums and considerations (Line 15)	27 ,742 ,278		
3.	Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)		(38,568,802)	0
4	Funds held by or deposited with reinsured companies (Line 16.2)	0		0
5.	Other assets	0		0
6.	Net amount recoverable from reinsurers	9,757,240		
7.	Protected cell assets (Line 27)	0		0
8.	Totals (Line 28)	225 , 323 , 286		
LIABIL	ITIES (Page 3)			
9.	Losses and loss adjustment expenses (Lines 1 through 3)	23,040,913		
10.	Taxes, expenses, and other obligations (Lines 4 through 8)	11,903,859		11,903,859
11.	Unearned premiums (Line 9)	40 , 966 , 571	119,513,469	
12.	Advance premiums (Line 10)	4,670,754		4,670,754
13.	Dividends declared and unpaid (Line 11.1 and 11.2)	0		0
14.	Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)			0
15.	Funds held by company under reinsurance treaties (Line 13)		(54,468)	0
16.	Amounts withheld or retained by company for account of others (Line 14)	0		0
17.	Provision for reinsurance (Line 16)	4,000	(4,000)	0
18.	Other liabilities	1,220,005		1,220,005
19.	Total liabilities excluding protected cell business (Line 26)	135,959,667	124,810,501	260,770,168
20.	Protected cell liabilities (Line 27)	0		0
21.	Surplus as regards policyholders (Line 37)	89,363,619	XXX	89,363,619
22.	Totals (Line 38)	225,323,286	124,810,501	350,133,787
	Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 per	cent reinsurance or pool	ling arrangements?	Yes [ ] No [ X ]

Schedule H - Part 1

# NONE

Schedule H - Part 2

Schedule H - Part 3

Schedule H - Part 4

Schedule H - Part 5 - Health Claims

# NONE

# SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

Years in	Pr	emiums Earne	ed			Los		pense Payme	nts			12
Which	1	2	3				and Cost	Adjusting		10	11	
Premiums				Loss Pa	/		t Payments	Payn				
Were Earned				4	5	6	7	8	9	Calvana	Total	Number of
and Losses										Salvage and	Net Paid (Cols. 4 - 5	Claims Reported
Were	Direct and		Net	Direct and		Direct and		Direct and		Subrogation	+ 6 - 7	Direct and
Incurred	Assumed	Ceded	(Cols. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1. Prior	XXX	XXX	xxx	0	0	0	0	0	0	0	0	XXX
2. 2007	3,417	1,391	2,026	1,119	173	69	19	36	11	0	1,021	86
3. 2008	8,511	3,110	5,401	1,267	176	158		76	0	64	1,303	
4. 2009		8,582	9,843	2,507	119		21	424	0	115	3,179	498
5. 2010	41,286	13,820	27 , 466	11,754	1,921	1,639		1,410	0	78		2,151
6. 2011	79,378	21,901	57 , 477	32,988		3,822		2,619	0	440		
7. 2012	140,434		55,874	172,251	131 , 100	24,923		8,225	0	1,572	57,444	
8. 2013	176,514	130,706	45,808	58,318		5 , 586	3,634	1,743	0		22,846	9,442
9. 2014	210,063		60,030	71,268	52,242	7 ,037	4,904	4,534	0	1	25,692	
10. 2015	249,506		67, 505	118,703	90 , 266	9,793	6,954	6,124	0	1 , 122		14,316
11.2016	279,800	217,036	62,764	79,161	56,476	4,972	3,336	4,879	0	535	29,200	10,288
12. Totals	XXX	XXX	XXX	549,337	372,536	58,386	36,221	30,070	11	6,078	229,025	XXX

		1	Linnoid		Defer	and Coat (	Contoinmont I	Innoid		and Other	23	24	25
	Case	Losses Basis	Bulk +	IBNR		ise and Cost C Basis		· IBNR	21	paid 22			
	13 Direct and	14 Ceded	15 Direct and	16	17 Direct and	18	19 Direct and	20	Direct and		Salvage and Subrogation	Total Net Losses and Expenses	Number of Claims Outstanding Direct and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	1	0	0	0	0	0	0	0	0	1	0
5.	200	0	8	5	16	0	4	1	6	0	0	228	1
6.	40	0	38	6	20	0	13	1	5	0	0	110	4
7.	1,545	535	1 , 098	1 , 066	183	73		169	110	0	0	1,279	33
8.	1,785			214	242	17	296	18	110	0	0	2,763	51
9.	3,026		3,477	1,440	488	143		294	295	0	0	5,247	76
10.	6,111	4,301	8,344	6,040	822	516	1 ,966	1 ,278	655	0	0	5,763	81
11.	21,992	21,373	18,528	15,261	1,202	981	1,999	1,426	1,499	0	0	6,179	1,002
12.	34,699	27,592	32,379	24,031	2,973	1,730	5,377	3,187	2,681	0	0	21,569	1,248

		Total		Loss and	Loss Expense P	ercentage			34	Net Balar	nce Sheet
		d Loss Expense			red/Premiums Ea			r Discount	Inter-		ter Discount
	26	27	28	29	30	31	32	33	Company	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	XXX	xxx	xxx	xxx	xxx	xxx	0	0	xxx	0	0
2.	1,224		1,021		14.6		0	0	0.0	0	0
3.	1,501		1,303	17.6	6.4		0	0	0.0	0	0
4.	3 , 320	140	3 , 180		1.6		0	0	0.0	1	0
5.	15 , 037	2,244	12,793		16.2		0	0	0.0	203	25
6.		1,061			4.8		0	0	0.0		
7.	208 , 520	149,797		148.5	177 . 1	105.1	0	0	0.0	1,043	236
8.	68 , 964	43 , 356	25 , 608				0	0	0.0	2 , 149	614
9.	91 , 039	60 , 100			40.1	51.5	0	0	0.0		1 ,259
10.	152,519	109,356	43, 163	61.1	60.1	63.9	0	0	0.0	4 , 114	1,649
11.	134,231	98,852	35,378	48.0	45.5	56.4	0	0	0.0	3,886	2,293
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	xxx	15,455	6,114

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Schedule P - Part 1B - Private Passenger

# NONE

Schedule P - Part 1C - Comm Auto/Truck

Schedule P - Part 1D - Workers' Comp

Schedule P - Part 1E - Comm Multi Peril

Schedule P - Part 1F - Med Pro Liab Occ

Schedule P - Part 1F - Med Pro Liab Clm

# SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

					(	\$000 OMITTE	D)					
Years in	P	remiums Earne						kpense Payme	nts			12
Which	1	2	3			Defense		Adjusting		10	11	
Premiums				Loss Pa	ayments	Containmer	nt Payments		nents			
Were				4	5	6	7	8	9		Total	Number of
Earned										Salvage	Net Paid	Claims
and Losses Were	1		N	Distant		Distant		D'ant and		and	(Cols. 4 - 5	Reported
Incurred	Direct and	Carlad	Net	Direct and	Orderl	Direct and	Ceded	Direct and	Carlad	Subrogation	+ 6 - 7 + 8 - 9)	Direct and
Incurred	Assumed	Ceded	(Cols. 1 - 2)	Assumed	Ceded	Assumed	Cedea	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1. Prior	xxx	xxx	XXX	0	0	0	0	0	0	0	0	XXX
2. 2007	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2008	0	0	0	0	0	0	0	0	0	0	0	xxx
4. 2009	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2010	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2011	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2012	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2013	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2014	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2015	541		83		30	0	0	2	0	0	2	XXX
11. 2016	3,674	3,120	555	351	351	0	0	20	0	0	20	XXX
12. Totals	xxx	xxx	xxx	381	381	0	0	22	0	0	22	XXX

