

PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

# **ANNUAL STATEMENT**

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

# **PAWTUCKET INSURANCE COMPANY**

		_	
NAIC Group Code 0497 ,	0497 NAIC Company 0	Code <u>14931</u> Emplo	oyer's ID Number 05-0197250
(Current Period)	(Prior Period)		
Organized under the Laws of	Rhode Island	, State of Domicile or Port of E	ntry Rhode Island
Country of Domicile		United States	
Incorporated/Organized	06/19/1848	Commenced Business	02/10/1849
Statutory Home Office	25 Maple Street		vtucket, RI, US 02860-2104
	(Street and Number)		or Town, State, Country and Zip Code)
Main Administrative Office	25 Maple Street	Pawtucket, RI, US 02860-2	401-725-5600
	(Street and Number)	(City or Town, State, Country and Zip	
	P. O. Box 820	. /	ket, RI, US 02862-0820
	and Number or P.O. Box)	· · ·	n, State, Country and Zip Code)
Primary Location of Books and Records	25 Maple Street (Street and Number)	City or Town, State, Country	
Internet Web Site Address	()	/ww.pawtucketinsurance.com	
Statutory Statement Contact	Laura Leigh Jones		401-495-6014
	(Name)	(Area C	code) (Telephone Number) (Extension)
NBIC-ComplianceInbo		401-	728-0680
(E-Mail Addres	s)	(Fax	K Number)
	OFFIC	CERS	
Name	Title	Name	Title
Todd Christopher Hart ,	Chief Executive Officer	Stewart Horner Steffey Jr.	, Founder & Executive Chairman
Kirk Howard Lusk	Chief Financial Officer	Stephen Donald Zubiago	, Secretary
	OTHER O	FFICERS	
,	DIRECTORS O		,
Stewart Horner Steffey Jr.	Arnold Larry Chavkin	Alex Anatol Fridlyand	Srdjan Vukovic
Kristin Kelly Gilbert	Todd Christopher Hart	Dale Stephen Hammond	
State ofRHODE ISLAND			
	SS		
County ofPROVIDENCE			
The officers of this reporting entity, being duly s	worn, each depose and say that they are the	he described officers of said reporting e	ntity, and that on the reporting period stated
above, all of the herein described assets were t	the absolute property of the said reporting e	entity, free and clear from any liens or cl	laims thereon, except as herein stated, and
that this statement, together with related exhibit			
liabilities and of the condition and affairs of the and have been completed in accordance with the			
may differ; or, (2) that state rules or regulations			
knowledge and belief, respectively. Furthermor	e, the scope of this attestation by the descr	ibed officers also includes the related c	orresponding electronic filing with the NAIC,
when required, that is an exact copy (except fo		ing) of the enclosed statement. The elec	ctronic filing may be requested by various
regulators in lieu of or in addition to the enclose	o statement.		
Todd Christopher Hart	Kirk Howa		Stephen Donald Zubiago
Chief Executive Officer	Chief Finan	cial Officer a. Is this an origina	Secretary I filing? Yes [X] No []
Cubacribad and swarp to before me		a. is unis dil Uliyilia	1 mmg: 100 [ X ] 100 [ ]

Subscribed and sworn to before me this \_\_\_\_\_\_ day of \_

\_

b. If no:1. State the amendment number

- Date filed
   Number of pages attached



NAIC Group Code 0497		SS IN THE STATE		1			URING THE YEAR				Company Code 1	
	Membership Fees, L	Including 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	Written	Earned	Direct Business	Reserves	(deducting salvage)	Incurred	Direct Losses Unpaid	Paid	Incurred	Unpaid	Expenses	Licenses and Fee
. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
Private crop												
2.5 Private flood												
<ol> <li>Farmowners multiple peril</li> </ol>												
Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												,
6. Mortgage guaranty												
B. Ocean marine												
Inland marine												
. Financial guaranty		1										
. Medical professional liability												
2. Earthquake												
										•••••		
6. Group accident and health (b)												
Credit A & H (group and individual)										•••••		
5.1 Collectively renewable A & H (b)												
5.2 Non-cancelable A & H (b)												
5.3 Guaranteed renewable A & H (b)												
Non-renewable for stated reasons only (b)												
5.5 Other accident only												
6.6 Medicare Title XVIII exempt from state taxes or fees												
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.												
<ul> <li>3 Excess workers' compensation.</li> </ul>												
										•••••		
8. Products liability												
Private passenger auto no-fault (personal injury protection)										•••••		
0.2 Other private passenger auto liability												
0.3 Commercial auto no-fault (personal injury protection)												
0.4 Other commercial auto liability												
.1 Private passenger auto physical damage												
.2 Commercial auto physical damage												
Aircraft (all perils)												
B. Fidelity												
. Surety												
Burglary and theft												
. Boiler and machinery												
B. Credit												
. Warranty		1										
Aggregate write-ins for other lines of business		<u>۱</u>	0	n	0	0	0	Λ	0	0	0	
5. TOTAL (a)		0 ^	0 ^	0 ^	0	0 ^	0	0 ^	0 ^	0	0 ^	(8
FAILS OF WRITE-INS		0	0	0	0	0	0	0	0	0	0	(0
ALS OF WRITE-INS 01.												
		· [			1							
		•			· [		· [					
03.		· [			· [	^	·	·				
98. Summary of remaining write-ins for Line 34 from overflow page	ee	l0	0	0	l0	0	0	0	0	0	0	
99. Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	I 0	0	0	0		0		0	0	0	0	1



NAIC Group Code 0497		ESS IN THE STAT					URING THE YEAR				Company Code	
	Membership Fees, L	Including 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
Line of Dusing and	1 Direct Premiums	2 Direct Premiums	or Credited to Policyholders on	Unearned Premium	Paid	Direct Losses	Discont Long and Line and	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 F
Fire												
Private crop Private flood												
										•••••		
Farmowners multiple peril					(207)	(207)						
Homeowners multiple peril	••				(307)	(307)				•••••		
Commercial multiple peril (non-liability portion)												
Commercial multiple peril (liability portion)												
Mortgage guaranty												
Ocean marine												
Inland marine												
Financial guaranty												
Medical professional liability												
Earthquake												
Group accident and health (b)												
Credit A & H (group and individual)												
Collectively renewable A & H (b)												
Non-cancelable A & H (b)												
Guaranteed renewable A & H (b)												
Non-renewable for stated reasons only (b)												
Other accident only												
Medicare Title XVIII exempt from state taxes or fees												
All other A & H (b)												
Federal Employees Health Benefits Plan premium (b)												
Workers' compensation												
Other liability-Occurrence												
Other Liability-Claims-Made												
Excess workers' compensation												
Products liability												
Private passenger auto no-fault (personal injury protection)												
Other private passenger auto liability												
Commercial auto no-fault (personal injury protection)												
Other commercial auto liability												
Private passenger auto physical damage												
Commercial auto physical damage												
Aircraft (all perils)												
Fidelity												
Surety												
Burglary and theft												
Boiler and machinery												
Credit												
Warranty	1				[							
Aggregate write-ins for other lines of business	0	0	0	n	0	0	0	n	0	0	0	
TOTAL (a)	0	0	0	0	(307)	(307)	0	0 N	0	n l	0 N	
ILS OF WRITE-INS				0	(307)	(307)	0	0		0	0	+
1.												
2.	1											
3.												
<ol> <li>Summary of remaining write-ins for Line 34 from overflow page</li> </ol>	0	n	0	n	0	0	0	n	0	0	n	1
9. Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	···	10	······································	·······	l0	0	·0	0	0	······································	0	



	NAIC Group Code 0497		NESS IN THE STA ncluding Policy and	IE OF Maine	4	5	6	OURING THE YEAR	<b>2016</b> 8	9	10 NAIC	Company Code '	14931 12
		Membership Fees, Le	Policies not Taken	Dividends Paid or Credited to	Direct	Direct Losses	0		o Direct Defense and Cost Containment		Direct Defense and Cost Containment	Commissions	12
		Direct Premiums	Direct Premiums	Policyholders on	Unearned Premium	Paid	Direct Losses		Expense	Expense	Expense	and Brokerage	Taxes,
	Line of Business	Written	Earned	Direct Business	Reserves	(deducting salvage)	Incurred	Direct Losses Unpaid	Paid	Incurred	Unpaid	Expenses	Licenses and Fe
1.	Fire												
2.1	Allied lines										•••••		
	Multiple peril crop												
2.3	Federal flood												
2.4	Private crop												
2.5	Private flood												
3.	Farmowners multiple peril												
4.	Homeowners multiple peril												
5.1	Commercial multiple peril (non-liability portion)												
5.2	Commercial multiple peril (liability portion)												
6.	Mortgage guaranty					[							
8.	Ocean marine												
9.	Inland marine												
9. 0.	Financial guaranty	•											
											•••••		•••••
1.	Medical professional liability												
2.	Earthquake												
3.	Group accident and health (b)												
4.	Credit A & H (group and individual)												
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).												
5.5	Other accident only												
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.													••••••
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							)					l
1.2	Commercial auto physical damage												
2.	Aircraft (all perils)		[			[		T					
3.	Fidelity					[							
.3. :4.	Surety												
.4. 26.	Burglary and theft												
.o. ?7.	Boiler and machinery												
		·											
8.	Credit							•					
0.	Warranty						~			^		~	
4.	Aggregate write-ins for other lines of business	0	0	0	0	0	0		0	0	0	0	
5.	TOTAL (a)	0	0	0	0	(10)	(10	) 0	0	0	0	0	
	OF WRITE-INS												
401.													
402.													
403.													
498.	Summary of remaining write-ins for Line 34 from overflow page	0		0	0		0	0	0	0	0	0	
400	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0		0	0	0	0	0	0	1



