



### **ANNUAL STATEMENT**

For the Year Ended December 31, 2018 OF THE CONDITION AND AFFAIRS OF THE

#### NARRAGANSETT BAY INSURANCE COMPANY

NAIC Group Code U4861	,0497NAIC Company (	code <u>43001</u> Employe	er's ID Number05-0394576
(Current Period)	(Prior Period)		
Organized under the Laws of	Rhode Island	, State of Domicile or Port of Entry	y Rhode Island
Country of Domicile		United States	
Incorporated/Organized	06/10/1981	Commenced Business	04/01/1982
Statutory Home Office	1301 Atwood Ave., Suite 316E	, Johns	ton, RI, US 02919-4933
	(Street and Number)		wn, State, Country and Zip Code)
Main Administrative Office	1301 Atwood Ave., Suite 316E	Johnston, RI, US 02919-4933	
	(Street and Number)	(City or Town, State, Country and Zip Coo	
Mail Address	P. O. Box 820		RI, US 02862-0820
	reet and Number or P.O. Box)		tate, Country and Zip Code)
Primary Location of Books and Record		Johnston, RI, US 02919	
Internet Web Site Address	(Street and Number)	(City or Town, State, Country and	Zip Code) (Area Code) (Telephone Number)
		www.nbic.com	404 405 0070
Statutory Statement Contact	Rosemarie Durette		401-495-8970
rdurette@n	(Name)	(Area Code <b>401-49</b> 5	) (Telephone Number) (Extension)
(E-Mail Add		(Fax Nu	
	OFFIC	`	mber)
Name	Title	_	T:41-
	* ****	Name	Title
Bruce Thomas Lucas  Kirk Howard Lusk	Chief Executive Officer	Timothy Michael Moura Kirk Howard Lusk	_, President _ Secretary
	Chief Financial Officer  OTHER OI		_, Secretary
Bruce Thomas Lucas Vijay Shankarrao Walvekar	DIRECTORS O Richard Alexander Widdicombe James Alfred Masiello		Irini Barlas
vijay Silalikaliao Walvekai	James Amed Wasiello		
State ofRhode Islan	d		
	ss		
County ofProvidence			
above, all of the herein described assets we that this statement, together with related exliabilities and of the condition and affairs of land have been completed in accordance wi may differ; or, (2) that state rules or regulatiknowledge and belief, respectively. Furtherr	ly sworn, each depose and say that they are the absolute property of the said reporting enibits, schedules and explanations therein cont the said reporting entity as of the reporting perith the NAIC Annual Statement Instructions and ons require differences in reporting not related more, the scope of this attestation by the descript for formatting differences due to electronic filiosed statement.	entity, free and clear from any liens or claim ained, annexed or referred to, is a full and od stated above, and of its income and del l Accounting Practices and Procedures ma to accounting practices and procedures, a bed officers also includes the related corre	is thereon, except as herein stated, and true statement of all the assets and ductions therefrom for the period ended, inual except to the extent that: (1) state law ccording to the best of their information, is sponding electronic filing with the NAIC,
Bruce Thomas Lucas Chief Executive Officer	Timothy Micl Presid		Kirk Howard Lusk Chief Financial Officer
Chier Executive Officer	Presid	a. Is this an original fili	
Subscribed and sworn to before me		b. If no:	
thisday of	,	State the amendme	nt number
		2. Date filed 3. Number of pages at	tached
		a. Number of pages at	lacrieu

### **ASSETS**

	Au	SEIS			
			Current Year		Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1.	Bonds (Schedule D)		Trondamiled 7 ledete	90,251,594	
2.	Stocks (Schedule D):				
۷.	` '	0		0	0
	2.1 Preferred stocks				
	2.2 Common stocks	4,105,615		4,105,615	2,667,389
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens			1	0
	3.2 Other than first liens			0	0
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less				
	\$encumbrances)			0	0
	4.2 Properties held for the production of income				
	(less \$encumbrances)			0	٥
					0
	4.3 Properties held for sale (less				
	\$encumbrances)			0	0
5.	Cash (\$52,213,135 , Schedule E-Part 1), cash equivalents				
	(\$48,591,004 , Schedule E-Part 2) and short-term				
	investments (\$1,997,987 , Schedule DA)	102,802,125		102,802,125	46,879,684
6.	Contract loans (including \$premium notes)			0	0
7.	Derivatives (Schedule DB)			0	0
8.	Other invested assets (Schedule BA)			l l	0
9.	Receivables for securities				0
					_
10.	Securities lending reinvested collateral assets (Schedule DL)				0
11.	Aggregate write-ins for invested assets				0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	197, 159, 334	0	197 , 159 , 334	146,800,052
13.	Title plants less \$charged off (for Title insurers				
	only)			0	0
14.	Investment income due and accrued	611,704		611,704	575,736
15.	Premiums and considerations:			·	
	15.1 Uncollected premiums and agents' balances in the course of				
	collection	6 502 121	250 040	6,244,083	6 216 067
		0,502,131	230,040	0,244,003	0,210,901
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$earned				
	but unbilled premiums)	21, 128, 997		21,128,997	22, 192, 664
	15.3 Accrued retrospective premiums (\$) and				
	contracts subject to redetermination (\$)			0	0
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	37.293.717		37,293,717	24.014.970
	16.2 Funds held by or deposited with reinsured companies			1	0
	16.3 Other amounts receivable under reinsurance contracts				0
17					_
17.	Amounts receivable relating to uninsured plans				0
18.1	Current federal and foreign income tax recoverable and interest thereon				4,864,276
18.2	Net deferred tax asset	1,819,125	J9 , 115	1,810,010	0
19.	Guaranty funds receivable or on deposit			0	0
20.	Electronic data processing equipment and software			0	0
21.	Furniture and equipment, including health care delivery assets				
	(\$)			L0 L	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates				0
23.	Receivables from parent, subsidiaries and affiliates				0
24.	Health care (\$) and other amounts receivable				0
i					
25.	Aggregate write-ins for other-than-invested assets	1 , 1/1,2/2	1/8,813		22,002,910
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	278,600,077	445,976	278 , 154 , 101	227 , 267 , 575
27.	From Separate Accounts, Segregated Accounts and Protected				
	Cell Accounts.		ļ	0	0
28.	Total (Lines 26 and 27)	278,600,077	445,976	278, 154, 101	227, 267, 575
	S OF WRITE-INS		,	,	, , ,
1101.				n	0
1101.				1	0
1103.					0
1198.	Summary of remaining write-ins for Line 11 from overflow page			_	0
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0		0	0
2501.	PREPAID REINSURANCE PREMIUMS			0	19,077,921
2502.	FEE INCOME RECEIVABLE.	3,468,855			0
2503.	EQUITY FROM POOLS AND ASSOCIATIONS				3,524,989
2598.	Summary of remaining write-ins for Line 25 from overflow page			381,860	
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	7,171,272	1/0,013	6,992,459	22,602,910