		Losses	Unpaid		Defen	se and Cost C	Containment U	Inpaid	Adjusting Unr		23	24	25
	Case			BNR	Case		Bulk +		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	3	3	0	0	0	0	0	0	0	0	0
11.	53	53	152	152	0	0	0	0	0	0	0	0	25
12.	53	53	155	155	0	0	0	0	0	0	0	0	25

	Lossos an	Total d Loss Expense	s Incurred		Loss Expense P ed/Premiums Ea		Nontabula	r Discount	34		nce Sheet fter Discount
	26	27	28	29	30	31	32	33	Inter- Company	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.			xxx		XXX		0	0	xxx	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	0	0	0	0.0	0.0		0	0	0.0	0	0
4.	0	0	0	0.0	0.0		0	0	0.0	0	0
5.	0	0	0	0.0	0.0		0	0	0.0	0	0
6.	0	0	0	0.0	0.0		0	0	0.0	0	0
7.	0	0	0	0.0	0.0		0	0	0.0	0	0
8.	0	0	0	0.0	0.0		0	0	0.0	0	0
9.	0	0	0	0.0	0.0		0	0	0.0	0	0
10.			2	6.4	7.3	1.8	0	0	0.0	0	0
11.	576	556	20	15.7	17.8	3.6	0	0	0.0	0	0
12.	xxx	XXX	XXX	xxx	XXX	XXX	0	0	xxx	0	0

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

Years in	Pi	emiums Earne	ed			Los		pense Payme	nts			12
Which	1	2	3				and Cost	Adjusting		10	11	
Premiums				Loss Pa	/		nt Payments	Payn			Tatal	N
Were Earned				4	5	6	/	8	9	Salvage	Total Net Paid	Number of Claims
and Losses										and	(Cols. 4 - 5	Reported
Were	Direct and		Net	Direct and		Direct and		Direct and		Subrogation	+ 6 - 7	Direct and
Incurred	Assumed	Ceded	(Cols. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1. Prior	xxx	xxx	xxx	0	0	0	0	0	0	0	0	xxx
2. 2007	27	5	22	4	0	3	0	0	0	0	7	2
3. 2008	66	4	62	3	0	2	0	2	0	0	7	4
4. 2009	264		75	42	0	21	0	(2)	0	0	60	4
5. 2010		279	275	813	800	67	50	26	0	0	56	9
6. 2011	1,009		118	91	48	21	9	6	0	0	61	15
7. 2012	1,553	1,284	269			178	69	22	0	0	137	25
8. 2013	1,834	1,526		281		29	13	19	0	0	128	18
9. 2014	1,839	1,131	708	83	2	30	8	4	0	0	107	11
10. 2015	1,894	1,255	639	171	94	28	13	18	0	0	110	26
11. 2016	2,006	1,950	56	9	6	6	4	1	0	0	7	7
12. Totals	xxx	XXX	xxx	1,653	1,287	384	166	96	0	0	680	XXX

		Losses	Unpaid		Defen	ise and Cost (	Containment U	Inpaid	Adjusting Ung	and Other baid	23	24	25
	Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	IBNR	21	22	1		
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	7.00041100	00000	, localited	00000	/ localitica	Occor	7 locarried	00000	rioouniou	Coucu	7 unioipatoa	Chipala	7 toournou
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	7	6	0	0	9	8	0	0	0	1	0
6.	0	0	25	20	0	0	5	4	0	0	0	6	0
7.		0	21	11	37	0	61	53	0	0	0	434	3
8.	50	19	194	151	14	0	8	0	0	0	0	96	3
9.			101	77	35	17	160	150	0	0	0	114	0
10.	130	50	730	580	37	12	51	31	0	0	0	276	11
11.	138	124	523	455	41	12	97	88	0	0	0	121	3
12.	1,091	525	1,601	1,301	164	41	391	333	0	0	0	1,047	20

		Total			Loss Expense P				34		nce Sheet
		d Loss Expense			ed/Premiums Ea		Nontabula		Inter-		fter Discount
	26	27	28	29	30	31	32	33	Company	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	xxx	xxx	xxx	xxx	xxx		0	0	xxx	0	0
2.	7	0	7		0.0		0	0	0.0	0	0
3.	7	0	7	11.0	0.0		0	0	0.0	0	0
4.	60	0	60		0.0		0	0	0.0	0	0
5.							0	0	0.0	0	1
6.			67	14.7	9.1		0	0	0.0	5	1
7.							0	0	0.0		
8.			224		24.3		0	0	0.0		22
9.			220		51.8		0	0	0.0		29
10.	1 , 166			61.6	62.1		0	0	0.0	231	46
11.	815	688	127	40.7	35.3	227.2	0	0	0.0	83	38
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	xxx	866	181

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

Years in	Pr	emiums Earne	ed			Los	ss and Loss E	pense Payme	nts			12
Which	1	2	3				and Cost	Adjusting		10	11	
Premiums Were				Loss Pa	<u></u>		nt Payments	<u> </u>	nents	-	Tatal	Number of
Earned				4	5	6	/	8	9	Salvage	Total Net Paid	Number of Claims
and Losses										and	(Cols. 4 - 5	Reported
Were	Direct and		Net	Direct and		Direct and		Direct and		Subrogation	+ 6 - 7	Direct and
Incurred	Assumed	Ceded	(Cols. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1. Prior	XXX	xxx	xxx	0	0	0	0	0	0	0	0	XXX
2. 2007	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008	0	0	0	0	0	0	0	0	0	0	0	0
4. 2009	0	0	0	0	0	0	0	0	0	0	0	0
5. 2010	0	0	0	0	0	0	0	0	0	0	0	0
6. 2011	0	0	0	0	0	0	0	0	0	0	0	0
7. 2012	0	0	0	0	0	0	0	0	0	0	0	0
8. 2013	0	0	0	0	0	0	0	0	0	0	0	0
9. 2014	0	0	0	0	0	0	0	0	0	0	0	0
10. 2015	0	0	0	0	0	0	0	0	0	0	0	0
11.2016	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

		Lossos	Unpaid		Dofor	ise and Cost C	Containment L	Innaid		and Other baid	23	24	25
	Case		Bulk +	IBNR		Basis	Bulk +		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	.0	0	0	0	0	0	0	.0		0	0	0	0
4.	.0	0	0	0	0				0	0	0	0	0
5.	0	0	0	0	0	١Ŋ٩	UNE	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	0	0	0	0	0	0	0	0	0	0	0	0	0

		Total			Loss Expense P				34		nce Sheet
		d Loss Expense			red/Premiums Ea			r Discount	Inter-		fter Discount
	26	27	28	29	30	31	32	33	Company	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.		xxx	XXX	XXX	xxx		0	0	xxx		0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	0	0	0	0.0	0.0		0	0	0.0	0	0
4.	0	0	0	0.0	0.0		0	0	0.0	0	0
5.	0	0	0	0.0	0.0		0	0	0.0	0	0
6.	0	0	0	0.0	0.0		0	0	0.0	0	0
7.	0	0	0	0.0	0.0		0	0	0.0	0	0
8.	0	0	0	0.0	0.0		0	0	0.0	0	0
9.	0	0	0	0.0	0.0		0	0	0.0	0	0
10.	0	0	0	0.0	0.0		0	0	0.0	0	0
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	xxx	0	0