NAIC Group Code 0497		S IN THE STATE O					URING THE YEAR		1		Company Code	
	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	Cost	10 Direct Defense and Cost	11	12
Line of Dusing and	1 Direct Premiums	2 Direct Premiums	or Credited to Policyholders on	Unearned Premium	Paid	Direct Losses	Direct Lange Line and	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 F
Fire												
Allied lines												
Multiple peril crop												
Federal flood												
Private crop												
Private flood												
Farmowners multiple peril												
Homeowners multiple peril												
Commercial multiple peril (non-liability portion)												
Commercial multiple peril (liability portion)												
Mortgage guaranty												
Ocean marine												
Inland marine	T											
Financial guaranty									[			
Medical professional liability												
Earthquake												
Group accident and health (b)												
Credit A & H (group and individual)												
Credit A & H (group and individual)	•											
Collectively renewable A & H (b).												
Non-cancelable A & H (b)												
Guaranteed renewable A & H (b)												
Non-renewable for stated reasons only (b)												
Other accident only Medicare Title XVIII exempt from state taxes or fees												
Medicare Title XVIII exempt from state taxes or fees												
All other A & H (b)												
Federal Employees Health Benefits Plan premium (b)												
Workers' compensation												
Other liability-Occurrence												
Other Liability-Claims-Made.												
Excess workers' compensation												
Products liability												
Private passenger auto no-fault (personal injury protection)	•											
Other private passenger auto liability												
Commercial auto no-fault (personal injury protection)												
Other commercial auto liability	•											
Private passenger auto hability					(4,000)							
Private passenger auto physical damage	•				(1,098)	(1,098)						
Commercial auto physical damage												
Aircraft (all perils)												
Fidelity												
Surety												
Burglary and theft												
Boiler and machinery												
Credit												
Warranty												
Aggregate write-ins for other lines of business	0	0		0	0	0	0	0	0	0	0	
TOTAL (a)	0	0	0	0	(1.098)	(1.098)	0	0	0	0	0	
OF WRITE-INS	1		0	, , , , , , , , , , , , , , , , , , ,	(1,000)	(1,000)			ľ			1
	1											
	1											
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	<u>^</u>	0	0	0	0	0	<u>^</u>	1
Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	· <b> </b> ···································	L	0	0	JU	0	L		0	LU		·····



NAIC Group Code 0497		SS IN THE STATE	OF New Jersey	4	5	6	URING THE YEAR	2016	9	10	Company Code '	14931
	Membership Fees, L	ess Return Premiums Policies not Taken	Dividends Paid	4 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												
3. Farmowners multiple peril												
<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)												
5.3 Sudranteed renewable A & H (b)												
5.4 Non-renewable for stated reasons only (b)										•••••		
<ul> <li>5.5 Other accident only</li> <li>5.6 Medicare Title XVIII exempt from state taxes or fees</li> </ul>												
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												
<ol> <li>Products liability</li> </ol>												
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												
4. Aggregate write-ins for other lines of business	0	n	0	n	0	0	0	n	0	n	n	
5. TOTAL (a)	n	<u> </u>	0		6,383		124.239	48,637		16.476		(8,09
ETAILS OF WRITE-INS			0	0	0,000	17,040	127,200	-0,001	00,140	10,70	0	(0,03
401.												
402.												
402.												
498. Summary of remaining write-ins for Line 34 from overflow page	0	∩	0	0	∩	0	<u>^</u>	0	0	0	<u>^</u>	
499. Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)		0 ^	0	0 ^	0	0	0	0 N	0	0 N	0 ^	
(a) Finance and service charges not included in Lines 1 to 35 \$	0	0	0	0	0	0	0	0	0	0	0	L



NAIC Group Code 0497		ESS IN THE STATE Including Policy and	OF New York		-				0		Company Code	14931 12
	Membership Fees, L	ess Return Premiums Policies not Taken	Dividends Paid	4 Direct	5 Direct Losses	6	7	8 Direct Defense and Cost	Cost	10 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												
3. Farmowners multiple peril												
4. Homeowners multiple peril						(12,341)			(12,341)			
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					[							
12. Earthquake					[							
<ol> <li>Group accident and health (b).</li> </ol>												
<ol> <li>Credit A &amp; H (group and individual)</li> </ol>												
<ul> <li>Is.1 Collectively renewable A &amp; H (b).</li> </ul>												
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												
15.6 Medicare Title XVIII exempt from state taxes or fees										•••••		
5.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
<ol> <li>Workers' compensation</li> </ol>												
17.1 Other liability-Occurrence												
7.2 Other Liability-Claims-Made.												
17.3 Excess workers' compensation												
<ol> <li>Products liability</li> </ol>												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit					[							
30. Warranty												
4. Aggregate write-ins for other lines of business	0	0	0	n	0	n	0	n	n	0	n	
35. TOTAL (a)	n	0	0 N	n	0	(12,341)	n	n	(12,341)	0	0 N	
ETAILS OF WRITE-INS		0	0	0		(12,041)		0	(12,041)	0	0	+
3401.												
3402.												
3403.							1					
3498. Summary of remaining write-ins for Line 34 from overflow page	0	<u>^</u>	0	<u>^</u>	∩	0	<u>^</u>	0	0	0	0	-
3498. Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)		0 N	0	0 N	0	0	0	0 N	0	0 N	0 ^	
(a) Finance and service charges not included in Lines 1 to 35 \$	0	0	0	0	0	0	0	0	0	0	0	└────



	NAIC Group Code 0497		SS IN THE STATE ( ncluding Policy and	OF Rhode Island	4	5	<b>D</b>	URING THE YEAR	<b>2016</b>	9	10 NAIC	Company Code	14931 12
		Membership Fees, L	ess Return Premiums Policies not Taken	Dividends Paid	4 Direct	5 Direct Losses	б		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 Fe
1.	Fire												
2.1	Allied lines												
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						(7,657)						
5.1	Commercial multiple peril (non-liability portion)							, · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		
5.2	Commercial multiple peril (liability portion)									1,868			
6.	Mortgage guaranty						, .			,	,		
8.	Ocean marine												
9.	Inland marine	Τ				[							
10.	Financial guaranty												
11.	Medical professional liability												
12.	Earthquake												
12.	Group accident and health (b)												
13. 14.	Credit A & H (group and individual)												
	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												
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)												
19.3 19.4	Other commercial auto liability	•											
19.4 21.1	Private passenger auto physical damage					(89)	(89)	-					
							(89)						
21.2	Commercial auto physical damage												
22.	Aircraft (all perils)												
23.	Fidelity							-					
24.	Surety												
26.	Burglary and theft												
27.	Boiler and machinery				•••••								
28.	Credit												
30.	Warranty												
34.	Aggregate write-ins for other lines of business		0	0	0	0	0	0	0	0	0	0	
35.	TOTAL (a)	0	0	0	0	(89)	(6,312)	49,508	23,012	16,101	13,250	0	(3,2
	OF WRITE-INS												
3401.													
3402.													
3403.													
	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	1	0			0			1



	NAIC Group Code 0497		IESS IN THE STAT ncluding Policy and	E OF Vermont	4	5				9		Company Code	14931 12
		Membership Fees, L	ess Return Premiums Policies not Taken	Dividends Paid	4 Direct	5 Direct Losses	6	7	8 Direct Defense and Cost	Direct Defense and Cost	10 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					(73)	(73)						
	Allied lines												
	Multiple peril crop												
	Federal flood												
	Private crop												
	Private flood												
3.	Farmowners multiple peril												
4.	Homeowners multiple peril					(852)	(852)						
5.1	Commercial multiple peril (non-liability portion)					· · · · · · · · · · · · · · · · · · ·							
5.2	Commercial multiple peril (liability portion)												
	Mortgage guaranty												
	Ocean marine												
0.	Financial guaranty												
	Medical professional liability												
	Earthquake												
3.	Group accident and health (b).												
4.	Credit A & H (group and individual)												
5.1	Collectively renewable A & H (b).												
5.2	Non-cancelable A & H (b)												
	Guaranteed renewable A & H (b)												
	Non-renewable for stated reasons only (b).												
	Other accident only Medicare Title XVIII exempt from state taxes or fees												
			•••••										
5.7	All other A & H (b)												
	Federal Employees Health Benefits Plan premium (b)												
	Workers' compensation												
7.1	Other liability-Occurrence												
7.2	Other Liability-Claims-Made												
7.3	Excess workers' compensation												
	Products liability												
9.1	Private passenger auto no-fault (personal injury protection)												
	Other private passenger auto liability												
7.Z	Commercial auto no-fault (personal injury protection)												
9.3		•• ••••••••••••••••••••••••••••••••••••									•••••		
	Other commercial auto liability												
	Private passenger auto physical damage												
	Commercial auto physical damage												
2.	Aircraft (all perils)												
J.	Fidelity												
	Surety												
	Burglary and theft												
	Boiler and machinery												
	Credit												
	Warranty												
	Aggregate write-ins for other lines of business	··	0	0	^	<u>^</u>	0	0	^	0	0	Λ	
÷	Aggregate white-ins for other lines of business	·· [v	Ö			(005)				0			
	TÕTAL (a) DF WRITE-INS	0	0	0	0	(925)	(925)	0	0	0	0	0	
AILS	DF WRITE-INS												
01.													
102.													
403.													
,98.	Summary of remaining write-ins for Line 34 from overflow page		0	0	0	0	0	0	0	0	0	0	
	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)			0		1	0			0			1