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	15,955,920	11,234,402
Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		0
Loss adjustment expenses (Part 2A, Line 35, Column 9)		5,454,214
Commissions payable, contingent commissions and other similar charges		7, 125, 955
Other expenses (excluding taxes, licenses and fees)		
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1 Current federal and foreign income taxes (including \$	1	
7.2 Net deferred tax liability		
8. Borrowed money \$ and interest thereon \$	-	0
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$		
health experience rating refunds including \$		
Service Act)	30,663,681	41,048,341
10. Advance premium	6,079,491	4,416,583
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)		
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ certified) (Schedule F, Part 3, Column 78)		
17. Net adjustments in assets and liabilities due to foreign exchange rates	1	
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		
20. Derivatives	i i	_
21. Payable for securities		
22. Payable for securities lending		
Liability for amounts held under uninsured plans		
25. Aggregate write-ins for liabilities	1	
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	1	
29. Aggregate write-ins for special surplus funds	1	
30. Common capital stock		
31. Preferred capital stock		
32. Aggregate write-ins for other-than-special surplus funds		0
33. Surplus notes		0
34. Gross paid in and contributed surplus	83,007,995	83 ,007 ,995
35. Unassigned funds (surplus)	25,985,109	24,096,924
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$		0
36.2 shares preferred (value included in Line 31 \$		0
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	112,993,104	111,104,919
38. Totals (Page 2, Line 28, Col. 3)	278,154,101	227 , 267 , 575
DETAILS OF WRITE-INS		
2501. AMOUNTS TO BE ESCHEATED	609 , 472	645,835
2502.		0
2503.	-	0
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	609,472	645,835
2901.	i	
2902.		0
2903.		0
2998. Summary of remaining write-ins for Line 29 from overflow page		0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0
3201.		0
3202.		
3203.	1	
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)	0	0

#### **STATEMENT OF INCOME**

	STATEMENT OF INCOME		
		1 Current Year	2 Prior Year
1.	UNDERWRITING INCOME Premiums earned (Part 1, Line 35, Column 4)	74,489,598	47 , 101 , 131
2	DEDUCTIONS: Losses incurred (Part 2, Line 35, Column 7)	30 500 306	14.041.591
3	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	10 793 953	8,366,838
	Other underwriting expenses incurred (Part 3, Line 25, Column 2)		4,349,255
5.	Aggregate write-ins for underwriting deductions	0	0
6.	Total underwriting deductions (Lines 2 through 5)	80,899,109	26,757,684
	Net income of protected cells		
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(0,409,511)	20 , 343 , 448
	INVESTMENT INCOME		
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17)	3,491,804	2,612,126
10.	Net realized capital gains (losses) less capital gains tax of \$(Exhibit of Capital Gains (Losses))	(43,405)	25,405
11.	Net investment gain (loss) (Lines 9 + 10)	3 ,448 ,399	2,637,531
	OTHER INCOME		
12.	Net gain (loss) from agents' or premium balances charged off (amount recovered \$0 amount		
,_	charged off \$		
1	Finance and service charges not included in premiums.	1,482,963 2,248,609	1,575,957 4,714,753
i	Aggregate write-ins for miscellaneous income		5,562,079
ı	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes		0,002,019
-	(Lines 8 + 11 + 15)	26,533	28,543,058
1	Dividends to policyholders		0
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	26 533	28 543 058
19.	Federal and foreign income taxes incurred	3,650,479	2,622,249
i	Net income (Line 18 minus Line 19) (to Line 22)	(3,623,946)	25,920,809
	CAPITAL AND SURPLUS ACCOUNT		
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	111.104.919	89.363.619
	Net income (from Line 20)		
	Net transfers (to) from Protected Cell accounts		
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$	1,438,226	1,008,441
25.	Change in net unrealized foreign exchange capital gain (loss)	2 EOO 77E	/F 627 220\
20.	Change in net deferred income tax	478 123	(389 900)
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	(10.000)	4.000
29.	Change in surplus notes		0
30.	Surplus (contributed to) withdrawn from protected cells		0
i i	Cumulative effect of changes in accounting principles		0
32.	Capital changes:		0
	32.1 Paid in		 0
	32.3 Transferred from surplus (Glock Dividend)		0
33.	Surplus adjustments:		
	33.1 Paid in		0
	33.2 Transferred to capital (Stock Dividend)		
24	33.3 Transferred from capital		0
i	Net remittances from or (to) Home Office		 n
ı	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		0
1	Aggregate write-ins for gains and losses in surplus	16,007	825,181
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37)	1,888,185	21,741,300
	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	112,993,104	111,104,919
	LS OF WRITE-INS		0
			 n
i .			0
1	Summary of remaining write-ins for Line 5 from overflow page		0
0599.	Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0
i	FEE INCOME		4,493,988
	OTHER INCOME.	, , , , , , , , , , , , , , , , , , ,	220,765
i	Summary of remaining write-ins for Line 14 from overflow page		 n
	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	2,248,609	4,714,753
	PRIOR YEAR TAX ADJUSTMENT		825,181
	Schedule F Penalty & Other Adj		0
3703.			0
1	Summary of remaining write-ins for Line 37 from overflow page		0
3799.	Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)	16,007	825,181

### **CASH FLOW**

		1	2
		Current Year	Prior Year
	Cash from Operations		
	Premiums collected net of reinsurance		32,762,6
	Net investment income		
	Miscellaneous income		5,562,0
	Total (Lines 1 through 3)		41,445,1
	Benefit and loss related payments		4,974,1
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
	Commissions, expenses paid and aggregate write-ins for deductions	1 1 1	15 , 331 , 8
	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) net of \$tax on capital gains (losses)		3,563,9
0.	Total (Lines 5 through 9)		23,869,6
1.	Net cash from operations (Line 4 minus Line 10)	33,206,611	17,575,
	Cash from Investments		
	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	9,293,584	19 , 534 ,
	12.2 Stocks		
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(4,019)	
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	9,289,565	19,534,
	Cost of investments acquired (long-term only):		
	13.1 Bonds	2,759,686	17,936,
	13.2 Stocks		
	13.3 Mortgage loans		
	13.4 Real estate		
	13.5 Other invested assets		
	13.6 Miscellaneous applications	10	
	13.7 Total investments acquired (Lines 13.1 to 13.6)	2,759,696	17,936,
4.	Net increase (decrease) in contract loans and premium notes	0	
5.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	6,529,869	1,598,
	Cash from Financing and Miscellaneous Sources		
6.	Cash provided (applied):		
	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock.		
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)		(20,557,
	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)		(20,557,
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS	, , , , , ,	, , , , ,
8.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	55.922.441	(1.383.
	Cash, cash equivalents and short-term investments:		( , , , , , , , , , , , , , , , , , , ,
	19.1 Beginning of year	46,879,684	48.263.
	19.2 End of year (Line 18 plus Line 19.1)	102,802,124	46,879,