# SCHEDULE P-PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in	Pi	remiums Earn	ed			Los	s and Loss E	kpense Payme	ents			12
Which Premiums	1	2	3	Loss Pa	ayments	Defense	and Cost nt Payments	Adjusting		10	11	
Were Earned and Losses				4	5	6	7	8	9	Salvage and	Total Net Paid (Cols. 4 - 5	Number of Claims Reported
Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Subrogation Received	(COIS: 4 - 5 + 6 - 7 + 8 - 9)	Direct and Assumed
				54	101		-				(07)	
1. Prior	XXX	XXX	XXX	51	124	14	1	0	0	δ	(67)	XXX
2. 2015	6,704	4,138	2,566	2,690	1,745	181	107	131	0	86	1 , 150	xxx
3. 2016	7,242	4,715	2,528	1,483	931	65	36	85	0	0	666	xxx
4. Totals	XXX	XXX	XXX	4,224	2,800	261	150	215	0	94	1,749	XXX

									Adjusting		23	24	25
		Losses	Unpaid		Defen	se and Cost C	Containment L	Inpaid	Unp	baid			
	Case	Basis	Bulk +	BNR	Case	Basis	Bulk +	BNR	21	22			
	13	14	15	16	17	18	19	20				Total	Number of
											Salvage	Net Losses	Claims
											and	and	Outstanding
	Direct and		Direct and		Direct and		Direct and		Direct and		Subrogation		Direct and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	23	0	13	4	4	0	1	0	0	0	0	35	0
2.	69	20	40	23	8	2	2	2	0	0	0	73	1
3.	575	331	171	113	21	9	5	3	0	0	0	316	37
4.	667	351	223	140	33	10	8	5	0	0	0	425	38

	Losses an	Total d Loss Expenses	s Incurred		oss Expense Pe ed/Premiums Ea		Nontabula	r Discount	34 Inter-	Net Balar Reserves At	
	26	27	28	29	30	31	32	33	Company Pooling	35	36 Loss
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Participation Percentage	Losses Unpaid	Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	31	4
2.	3,122	1,899 .	1,224				0	0	0.0		7
3.	2,405	1,422	982	33.2	30.2	38.9	0	0	0.0	302	14
4.	XXX	XXX	ххх	XXX	XXX	XXX	0	0	ххх	399	25

Schedule P - Part 1J - Auto Physical

# NONE

Schedule P - Part 1K - Fidelity/Surety

Schedule P - Part 1L - Other

Schedule P - Part 1M - International

Schedule P - Part 1N - Reinsurance

Schedule P - Part 10 - Reinsurance

Schedule P - Part 1P - Reinsurance

Schedule P - Part 1R - Prod Liab Occur

Schedule P - Part 1R - Prod Liab Claims

Schedule P - Part 1S-Fin./Mtg. Guaranty

Schedule P - Part 1T - Warranty

#### SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

	INCURRED	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOF	RTED AT YEA	AR END (\$00	OMITTED)	DEVELC	PMENT
Years in Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year
1. Prior				14	11	11	11	11	11	11	0	0
2. 2007	1,115		1,022	1,007							0	0
3. 2008	xxx	1,534	1,244		1,318	1,226	1,227	1,227	1,227	1,227	0	0
4. 2009	xxx	XXX	3,236		2,698		2,767	2,749	2,764			7
5. 2010	XXX	XXX	XXX	11,411	11,048		11,213		11,364		12	
6. 2011	XXX	XXX	XXX	XXX	34,515		36,146				(283)	(857)
7. 2012	XXX	XXX	XXX	XXX	XXX	46 , 827	49,902	51,024			(139)	(636)
8. 2013	xxx	XXX	XXX	XXX	XXX	XXX		24,311			(540)	(555)
9. 2014	xxx	XXX	XXX	XXX	XXX	XXX	xxx				(1,121)	(537)
10. 2015	xxx	XXX	XXX	XXX	XXX	XXX	XXX	xxx			(415)	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29,001	XXX	XXX
										12. Totals	(2,494)	(2,545)

SCH	EDUL	E P - P	ART 2	B - PR	IVATE	PASS	ENGE	R AUT	O LIAE	BILITY	/MEDIO	CAL
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2009	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2010	XXX	XXX	XXX	0	0	0		0	0	0	0	0
6. 2011	XXX	XXX	XXX	XXX	N/	<b>NIE</b>	0	0	0	0	0	0
7. 2012	XXX	XXX	XXX	XXX	XXX		0	0	0	0	0	0
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
										12. Totals	0	0

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

1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0
2.	2007	0	0	0	0	0	0	0	0	0	0	0	0
3.	2008	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2009	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2010	XXX	XXX	XXX	0	0		0	0	0	0	0	0
6.	2011	XXX	XXX	XXX	XXX	<b>N</b> I	<u> NIF</u>	0	0	0	0	0	0
7.	2012	XXX	XXX	XXX	XXX	XXX N			0	0	0	0	0
8.	2013	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2014	XXX	XXX	XXX		XXX	XXX	XXX	0	0	0	0	0
10.	2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
											12. Totals	0	0

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

_					LODINO	LYOLOO	NORRE		LINGATI				
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0
2.	2007	0	0	0	0	0	0	0	0	0	0	0	0
3.	2008	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2009	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2010	XXX	XXX	XXX	0	0	00	0	0	0	0	0	0
6.	2011	XXX	XXX	XXX	XXX	<b>N</b> I (	<b>NIE</b>	0	0	0	0	0	0
7.	2012	XXX	XXX	XXX	XXX	XXX N			0	0	0	0	0
8.	2013	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10.	2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
											12. Totals	0	0

### SCHEDULE P - PART 2E- COMMERCIAL MULTIPLE PERIL

		-											
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0
2.	2007	0	0	0	0	0	0	0	0	0	0	0	0
3.	2008	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2009	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2010		XXX	XXX	0	0			0	0	0	0	0
6.	2011		XXX	XXX	XXX	N	<b>MNIE</b>	0	0	0	0	0	0
7.	2012	XXX	XXX	XXX	XXX	xxx N			0	0	0	0	0
8.	2013		XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2014		XXX	XXX	XXX	xxx	xxx	xxx	0	0	0	0	0
10.	2015		XXX	XXX	XXX	xxx	xxx	xxx	xxx	0	0	0	xxx
11.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
											12. Totals	0	0

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

	INCURRED	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR END (\$000	OMITTED)	DEVELO	OPMENT
Years in Which Losses Were	1	2	3	4	5	6	7	8	9	10	11	12
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008	xxx	0	0	0	0	0	0	0	0	0	0	0
4. 2009	XXX	XXX	0	0	N.I		0	0	0	0	0	0
5. 2010	XXX	XXX	XXX	0	<u> </u>		0	0	0	0	0	0
6. 2011	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2012	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
										12. Totals	0	0

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

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

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

						(		,	•••==•				
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0
2.	2007	0	0	0	0	0	0	0	0	0	0	0	0
3.	2008	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2009	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2010	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6.	2011	XXX	XXX	XXX	XXX	<b>N</b> I		0	0	0	0	0	0
7.	2012	XXX	XXX	XXX	XXX	xxx N			0	0	0	0	0
8.	2013	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2014	XXX	XXX	XXX	XXX			XXX	0	0	0	0	0
10.	2015	XXX	XXX	XXX	XXX	xxx	XXX	XXX	XXX	0	0	0	XXX
11.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
											12. Totals	0	0