0

	NAIC Group Code 0497	Gross Premiums, Membership Fees, L	SS IN THE STATE Including Policy and ess Return Premiums Policies not Taken	3	4	5	6 6	URING THE YEAR	8 Direct Defense and	9 Direct Defense and	10 Direct Defense and	Company Code 1 11	14931 12
		1 Direct Premiums	2 Direct Premiums	Dividends Paid or Credited to Policyholders on	Direct Unearned Premium	Direct Losses Paid	Direct Losses		Cost Containment Expense	Cost Containment Expense	Cost 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
	Fire		0	0	0	(73)	(73)		0	0	0		
	Allied lines		0	0	0	0	0		0	0	0		
	Multiple peril crop		0	0	0	0	0		0	0	0	0	
	Federal flood		0	0	0	0	0		0	0	0	0	
	Private crop		0	0	0	0	0		0	0	0		
	Private flood		0	0	0	0	0		0	0	0		
	Farmowners multiple peril		0	0	0			400.050	74 040				/0.0
•	Homeowners multiple peril		0	0	0	5,224	(6,211)				21,476	0	
	Commercial multiple peril (non-liability portion)		0	0	0	0			0		0	0	
	Commercial multiple peril (liability portion)		0	0	0	0	1,434		0	1,868		0	
	Mortgage guaranty		0	l0	0	<u>0</u>	0	<u>0</u>	ļ0	<u>0</u>	0	0	
	Ocean marine		l0	l0	0	0	0	0	ļ0	0	0	0	
	Inland marine		0	l0	0	0	0	0	0	ļ0	0	0	
	Financial guaranty		0	0	0	0	0	0	0	0	0	0	
	Medical professional liability		0	0	0	0	0	0	0	0	0	0	
	Earthquake		0	0	0	0	0	0	0	0	0	0	
	Group accident and health (b)		0	0	0	0	0	0	0	0	0	0	
	Credit A & H (group and individual)	0	0	0	0	0	0	0	0	0	0	0	
	Collectively renewable A & H (b)	0	0	0	0	0	0	0	0	0	0	0	
	Non-cancelable A & H (b)	0	0	0	0	0	0	0	0	0	0	0	
.3	Guaranteed renewable A & H (b)		0	0	0	0	0	0	0	0	0	0	
.4	Non-renewable for stated reasons only (b)	0	0	0	0		0		0		0	0	
.5	Other accident only	0	0	0	0	0	0	0	0	0	0	0	
.6	Medicare Title XVIII exempt from state taxes or fees.		0	0	0	0	0	0	0	0		0	
.7	All other A & H (b).	0	0	0	0	0	0	0	0	0	0	0	
.8	Federal Employees Health Benefits Plan premium (b)	0	0	0	0	0	0	0	0	0	0	0	
	Workers' compensation	0	0	0	0	0	0	0	0	0	0	0	
	Other liability-Occurrence.	0	0	0	0	0	0	0	0	0	0	0	
	Other Liability-Claims-Made.	0	0	0	0	0	0	0	0	0	0	0	
	Excess workers' compensation.	0	0	0	0	0	0	0	0	0	0	0	
	Products liability	0	0	0	0	0	0	0	0	0	0	0	
	Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	
	Other private passenger auto liability	0	0	0	0	0	0	0	0	0	0	0	Λί
.3	Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0 0	
.4	Other commercial auto liability		0	0	0	0	0 0	0	0	0	0	0 0	
	Private passenger auto physical damage		0	0	0			0	0	0	0	0 0	
	Commercial auto physical damage		0	0	0	(1,197)			0	0	0	0	
	Aircraft (all perils)		0	0	0	0	0	0	0		0	0	
	Fidelity		0	0	0	0	0	0	0	0	0	0	
	Surety		0	0	0	0	0		0	0	0	0	
			0	0	0	0	0		0	0	0	0	
	Burglary and theft		l0		0		0			0	0		
	Boiler and machinery	· [0	l0		0	0	0			······	0		
	Credit	······································	l	l0	0								
	Warranty	· [0		·0	0	<u>0</u>	0		0	0	0	0	
	Aggregate write-ins for other lines of business	· [0	0		0				74.040		0	0	/ / / 7
	TÕTAL (a) OF WRITE-INS	0	0	0	0	3,954	(6,047)	173,747	71,649	83,905	29,726	0	(11,70
01.	OF WRITE-INS												
02.													
03.													
98.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	
00	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	1

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products

Schedule F - Part 1

# NONE

Schedule F - Part 2

Schedule F - Part 3

Schedule F - Part 4

Schedule F - Part 5

Schedule F - Part 6 - Section 1

Schedule F - Part 6 - Section 2

Schedule F - Part 7

Schedule F - Part 8

Schedule F - Part 9

Schedule H - Part 1

Schedule H - Part 2

Schedule H - Part 3

## NONE

Schedule H - Part 4

Schedule H - Part 5 - Health Claims NONE

# SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

Years in	Pr	emiums Earne	ed		(	Los	ss and Loss Ex	kpense Payme	ents			12
Which	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
Premiums Were				Loss Pa	ayments 5	Containmer 6	nt Payments	Payn 8	nents 9		Total	Number of
Earned				4	5	0	/	0	9	Salvage	Net Paid	Claims
and Losses										and	(Cols. 4 - 5	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	+ 6 - 7 + 8 - 9)	Direct and Assumed
			Ľ	Assumed	Ceded	Assumed	Ceded	Assumed	Cedeu	Received	. 0 - 3)	
1. Prior	XXX	XXX	XXX	5	0	72	0	0	0	1	77	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	5	0	72	0	0	0	1	77	XXX

					D.(					and Other	23	24	25
	0		Unpaid			se and Cost C				paid			
	Case 13	Basis 14	Bulk + 15	16 16	17	Basis 18	Bulk + 19	20	21	22		Total	Number of
	13	14	15	10	17	10	19	20			Salvage and	Net Losses and	Claims
	Direct and		Direct and		Direct and		Direct and		Direct and		Subrogation	Expenses	Direct and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	60	0	79	0	21	0	99	0	0	0	0	259	4
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	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.	60	0	79	0	21	0	99	0	0	0	0	259	4

		Total			Loss Expense P				34		nce Sheet
		d Loss Expense			ed/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	xxx		0	0	xxx		
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	139	120

Schedule P - Part 1B - Private Passenger

# NONE

Schedule P - Part 1C - Comm Auto/Truck

# SCHEDULE P - PART 1D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

					(	\$000 OMITTE	U)					
Years in	Pi	remiums Earne	ed	Loss and Loss Expense Payments           Defense and Cost         Adjusting and Other         10         11								12
Which	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
Premiums				Loss Pa	ayments	Containmer	t Payments	Payr	nents			
Were				4	5	6	7	8	9		Total	Number of
Earned										Salvage	Net Paid	Claims
and Losses Were			Net	Disectored		Discotored		Discotored		and	(Cols. 4 - 5	Reported
Incurred	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Subrogation Received	+ 6 - 7 + 8 - 9)	Direct and Assumed
incurreu	Assumed	Ceded	(COIS. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumeu	Ceded	Received	+ 0 - 9)	Assumed
1. Prior	XXX	xxx	XXX	10	0	0	0	0	0	0	10	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	10	0	0	0	0	0	0	10	XXX

		Losses	Unpaid		Defen	se and Cost C	Containment L	Inpaid		and Other baid	23	24	25
	Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	IBNR	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	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

	Losses and	Total d Loss Expense	s Incurred		oss Expense Pored/Premiums Ea		Nontabula	r Discount	34 Inter-		nce Sheet fter Discount
	26 Direct and	27	28	29 Direct and	30	31	32	33 Loss	Company Pooling Participation	35 Losses	36 Loss Expenses
	Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	xxx	xxx	XXX	xxx	xxx		0	0	xxx	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	0	0
4.	0	0	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	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	0	0
8.	0	0	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	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 1E - COMMERCIAL MULTIPLE PERIL (\$000 OMITTED)

Years in	(\$000 OWITTED)       Premiums Earned     Loss and Loss Expense Payments       1     2     3     Defense and Cost     Adjusting and Other     10     11									12		
Which	1	2	3							10	11	12
Premiums		-	Ŭ	Loss Pa	yments	Containmen		Payn				
Were				4	5	6	7	8	9	1	Total	Number of
Earned										Salvage	Net Paid	Claims
and Losses Were	Direct and		Net	Dise at an el		Direct and		Discotored		and	(Cols. 4 - 5	Reported
Incurred	Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Assumed	Ceded	Direct and Assumed	Ceded	Subrogation Received	+ 6 - 7 + 8 - 9)	Direct and Assumed
linouriou			r í		Ocaca	7.5501100	Ocaca	7.5501100	Ocaca	Received	, í	
1. Prior	XXX	XXX	XXX	(6)	0	0	0	0	0	0	(6)	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	(6)	0	0	0	0	0	0	(6)	xxx

		1 00000	Linnoid		Defer	and Coat (	Containment I	Inneid		and Other	23	24	25
	Case		Unpaid Bulk +	IBNR		ise and Cost C Basis	Bulk +		21	paid 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.	14	0	21	0	8	0	26	0	0	0	0	70	1
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	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.	14	0	21	0	8	0	26	0	0	0	0	70	1

		Total			Loss Expense P				34		nce Sheet
		d Loss Expense			ed/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	XXX		0	0	xxx		
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	0	0
4.	0	0	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	0	0
6.	0	0	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	35	35

Schedule P - Part 1F - Med Pro Liab Occ

Schedule P - Part 1F - Med Pro Liab Clm

Schedule P - Part 1G - Special Liability

Schedule P - Part 1H - Other Liab Occur NONE

Schedule P - Part 1H - Other Liab Claims

# NONE

# 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 Ex	pense Payme	ents			12
Which Premiums	1	2	3	Loss Pa	ayments	Defense Containmer	and Cost It Payments	Adjusting Payr	and Other nents	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	+ 6 - 7 + 8 - 9)	Direct and Assumed
1. Prior	xxx	xxx	xxx	0	0	0	0	0	0	0	0	XXX
2. 2015	0	0	0	0	0	0	0	0	0	0	0	XXX
2 2040	0	0	0	0	0	0	0	0	0	0	0	xxx
3. 2016	0	0	0	0	0	0	0	0	0	0	0	~~~
4. Totals	xxx	xxx	xxx	0	0	0	0	0	0	0	0	xxx

									Adjusting		23	24	25
		Losses	Unpaid		Defen	se and Cost C	Containment L	Jnpaid	Unp	paid			
	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
		0	0	0		0	0		0	0		0	
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

		Total	· · · · · · · · · · · · · · · · · · ·					- D'	34	Net Balar	
			1			/	Nontabula	r	Inter-	Reserves Af	
	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	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	0	0
4.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

# SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 OMITTED)
-----------------

Years in	Pi	emiums Earne	ed			Los	s and Loss Ex	pense Payme	nts			12
Which	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
Premiums				Loss Pa	ayments	Containmer	t Payments	Payn	nents			
Were				4	5	6	7	8	9		Total	Number of
Earned										Salvage	Net Paid	Claims
and Losses										and	(Cols. 4 - 5	Reported
Were	Direct and		Net	Direct and		Direct and		Direct and		Subrogation		Direct and
Incurred	Assumed	Ceded	(Cols. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1. Prior	xxx	xxx	XXX	(1)	0	0	0	0	0	1	(1)	XXX
2, 2015	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016	0	0	0	0	0	0	0	0	0	0	0	0
0.2010		Ŭ	, , , , , , , , , , , , , , , , , , ,	Ŭ	, , , , , , , , , , , , , , , , , , ,			, j	, , , , , , , , , , , , , , , , , , ,	ľ		
4. Totals	XXX	XXX	XXX	(1)	0	0	0	0	0	1	(1)	XXX

									Adjusting		23	24	25
		Losses			Defen	se and Cost C			Un	baid			
	Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	BNR	21	22			Number of
	13	14	15	16	17	18	19	20				Total	Claims
											Salvage	Net Losses	Outstand-
											and	and	ing Direct
	Direct and		Direct and		Direct and		Direct and		Direct and		Subrogation	Expenses	and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
	0	0	0	0	0	0	0		0			0	0
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
	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
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	_ ۱	0	0	_ ۱	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	

	Losses an	Total d Loss Expense	s Incurred		Loss Expense P ed/Premiums Ea		Nontabula	r Discount	34 Inter-		nce Sheet fter Discount
	26	27	28	29	30	31	32	33	Company Pooling	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	xxx		xxx	xxx	xxx		0	0		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	0
3.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	xxx	0	0

Schedule P - Part 1K - Fidelity/Surety

# NONE

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	NSE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR END (\$000	OMITTED)	DEVELO	OPMENT
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	2,401	2,233	2,601	3,541	3,564		4 ,052	4,421	4 , 518	4,597		176
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	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	79	176

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

1.	Prior		2,845	2,261	1,672	1,813		1,621	1,619	1,624	1,621	(4)	1
2.	2007	0	0	2	0	0	0	0	0	0	0	0	0
3.	2008	XXX	0	4	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	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	(4)	1

### 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)

							-		-	-			
1.	Prior	128	130	145	134	134	134	134	134	134	144	10	10
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	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	0	0	0	0	0						
10.	2015	XXX	0	0	0	XXX							
11.	2016	XXX	0	XXX	XXX								
											12. Totals	10	10

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

1.	Prior	1,388	1,897	1,969		1,981	1,982	1,925	1,912	1,979	1,977	(2)	
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	0	0	0	0	0	0	0	0
7.	2012	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	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	(2)	65

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

	INCURRED	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOF	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.1/		0	0	0	0	0	0
5. 2010	XXX	XXX	XXX	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	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		0	0	0	0	0	0	0	0	0	0
5	2010	XXX		XXX	0	0	0		0	0	0	0	0
6	2011	XXX	XXX	XXX	xxx	N	<b>MNIE</b>	0	0	0	0	0	0
7.	2012	XXX		XXX	XXX	XXX N			0	0	0	0	0
8	2013	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	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	N	UNIC	0	0	0	0	0	0
7.	2012	XXX	XXX	XXX	XXX				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	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	459		606			752			754		0	(28)
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			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	0	0	0	0	0						
10.	2015	XXX		0	0	0	XXX						
11.	2016	XXX	0	XXX	XXX								
											12. Totals	0	(28)

#### 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
6.	2011	XXX	XXX	XXX	XXX	N	()VIE	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 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	OPMENT
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	0	0	0	0	0
					IN'		_					
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
										4. Totals	0	0

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

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

### SCHEDULE P - PART 2K - FIDELITY, SURETY

								1				1
1. Prior	xxx	xxx	xxx	xxx		xxx	xxx	0	0	0	0	.0
-		2007	2007					2004	0	0	0	2007
2. 2015	XXX	XXX	xxx		~~~ <b>``N</b> (	UNE	XXX	XXX	0	0	0	XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
										4. Totals	0	0

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

1.	Prior	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0	0	0	0	0
2	2015	xxx		XXX	xxx	×× I		XXX	xxx	0	0	0	xxx
						IN		-				~~~~	
3.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
											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
7. 2012				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.	0	0	0	xxx						
11. 2016	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

11

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						(\$000 OI	MITTED)						Number of
		1	2	3	4	5	6	7	8	9	10	Number of	Claims
												Claims	Closed
	in Which											Closed With	
	es Were											Loss	Loss
Inc	urred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Payment	Payment
1.	Prior			1,627	2,451	3,093	3 , 368		4,203	4 , 261	4,338	20,988	7 , 184
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	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	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 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1.	Prior			1, 198	1,309	1,635	1,624	1,621	1,619	1,621	1,621		7 ,678
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	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 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1.	Prior	000	0	0	0	0	0	0	0	0	0		41
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
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	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	0	0	0	0	0						
10.	2015	XXX	0	0	0	0							
11.	2016	XXX	0	0	0								

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

1. Prior			2	2	2	2	2	2	2	12	0	0
2. 2007		0	0	0	0	0	0	0	0	0	0	0
3. 2008		0				0	0	0	0	0	0	0
4. 2009			0	0	0	0	0	0	0	0	0	0
5. 2010		xxx	xxx	0	0	0	0	0	0	0	0	0
6. 2011		xxx	xxx	XXX	0	0	0	0	0	0	0	0
7. 2012		xxx	xxx	xxx	xxx	0	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	0	0	0	0						
11. 2016	XXX	0	0	0								

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

1.	Prior	000	1,175	1,597	1,691	1,808	1,825	1,880	1,889	1,913	1,907	2,260	1,745
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	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 1 - MEDICAL **PROFESSIONAL LIABILITY - OCCURRENCE**

	CUMUL	ATIVE PAID I	NET LOSSES	AND DEFEN			MENT EXPE	NSES REPOR	RTED AT YEA	AR END	11	12
Years in Which Losses Were	1	2	3	4	(\$000 OI 5	6	7	8	9	10	Number of Claims Closed With Loss	Number of Claims Closed Without Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Payment	Payment
1. Prior		0	0	0	0	0	0	0	0	0	0	0
2. 2007	0	0	0	0				0	0	0	0	0
3. 2008	XXX	0	0	0	N			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
			xxx						0				0
7.	2012	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	0	0	0	0	0
10.	2015	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		413							754		145
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
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	0	0	0	0	0						
10.	2015	XXX	0	0	0	0							
11.	2016	XXX	0	0	0								

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

											/
CUMUL	LATIVE PAID	NET LOSSES	S AND DEFEN			MENT EXPE	NSES REPOF	RTED AT YEA	AR END	11	12
				(\$000 O	MITTED)						Number of
1	2	3	4	5	6	7	8	9	10	Number of	Claims
										Claims	Closed
										Closed With	Without
						_				Loss	Loss
2007	2008	2009	2010	201	()≩N≩ ⊢	2013	2014	2015	2016	Payment	Payment
						-					
xxx		XXX	XXX	XXX	XXX			0	0		XXX
XXX	XXX	XXX	XXX	XXX	XXX	xxx	xxx	0	0	XXX	XXX
xxx	xxx	xxx	xxx	xxx	XXX	xxx	xxx	xxx	0	XXX	XXX
	1 2007	1         2           2007         2008           XXX         XXX           XXX         XXX	1         2         3           2007         2008         2009           XXX         XXX         XXX           XXX         XXX         XXX	1         2         3         4           2007         2008         2009         2010           XXX         XXX         XXX         XXX           XXX         XXX         XXX         XXX	(\$000 OI 1 2 3 4 5 2007 2008 2009 2010 20 XXX XXX XXX XXX XXX XXX XXX XXX XXX X	(\$000 OMITTED)           1         2         3         4         5         6           2007         2008         2009         2010         20 <b>NOPNE</b> xxx         xxx         xxx         xxx         xxx         xxx           xxx         xxx         xxx         xxx         xxx         xxx	1       2       3       4       5       6       7         2007       2008       2009       2010       <	1       2       3       4       5       6       7       8         2007       2008       2009       2010       20       20       2012       2013       2014         XXX       XXX       XXX       XXX       XXX       XXX       000         XXX       XXX       XXX       XXX       XXX       XXX       XXX	1       2       3       4       5       6       7       8       9         2007       2008       2009       2010       2010       2010       2010       2010       201	1       2       3       4       5       6       7       8       9       10         2007       2008       2009       2010       2010       2010       2010       2010       20110<	1       2       3       4       5       6       7       8       9       10       Number of Claims Closed With Loss         2007       2008       2009       2010       20       Pointe       2013       2014       2015       2016       Payment         xxx       xxx       xxx       xxx       xxx       xxx       xxx       000       0      0       xxx

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

1. 1	Prior	xxx	xxx	xxx		xxx	xxx	xxx	.000	(2)	(3)	0	0
2. 2	2015	xxx	0	0	0	0							
3. 2	2016	XXX	XXX	0	0	0							

## SCHEDULE P - PART 3K - FIDELITY/SURETY

I. Prior	xxx				xxx	xxx						
2. 2015	xxx	xxx	xxx	xxx	××N	ONE	×××	xxx	0	0	xxx	xxx
3. 2016	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	xxN	ONE	E xxx	xxx	0	0	xxx	xxx
3. 2016	xxx	xxx	xxx	0	xxx	xxx						

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

-			r										
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	0	0	0	xxx	xxx
10.	2015	xxx			xxx	xxx	xxx		xxx	0	0	xxx	xxx
	2016	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	CONTAINMEN	NT 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			158		141	270		157		177
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	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		0	0	0
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX		XXX	0	0
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior	1,534	812			153	(50)	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	0	0	0	0	0	0	0
6. 2011		XXX	XXX	XXX	0	0	0	0	0	0
7. 2012		xxx	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	xxx	XXX	XXX	xxx	xxx	xxx	0	0
11. 2016	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	ION¢		0	0	0	0
7.	2012	XXX	XXX	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	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 4D - 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	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
								0			
			XXX					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	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	441			133	112		20	18		
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	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		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)

	DOLICIANDI									<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	XXX		ICINC		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 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