### **UNDERWRITING AND INVESTMENT EXHIBIT**

PART 1 - PREMIUMS EARNED

	TAILT-1	REMIUMS EARN	2	3	4
	Line of Dunings	Net Premiums Written per	Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's	Unearned Premiums Dec. 31 Current Year - per Col. 5	Premiums Earned During Year
	Line of Business	Column 6, Part 1B	Part 1	Part 1A	(Cols. 1 + 2 - 3)
1.	Fire	2,026,894	215,643	1,357,312	885,225
2.	Allied lines	1,619,170	463 , 170	1,119,698	962,642
3.	Farmowners multiple peril	0	0	0	0
4.	Homeowners multiple peril	58,772,414	39,463,318	26,953,510	71,282,222
5.	Commercial multiple peril	0	0	0	0
6.	Mortgage guaranty	0	0	0	0
8.	Ocean marine	0	0	0	0
9.	Inland marine	1,347,162	384,526	741,900	989,788
10.	Financial guaranty	0	0	0	0
11.1	Medical professional liability-occurrence				0
11.2	Medical professional liability-claims-made				0
12.	Earthquake				
13.	Group accident and health				
14.	Credit accident and health (group and individual)				
	Other accident and health				0
15.					
16.	Workers' compensation				
17.1	Other liability-occurrence				
17.2	Other liability-claims-made				0
17.3	Excess workers' compensation				0
18.1	Products liability-occurrence				0
18.2	Products liability-claims-made	0	0	0	0
19.1,19.	2 Private passenger auto liability	0	0	0	0
19.3,19.	4 Commercial auto liability	0	0	0	0
21.	Auto physical damage	0	0	0	0
22.	Aircraft (all perils)	0	0	0	0
23.	Fidelity	0	0	0	0
24.	Surety	0	0	0	0
26.	Burglary and theft	0	0	0	0
27.	Boiler and machinery			156,806	244 , 259
28.	Credit			0	0
29.	International			0	0
30.	Warranty			0	0
31.	Reinsurance-nonproportional assumed property			n	n
32.	Reinsurance-nonproportional assumed liability			n	n
	Reinsurance-nonproportional assumed financial lines				U
33.					U
34.	Aggregate write-ins for other lines of business		0	0 00 000	7,
35.	TOTALS DE WRITE INC	64,104,938	41,048,341	30,663,681	74,489,598
	DF WRITE-INS	_		_	•
3401.		0	0	0	0
3402.			0	<u>0</u>	0
3403.			0	0	0
3498.	Sum. of remaining write-ins for Line 34 from overflow page	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0	0

### **UNDERWRITING AND INVESTMENT EXHIBIT**

#### PART 1A - RECAPITULATION OF ALL PREMIUMS

		1	2	3	4	5
		Amount Unearned (Running One Year or Less from Date of Policy)	Amount Unearned (Running More Than One Year from Date of Policy)	Earned but	Reserve for Rate Credits and Retrospective Adjustments Based	Total Reserve for Unearned Premiums
	Line of Business	(a)	(a)	Unbilled Premium	on Experience	Cols. 1 + 2 + 3 + 4
	re				l	1 , 357 , 312
2. All	lied lines	1,119,698				1 , 119 , 698
	armowners multiple peril				l	
4. Ho	omeowners multiple peril	26,953,510				26,953,510
5. Co	ommercial multiple peril					0
6. Mo	ortgage guaranty					0
8. Od	cean marine					0
9. Inl	land marine	741,900				741,900
10. Fir	nancial guaranty					0
11.1 Me	edical professional liability-occurrence					0
11.2 Me	edical professional liability-claims-made					0
12. Ea	arthquake	42,005				42,005
	roup accident and health					0
14. Cr	redit accident and health (group and individual)					0
15. Ot	ther accident and health					0
16. W	orkers' compensation					0
17.1 Ot	ther liability-occurrence	292,450				292,450
	ther liability-claims-made					
	xcess workers' compensation					
	roducts liability-occurrence					
	roducts liability-claims-made					
	rivate passenger auto liability					
	ommercial auto liability					
	uto physical damage					
	rcraft (all perils)					
	delity					
	urety					
	urglary and theft					156 006
	oiler and machinery					156,806
	redit					
	ternational					J
	arranty					0
	einsurance-nonproportional assumed property					0
	einsurance-nonproportional assumed liability					0
	einsurance-nonproportional assumed financial					0
	ggregate write-ins for other lines of business		0	0	0	0
_	OTALS	30,663,681	0	0	0	30,663,681
	ccrued retrospective premiums based on experier		-	-		33,000,00.
	arned but unbilled premiums					30,663,681
	alance (Sum of Lines 35 through 37)					30,003,001
DETAILS OF	WRITE-INS					_
3401						
3402					<b></b>	0
3403						ļ0
	um. of remaining write-ins for Line 34 from verflow page	0	0	0	0	0
	otals (Lines 3401 through 3403 plus 3498) (Line					
	4 above)	0	0	0	0	0

<sup>(</sup>a) State here basis of computation used in each case.

#### **UNDERWRITING AND INVESTMENT EXHIBIT**

#### **PART 1B - PREMIUMS WRITTEN**

		1	Reinsuranc		ice Ceded	6	
	Line of Dunings	Direct Business	2 From	3 From	4 To	5 To	Net Premiums Written Cols.
	Line of Business	(a)	Affiliates	Non-Affiliates	Affiliates	Non-Affiliates	1+2+3-4-5
1.	Fire	· · ·				·	2,026,894
2.	Allied lines	1					1,619,170
3.	Farmowners multiple peril						0
4.	Homeowners multiple peril					264,246,315	58 ,772 ,414
5.	Commercial multiple peril						0
6.	Mortgage guaranty						0
8.	Ocean marine	i					0
9.	Inland marine	3,408,411				2,061,249	1,347,162
10.	Financial guaranty						0
11.1	Medical professional liability-occurrence						0
11.2	Medical professional liability-claims-made						0
12.	Earthquake	182,648				109,944	72,704
13.	Group accident and health						0
14.	Credit accident and health (group and individual)						0
15.	Other accident and health						0
16.	Workers' compensation						0
17.1	Other liability-occurrence	2,311,794				2,060,546	251,248
17.2	Other liability-claims-made						0
17.3	Excess workers' compensation						0
18.1	Products liability-occurrence						0
18.2	Products liability-claims-						0
19.1,19.	2 Private passenger auto liability						0
19.3,19.	4 Commercial auto liability						0
21.	Auto physical damage						0
22.	Aircraft (all perils)						0
23.	Fidelity						0
24.	Surety						0
26.	Burglary and theft						0
27.	Boiler and machinery	i			i	4,856,887	15,346
28.	Credit	1					0
		i i					٥٥
29.	International	i					
30.	Warranty						
31.	Reinsurance- nonproportional assumed property	xxx					0
32.	Reinsurance- nonproportional assumed liability						0
33.	Reinsurance- nonproportional assumed financial lines						
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0
35.	TOTALS	339,613,890	0	0	0	275,508,952	64,104,938
	OF WRITE-INS	000,010,000	U	<u> </u>		270,000,002	01,101,000
3401.	OF WRITE-INS					n	0
							٥
3402.							0
3403.							0
3498.	Sum. of remaining write- ins for Line 34 from overflow page	0	0	0	0	0	0
3499.	Totals (Lines 3401 through						
1	3403	0		0	0	0	0

(a) Does the company's direct premiums written include premiums recorded on an installment basis?	Yes	[	]	No [ X ]	
If yes: 1. The amount of such installment premiums \$					
2. Amount at which such installment promiums would have been reported had they been rea	ordod o	n 01		anualizad basia ¢	