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

1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0
2.	2007	7	6	6	6	6	6	16	7	7	7	0	0
3.	2008	XXX	8	5		5	5		5	5	5	0	0
4.	2009	XXX	XXX	12		27	66	68		63		0	(23)
5.	2010	XXX	XXX	XXX		24		53	43	31		(1)	(13)
6.	2011	XXX	XXX	XXX	XXX	65		(10)	137	72	61	(11)	(76)
7.	2012	XXX	XXX	XXX	XXX	XXX	106	353		279		270	106
8.	2013	XXX	XXX	XXX	XXX	XXX	XXX	672				(44)	(141)
9.	2014	XXX	XXX				XXX	XXX		248		(32)	(143)
10.	2015	XXX	XXX			(3)	XXX						
11.	2016	XXX	XXX	XXX	126	XXX	XXX						
											12. Totals	178	(290)

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

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

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

	INCURRED	NET LOSSES	AND DEFE	NSE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	R END (\$000	OMITTED)	DEVELO	PMENT
Years in Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were												
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	312	441		(135)	(6)
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1,093		XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	897	XXX	XXX
										4. Totals	(2)	(6)

### SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

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

# SCHEDULE P - PART 2K - FIDELITY, SURETY

1. Prior		XXX	XXX			xxx		0	0	0	0	0
2. 2015			XXX	XXX	XX		XXX	XXX	0	0	0	XXX
0 0040		N/V/	VVV					VVV	~~~~	0	VVV	VVV
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
										<ol><li>Totals</li></ol>	0	0

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

1. Prior	xxx		xxx	xxx	xxx	xxx		0	0	0	0	0
2, 2015	xxx		xxx	xxx	××		- xxx	xxx	0	0	0	xxx
3. 2016	XXX	XXX	XXX	XXX			xxx	XXX	XXX	0	XXX	xxx
0. 2010	7000	7000	7000	7000	7000	7000	7000	7000	7000	Ŭ	7000	7000
										4. Totals	0	0

#### **SCHEDULE P - PART 2M - INTERNATIONAL**

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

Schedule P - Part 2N

# NONE

Schedule P - Part 20

Schedule P - Part 2P

Schedule P - Part 2R - Prod Liab Occur

Schedule P - Part 2R - Prod Liab Claims

Schedule P - Part 2S

Schedule P - Part 2T

# SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

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					(\$000 OI	MITTED)						Number of
	1	2	3	4	5	6	7	8	9	10	Number of	Claims
Years in Whicl											Claims Closed With	Closed Without
Losses Were											Loss	Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Payment	Payment
1. Prior				11	11	11	11	11	11	11	4	0
2. 2007											67	19
3. 2008	xxx		1,077	1,061	1,148	1,226	1,226	1,227	1,227	1,227	146	
4. 2009		xxx	1,483	2,403	2,417	2,620	2,683	2,745	2,754	2,755		
5. 2010	xxx	xxx	XXX	8,478	10 ,048	10 , 263		10,862	11,128		1,455	
6. 2011		xxx	XXX	xxx				35,632	35,844	35,756	7,896	2,959
7. 2012	xxx	xxx	XXX	xxx	XXX	41,394		48,235	48,931			9,345
8. 2013		xxx	XXX	XXX	XXX	XXX		20 , 542	21,893	21,103	6 , 603	2,788
9. 2014	xxx	xxx	XXX	XXX	XXX	XXX	xxx	20 , 685	23,200	21,159	7 , 395	3,116
10. 2015		xxx	XXX	xxx	XXX	XXX	XXX	xxx		31,275		3, 559
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,321	7,058	2,228

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

1.	Prior		0	0	0	0	0	0	0	0	0	0	0
2.	2007	0	0	0	0	0	0	0	0	0	0	0	0
3.	2008	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2009	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2010	XXX	XXX	XXX	0	<b>N</b> .Î			0	0	0	0	0
6.	2011	XXX	XXX	XXX	XXX	N	UNE		0	0	0	0	0
7.	2012	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2013	XXX	xxx	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10.	2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx	0	0	0	0
11.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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

1.	Prior	000	0	0	0	0	0	0	0	0	0	0	0
2.	2007	0	0	0	0	0	0	0	0	0	0	0	0
3.	2008	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2009	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2010	XXX	XXX	XXX	0				0	0	0	0	0
6.	2011	XXX	XXX	XXX	XXX	N '	UINE		0	0	0	0	0
7.	2012	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2013	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10.	2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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

1. Prior		0	0	0	0	0	0	0	0	0	0	0
2. 2007	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008	xxx	0	0	0	0	0	0	0	0	0	0	0
4. 2009	XXX	xxx	0	0	0	0	0	0	0	0	0	0
5. 2010	xxx		XXX	0				0	0	0	0	0
6. 2011	XXX	xxx	XXX	XXX	N '	UNE	0	0	0	0	0	0
	xxx						0	0	0	0	0	0
8. 2013	xxx	XXX	XXX	xxx	XXX	xxx	0	0	0	0	0	0
9. 2014	xxx	0	0	0	0	0						
10. 2015	xxx	0	0	0	0							
11. 2016	XXX	0	0	0								

### **SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL**

1.	Prior	000	0	0	0	0	0	0	0	0	0	0	0
2.	2007	0	0	0	0	0	0	0	0	0	0	0	0
3.	2008	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2009	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2010	XXX	XXX	XXX	0			0	0	0	0	0	0
6.	2011	XXX	XXX	XXX	XXX	N	UNE		0	0	0	0	0
7.	2012	XXX	XXX	XXX	XXX	XXX		0	0	0	0	0	0
8.	2013	XXX	XXX	XXX	XXX	XXX		0	0	0	0	0	0
9.	2014	XXX	XXX	XXX	XXX	XXX		xxx	0	0	0	0	0
10.	2015	xxx	XXX	XXX	XXX			xxx	xxx	0	0	0	0
11.	2016	XXX	0	0	0								

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

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CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END

Т

						MITTED)						Number of
	1	2	3	4	5	6	7	8	9	10	Number of	Claims
											Claims	Closed
Years in Which											Closed With	Without
Losses Were											Loss	Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Payment	Payment
1. Prior	000	0	0	0	0	0	0	0	0	0	0	0
2. 2007	0	0	0	0			0	0	0	0	0	0
3. 2008	XXX	0	0	0	N (	() \  +	0	0	0	0	0	0
4. 2009	XXX	XXX	0	0	0		0	0	0	0	0	0
5. 2010	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2011	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2012	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2015	XXX	XXX	XXX	xxx	XXX	XXX	XXX	XXX	0	0	0	0
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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

1.	Prior	000	0	0	0	0	0	0	0	0	0	0	0
2.	2007	0	0	0	0	0	0	0	0	0	0	0	0
3.	2008	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2009	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2010	xxx	XXX	XXX	0			0	0	0	0	0	0
6.	2011	xxx	XXX	XXX	xxx	N	UNE			0			0
7.	2012	xxx	XXX	XXX	xxx			0	0	0	0	0	0
8.	2013	xxx	XXX	XXX	xxx	xxx	XXX	0	0	0	0	0	0
9.	2014	xxx	0	0	0	0	0						
10.	2015	xxx		XXX		xxx			xxx	0	0	0	0
11.	2016	XXX	0	0	0								