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

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

1.	Prior					(14)	4			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	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	0	0	0	0
9.	2014	XXX	XXX	XXX	XXX	xxx	XXX		0	0	0
10.	2015	XXX	XXX		XXX	XXX			XXX	ļ0	0
11.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1	Prior	0	٥	0	0	0	0	0	0	0	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	0	0	0	0	0	0
4.	2009		XXX	0	0	0	0	0	0	0	0
5.	2010	XXX	XXX	XXX	R		0	0	0	0	0
6.	2011		XXX	XXX	XXX		0	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	0	0	0						
10.	2015	xxx	0	0							
11.	2016	XXX	0								

Schedule P - Part 4I

# NONE

Schedule P - Part 4J

Schedule P - Part 4K

Schedule P - Part 4L

Schedule P - Part 4M

Schedule P - Part 4N

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

		CUMULA	TIVE 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			12	6	9	7	1	0	2	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	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

					SECTION 2					
			NUMBER	R OF CLAIMS O	UTSTANDING [	DIRECT AND AS	SSUMED AT YE	AR END		
Years in Which Premiums Were Earned	1	2	3	4	5	6	7	8	9	10
and Losses										
Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	74	46	37	27	15	12	9	4	5	4
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	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

					<b>SECTION 3</b>					
			CUMULATIVE	NUMBER OF C	LAIMS REPOR	TED DIRECT AI	ND ASSUMED A	T 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		7 , 139		3	1	7	2	(5)	3	1
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	0
6. 2011	xxx	XXX	XXX	xxx	0	0	0	0	0	0
7. 2012	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	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

72

## SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

Т

SECTION 1 CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END

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		CONOLA	TIVE NUMBER	OF CLAINS CL	OSED WITH LC	55 PATIVIENT	DIRECT AND A	SSUMED AT TE	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	1,483		16	9	5	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	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	0	0
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

					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	82	53	32	9	1	1	0	0	1	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	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

	_				SECTION 3					
			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	(490) .	2,558	2,942	0	0	0	0	0	1	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	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

#### SECTION 3

## SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

SECTION 1 CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END

		SECTION 1										
			CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT	DIRECT AND AS	SSUMED AT YE	AR END		
Ye	ars in	1	2	3	4	5	6	7	8	9	10	
	/hich			-		-			-			
Pre	miums											
Were	Earned											
and	Losses											
Were	Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	
1.	Prior	1	8	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	0	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	

					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	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	0
6. 2011	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

					SECTION 3					
			CUMULATIVE	NUMBER OF C	LAIMS 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	(44) .	18	8	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	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

#### SECTION 3

# **SCHEDULE P - PART 5D - WORKERS' COMPENSATION** (EXCLUDING EXCESS WORKERS' COMPENSATION)

SECTION 1 CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END

					SECTION I					
		CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LO	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				0010		0010				
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	0	0	0	0
3. 2008	XXX	0	0	R		0	0	0	0	0
4. 2009	xxx	xxx	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	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	0	0
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

	-				SECTION 2					
			NUMBER	R OF CLAIMS O	UTSTANDING [	DIRECT AND AS	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	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	b	IONE	0	0	0	0	0
5. 2010	xxx	XXX	xxx	0	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

					SECTION 3							
	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED 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	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	N	IONF	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	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	lC		
10. 2015	xxx.	xxx	xxx		xxx	xxx		xxx	0			
11. 2016	XXX	xxx	xxx	XXX	XXX	XXX	XXX	XXX	XXX	0		

#### SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL SECTION 1

	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END										
			ATTVE NUMBER	OF CLAIMS CL						1	
Years in	1	2	3	4	5	6	7	8	9	10	
Which											
Premiums											
Were Earned											
and Losses				0010	0011						
Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	
1. Prior	15	619	(5)	3	3	1	1	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	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	

					SECTION 2					
			NUMBER	R OF CLAIMS O	UTSTANDING [	DIRECT AND AS	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
	2001	2000	2000	2010	2011	2012	2010	2011	2010	2010
1. Prior	45	42	22	11	3	2	1	0	1	1
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	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

					<b>SECTION 3</b>					
			CUMULATIVE	NUMBER OF C		TED DIRECT A	ND ASSUMED A			
Years in Which Premiums Were Earned	1	2	3	4	5	6	7	8	9	10
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			(4)	0	0	1	1	(1)	1	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	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	0	0	0
10. 2015	xxx	xxx	xxx	xxx		xxx	xxx	xxx	0	0
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

Schedule P - Part 5F- SN1A

Schedule P - Part 5F- SN2A

NONE

Schedule P - Part 5F- SN3A

Schedule P - Part 5F- SN1B

Schedule P - Part 5F- SN2B

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											
Premiums											
Were Earned											
and Losses Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	
	2007	2000	2003	2010	2011	2012	2013	2014	2013	2010	
1. Prior	54	52	5	1	1	0	1	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	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	

					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	18	13	7	5	3	2	1	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	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

					SECTION 3A					
				NUMBER OF C		TED DIRECT A	ND ASSUMED A			
Years in Which Premiums Were Earned	1	2	3	4	5	6	7	8	9	10
and Losses Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
were incurred	2007	2000	2003	2010	2011	2012	2013	2014	2013	2010
1. Prior	123	133	(3)	0	0	0	0	(1)	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	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 5H- SN1B

Schedule P - Part 5H- SN2B

Schedule P - Part 5H- SN3B

Schedule P - Part 5R- SN1A

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 - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL SECTION 1

		CUMU	LATIVE PREM	/IUMS EARN	ED DIRECT A	ND ASSUME	D AT YEAR EI	ND (\$000 OM	ITTED)		11
Years in Which	1	2	3	4	5	6	7	8	9	10	Current
Premiums Were											Year
Earned and Losses											Premiums
Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Earned
1. Prior	0		0	0	0	0	0	0	0	0	0
2. 2007	0	0	0	0	0	0	0	0	0	0	0
3. 2008	XXX	0	0	0	0	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
6. 2011	XXX		XXX	XXX	0	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
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned											
Premiums											
(Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX

					SECTION	2					
			CUMULATI	/E PREMIUM	S EARNED C	EDED AT YEA	AR END (\$000	OMITTED)			11
Years in Which	1	2	3	4	5	6	7	8	9	10	Current
Premiums Were											Year
Earned and Losses											Premiums
Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Earned
1. Prior	0	(13)	0	0	0	0	0	0	0	0	0
2. 2007	0	0	0	0	0	0	0	0	0	0	0
3. 2008	XXX	0	0	0	0	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
6. 2011	XXX	XXX	XXX	XXX	0	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
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums	0	0	0	0	0	0	0	0	0	0	VVV
(Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX

#### SCHEDULE P - PART 6D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION) SECTION 1

					SECTION						
		CUMU	LATIVE PREM	IUMS EARNI	ED DIRECT A	ND ASSUME	D AT YEAR EI	ND (\$000 OMI	TTED)		11
Years in Which	1	2	3	4	5	6	7	8	9	10	Current
Premiums Were											Year
Earned and Losses											Premiums
Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Earned
1. Prior	0	(59)	0	0	0	0	0	0	0	0	0
2. 2007	0	0	0	0	0	0	0	0	0	0	0
3. 2008	XXX	0	0	0	0	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
6. 2011	XXX	XXX	XXX	XXX	0	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
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned											
Premiums											
(Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX

					SECTION	2					
			CUMULATI	VE PREMIUM	S EARNED C	EDED AT YEA	AR END (\$000	OMITTED)			11
Years in Which Premiums Were	1	2	3	4	5	6	7	8	9	10	Current Year
Earned and Losses Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Premiums Earned
1. Prior	0	(5)	0	0	0	0	0	0	2010	0	Lamea
2. 2007	0	0	Ũ	0	0	0	0	0	0	0	0
3. 2008	XXX	Õ	Õ	Ũ	Ũ	Õ	Ũ	Ũ		Õ	0
4. 2009	XXX		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	0	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	0
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sc P–Pt 1)	0	0	0	0	0	0	0	0	0	0	xxx

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 - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)

			SECTION	1			
	Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contacts	6 Loss Sensitive as Percentage of Total
1.	Homeowners/Farmowners				0		0.0
2.	Private Passenger Auto Liability/Medical	0		0.0	0		0.0
3.	Commercial Auto/Truck Liability/Medical	0		0.0	0		0.0
4.		0		0.0	0		0.0
5.	Commercial Multiple Peril	70		0.0	0		0.0
6.	Medical Professional Liability-Occurrence	0		0.0	0		0.0
	Medical Professional Liability -Claims- Made						
	Special Liability						
9.	Other Liability-Occurrence						
10.	····, ····,				0		0.0
11.		0		0.0	0		0.0
12.	Auto Physical Damage	0		0.0	0		0.0
	Fidelity/Surety						
14.	Other	0		0.0	0		
15.	International	0		0.0	0		0.0
16.	Reinsurance-Nonproportional Assumed Property	XXX	xxx	xxx.	XXX	xxx	xxx
17.	Reinsurance-Nonproportional Assumed Liability	XXX	xxx	xxx	xxx		xxx
18.	Reinsurance-Nonproportional Assumed Financial Lines	xxx	xxx	xxx	xxx		xxx
	Products Liability-Occurrence				0		0.0
20.	Products Liability-Claims-Made	0		0.0	0		0.0
21.	Financial Guaranty/Mortgage Guaranty	0		0.0	0		0.0
22.	Warranty	0		0.0	0		0.0
23.	Totals	328	0	0.0	0	0	0.0

SECT	<b>ON</b>	2

					SECTION 2					
		INCURRED LO	SSES AND DEF	ENSE AND CC	ST CONTAINM	ENT EXPENSE	S REPORTED A	T YEAR END (\$	6000 OMITTED)	
Years in Which Policies	1	2	3	4	5	6	7	8	9	10
Were Issued	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	0	0	0	0	0	0	0	0	0	
2. 2007	0	0	0	0	0	0	0	0	0	
3. 2008	xxx	0	0	0	0	0	0	0	0	
4. 2009	xxx		0	N	J()N0H		0	0	0	
5. 2010	xxx	xxx	xxx	0	0	0	0	0	0	
6. 2011	xxx		xxx		0	0	0	0	0	
7. 2012	xxx	xxx	xxx		xxx	0	0	0	0	
8. 2013	xxx	xxx	xxx	XXX	xxx		0	0	0	
9. 2014	xxx	XXX	xxx	XXX	xxx	XXX	xxx	0	0	
10. 2015	xxx	xxx	xxx	XXX	xxx	XXX	xxx	xxx	0	
11. 2016	XXX	XXX	xxx	XXX	XXX	XXX	xxx	XXX	xxx	