### **UNDERWRITING AND INVESTMENT EXHIBIT**

PART 2 - LOSSES PAID AND INCURRED

			LOSSES PAID AND	INCURRED				
		Losses Paid I			5	6	7	8
Line of Business	1 Direct Business	2 Reinsurance Assumed	3  Reinsurance Recovered	4  Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1. Fire			507,057	395,747	164,486	103,536	456,697	51.6
2. Allied lines			1,008,048	445,919	257,998	86,015	617 ,902	64.2
Farmowners multiple peril				0	0	0	0	0.0
4. Homeowners multiple peril	158,367,742		124,790,774	33,576,968	14,755,422	10,370,009	37,962,381	53.3
Commercial multiple peril				0	0	0	0	0.0
6. Mortgage guaranty				0	0	0	0	0.0
8. Ocean marine				0	0	0	0	0.0
9. Inland marine			861,512	373,505	161,409	81,226	453,688	45.8
10. Financial guaranty				0	0	0	0	0.0
11.1 Medical professional liability-occurrence				0	0	0	0	0.0
11.2 Medical professional liability-claims-made				0	0	0	0	0.0
12. Earthquake				0	0	0	0	0.0
13. Group accident and health				0	0	0	0	0.0
14. Credit accident and health (group and individual)				0	0	0	0	0.0
15. Other accident and health				0	0	0	0	0.0
16. Workers' compensation				0	0	0	0	0.0
17.1 Other liability-occurrence			16,307	145,071	616,605	593,616	168,060	227 .6
17.2 Other liability-claims-made				0	0	0	0	0.0
17.3 Excess workers' compensation				0	0	0	0	0.0
18.1 Products liability-occurrence				0	0	0	0	0.0
18.2 Products liability-claims-made				0	0	0	0	0.0
19.1,19.2 Private passenger auto liability				0	0	0	0	0.0
19.3,19.4 Commercial auto liability				0	0	0	0	0.0
21. Auto physical damage				0	0	0	0	0.0
22. Aircraft (all perils)				0	0	0	0	0.0
23. Fidelity				0	0	0	0	0.0
24. Surety				0	0	0	0	0.0
26. Burglary and theft				0	0	0	0	0.0
27. Boiler and machinery			920,526	(158,332)	0	0	(158,332)	(64.8
28. Credit	·			0 .	0	0		0.0
29. International				0 L	0	0	0	0.0
30. Warranty					0	0	0	0.0
31. Reinsurance-nonproportional assumed property	xxx				0	0 l	0	0.0
32. Reinsurance-nonproportional assumed liability	XXX				0		0	0.0
33. Reinsurance-nonproportional assumed financial lines	XXX			0	0	0	0	0.0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0.0
35. TOTALS	162,883,102	0	128,104,224	34,778,878	15,955,920	11,234,402	39.500.396	53.0
DETAILS OF WRITE-INS		•	,,	21,112,012	,	,,		
3401.				0	0	0	0	0.0
3402.				0	0	0	0	0.0
3403.				0	0	0	0	0.0
3498. Sum. of remaining write-ins for Line 34 from overflow page		0	0	0	0	0	0	0.0
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above)	0	0	0	0	0	0	0	0.0

### **UNDERWRITING AND INVESTMENT EXHIBIT**

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		PART 2A	- UNPAID LOS	SES AND LOSS	ADJUSTMENT					
			Reporte	ed Losses			curred But Not Reporte	ed	8	9
	Line of Business	1 Direct	2 Reinsurance Assumed	3  Deduct Reinsurance Recoverable	4  Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded	Net Losses Unpaid (Cols. 4 +5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1.	Fire	252,597	Assumed	128,077	124,520	123,086	Assumed	83,120	164,486	19,072
2.	Allied lines	428.751		227,632	201,119	142.472			257,998	12,298
3.	Farmowners multiple peril	420,731		227 ,032	I201, 113	142,472				12,200
4.	Homeowners multiple peril				8,386,390	41,278,507			14.755.422	6.403.504
5.	Commercial multiple peril			1	n				n	, , , , , , , , , , , , , , , , ,
6.	Mortgage guaranty								 N	
8.	Ocean marine			·	u				 1	
9.	Inland marine	330,678		207,675	123.003	114 . 132		75.726	161.409	1.757
10.	Financial guaranty			207 ,073	120,000	114,102				1,101
11.1	Medical professional liability-occurrence			· <del> </del>						
11.1	Medical professional liability-occurrence  Medical professional liability-claims-made			·	I					
	Earthquake			·	J					
12.					l					
13.	Group accident and health				J				(a)0	
14.	Credit accident and health (group and individual)				ļ				U	
15.	Other accident and health			-	JU				(a)0	
16.	Workers' compensation	1,801,853		1.382.466	419,387	1,566,170		1.368.952	616,605	115,650
17.1	Other liability-occurrence			1,382,400	419,387	1,500,170		1,308,952	010,000	110,000
17.2	Other liability-claims-made			-	łn					
17.3	Excess workers' compensation				ļ0				0	
18.1	Products liability-occurrence				ļ0				0	
18.2	Products liability-claims-made				J0				0	
19.1,19	.2 Private passenger auto liability				J0				0	
	.4 Commercial auto liability				ļ0				0	
21.	Auto physical damage				ļ0				0	
22.	Aircraft (all perils)				J0				0	
23.	Fidelity				ļ0				Ω	
24.	Surety				<b>.</b> 0				0	
26.	Burglary and theft				<b>.</b> 0				0	
27.	Boiler and machinery	121,419		121,419	J0	124,396		124,396	0	
28.	Credit				J0				0	
29.	International				0				0	
30.	Warranty				J0				0	
31.	Reinsurance-nonproportional assumed property	xxx			<b>.</b> 0	XXX			0	
32.	Reinsurance-nonproportional assumed liability	xxx			<b></b> 0	XXX			0	
33.	Reinsurance-nonproportional assumed financial lines	xxx			J0	XXX			0	
34.	Aggregate write-ins for other lines of business		0	]0	<b>J</b> 0	0	0	J0	0	0
35.	TOTALS	49,658,163	0	40,403,744	9,254,419	43,348,763	0	36,647,262	15,955,920	6,552,281
DETAILS	OF WRITE-INS									
3401.					<b></b> 0				0	
3402.					<b></b> _0				0	
3403.					<b>l</b> 0					
3498.	Sum. of remaining write-ins for Line 34 from overflow page		0	<u></u>	<b>.</b> 0	0	0	J0		0
3499.	Totals (Lines 3401 through 3403 + 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0

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

### **UNDERWRITING AND INVESTMENT EXHIBIT**

PART 3 - EXPENSES

	PARI 3	- EXPENSES			
		1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1.	Claim adjustment services:				
	1.1 Direct	17 ,845 ,734			17 , 845 , 734
	1.2 Reinsurance assumed				0
	1.3 Reinsurance ceded	13,019,713			13,019,713
	1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)	4.826.021	0	0	4.826.021
2	Commission and brokerage:				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	2.1 Direct, excluding contingent		52 406 175		52 406 175
	Z.2 Reinsurance assumed, excluding contingent				
	2.3 Reinsurance ceded, excluding contingent		i i		
	2.4 Contingent-direct				
	2.5 Contingent-reinsurance assumed				
	2.6 Contingent-reinsurance ceded				J
	2.7 Policy and membership fees				0
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)	0	(11,725,693)	0	(11,725,693
	Allowances to manager and agents				
	Advertising				
5.	Boards, bureaus and associations	55,492	2,128,565		2, 184, 057
6.	Surveys and underwriting reports		3,029,487		3,029,487
7.	Audit of assureds' records				0
8.	Salary and related items:				
	8.1 Salaries	3,273,362	14,510,095		17 , 783 , 457
	8.2 Payroll taxes				
a	Employee relations and welfare		1,964,245		
	Insurance		151,013		
	Directors' fees		i i		
	Travel and travel items				
	Rent and rent items		361,559		
	Equipment		2,022,355		1
	Cost or depreciation of EDP equipment and software				976,865
16.	Printing and stationery	168,990	804,423		973,413
17.	Postage, telephone and telegraph, exchange and express	195,129	1,193,560		1,388,689
18.	Legal and auditing	262,632	1,054,807		1,317,439
	Totals (Lines 3 to 18)	5,424,119	30 , 109 , 048	0	35,533,167
	Taxes, licenses and fees:				
	20.1 State and local insurance taxes deducting guaranty association				
	credits of \$		7 954 963		7 954 963
	20.2 Insurance department licenses and fees		i i		171,913
	20.3 Gross guaranty association assessments				404,529
					,
	20.4 All other (excluding federal and foreign income and real estate)		4,545		5,743
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
	Real estate expenses				
22.					
23.	Reimbursements by uninsured plans				i .
24.	Aggregate write-ins for miscellaneous expenses	506,737	3,721,333	254,687	4,482,757
25.	Total expenses incurred	10 , 793 , 953	30,604,760	254,687	(a)41,653,400
26.	·				16,243,931
	Add unpaid expenses-prior year			0	
28.	Amounts receivable relating to uninsured plans, prior year		i i	0	
				0	n
	Amounts receivable relating to uninsured plans, current year		20, 200, 700	054 007	20 242 225
	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	9,695,886	29,362,762	254,687	39,313,335
	LS OF WRITE-INS				
	CONSULTING SERVICES				3,057,638
	BANK AND CREDIT CARD SERVICE CHARGES				1,636,916
2403.	MISCELLANEOUS EXPENSE	6,532	(473,016)		(466,484
2498.	Summary of remaining write-ins for Line 24 from overflow page	0	0	254,687	254,687
2499.	Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)	506,737	3,721,333	254,687	4,482,757