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

									_				
1.	Prior	000	0	0	0	0	0	0	0	0	0	XXX	XXX
2.	2007	0	0	0	0	0	0	0	0	0	0	XXX	XXX
3.	2008	XXX	0	0	0	0	0	0	0	0	0	xxx	XXX
4.	2009	xxx	XXX	0	0	0	0	0	0	0	0	XXX	XXX
5.	2010	xxx	XXX	xxx	0				0	0	0	xxx	XXX
6.	2011	XXX	XXX	XXX	XXX	N	UNE		0	0	0	xxx	XXX
7.	2012	xxx	XXX	XXX	xxx			0	0	0	0	xxx	xxx
8.	2013	xxx	xxx	xxx	xxx	XXX	xxx	0	0	0	0	xxx	XXX
9.	2014	xxx	0	0	0	xxx	XXX						
10.	2015	XXX	0	0	xxx	XXX							
11.	2016	XXX	0	XXX	XXX								

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

	_	-				-	-						
1.	Prior	000	0	0	0	0	0	0	0	0	0	0	0
2.	2007	0	6	6	6	6	6	6	7	7	7	1	1
3.	2008	XXX	2	5	5	5	5	5	5	5	5	2	2
4.	2009	XXX	XXX	0	1	1	2	6	15	62	62	1	3
5.	2010	XXX	XXX	XXX	0	0	1	(2)	11	30			6
6.	2011	XXX	XXX	XXX	XXX	1		(29)	18	55	55		10
7.	2012	XXX	XXX	XXX	XXX	XXX	5	7		72	115		14
8.	2013	XXX	XXX	XXX	XXX	XXX	XXX	6		110	109		10
9.	2014	XXX	69		103	6	5						
10.	2015	XXX	XXX	7		6	9						
11.	2016	XXX	XXX	XXX	6	2	2						

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

1.	Prior	000	0	0	0	0	0	0	0	0	0	0	0
2.	2007	0	0	0	0	0	0	0	0	0	0	0	0
3.	2008	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2009	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2010	XXX	XXX	XXX	0				0	0	0	0	0
6.	2011	XXX	XXX	XXX	XXX	N	UNE		0	0	0	0	0
7.	2012	XXX	XXX	XXX	XXX	XXX		0	0	0	0	0	0
8.	2013	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2014	XXX	0	0	0	0	0						
10.	2015	XXX	0	0	0	0							
11.	2016	XXX	0	0	0								

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

	CUMUL	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END										
		-	-		(\$000 O	MITTED)	_	-	-			Number of
	1	2	3	4	5	6	7	8	9	10	Number of	Claims
											Claims	Closed
Years in Which											Closed With	
Losses Were											Loss	Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	675	1.020	XXX	XXX
010												
3. 2016	XXX	xxx	XXX	xxx	XXX	XXX	xxx	xxx	XXX	581	xxx	XXX
3. 2010	~~~	~~~~	~~~		~~~	~~~		~~~	~~~	301		~~~

### SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior	xxx	xxx	xxx	xxx	xxx		xxx	.000	0	0	0	0
2. 2015	XXX	xxx	xxx	xxx		ONE	- xxx	xxx	0	0	0	0
3. 2016	XXX	xxx	XXX	0	0	0						

# SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior	XXX	.000	.0	0	xxx	xxx						
2. 2015.		xxx	xxx	xxx	xxN	ONE	xxx	xxx	0	0	xxx	xxx
3. 2016	xxx	xxx	0	XXX	xxx							

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

1. Prior	xxx		.0		xxx	xxx						
2. 2015		xxx	xxx	xxx	× N	ONE	xxx	xxx	0	0	xxx	xxx
3. 2016	xxx	0	xxx	xxx								

## **SCHEDULE P - PART 3M - INTERNATIONAL**

-													
1.	Prior	000	0	0	0	0	0	0	0	0	0	xxx	xxx
2.	2007	0	0	0	0	0	0	0	0	0	0	xxx	xxx
3.	2008	xxx	0	0	0	0	0	0	0	0	0	xxx	xxx
4.	2009	xxx	xxx	0	0	0	0	0	0	0	0	xxx	xxx
5.	2010	xxx	xxx.	xxx.	0			0	0	0	0	xxx	xxx
6.	2011	xxx	xxx		xxx	N	ONE	0	0	0	0	xxx	xxx
7.	2012	xxx	xxx	xxx.	xxx	xxx	0	0	0	0	0	xxx	xxx
8.	2013	xxx	xxx		xxx	xxx		0	0	0	0	xxx	
9.	2014	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0	0	0	xxx	xxx
10.	2015	xxx			xxx	xxx	xxx		xxx	0	0	xxx	xxx
	2016	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0	xxx	xxx

Schedule P - Part 3N

## NONE

Schedule P - Part 30

Schedule P - Part 3P

Schedule P - Part 3R - Prod Liab Occur

Schedule P - Part 3R - Prod Liab Claims

Schedule P - Part 3S

Schedule P - Part 3T

### SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

	BULK AND IE	BNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COST	<b>F CONTAINMEN</b>	IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
Years in Which	1	2	3	4	5	6	7	8	9	10
Losses Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	36	7	6	3	0	0	0	0	0	0
2. 2007					0	0		0	0	0
3. 2008	xxx				17	0	0	0	0	0
4. 2009	xxx	XXX	762				7	0	2	1
5. 2010	xxx	XXX	XXX	1,271		202	40	0	21	6
6. 2011	XXX	XXX	XXX	XXX	2,070			516	203	45
7. 2012	xxx	XXX	xxx	XXX			666	1 , 560	237	
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014	xxx	XXX	xxx	XXX		xxx			2,438	2,656
10. 2015	xxx	XXX	xxx	XXX		XXX	xxx	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,840

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

1. Pri	rior	0	0	0	0	0	0	0	0	0	0
2. 20	007	0	0	0	0	0	0	0	0	0	0
3. 20	800	XXX	0	0	0	0	0	0	0	0	0
4. 20	009	XXX	XXX	0	0	0	0	0	0	0	0
5. 20	)10	XXX	XXX	XXX	····· R			0	0	0	0
6. 20	)11	XXX	XXX	XXX	XXX		0	0	0	0	0
7. 20	)12	XXX	XXX	XXX	XXX	xxx	0	0	0	0	0
8. 20	)13	XXX	XXX	XXX	XXX	xxx	xxx	0	0	0	0
9. 20	)14	XXX	XXX	XXX	XXX	xxx	xxx	xxx	0	0	0
10. 20	)15	XXX	XXX	XXX	XXX	xxx	xxx		XXX	0	0
11. 20	016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

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

### **SCHEDULE P - PART 4D - WORKERS' COMPENSATION**

(EXCLUDING EXCESS WORKERS' COMPENSATION)

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

### **SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL**

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

# SCHEDULE P - PART 4F - SECTION 1 - MEDICAL

 PROFESSIONAL LIABILITY - OCCURRENCE

 BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)