					<b>SECTION 3</b>					
	BULK AND IN	CURRED BUT I	NOT REPORTE	D RESERVES F	OR LOSSES AN OMIT		ND COST CON	TAINMENT EXP	ENSES AT YE	AR END (\$000
Years in	1	2	3	4	5	6	7	8	9	10
Which Policies										
Were Issued	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	0	0	0	0	0	0	0	0	0	
2. 2007	0	0	0	0	0	0	0	0	0	
3. 2008		0	0	Ŕ			0	0	0	
4. 2009	xxx	xxx	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	
7. 2012	xxx	xxx	xxx	XXX	XXX	0	0	0	0	
8. 2013	xxx	xxx	xxx		XXX	XXX	0	0	0	
9. 2014	xxx	xxx	xxx			xxx	xxx	0	0	
10. 2015		xxx	xxx		XXX	XXX		xxx	0	
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

#### SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (continued) SECTION 4

	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
Years in Which Policies	1	2	3	4	5	6	7	8	9	10
Were Issued	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	0 .	0	0	0	0	0	0	0	0	
2. 2007	0	0	0	0	0	0	0	0	0	
3. 2008	xxx	0	0	0	0	0	0	0	0	
4. 2009	xxx	xxx	0	0	0	0	0	0	0	
5. 2010	xxx	xxx	xxx		IONE	0	0	0	0	
6. 2011	xxx	xxx	xxx	xxx	0	0	0	0	0	
7. 2012	xxx	xxx	xxx	xxx	xxx	0	0	0	0	
8. 2013	xxx	xxx	xxx	xxx	xxx	xxx	0	0	0	
9. 2014	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0	0	
10. 2015	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0	
11. 2016	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	

	NE	T RESERVE FC	R PREMIUM A	DJUSTMENTS	SECTION 5 AND ACCRUED	RETROSPECT	IVE PREMIUMS	AT YEAR END	(\$000 OMITTED	))
Years in Which Policies	1	2	3	4	5	6	7	8	9	10
Were Issued	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	0	0	0	0	0	0 .	0	0	0	
2. 2007	0	0	0	0	0	0	0	0	0	
3. 2008	XXX	0	0	0	0	0	0	0	0	
4. 2009	xxx	xxx	0	0	0	0	0	0	0	
5. 2010	xxx	xxx	xxx	N	IONE	0	0	0	0	
6. 2011	xxx	xxx	xxx	xxx	0	0	0	0	0	
7. 2012	xxx	xxx	xxx	xxx.	xxx	0	0	0	0	
8. 2013	xxx	xxx	xxx	xxx	xxx	xxx	0	0	0	
9. 2014	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0	0	
10. 2015	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0	
11. 2016	xxx	xxx	xxx	xxx	xxx	xxx	XXX	xxx	xxx	

### SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)

			SECTION	1			
		1	2	3	4	5	6
	Schedule P - Part 1	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contacts	Loss Sensitive as Percentage of Total
1.	Homeowners/Farmowners			0.0	0		0.0
2.	Private Passenger Auto Liability/Medical			0.0	0		0.0
3.	Commercial Auto/Truck Liability/Medical	0		0.0	0		0.0
4.	Workers' Compensation	0		0.0	0		0.0
5.	Commercial Multiple Peril			0.0	0		0.0
6.					0		0.0
	Medical Professional Liability -Claims- Made	0		0.0	0		0.0
8.	Special Liability	0		0.0	0		0.0
9.	Other Liability-Occurrence				0		0.0
10.	Other Liability-Claims-made	0		0.0	0		
	Special Property				0		0.0
12.	Auto Physical Damage	0		0.0	0		0.0
	Fidelity/Surety				0		0.0
14.	Other	0		0.0	0		0.0
15.	International	0		0.0	0		0.0
16.	Reinsurance-Nonproportional Assumed Property	0		0.0	0		0.0
17.	Reinsurance-Nonproportional Assumed Liability	0		0.0	0		0.0
	Reinsurance-Nonproportional Assumed Financial Lines				0		0.0
	Products Liability-Occurrence			0.0	0		
20.	Products Liability-Claims-Made	0		0.0	0		0.0
	Financial Guaranty/Mortgage Guaranty	0		0.0	0		0.0
22.	Warranty	0		0.0	0		0.0
23.	Totals	328	0	0.0	0	0	0.0

**SECTION 2** 

		INCURRED LO	SSES AND DEF	ENSE AND CC	ST CONTAINM	ENT EXPENSE	S REPORTED A	T YEAR END (\$	6000 OMITTED)	
Years in	1	2	3	4	5	6	7	8	9	10
Which Policies Were Issued	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	0	0	0	0	0	0	0	0	0	
2. 2007	0	0	0	0	0	0	0	0	0	
3. 2008		0	0	0	0	0	0	0	0	
4. 2009		XXX	0	N		0	0	0	0	
5. 2010		XXX	xxx			0	0	0	0	
6. 2011		XXX	xxx	XXX	0	0	0	0	0	
7. 2012		xxx	xxx	XXX	xxx	0	0	0	0	
8. 2013		XXX	xxx	XXX	XXX	XXX	0	0	0	
9. 2014		XXX	xxx	XXX	xxx	XXX	xxx	0	0	
10. 2015	XXX	xxx	xxx	xxx	xxx	XXX	xxx	XXX	0	
11. 2016	XXX	XXX	xxx	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3** 

	BULK AND IN	ICURRED BUT	NOT REPORTE	D RESERVES F	OR LOSSES AN OMIT	ND DEFENSE A	ND COST CON	TAINMENT EXF	PENSES AT YEA	AR END (\$000
Years in Which Policies	1	2	3	4	5	6	7	8	9	10
Were Issued	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	0	0	0	0	0	0	0	0	0	
2. 2007	0	0	0	0	0	0	0	0	0	
3. 2008	xxx	0	0	0	0	0	0	0	0	
4. 2009	xxx	XXX	0	N	J(_)N0H		0	0	0	
5. 2010	xxx		xxx	0		0	0	0	0	
6. 2011	xxx	XXX	xxx	XXX	0	0	0	0	0	
7. 2012	xxx		xxx		xxx	0	0	0	0	
8. 2013	xxx	XXX	xxx	XXX	XXX	XXX	0	0	0	
9. 2014	xxx	xxx	xxx		xxx	xxx	xxx	0	0	
10. 2015	xxx	xxx	xxx	XXX	xxx	xxx	xxx	xxx	0	
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

				<b>\</b>	SECTION 4	<u> </u>				
			NET	EARNED PREM	IUMS REPORT	ED AT YEAR E	ND (\$000 OMIT			
Years in	1	2	3	4	5	6	7	8	9	10
Which Policies Were Issued	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	0	0	0	0	0	0	0	0	0	
2. 2007	0	0	0	0	0	0	0	0	0	
3. 2008	xxx	0	0	0	0	0	0	0	0	
4. 2009			0	N		0	0	0	0	
5. 2010	xxx	xxx	xxx				0	0	0	
6. 2011	xxx	xxx	xxx		0	0	0	0	0	
7. 2012	xxx	xxx	xxx		xxx	0	0	0	0	
8. 2013		xxx	xxx			xxx	0	0	0	
9. 2014		xxx	xxx		XXX	xxx		0	0	
10. 2015	xxx	xxx	xxx		xxx	xxx		xxx	0	
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

#### **SECTION 5**

	NE	ET RESERVE F	OR PREMIUM A	DJUSTMENTS	AND ACCRUED	D RETROSPEC	TIVE PREMIUM	S AT YEAR ENI	D (\$000 OMITTE	ED)
Years in	1	2	3	4	5	6	7	8	9	10
Which Policies Were Issued	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	0	0	0	0	0	0	0	0	0	
2. 2007	0	0	0	0	0	0	0	0	0	
3. 2008		0	0	0	0	0	0	0	0	
4. 2009	xxx	XXX	0	<b>N</b>		0	0	0	0	
5. 2010	xxx	XXX	xxx			0	0	0	0	
6. 2011	xxx	XXX	xxx	xxx	0	0	0	0	0	
7. 2012	xxx		xxx	xxx	xxx	0	0	0	0	
8. 2013			xxx	xxx	xxx	xxx	0	0	0	
9. 2014		XXX	xxx	xxx	xxx	xxx	xxx	0	0	
10. 2015	xxx	XXX	xxx	xxx	xxx	xxx	xxx	xxx	0	
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

#### **SECTION 6** INCURRED ADJUSTABLE COMMISSIONS REPORTED AT YEAR END (\$000 OMITTED) 3 4 5 6 7 8 2 9 10 Years in 1 Which Policies Were Issued 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 .0 .0 .0 .0 .0 ..0 ..0 .0 .0 1. Prior 2. 2007 .0 .0 .0 .0 .0 .0 .0 ..0 .0 .0 .0 .0 .0 ..0 ..0 .0 3. 2008 XXX. .0 NONE P ..0 0 0 0 0 4. 2009 XXX XXX 5. 2010 XXX. .XXX. XXX. .0 .0 .0 .0 .0 ..0 ..0 ..0 .0 6. 2011 XXX. XXX. XXX XXX. 0 0 0 7. 2012 XXX. XXX .XXX XXX XXX ..0 8. 2013 XXX. XXX. XXX. XXX. XXX. XXX. ..0 .0 .0 ..0 .0 XXX. 9. 2014 XXX. XXX. XXX. XXX. XXX XXX. 10. 2015 XXX. XXX. XXX. XXX. XXX. XXX. XXX. XXX. ..0 11. 2016 ххх ххх XXX XXX ххх XXX XXX XXX XXX