### **EXHIBIT OF NET INVESTMENT INCOME**

		1 Collected During Year	2 Earned During Year
1.	U.S. Government bonds	(a)1,139,041	1,374,359
1.1	Bonds exempt from U.S. tax		4 000
1.2	Other bonds (unaffiliated)		1,327,855
1.3	Bonds of affiliates		, , , , , , , , , , , , , , , , , , , ,
2.1	Preferred stocks (unaffiliated)		
2.11			
2.2	Common stocks (unaffiliated)		
1	Common stocks of affiliates		
3.	Mortgage loans		
4.	Real estate	1 ' '	
5.	Contract loans.	( )	
6.	Cash, cash equivalents and short-term investments		950,973
7.	Derivative instruments		
8.	Other invested assets	1 1	
9.	Aggregate write-ins for investment income		
10.	Total gross investment income	3.584.794	
11.	Investment expenses		
12.	Investment taxes, licenses and fees, excluding federal income taxes		107
13.	Interest expense		1 ' '
14.	Depreciation on real estate and other invested assets		1 17
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Lines 11 through 15)		254,687
17.	Net investment income (Line 10 minus Line 16)	1	3,491,004
	LS OF WRITE-INS		
0901.	OTHER INTEREST INCOME.	91,672	91,672
0902.			
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)	91,672	91,672
1501.			
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		
1599.			1
	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)	4 000	0
(a) Incl	udes \$19,178 accrual of discount less \$448,390 amortization of premium and less \$		d interest on purchases.
(D) INCH	udes \$amortization of premium and less \$amortization of premium and less \$  ### des \$	paid for accrue	u uiviuenas on purchases.
			u interest on purchases.
	udes \$		d (ataunat an arranhan)
	udes \$	paid for accrue	a interest on purchases.
	udes \$amortization of premium.	de dia a fada a di Como di	a attaile stale la 7 :
	udes \$investment expenses and \$investment taxes, licenses and fees, exc	ciuding federal income taxes	s, attributable to
	regated and Separate Accounts.		
	udes \$interest on surplus notes and \$interest on capital notes.		
(i) Incli	udes \$depreciation on real estate and \$depreciation on other invested asse	ets.	

**EXHIBIT OF CAPITAL GAINS (LOSSES)** 

		0. 0/1		<b>0 (2002</b>	<b>U</b> ,	
		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds			0		
1.1	Bonds exempt from U.S. tax			0		
1.2	Other bonds (unaffiliated)	(39,376)		(39,376)		
1.3	Bonds of affiliates	0	0	0	0	0
2.1	Preferred stocks (unaffiliated)		0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)	0	0	0	0	0
2.21	Common stocks of affiliates	0	0	0	1,438,226	0
3.	Mortgage loans	0	0	0	0	0
4.	Real estate	0	0	0		0
5.	Contract loans			0		
6.	Cash, cash equivalents and short-term investments	(4,029)		(4,029)	10	0
7.	Derivative instruments			0		
8.	Other invested assets	0	0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	(43,405)	0	(43,405)	1,438,236	0
DETAI	LS OF WRITE-INS					
0901.				0		
0902.				0		
0903.				0		
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)	0	0	0	0	0

### **EXHIBIT OF NONADMITTED ASSETS**

		1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)	0	0	0
	Stocks (Schedule D):			
	2.1 Preferred stocks	0	0	0
	2.2 Common stocks	0	0	0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens	i	i	0
	3.2 Other than first liens	0	0	0
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			
	4.2 Properties held for the production of income			_
_	4.3 Properties held for sale	0	0	0
5.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and			0
	short-term investments (Schedule DA)			0
	Contract loans			0
	Derivatives (Schedule DB)			0
	Other invested assets (Schedule BA)			0
	Receivables for securities			0
	Securities lending reinvested collateral assets (Schedule DL)			0
	Aggregate write-ins for invested assets			0
	Subtotals, cash and invested assets (Lines 1 to 11)			0
	Investment income due and accrued			U
	Premiums and considerations:			0
13.	15.1 Uncollected premiums and agents' balances in the course of	250 040	220 026	(20, 222)
	collection		228,826	(29,222)
16			0	0
10.	16.1 Amounts recoverable from reinsurers	0	0	0
	16.2 Funds held by or deposited with reinsured companies			0
	16.3 Other amounts receivable under reinsurance contracts			0
17.	Amounts receivable relating to uninsured plans			0
	Current federal and foreign income tax recoverable and interest thereon		0	
	Net deferred tax asset		0	(9,115)
	Guaranty funds receivable or on deposit			0
			0	
				0
	Net adjustment in assets and liabilities due to foreign exchange rates		0	0
23.	Receivables from parent, subsidiaries and affiliates	0	_	0
24.	Health care and other amounts receivable	0	0	0
	Aggregate write-ins for other-than-invested assets		695,273	516,460
	Total assets excluding Separate Accounts, Segregated Accounts and			
	Protected Cell Accounts (Lines 12 to 25)	445,976	924,099	478 , 123
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
28.	Total (Lines 26 and 27)	445,976	924,099	478,123
DETAII	LS OF WRITE-INS			
1101.			0	0
1102.			0	0
1103.			0	0
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0
2501.	PREPAID OUTSIDE SERVICE COSTS	178,813	695,273	516,460
2502.			0	0
2503.			0	0
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	178,813	695,273	516,460

#### 1. Summary of Significant Accounting Practices

#### A. Accounting Practices

The accompanying financial statements of Narragansett Bay Insurance Company (the "Company" or "NBIC") are presented on the basis of accounting practices prescribed or permitted by the Rhode Island Insurance Department.

The Rhode Island Insurance Department recognizes only statutory accounting practices prescribed or permitted by the State of Rhode Island for determining and reporting the financial condition and results of operations of an insurance company, and for determining its solvency under the Rhode Island Insurance Law. The National Association of Insurance Commissioners' ("NAIC") *Accounting Practices and Procedures Manual* ("NAIC SAP") has been adopted as a component of prescribed or permitted practices by the State of Rhode Island.