	DOLIVINO									<i>(</i> 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Years in Which Losses Were	1	2	3	4	5	6	7	8	9	10
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2007	0	0	0	0	0	0	0	0	0	0
3. 2008	XXX	0	0	0	0	0	0	0	0	0
4. 2009	XXX		0	Þ	() N  0 -	0	0	0	0	0
5. 2010	XXX	XXX	XXX	0		0	0	0	0	0
6. 2011	XXX	xxx	xxx	XXX	0	0	0	0	0	0
7. 2012	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2007	0	0	0	0	0	0	0	0	0	0
3.	2008	XXX	0	0	0	0	0	0	0	0	0
4.	2009	xxx	xxx	0	0	0	0	0	0	0	0
5.	2010	XXX	xxx	XXX	R			0	0	0	0
6.	2011		xxx		XXX	U ( ) Nd		0	0	0	0
									0	0	
8.	2013		XXX	XXX	XXX	XXX	XXX	0	0	0	0
9.	2014	xxx	xxx	xxx					0	0	0
10.	2015	xxx	xxx	xxx	XXX				xxx	0	0
11.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2007	0	0	0	0	0	0	0	0	0	0
3. 2008		0	0	0	0	0	0	0	0	0
4. 2009		XXX	0	0	0	0	0	0	0	0
5. 2010		XXX	XXX	R			0	0	0	0
	XXX						0	0	0	0
7. 2012			XXX	xxx		0	0	0	0	0
8. 2013		XXX	XXX	XXX		XXX	0	0	0	0
9. 2014		XXX	XXX	XXX		XXX	xxx	0	0	0
10. 2015		xxx	XXX	xxx		xxx		xxx	00	0
11. 2016	XXX	0								

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

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2007	0	0	0	0	0	0	1	0	0	0
3. 2008		0	0	0	0	0	0	0	0	0
4. 2009	xxx	xxx	3	3	2	2	(10)	0	0	0
5. 2010		XXX	XXX	14	9	6		0	2	1
6. 2011	xxx	xxx	XXX	XXX	21	16	(13)	54	17	6
7. 2012		XXX	XXX	XXX	XXX					
8. 2013		XXX	XXX	XXX		XXX	645		61	51
9. 2014		XXX	XXX	XXX	XXX	XXX				
10. 2015		xxx	xxx	xxx	XXX			XXX		
11. 2016	XXX	XXX	XXX	78						

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

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

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

	BULK AND I	BNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
Years in Which	1	2	3	4	5	6	7	8	9	10
Losses Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
incuired	2007	2006	2009	2010	2011	2012	2013	2014	2015	2010
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	210		9
0 0045	2007	2004	2007	N///		2007		N////	25	47
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2016	XXX	xxx	xxx	xxx	xxx	xxx	xxx	XXX	xxx	60

### SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior					XXX	XXX		0	0	0
2. 2015				<b>N</b>	IQNE	xxx		xxx	0	0
3. 2016	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0

### SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior		xxx	xxx	xxx	XXX	xxx	xxx	0	0	0
2. 2015		xxx			IONE	xxx	xxx	xxx	0	0
3. 2016	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0

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

1. Prior	xxx	xxx			XXX	XXX		0	0	0
2. 2015	xxx		xxx		IONE	XXX		xxx	0	0
3. 2016	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0

### **SCHEDULE P - PART 4M - INTERNATIONAL**

1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2007	0	0	0	0	0	0	0	0	0	0
3.	2008	xxx	0	0	0	0	0	0	0	0	0
4.	2009	xxx	xxx	0	0	0	0	0	0	0	0
5.	2010	xxx	xxx	xxx	0		0	0	0	0	0
6.	2011	xxx	xxx	xxx	XXX <b>N</b>		0	0	0	0	0
7.	2012	xxx	xxx	xxx	xxx	xxx	0	0	0	0	0
8.	2013	xxx	xxx	xxx	xxx	xxx	xxx	0	0	0	0
9.	2014	xxx	xxx	xxx	XXX	xxx	xxx	xxx	0	0	0
10.	2015	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0	0
11.	2016	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0

Schedule P - Part 4N

## NONE

Schedule P - Part 40

Schedule P - Part 4P

Schedule P - Part 4R - Prod Liab Occur

Schedule P - Part 4R - Prod Liab Claims

Schedule P - Part 4S

Schedule P - Part 4T - Warranty

## SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS

					SECTION					
		CUMULA	ATIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT	DIRECT AND A	SSUMED AT YE	AR END	
Years in	1	2	3	4	5	6	7	8	9	10
Which										
Premiums Were Earned										
and Losses										
Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	(17)	1	0	0	0	0	0	0	0	0
2. 2007		63	64	67	67	67	67	67	67	67
3. 2008	xxx	83	144	145	146	146	146	146	146	146
4. 2009	xxx	xxx	181			313	315	317		
5. 2010	xxx	xxx	xxx	1 , 163	1,314	1,354	1,378	1,445	1,454	1,455
6. 2011	xxx	xxx	XXX	XXX			7 ,731	7 ,875	7,891	
7. 2012	xxx	xxx	XXX	XXX	XXX	14,570				
8. 2013	xxx	xxx	XXX	XXX	XXX	XXX	5,211	6,406	6,568	
9. 2014	xxx	xxx	XXX	XXX	xxx.	XXX	xxx	6,073	7 , 285	
10. 2015	xxx	xxx	xxx	XXX	xxx.	XXX	xxx	xxx		10,676
11. 2016	xxx	XXX	xxx	xxx	xxx	XXX	xxx	xxx	xxx	7,058

					SECTION 2					
			NUMBER	R OF CLAIMS O	UTSTANDING [	DIRECT AND AS	SSUMED AT YE	AR END		
Years in Which Premiums Were Earned and Losses	1	2	3	4	5	6	7	8	9	10
Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	1	1	1	0	0	0	0	0	0	0
2. 2007	42	4	3	0	0	0	0	0	0	0
3. 2008	XXX	72	7	3	4	0	0	0	0	0
4. 2009	XXX	XXX	161	5	8	6	2	0	1	0
5. 2010	XXX	XXX	XXX	177	22	20	19	11	3	1
6. 2011	XXX	XXX	XXX	XXX	462	56	29	20	10	4
7. 2012	XXX	XXX	XXX	XXX	XXX	13,590	568			
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	831	150		51
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			76
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,117	81
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,002

					<b>SECTION 3</b>					
				NUMBER OF C			ND ASSUMED A			
Years in Which Premiums	1	2	3	4	5	6	7	8	9	10
Were Earned										
and Losses Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior		0	(41)	(1)	0	0	0	0	0	0
2. 2007			86			86				86
3. 2008	xxx					228				
4. 2009	xxx			474						
5. 2010	xxx		xxx	1,876	1,962	2,014	2,049	2,146	2,151	2, 151
6. 2011	xxx	xxx	xxx	xxx		10 , 525	10 , 650	10,843		10 , 859
7. 2012	xxx	XXX	xxx	xxx	XXX					
8. 2013	xxx	XXX	XXX	XXX	XXX	xxx				9,442
9. 2014	xxx		xxx	xxx	xxx	xxx	xxx	9,764		10 , 587
10. 2015	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		14,316
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx	XXX	10,288