	SECTION 7										
			RESERVI	ES FOR COMM	ISSION ADJUST	MENTS AT YE	AR END (\$000 (	OMITTED)			
Years in	1	2	3	4	5	6	7	8	9	10	
Which Policies Were Issued	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	
1. Prior	0	0	0	0	0	0	0	0	0		
2. 2007	0	0	0	0	0	0	0	0	0		
3. 2008	xxx	0	0	0	0	0	0	0	0		
4. 2009	xxx	xxx	0	N		0	0	0	0		
5. 2010	xxx	xxx	xxx				0	0	0		
6. 2011	xxx	XXX	xxx	XXX	0	0	0	0	0		
7. 2012	xxx	XXX	XXX	XXX	xxx	0	0	0	0		
8. 2013				XXX		XXX	0	0	0		
9. 2014		XXX	xxx	XXX	XXX		XXX	0	0		
10. 2015	xxx	XXX	xxx	xxx	xxx	XXX		xxx	0		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

## **SCHEDULE P INTERROGATORIES**

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical

	Professional Liability Claims Made insurance policies. EREs	provided for reasons other than DDR are no	ot to be included.				
1.1	Does the company issue Medical Professional Liability Claim reporting endorsement, or "ERE") benefits in the event of De cost?	eath, Disability, or Retirement (DDR) at a red	uced charge or at no additional	Yes [	]	No [	X ]
	If the answer to question 1.1 is "no", leave the following ques questions:	stions blank. If the answer to question 1.1 is	'yes", please answer the following				
1.2	What is the total amount of the reserve for that provision (DE dollars)?	DR Reserve), as reported, explicitly or not, el	sewhere in this statement (in \$				
1.3	Does the company report any DDR reserve as Unearned Pre	emium Reserve per SSAP #65?		Yes [	]	No [	Χ]
1.4	Does the company report any DDR reserve as loss or loss a	djustment expense reserve?		Yes [	]	No [	Χ]
1.5	If the company reports DDR reserve as Unearned Premium Investment Exhibit, Part 1A – Recapitulation of all Premiums		on the Underwriting and Yes [	] No [	]	N/A [	]
1.6	If the company reports DDR reserve as loss or loss adjustme where these reserves are reported in Schedule P:	ent expense reserve, please complete the fo	llowing table corresponding to				
		DDR R	eserve Included in	]			
			, Medical Professional Liability t Losses and Expenses Unpaid				
	Years in Which Premiums Were Earned a Losses Were Incurred	and 1 Section 1: Occurrence	2 Section 2: Claims-Made				
	1.601 Prior						
	1.602 2007						
	1.603 2008						
	1.604 2009						
	1.606 2011			1			
	1.608 2013						
	1.612 Totals		0 0				
2.	The definition of allocated loss adjustment expense effective January 1, 1998. This change in definition "Defense and Cost Containment" and "Adjusting a	on applies to both paid and unpaid expenses	Are these expenses (now reported as	I Yes [	X ]	No [	]
3.	The Adjusting and Other expense payments and i the number of claims reported, closed and outstar companies in a group or a pool, the Adjusting and and the claim counts. For reinsurers, Adjusting an For Adjusting and Other expense incurred by rein Adjusting and Other expense should be allocated below. Are they so reported in this Statement?:	nding in those years. When allocating Adjus d Other expense should be allocated in the s nd Other expense assumed should be repor surers, or in those situations where suitable	ting and Other expense between ame percentage used for the loss amounts ted according to the reinsurance contract. claim count information is not available,	Yes [	X ]	No [	]
4.	Do any lines in Schedule P include reserves that a reported net of such discounts on Page 10?	are reported gross of any discount to preser	nt value of future payments, and that are	Yes [	]	No [	X ]
	If yes, proper disclosure must be made in the Not be reported in Schedule P - Part 1, Columns 32 a		ne Instructions. Also, the discounts must				

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.

What were the net premiums in force at the end of the year for: 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 lo reserves, among other things. Are there any especially significant events, coverage, retention or accounting ch occurred that must be considered when making such analyses?		Yes [ ]	No [ X ]
7.2	An extended statement may be attached.			

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

			ted By States and Territo	Direct Bus				
	-	1 Life (Group and	2 Annuities (Group	3 Disability Income (Group and	4 Long-Term Care (Group and	5 Deposit-Type	6	
States, Etc. 1. Alabama	A1	Individual)	and Individual)	Individual)	Individual)	Contracts	Totals	
1. Alabama 2. Alaska								
2. Alaska 3. Arizona								
4. Arkansas						•••••		
						•••••		
5. California								
6. Colorado	-							
7. Connecticut								
8. Delaware								
9. District of Columbia								
10. Florida								
11. Georgia	GA							
12. Hawaii	HI							
13. Idaho	ID							
14. Illinois								
15. Indiana								
16. Iowa								
17. Kansas	-							
18. Kentucky	-							
19. Louisiana								
19. Louisiana 20. Maine			··					
						•••••		
21. Maryland								
22. Massachusetts								
23. Michigan								
24. Minnesota	MN							
25. Mississippi	MS							
26. Missouri	MO							
27. Montana	MT							
28. Nebraska	NE		NUNE					
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	-							
44. Texas 45. Utah								
46. Vermont	UT							
	-							
47. Virginia			1					
48. Washington								
49. West Virginia								
50. Wisconsin								
51. Wyoming								
52. American Samoa	AS							
53. Guam	GU							
54. Puerto Rico	PR							
55. US Virgin Islands								
56. Northern Mariana Islands								
57. Canada			1 1					
oouuuu					1			
58. Aggregate Other Alien	OT							

## SCHEDULE Y PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
		NAIC				Exchange if Publicly	Names of		Relationship to		Board, Management,	If Control is Ownership		ls an SCA Filing	
Group Code	Group Name	Company Code	ID Number	Federal RSSD	СІК	Traded (U.S. or International)	or Affiliates	Domiciliary Location	Reporting Entity	Directly Controlled by (Name of Entity/Person)	Attorney-in-Fact, Influence, Other)	Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Required? (Y/N)	*
		. 00000	. 26 <b>-</b> 1736008				NBIC HOLDINGS, INC	DE	UDP		BOARD	0.0	NBIC HOLDINGS,	· · · · · · · · · · · · · · · · · · ·	0
		. 00000	20-3179005				NBIC FINANCIAL HOLDINGS , INC	RI	UDP	NBIC HOLDINGS, INC	OWNERSHIP		INC.		0
	NARRAGANSETT BAY INSURANCE	43001	05-0394576				NARRAGANSETT BAY INSURANCE	RI		NBIC FINANCIAL HOLDINGS, INC			NBIC HOLDINGS,		0
	NARRAGANSETT BAY INSURANCE COMPANY GROUP		05-0197250				PAWTUCKET INSURANCE COMPANY		RE	NARRAGANSETT BAY INSURANCE	OWNERSHIP.	100.0	NBIC HOLDINGS,		
00497	COMPANT GROUP												NBIC HOLDINGS,		
			26-3867627				NBIC SERVICE COMPANY, INC	RI	NIA	NBIC HOLDINGS, INC	OWNERSHIP		INC. NBIC HOLDINGS,		0
		. 00000					NBIC E&S, INC	I A	I A	NBIC HOLDINGS, INC	OWNERSHIP		INC NBIC HOLDINGS,		0
		. 00000					WESTWIND UNDERWRITERS, INC	DE	I A	NBIC HOLDINGS, INC	OWNERSHIP				0
										·····					
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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						v			(30, 335, 245)	
14931	05-0197250	PAWTUCKET INSURANCE COMPANY.							<b>.</b>			
	26-3867627	NBIC SERVICE COMPANY INC							<b>.</b>			
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## 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.		WAIVED
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
5.	APRIL FILING Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	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
8.	MAY FILING Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	YES
9.	JUNE FILING Will an audited financial report be filed by June 1?	YES
9.		ILU
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.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	N0
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	N0
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	N0
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	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)?	SEE EXPLANATION
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
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	N0
25.		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

27. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?

..NO...

### 1.

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?	NO
31.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
32.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
33.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
34.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	NO
	AUGUST FILING	
35.		YES
Explar	nation:	
12.		
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19.		
20. NO	ACTUARIAL OPINION SUMMARY WILL BE FILED. A WAIVER WAS RECEIVED FROM THE RHODE ISLAND DEPARTMENT OF BUSINESS REGULATION - INSUR	NCE DIVISION.
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ANNUAL STATEMENT FOR THE YEAR 2016 OF THE PAWTUCKET INSURANCE COMPANY

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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ANNUAL STATEMENT FOR THE YEAR 2016 OF THE PAWTUCKET INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE PAWTUCKET INSURANCE COMPANY

#### ANNUAL STATEMENT BLANK

Assets	2
Cash Flow	5
Exhibit of Capital Gains (Losses)	12
Exhibit of Net Investment Income	12
Exhibit of Nonadmitted Assets	13
Exhibit of Premiums and Losses (State Page)	19
Five-Year Historical Data	17
General Interrogatories	15
Jurat Page	1
Liabilities, Surplus and Other Funds	3
Notes To Financial Statements	14
Overflow Page For Write-Ins	100
Schedule A – Part 1	E01
Schedule A – Part 2	E02
Schedule A – Part 3	E03
Schedule A – Verification Between Years	SI02
Schedule B – Part 1	E04
Schedule B – Part 2	E05
Schedule B – Part 3	E06
Schedule B – Verification Between Years	SI02
Schedule BA – Part 1	E07
Schedule BA – Part 2	E08
Schedule BA – Part 3	E09
Schedule BA – Verification Between Years	SI03
Schedule D – Part 1	E10
Schedule D – Part 1A – Section 1	SI05
Schedule D – Part 1A – Section 2	SI08
Schedule D – Part 2 – Section 1	E11
Schedule D – Part 2 – Section 2	E12
Schedule D – Part 3	E13
Schedule D – Part 4	E14
Schedule D – Part 5	E15
Schedule D – Part 6 – Section 1	E16
Schedule D – Part 6 – Section 2	E16
Schedule D – Summary By Country	SI04
Schedule D – Verification Between Years	SI03
Schedule DA – Part 1	E17