A reconciliation of the Company's surplus between the practice permitted by the Rhode Island Department and the NAIC SAP is shown below:

		SSAP#	F/S Page	F/S Line #	2018	2017
NET I	NCOME (LOSS)					
(1)	Narragansett Bay Insurance Company state basis (Page 4, Line 20, Columns 1 & 2)				\$ (3,623,946)	\$ 25,920,809
(2)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP:				-	-
(3)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP:				\$ -	\$ 
(4)	NAIC SAP (1-2-3=4)				\$ (3,623,946)	\$ 25,920,809
SURP	<u>LUS</u>					
(5)	Narragansett Bay Insurance Company state basis (Page 3, Line 37, Columns 1 &2)				\$ 112,993,104	\$ 111,104,919
(6)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP:				-	-
(7)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP:				\$ -	
(8)	NAIC SAP (5-6-7=8)				\$ 112,993,104	\$ 111,104,919

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

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

#### C. Accounting Policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business and are based on reports received from ceding companies for reinsurance assumed and contract terms for reinsurance ceded.

Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receiveble.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments are stated at amortized costs.
- (2) Bonds not backed by other loans are stated at amortized cost using the scientific interest method.
- (3) Unaffiliated common stocks are stated at market value.
- (4) Preferred stocks

N/A

(5) Mortgage loans on real estate

N/A

- (6) Loan-backed securities are stated at amortized cost. The retrospective amortization adjustment method is used to value all loan-backed securities.
- (7) Investments in uncombined subsidiaries controlled and affiliated companies in which the Company had an interest of 20% or more are carried on the equity basis.

- (8) Investments in joint ventures, partnerships and limited liability companies N/A
- (9) Derivatives N/A
- (10) N/A
- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- (12) The Company has not modified its capitalization policy from the prior period.
- (13) Method used to estimate pharmaceutical rebate receivables
- D. Going Concern

 $\tilde{N}/\Delta$ 

2. Accounting Changes and Corrections of Errors

N/A

3. Business Combinations and Goodwill

The Company had no unamortized goodwill and did not participate in a business combination during the years ended December 31, 2018 and 2017.

A. Statutory Purchase Method

N/A

B. Statutory Merger

N/A

C. Impairment Loss

N/A

4. Discontinued Operations

N/A

- Investments
  - A. Mortgage Loans, including Mezzanine Real Estate Loans

N/A

B. Troubled Debt Restructuring for Creditors

N/A

C. Reverse Mortgages

N/A

- D. Loan-Backed Securities
  - (1) Prepayments assumptions for Mortgage-Backed Securities, Collateralized Mortgage Obligations and Other Structured Securities were generated using a purchased prepayment model. The prepayment model uses a number of factors to estimate prepayment activity including the time of year (seasonality), current levels or interest rates (refinancing incentive), economic activity (including housing turnover) and term and age of the underlying collateral (burnout, seasoning).
  - (2) N/A
  - (3) N/A
  - (4) The fair value and gross unrealized losses by length of time that individual security within the Company's portfolio had been in continuous unrealized loss position were as follows at December 31, 2018:
    - a. The aggregate amount of unrealized losses:

1. Less than 12 Months \$ (226,300) 2. 12 Months or Longer \$ (866,431)

b. The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months \$ 13,169,294 2. 12 Months or Longer \$ 29,942,442 (5) The Company routinely assesses whether declines in fair value of its investments represent impairments that are other than temporary. There are several factors that are considered in the assessment of a security, which include: (a) the time period during which there has been a significant decline below cost; (b) the extent of the decline below cost; (c) The Company's intent and ability to hold the security; (d) the potential for the security to recover in value; (e) an analysis of the financial condition of the issuer; and (f) an analysis of the collateral structure and credit support of the security, if applicable.

When the Company has determined that an other-than-temporary decline in the fair value of the security exists, the cost of the security is written down to its fair value and the unrealized loss at the time of the determination is charged to income through the recognition of a realized capital loss. There were no other than temporary charges recorded during the years ended December 31, 2018 and 2017.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

 $\begin{array}{cc} \text{H.} & \text{Repurchase Agreements Transactions Accounted for as a Sale} \\ & \text{N/A} \end{array}$ 

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

J. Real Estate

N/A

K. Low Income Housing Tax Credits (LIHTC)

N/A

L. Restricted Assets

In accordance with revisions to SSAP No. 1, effective in 2013, the following tables disclose quantitative information about the Company's restricted assets by category of restricted asset for the year ended December 31, 2018.

(1) Restricted assets (including pledged) summarized by restricted asset category

								Current Year				
		(	Gross (Admit	ted & Nonadmi	tted) Restricted					Perce	Percentage	
			Current Yea	r	_	6	7	8	9	10	11	
D. C. L.	1	2	3	4	5	Ŭ	,			10	11	
Restricted Asset Category	Total General Account (G/A)	G/A Supporti ng Protecte d Cell Account Activity (a)	Total Protecte d Cell Account Restricte d Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Nonadmitted Restricted	Total Current Year Admitted Restricted	Gross Restricted to Total Assets	Admitted Restricted to Total Admitted Assets	
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	0.0%	
b. Collateral held under security lending agreements	-	-	-	-	-	-	-	-	-	0.0%	0.0%	
c. Subject to repurchase agreements	-	-	-	-	-	-	-	-	-	0.0%	0.0%	
d. Subject to reverse repurchase agreements	_	_	-	-	_	-	_		-	0.0%	0.0%	
e. Subject to dollar repurchase agreements	-	-	-	-	_	-	-	-	-	0.0%	0.0%	
f. Subject to dollar reverse repurchase			_		_			_		0.0%	0.0%	
g. Placed under option contracts	-	-				-	-		-	0.0%	0.0%	
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	_	_	_	_	_	_	_	_	_	0.0%	0.0%	
i. FHLB capital stock	-	-	-	-	-	-	-	-	-	0.0%	0.0%	
j. On deposit with states k. On deposit with other	\$ 1,302,504	-	-	-	\$ 1,302,504	\$ 603,478	\$ 699,026	-	\$ 1,302,504	0.5%	0.5%	
regulatory bodies  1. Pledged	-	-	-	-	-	-	-	-	-	0.0%	0.0%	
collateral to FHLB (including assets backing funding										0.004	0.004	
agreements) m. Pledged as collateral not captured in other	-	-	-	-	-	-	-	-	-	0.0%	0.0%	
n. Other restricted assets	-	-	-	-	-	-	-	-	-	0.0%	0.0%	
o. Total Restricted Assets	\$ 1,302,504 (a) Subset of 6	\$ -	\$ -	\$ -	\$ 1,302,504	603,478	\$ 699,026	\$ -	\$ 1,302,504	0.5%	0.5%	

Subset of column 1
Subset of column 3
Column 5 divided by Asset Page, Column 1, Line 28
Column 9 divided by Asset Page, Column 3, Line 28

<sup>(</sup>a) (b) (c) (d)

(2) Detail of Assets Pledged as Collateral Not Captured in Other Categories  $N/\Delta$ 

(3) Detail of Other Restricted

N/A

(4) Collateral Received and Reflected as Assets Within the Financial Statements

N/A

#### M. Working Capital Finance Investments

(1) Aggregate Working Capital Finance Investments (WCFI) Book/Adjusting Carrying Value by NAIC Designation:

(2) Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs:

N/A

(3) Events of Default of Working Capital Finance Investments

N/A

N. Offsetting and Netting of Assets and Liabilities

N/A

O. Structured Notes

N/A

P. Securities

N/A

Q. Short Sales

N/A

R. Prepayment Penalty and Acceleration Fees

N/A

- 6. Joint Ventures, Partnerships and Limited Liability Companies
  - A. Detail for Those Greater than 10% of Admitted Assets

N/A

B. Write-downs for Impairments

N/A

- 7. Investment Income
  - A. Due and Accrued Investment Income

The Company non-admits investment income due and accrued if amounts are over 90 days past due.