Schedule P - Part 5B- SN1

NONE

Schedule P - Part 5B- SN2

Schedule P - Part 5B- SN3

Schedule P - Part 5C- SN1

Schedule P - Part 5C- SN2

Schedule P - Part 5C- SN3

Schedule P - Part 5D- SN1

Schedule P - Part 5D- SN2

Schedule P - Part 5D- SN3

Schedule P - Part 5E- SN1

Schedule P - Part 5E- SN2

Schedule P - Part 5E- SN3

Schedule P - Part 5F- SN1A

Schedule P - Part 5F- SN2A

Schedule P - Part 5F- SN3A

Schedule P - Part 5F- SN1B NONE Schedule P - Part 5F- SN2B NONE

Schedule P - Part 5F- SN3B

## SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END										
Years in	1	2	3	4	5	6	7	8	9	10
Which		-	ů		°,	C C		Ū	, i i i i i i i i i i i i i i i i i i i	
Premiums										
Were Earned										
and Losses Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
were incurred	2007	2006	2009	2010	2011	2012	2013	2014	2015	2010
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2007	0	0	1	1	1	1	1	1	1	1
3. 2008	xxx	0	2	2	2	2	2	2	2	2
4. 2009	xxx		0	0	0	0	0	0	1	1
5. 2010	xxx	xxx	xxx	0	0	0	0	2	3	3
6. 2011	xxx	xxx	xxx	XXX	0	0	1	4	5	5
7. 2012	xxx	xxx	XXX	XXX	xxx	1	5	7	7	8
8. 2013	xxx	xxx	XXX	XXX	XXX	XXX	1	3	5	5
9. 2014	xxx	6	6	6						
10. 2015	xxx	2	6							
11. 2016	xxx	2								

					SECTION 2A					
			NUMBER	R OF CLAIMS O	UTSTANDING [	DIRECT AND AS	SSUMED AT YE	AR END		
Years in Which Premiums Were Earned and Losses	1	2	3	4	5	6	7	8	9	10
Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2007	0	0	0	0	0	0	1	0	0	0
3. 2008	xxx	2	0	0	0	0	0	0	0	0
4. 2009	xxx	xxx	2	2	2	2	2	2	0	0
5. 2010	XXX	XXX	XXX	2	2	2	5	2	0	0
6. 2011	XXX	XXX	XXX	XXX	5	6	3	2	0	0
7. 2012	XXX	XXX	XXX	XXX	XXX	8	5	4	4	3
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	2	3	5	3
9. 2014	xxx	XXX	XXX	XXX	xxx	XXX	XXX	0	0	0
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx	15	11
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3

					<b>SECTION 3A</b>					
			CUMULATIVE	NUMBER OF C	CLAIMS REPOR	TED DIRECT A	ND ASSUMED A	AT YEAR END		
Years in Which Premiums Were Earned and Losses	1	2	3	4	5	6	7	8	9	10
Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2007	0	2	1	1	1	1	2	2	2	2
3. 2008	XXX	3	4	4	4	4	4	4	4	4
4. 2009	XXX	XXX	2	2	2	2	4	4	4	4
5. 2010	XXX	XXX	XXX	4	5	6	9	9	9	9
6. 2011	XXX	XXX	XXX	XXX	7	12	13	15	15	15
7. 2012	XXX	XXX	XXX	XXX	xxx	17	22	25	25	25
8. 2013	XXX	XXX	XXX	XXX	xxx	XXX	7	12	16	18
9. 2014	XXX	XXX	XXX	XXX	xxx	XXX	xxx	10	11	11
10. 2015	XXX	XXX	XXX	XXX	xxx	XXX	xxx	XXX	21	26
11. 2016	XXX	XXX	XXX	XXX	xxx	XXX	xxx	XXX	XXX	7

### 79

Schedule P - Part 5H- SN1B NONE Schedule P - Part 5H- SN2B NONE Schedule P - Part 5H- SN3B NONE Schedule P - Part 5R- SN1A NONE

Schedule P - Part 5R- SN2A

Schedule P - Part 5R- SN3A

Schedule P - Part 5R- SN1B

Schedule P - Part 5R- SN2B

Schedule P - Part 5R- SN3B

Schedule P - Part 5T- SN1

Schedule P - Part 5T- SN2

Schedule P - Part 5T- SN3

Schedule P - Part 6C - SN1

Schedule P - Part 6C - SN2

Schedule P - Part 6D - SN1

Schedule P - Part 6D - SN2 NONE Schedule P - Part 6E - SN1 NONE Schedule P - Part 6E - SN2 NONE Schedule P - Part 6H - SN1A NONE Schedule P - Part 6H - SN2A NONE Schedule P - Part 6H - SN1B NONE Schedule P - Part 6H - SN2B NONE Schedule P - Part 6M - SN1 NONE Schedule P - Part 6M - SN2 NONE Schedule P - Part 6N - SN1 NONE Schedule P - Part 6N - SN2 NONE Schedule P - Part 60 - SN1 NONE Schedule P - Part 6O - SN2 NONE Schedule P - Part 6R - SN1A NONE Schedule P - Part 6R - SN2A

## NONE

Schedule P - Part 6R - SN1B

## NONE

Schedule P - Part 6R - SN2B

Schedule P - Part 7A - Section 1

Schedule P - Part 7A - Section 2

Schedule P - Part 7A - Section 3

Schedule P - Part 7A - Section 4

Schedule P - Part 7A - Section 5

Schedule P - Part 7B - Section 1

Schedule P - Part 7B - Section 2

Schedule P - Part 7B - Section 3

Schedule P - Part 7B - Section 4

Schedule P - Part 7B - Section 5

Schedule P - Part 7B - Section 6

Schedule P - Part 7B - Section 7

## SCHEDULE P INTERROGATORIES

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 to be included. 1.

g endorsement, or "ERE") benefits in the event of Death, Disabil swer to question 1.1 is "no", leave the following questions blank	lity, or Retirement (DDR) at a reduced	charge or at no additional	Yes [	] No [X]
	e), as reported, explicitly or not, elsewh			
e company report any DDR reserve as Unearned Premium Res	erve per SSAP #65?		Yes [	] No [ X ]
e company report any DDR reserve as loss or loss adjustment e	expense reserve?		Yes [	] No [X]
		ne Underwriting and Yes [	] No [	] N/A [ X ]
	e reserve, please complete the followin	ng table corresponding to		
	Schedule P, Part 1F, Me	dical Professional Liability		
Years in Which Premiums Were Earned and Losses Were Incurred	1 Section 1: Occurrence	2 Section 2 <sup>-</sup> Claims-Made		
1.601         Prior           1.602         2007.           1.603         2008.           1.604         2009.           1.605         2010.           1.606         2011.           1.607         2012.				
	g endorsement, or "ERE") benefits in the event of Death, Disabi swer to question 1.1 is "no", leave the following questions blank is: the total amount of the reserve for that provision (DDR Reserve?) e company report any DDR reserve as Unearned Premium Res e company report any DDR reserve as loss or loss adjustment e mpany reports DDR reserve as Unearned Premium Reserve, d ent Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) C mpany reports DDR reserve as loss or loss adjustment expense nese reserves are reported in Schedule P: Years in Which Premiums Were Earned and Losses Were Incurred 1.601 Prior 1.602 2007 1.603 2008 1.604 2009 1.605 2010 1.606 2011 1.607 2012	g endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced swer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes" is: the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewh? e company report any DDR reserve as Unearned Premium Reserve per SSAP #65? e company report any DDR reserve as loss or loss adjustment expense reserve? mpany reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the ent Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? mpany reports DDR reserve as loss or loss adjustment expense reserve, please complete the following these reserves are reported in Schedule P:   Vears in Which Premiums Were Earned and Losses Were Incurred  Vears in Which Premiums Were Earned and Losses Were Incurred  Net Column 24: Total Net Los Schedule P, Part 1F, Me Column 24: Total Net Los Losses Unearned Premium and the total section 1: Occurrence  1.601 Prior 1.602 2007 1.603 2008 1.604 2009 1.605 2010 1.605 2010 1.605 2011 1.607 2012	the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in ?	g endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional results in the event of pleath, Disability, or Retirement (DDR) at a reduced charge or at no additional swer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following serves to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following serves as the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in second premium Reserve per SSAP #65?       Yes       [         e company report any DDR reserve as Unearned Premium Reserve, per SSAP #65?       Yes       [         mapny reports DDR reserve as loss or loss adjustment expense reserve?       Yes       [         mapny reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to reserves are reported in Schedule P. Part 11, plus 11.2?       Yes       ]       No [         mapny reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to reserves are reported in Schedule P. Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid       1       1         Years in Which Premiums Were Earned and Losses Were Incurred       1       Section 1: Occurrence       Section 2: Claims-Made       2         1.601       2007       1       1       1       1       1       1       1       1       1

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 [	Х	]
	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.						
_							

0

0

What were the net premiums in force at the end of the year for: (in thousands of dollars) 5.