Schedule DA – Verification Between Years	SI10
Schedule DB – Part A – Section 1	E18
Schedule DB – Part A – Section 2	E19
Schedule DB – Part A – Verification Between Years	SI11
Schedule DB – Part B – Section 1	E20
Schedule DB – Part B – Section 2	E21
Schedule DB – Part B – Verification Between Years	SI11
Schedule DB – Part C – Section 1	SI12
Schedule DB – Part C – Section 2	SI13
Schedule DB – Part D – Section 1	E22
Schedule DB – Part D – Section 2	E23
Schedule DB – Verification	SI14
Schedule DL – Part 1	E24
Schedule DL – Part 2	E25
Schedule E – Part 1 – Cash	E26
Schedule E – Part 2 – Cash Equivalents	E27
Schedule E – Part 3 – Special Deposits	E28
Schedule E – Verification Between Years	SI15
Schedule F – Part 1	20
Schedule F – Part 2	21
Schedule F – Part 3	22
Schedule F – Part 4	23
Schedule F – Part 5	24
Schedule F – Part 6 – Section 1	25
Schedule F – Part 6 – Section 2	26
Schedule F – Part 7	27
Schedule F – Part 8	28
Schedule F – Part 9	29
Schedule H – Accident and Health Exhibit – Part 1	30
Schedule H – Part 2, Part 3, and Part 4	31
Schedule H – Part 5 – Health Claims	32
Schedule P – Part 1 – Summary	33
Schedule P – Part 1A – Homeowners/Farmowners	35
Schedule P – Part 1B – Private Passenger Auto Liability/Medical	36
Schedule P – Part 1C – Commercial Auto/Truck Liability/Medical	37
Schedule P – Part 1D – Workers' Compensation (Excluding Excess Workers' Compensation)	38

Schedule P – Part 1E – Commercial Multiple Peril	39
Schedule P – Part 1F – Section 1 – Medical Professional Liability – Occurrence	40
Schedule P – Part 1F – Section 2 – Medical Professional Liability – Claims-Made	40 41
Schedule P – Part 1G – Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler and	
Machinery)	42
Schedule P – Part 1H – Section 1 – Other Liability–Occurrence	43
Schedule P – Part 1H – Section 2 – Other Liability – Claims-Made	44
Schedule P – Part 1I – Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	45
Schedule P – Part 1J – Auto Physical Damage	46
Schedule P – Part 1K – Fidelity/Surety	47
Schedule P – Part 1L – Other (Including Credit, Accident and Health)	48
Schedule P – Part 1M – International	49
Schedule P – Part 1N – Reinsurance – Nonproportional Assumed Property	50
Schedule P – Part 1O – Reinsurance – Nonproportional Assumed Liability	51
Schedule P – Part 1P – Reinsurance – Nonproportional Assumed Financial Lines	52
Schedule P – Part 1R – Section 1 – Products Liability – Occurrence	53
Schedule P – Part 1R – Section 2 – Products Liability – Claims – Made	54
Schedule P – Part 1S – Financial Guaranty/Mortgage Guaranty	55
Schedule P – Part 1T – Warranty	56
Schedule P – Part 2, Part 3 and Part 4 – Summary	34
Schedule P – Part 2A – Homeowners/Farmowners	57
Schedule P – Part 2B – Private Passenger Auto Liability/Medical	57
Schedule P – Part 2C – Commercial Auto/Truck Liability/Medical	57
Schedule P – Part 2D – Workers' Compensation (Excluding Excess Workers' Compensation)	57
Schedule P – Part 2E – Commercial Multiple Peril	57
Schedule P – Part 2F – Section 1 – Medical Professional Liability – Occurrence	58
Schedule P – Part 2F – Section 2 – Medical Professional Liability – Claims – Made	58
Schedule P – Part 2G – Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	58
Schedule P – Part 2H – Section 1 – Other Liability – Occurrence	58
Schedule P – Part 2H – Section 2 – Other Liability – Claims – Made	58
Schedule P – Part 2I – Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, and Theft)	59
Schedule P – Part 2J – Auto Physical Damage	59
Schedule P – Part 2K – Fidelity, Surety	59
Schedule P – Part 2L – Other (Including Credit, Accident and Health)	59
Schedule P – Part 2M – International	59
Schedule P – Part 2N – Reinsurance – Nonproportional Assumed Property	60
Schedule P – Part 2O – Reinsurance – Nonproportional Assumed Liability	60
Schedule P – Part 2P – Reinsurance – Nonproportional Assumed Financial Lines	60
Schedule P – Part 2R – Section 1 – Products Liability – Occurrence	61
Schedule P – Part 2R – Section 2 – Products Liability – Claims-Made	61
Schedule P – Part 2S – Financial Guaranty/Mortgage Guaranty	61
Schedule P – Part 2T – Warranty	61
Schedule P – Part 3A – Homeowners/Farmowners	62

Schedule P – Part 3B – Private Passenger Auto Liability/Medical	62
Schedule P – Part 3C – Commercial Auto/Truck Liability/Medical	62
Schedule P – Part 3D – Workers' Compensation (Excluding Excess Workers' Compensation)	62
Schedule P – Part 3E – Commercial Multiple Peril	62
Schedule P – Part 3F – Section 1 – Medical Professional Liability – Occurrence	63
Schedule P – Part 3F – Section 2 – Medical Professional Liability – Claims-Made	63
Schedule P – Part 3G – Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	63
Schedule P – Part 3H – Section 1 – Other Liability – Occurrence	63
Schedule P – Part 3H – Section 2 – Other Liability – Claims-Made	63
Schedule P – Part 3I – Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, and Theft)	64
Schedule P – Part 3J – Auto Physical Damage	64
Schedule P – Part 3K – Fidelity/Surety	64
Schedule P – Part 3L – Other (Including Credit, Accident and Health)	64
Schedule P – Part 3M – International	64
Schedule P – Part 3N – Reinsurance – Nonproportional Assumed Property	65
Schedule P – Part 3O – Reinsurance – Nonproportional Assumed Liability	65
Schedule P – Part 3P – Reinsurance – Nonproportional Assumed Financial Lines	65
Schedule P – Part 3R – Section 1 – Products Liability – Occurrence	66
Schedule P – Part 3R – Section 2 – Products Liability – Claims-Made	66
Schedule P – Part 3S – Financial Guaranty/Mortgage Guaranty	66
Schedule P – Part 3T – Warranty	66
Schedule P – Part 4A – Homeowners/Farmowners	67
Schedule P – Part 4B – Private Passenger Auto Liability/Medical	67
Schedule P – Part 4C – Commercial Auto/Truck Liability/Medical	67
Schedule P – Part 4D – Workers' Compensation (Excluding Excess Workers' Compensation)	67
Schedule P – Part 4E – Commercial Multiple Peril	67
Schedule P – Part 4F – Section 1 – Medical Professional Liability – Occurrence	68
Schedule P – Part 4F – Section 2 – Medical Professional Liability – Claims-Made	68
Schedule P – Part 4G – Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	68
Schedule P – Part 4H – Section 1 – Other Liability – Occurrence	68
Schedule P – Part 4H – Section 2 – Other Liability – Claims-Made	68
Schedule P – Part 4I – Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary and Theft)	69
Schedule P – Part 4J – Auto Physical Damage	69
Schedule P – Part 4K – Fidelity/Surety	69
Schedule P – Part 4L – Other (Including Credit, Accident and Health)	69
Schedule P – Part 4M – International	69
Schedule P – Part 4N – Reinsurance – Nonproportional Assumed Property	70
Schedule P – Part 4O – Reinsurance – Nonproportional Assumed Liability	70
Schedule P – Part 4P – Reinsurance – Nonproportional Assumed Financial Lines	70
Schedule P – Part 4R – Section 1 – Products Liability – Occurrence	71
Schedule P – Part 4R – Section 2 – Products Liability – Claims-Made	71

Schedule P – Part 4S – Financial Guaranty/Mortgage Guaranty	71
Schedule P – Part 4T – Warranty	71
Schedule P – Part 5A – Homeowners/Farmowners	72
Schedule P – Part 5B – Private Passenger Auto Liability/Medical	73
Schedule P – Part 5C – Commercial Auto/Truck Liability/Medical	74
Schedule P – Part 5D – Workers' Compensation (Excluding Excess Workers' Compensation)	75
Schedule P – Part 5E – Commercial Multiple Peril	76
Schedule P – Part 5F – Medical Professional Liability – Claims-Made	78
Schedule P – Part 5F – Medical Professional Liability – Occurrence	77
Schedule P – Part 5H – Other Liability – Claims-Made	80
Schedule P – Part 5H – Other Liability – Occurrence	79
Schedule P – Part 5R – Products Liability – Claims-Made	82
Schedule P – Part 5R – Products Liability – Occurrence	81
Schedule P – Part 5T – Warranty	83
Schedule P – Part 6C – Commercial Auto/Truck Liability/Medical	84
Schedule P – Part 6D – Workers' Compensation (Excluding Excess Workers' Compensation)	84
Schedule P – Part 6E – Commercial Multiple Peril	85
Schedule P – Part 6H – Other Liability – Claims-Made	86
Schedule P – Part 6H – Other Liability – Occurrence	85
Schedule P – Part 6M – International	86
Schedule P – Part 6N – Reinsurance – Nonproportional Assumed Property	87
Schedule P – Part 6O – Reinsurance – Nonproportional Assumed Liability	87
Schedule P – Part 6R – Products Liability – Claims-Made	88
Schedule P – Part 6R – Products Liability – Occurrence	88
Schedule P – Part 7A – Primary Loss Sensitive Contracts	89
Schedule P – Part 7B – Reinsurance Loss Sensitive Contracts	91
Schedule P Interrogatories	93
Schedule T – Exhibit of Premiums Written	94
Schedule T – Part 2 – Interstate Compact	95
Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	96
Schedule Y – Part 1A – Detail of Insurance Holding Company System	97
Schedule Y – Part 2 – Summary of Insurer's Transactions With Any Affiliates	98
Statement of Income	4
Summary Investment Schedule	SI01
Supplemental Exhibits and Schedules Interrogatories	99
Underwriting and Investment Exhibit Part 1	6
Underwriting and Investment Exhibit Part 1A	7
Underwriting and Investment Exhibit Part 1B	8
Underwriting and Investment Exhibit Part 2	9
Underwriting and Investment Exhibit Part 2A	10
Underwriting and Investment Exhibit Part 3	11

INDEX8