B. Amounts Non-Admitted

No investment income due and accrued was excluded from surplus as of December 31, 2018.

8. Derivative Instruments

N/A

- 9. Income Taxes
  - A. The components of the net deferred tax asset (DTA) or deferred tax liability (DTL) at December 31 are as follows:

ı										
		12/31/2018			12/3 1/20 17		Change			
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	
1	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col4+5) Total	(Coll-4) Ordinary	(Col2-5) Capital	(Co17+8) Total	
(a) Gross Deferred Tax Assets	2,032,514	9,115	2,041,629	2,455,260		2,455,260	(422,746)	9,115	(413,631)	
(b) Statutory Valuation Allowance Adjustments	-	-	-	-	-	-	-	-	-	
(c) Adjusted Gross Deferred Tax Assets (la-lb)	2,032,514	9,115	2,041,629	2,455,260	-	2,455,260	(422,746)	9,115	(413,631)	
(d) Deferred Tax Assets Nonadmitted	-	9,115	9,115	-	-	-	-	9,115	9,115	
(e) Subtotal Net Admitted Deferred Tax Asset (lc-ld)	2,032,514	-	2,032,514	2,455,260	-	2,455,260	(422,746)	-	(422,746)	
(f) Deferred Tax Liabilities	222,504	-	222,504	4,235,025	-	4,235,025	(4,012,521)	-	(4,012,521)	
(g) Net Admitted Deferred Tax Assets/ (Net Deferred Tax Liabilities) (le-lf)	1,8 10,0 10	_	1,8 10,0 10	(1,779,765)	_	(1,779,765)	3,589,775	_	3,589,775	
		12/31/2018	, ,	(, , , ,	12/31/2017			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	
2	Ordinary	Capital	(Coll+2) Total	Ordinary	Capital	(Col4+5) Total	(Coll-4) Ordinary	(Col2-5) Capital	(Co17+8) Total	
Admission Calculation Components SSAP No. 101:  (a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.  (b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)) and 2(b)2	-		-	1,573,349	-	1,573,349	(1,573,349)	-	(1,573,349)	
Below).  1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following	45,692	-	45,692	833,583	-	833,583	(787,891)	-	(787,891)	
the Balance Sheet Date.  2. Adjusted Gross Deferred Tax Assets	45,692	-	45,692	833,583	-	833,583	(787,891)	-	(787,891)	
Allo wed per Limitation Thres hold.			16,678,959			17,258,411	-	-	(579,452)	
Lesser of (b)lor (b)2. (c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Lia bilities	45,692 51,249	-	45,692 51,249	833,583 48,328	-	833,583 48,328	(787,891)	-	(787,891)	
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101 Total (2(a)+2(b)+2(c))	96,941	-	96,941	2,455,260	-	2,455,260	(2,358,319)	-	(2,358,319)	

3 (a) Ra ab

3	2018	2017
(a) Ratio Percentage Used to Determine Recovery Period and Threshold Limitation in 2(b)1 above.	435%	984%
(b) Amount of Adjusted Capital And Surplus Used To Determine Recovery Period and Threshold Limitation In 2(b)2 above	\$ 112,993,104	\$ 111,104,919

		12/3 1/20 18		12/31	1/2017	Change		
		(1)	(2)	(3)	(4)	(5)	(6)	
4	Impact of Tax-P lanning Strategies:	Ordinary Percentage	Capital Percentage	Ordinary Percentage	Capital Percentage	Total Ordinary Percentage	Total Capital Percentage	
(a)	Determination of Adjusted Gross Deferred Tax Assets, By Tax Character as a Percentage	0%	0%	0%	0%	0%	0%	
1. 2.	Adjusted Gross DTAs Amounts from Note 9Al(c) Percentage of Adjusted Gross DTAs By Tax	2,032,514	9,115	2,455,260	-	(422,746)	9,115	
	Character Attributable to the Impact of Tax Planning Strategies	0%	0%	0%	0%	-	0%	
3.	Net Admitted Adjusted Gross DTAs Amount from Note	2,032,514	-	2,455,260	-	(422,746)	-	
4.	Note 9Al(e) Percentage of Net Admitted Adjusted Gross DTAs by Tax Character Admitted because of the Impact of Tax Planning	0%	0%	0%	0%	0%	0%	
	Strategies							

 $(b) \ \ Does \ the \ Company's \ tax-planning \ strategies \ include \ the \ use \ of \ reinsurance?$ 

Yes [ ] No [X]

# B. Deferred tax liabilities are not recognized for the following amounts: $\ensuremath{N/A}$

#### $C. \quad Current \ Tax \ and \ Change \ in \ Deferred \ Tax$

(b) Foreign - 3,786,253 1,4 (d) Federal income tax on net capital gains -	
1 Current Income Tax  (a) Federal 3,786,253 1,4  (b) Foreign -  (c) Subtotal 3,786,253 1,4  (d) Federal income tax on net capital gains -	414,946 2,371,307 
(b) Foreign - 3,786,253 1,4 (d) Federal income tax on net capital gains -	207,303 (1,343,077)
(c) Subtotal 3,786,253 1,4 (d) Federal income tax on net capital gains -	
(d) Federal income tax on net capital gains -	
(e) Utilization of capital loss carry-forwards -	
(f) Other (135,774) 1,2	
	1,020,230
2 Deferred Tax Assets:	
(a) Ordinary	
	161,092 147,636
	909,527 (366,314)
(3) Policyholder reserves	
(4) Investments	_
(5) Deferred acquisition costs	
(6) Policyholder dividends accrual	
(7) Fixed assets	
(8) Compensation and benefits accrual	
(9) Pension accrual	
	104 061 (102 220)
	194,061 (102,320)
	100,130 (100,130)
(12) Tax credit carry-forward -	(1.610)
(13) Other (including items <5% of total ordinary tax assets) 88,832	90,451 (1,619)
	455,261 (422,747)
(b) Statutory valuation allowance adjustment -	-
(c) Non admitted -	
(d) Admitted ordinary deferred tax assets (2a99-2b-2c) 2,032,514 2,4	455,261 (422,747)
(e) Capital:	
(1) Investments	_
(2) Net capital loss carry-forward 9,115	- 9,115
(3) Real estate	_
(4) Other (including items <5% of total capital tax assets)	
(99) Subtotal 9,115	- 9,115
(f) Statutory valuation allowance adjustment -	7,113
	- 9,115
	- 9,113
(h) Admitted capital deferred tax assets (2e99-2f-2g)	455 261 (422 747)
	455,261 (422,747)
Deferred Tax Liabilities:  (a) Ordinary	
(a) Ordinary (1) Investments 3,038	6,063 (3,025)
	117,605 (3,023)
(3) Deferred and uncollected premium	
(4) Policyholder reserves	
	57 592
(5) Other (including items <5% of total ordinary tax liabilities) 57,582	- 57,582
(99) Subtotal 222,504	123,668 98,836
(b) Capital:	
(1) Investments -	-   -
(2) Real estate -	-   -
(3) Other (including items <5% of total capital tax liabilities) - 4,1	111,358 (4,111,358)
	111,358 (4,111,358)
	235,026 (4,012,522)
	779,765) 3,589,775