		5.1 Fidelity	\$	
		5.2 Surety	\$	
6.	Claim count information is reported per claim or per claimant. (indicate which) If not the same in all years, explain in Interrogatory 7.			CLAIMANT
7.1	The information provided in Schedule P will be used by many persons to estimate the adequacy of the current los reserves, among other things. Are there any especially significant events, coverage, retention or accounting char occurred that must be considered when making such analyses?		Yes [	] No [X]
7.0				

7.2 An extended statement may be attached.

1.610

1.611

1.612

2015

2016.

Totals

#### SCHEDULE T – PART 2 INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN Allocated By States and Territories

Allocated By States and Territories Direct Business Only							
		1 Life	2	3 Disability	4 Long-Term Care	5	6
States, Etc.		Life (Group and Individual)	Annuities (Group and Individual)	Income (Group and Individual)	(Group and Individual)	Deposit-Type Contracts	Totals
1. Alabama	AL						
2. Alaska							
3. Arizona							
4. Arkansas							
5. California							
6. Colorado							
7. Connecticut	CT						
8. Delaware	DE						
9. District of Columbia	DC						
10. Florida	FL						
11. Georgia	GA						
12. Hawaii	HI						
13. Idaho							
14. Illinois							
15. Indiana							
16. lowa							
16. lowa							
18. Kentucky							
19. Louisiana							
20. Maine							
21. Maryland							
22. Massachusetts							
23. Michigan	MI						
24. Minnesota	MN						
25. Mississippi	MS						
26. Missouri							
27. Montana		N					
28. Nebraska		<b>`</b>					
29. Nevada							
30. New Hampshire							
31. New Jersey							
32. New Mexico							
33. New York							
34. North Carolina					•••••		
35. North Dakota							
36. Ohio							
37. Oklahoma							
38. Oregon							
39. Pennsylvania	PA						
40. Rhode Island	RI						
41. South Carolina	SC						
42. South Dakota							
43. Tennessee							
44. Texas							
45. Utah							
45. Utan							
47. Virginia							
48. Washington							
49. West Virginia							
50. Wisconsin							
51. Wyoming							
52. American Samoa	AS						
53. Guam	GU						
54. Puerto Rico							
55. US Virgin Islands							
56. Northern Mariana Islands							
57. Canada							
58. Aggregate Other Alien							
				^	^	^	
59. Totals		0	0	0	0	0	1

## 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
						Name of Securities Exchange if			Relationship		Type of Control (Ownership, Board,	If Control is		Is an SCA	
Group		NAIC Company		Federal	0.114	Publicly Traded (U.S. or	Names of Parent, Subsidiaries		to Reporting	Directly Controlled by	Management, Attorney-in-Fact,	Ownership Provide	Ultimate Controlling	Filing Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity UDP	(Name of Entity/Person)	BOARD		Entity(ies)/Person(s)	(Y/N)	
			. 26 - 1736008				NBIC HOLDINGS, INC				DUARD	0.0	NBIC HOLDINGS,	-	0
			20-3179005				NBIC FINANCIAL HOLDINGS , INC.	RI	UDP	NBIC HOLDINGS, INC	OWNERSHIP		INC.		0
	NARRAGANSETT BAY INSURANCE						NARRAGANSETT BAY INSURANCE						NBIC HOLDINGS,		
	COMPANY GROUP	43001	05-0394576				COMPANY		RE	NBIC FINANCIAL HOLDINGS, INC.	OWNERSHIP				0
	NARRAGANSETT BAY INSURANCE									NARRAGANSETT BAY INSURANCE			NBIC HOLDINGS,		
00497	COMPANY GROUP	. 14931	05-0197250				PAWTUCKET INSURANCE COMPANY	RI	IA	COMPANY	OWNERSHIP				0
													NBIC HOLDINGS,		
			26-3867627				NBIC SERVICE COMPANY, INC	RI	NIA	NBIC HOLDINGS, INC	OWNERSHIP		INC		0
													NBIC HOLDINGS,		
							NBIC E&S, INC	I A	I A	NBIC HOLDINGS, INC	OWNERSHIP				0
													NBIC HOLDINGS,		
00000							WESTWIND UNDERWRITERS, INC	DE	I A	NBIC HOLDINGS, INC	OWNERSHIP		INC		0
														1	
														· · · · · · · · · · · · · · · · · · ·	

Asterisk

Explanation

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## SCHEDULE Y

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

1	2	3	4	5	6 Purchases, Sales or	7 Income/ (Disbursements)	8	9	10	11	12	13 Reinsurance
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	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	Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
43001	05-0394576	NARRAGANSETT BAY INSURANCE COMPANY					(30,335,245)	v			(30, 335, 245)	
14931	05-0197250	PAWTUCKET INSURANCE COMPANY.										
	26-3867627	NBIC SERVICE COMPANY, INC										
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9999999	Control Totals		0	0	0	0	0	0	ХХХ	n	0	0
5555555			0	0	0	0	0	0	777	0	U	0

## 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.		YES
6.	Will 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.		YES
	JUNE FILING	
9.		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 <b>NO</b> 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 <b>SEE EXPLANATION</b> and provide an explanation following the interrogatory questions.	
	MARCH FILING	
12.		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?	N0
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?	N0
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	N0
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	N0
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?	NO
23.	Will the Bail Bond 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 partner 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?	N0

.NO...

..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?

24. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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?

	APRIL FILING						
29.	Will the Credit Insurance Experience Exhibit be filed with the 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?	N0					
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?	N0					
33.	Will the regulator only (non-public) Supplemental Health Care Exhibit's 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?	N0					
	AUGUST FILING						
35.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES					
Explar	nation:						

13.

12.	
13.	
14.	
15.	
16.	
17.	
18.	
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22.	
23.	
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ANNUAL STATEMENT FOR THE YEAR 2016 OF THE NARRAGANSETT BAY INSURANCE COMPANY SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

## **OVERFLOW PAGE FOR WRITE-INS**

P011 Additional Aggregate Lines for Page 11 Line 24. \*EXEXP - Underwriting and Investment - Part 3 - Expenses

	1	2	3	4
	Loss Adjustment	Other Underwriting		
	Expenses	Expenses	Investment Expenses	Total
2404. INVESTMENT FEES				
2497. Summary of remaining write-ins for Line 24 from page 11	0	0	233,866	233,866

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