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate

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

	1	12/31/2018	Effective
		Amount	Tax Rate
Provision computed at statutory rate	\$	5,572	21.0%
Permanent Differences		-	0.0%
Tax-exempt interest, net of pro-ration		(2,143)	-8.1%
Dividend-received-deduction, net of pro-ration		-	0.0%
Change in N/A Assets		102,320	385.7%
Impact of tax rate change		(54,410)	-205.1%
PY Federal tax adjustment		250	0.9%
Total	\$	51,590	194.5%
Federal and foreign income taxes incurred	\$	3,650,479	13759.2%
Tax on capital gains(losses)		-	0.0%
Change in net deferred taxes		(3,598,889)	-13564.7%
Total statutory taxes	\$	51,590	194.5%

- E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits
  - (1) At December 31, 2018, the Company did not have any unused operating loss carry-forwards available to offset against future taxable income.
  - (2) The following is income tax expense for 2018 and 2017 that is available for recoupment in the event of future net losses:

Year	Amount
2018	\$ 3,786,253
2017	\$ -

- (3) The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.
- F. Consolidated Federal Income Tax Return
  - (1) The Company's 2018 federal income tax return will be consolidated with the following entities:

Heritage Insurance Holdings, Inc.
Heritage Property & Casualty Insurance Company
Osprey Re Ltd.
Zephyr Insurance Company
Zephyr Acquisition Company
HI Holdings, Inc.
NBIC Holdings, Inc.
Pawtucket Insurance Company
NBIC Service Company, Inc.
NBIC Financial Holdings, Inc.

- (2) Allocation is based upon separate return calculations.
- G. Federal or foreign income tax loss contingencies  $\ensuremath{N/A}$
- 10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties
  - A. C. The Company had been capitalized through a \$200 million funding agreement between Blackstone Financial Group, Inc. ("BFG") (ultimate parent company of the group) and an outside investment group. During 2008, Blackstone Financial Group, Inc. changed its name to NBIC Financial Holdings, Inc. and later to NBIC Holdings, Inc. ("NBICHI").

The Company received additional capital contributions from NBIC Financial Holdings, Inc. in the form of cash in the amount of \$11.0 million, \$12.0 million, \$10.0 million and \$9.0 million during 2012, 2011, 2010 and 2009, respectively.

On April 2, 2013, the Company received an additional \$2.5 million capital contribution from NBIC Financial Holdings, Inc. in the form of cash. The amount was recorded in the December 31, 2012 statutory balance sheet as gross paid in and contributed surplus. Correspondingly, \$2.5 million was recorded in the December 31, 2012 balance sheet as receivable from parent, subsidiaries and affiliates.

On November 12, 2015, the Company contributed additional capital of \$1.5 million to Pawtucket Insurance Company ("PIC"). The contribution was originally funded by NBIC Service Company and passed through NBIC to PIC.

Effective November 30, 2018, Heritage Insurance Holdings, Inc. acquired 100% of the issued and outstanding shares of NBICHI

- D. As of December 31, 2018, the Company owed its affiliate, NBIC Service Company, Inc. \$2,619,814 for amounts related to an expense sharing agreement between the Company, Pawtucket Insurance Company ("PIC"), NBIC Service Company, Inc. and NBICHI
- E. Guarantees or Contingencies for Related Parties

N/A

F. Management, Service Contracts, Cost Sharing Arrangements

The Company has an Administrative Services arrangement with NBIC Service Company Inc., NBICHI and PIC. The Company reimburses these affiliated entities for costs directly related to the business of the Company. The allocation policies were designed to be fair and equitable to all parties.

- G. See Note 10 A., B., & C. and 10 I
- H. Value of an Upstream Intermediate Entity

N/A

I. Investment in an SCA that exceeds 10% of admitted assets

In accordance with NAIC SAP, NBIC has reported the investment in its 100% owned insurance subsidiary, PIC, at the statutory surplus value of that subsidiary. However, effective September 30, 2006, PIC, with the explicit permission of the Rhode Island Insurance Department, records its buildings and land at fair market value instead of at depreciated cost required by NAIC SAP. This permitted practice, however, does not extend to the value of PIC as recorded by NBIC. NBIC, therefore, continues to record its investment in PIC as an amount equal to PIC's statutory surplus on an NAIC SAP basis. During 2018, PIC sold its buildings and land to NBIC Service Company, Inc.

J. Write down for Impairment of Investments in SCA Entities

N/A

K. Investment in Foreign Insurance Subsidiary

N/A

L. Investment in Downstream Non-Insurance Holding Company

N/A

M. SCA Investments

N/A

N. Investment in an Insurance SCA

N/A

11. Debt

N/A

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

N/A

- 13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations
  - (1) The Company had 1,000,000 shares of \$1 par value common stock authorized, issued and outstanding at December 31, 2018 and 2017.
  - (2) The Company has no preferred stock outstanding at December 31, 2018 and 2017.
  - (3) The Company may pay dividends without prior approval of the Rhode Island (state of domicile) Department of Business Regulation ("DBR") except as required under Rhode Island law. Prior notification to the DBR prior to paying dividends, however, is required.
  - (4) The Company made no dividend payments during the years ended December 31, 2018 and 2017.
  - (5) Within the limits described above (see Note 13 (3)), there are no restrictions placed on the portion of profits that may be paid as ordinary dividends.
  - (6) Restrictions on Unassigned Funds (Surplus)

N/A

(7) Mutual Surplus Advances

N/A

(8) Stock Held for Special Purposes

N/A

(9) Changes in Special Surplus Funds

N/A

(10) Changes in Unassigned Funds

The Company's unassigned funds/surplus has not been reduced by cumulative unrealized losses related to investments in both unaffiliated common stocks and bonds. Unassigned funds/surplus has increased by cumulative unrealized gains of \$7,113,610 related to the Company's investment in its affiliate, PIC.

(11) Surplus Notes

N/A

(12) Quasi Reorganizations

N/A

(13) Effective Date of Quasi Reorganizations

N/A

- 14. Liabilities, Contingencies and Assessments
  - A. Contingent Commitments

None

B. Assessments

The Company is subject to guaranty fund assessments by states in which it writes business. Most assessments are recorded either at the time the assessments are levied or in the case of premium-based assessments, at the time premiums are written.

The Company has accrued a liability for guaranty fund of \$423,010 at December 31, 2018. The amount recorded represents management's best estimate based on guaranty fund rate information received from states in which the Company writes business and the direct written premiums written in those states.

The Company has accrued a liability for other taxes, licenses, fees and assessments of \$403,358 at December 31, 2018. The amount recorded represents management's best estimate based on assessment rate information received from states in which the Company writes business and the direct written premiums written in those states.

C. Gain Contingencies

N/A

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

N/A

E. Product Warranties

N/A

F. Joint and Several Liabilities

N/A

G. All Other Contingencies

The Company is subject to litigation in the ordinary course of business. Management does not believe that the eventual outcome of any such pending litigation is likely to have a material effect on the Company's financial condition or business.

- 15 Leases
  - A. Lessee Operating Lease

The Company incurs no significant lease expense.

B. Lessor Leases

The Company has no leasing agreements as a lessor.

16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risks

N/A

- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishment of Liabilities
  - A. Transfers of Receivables Reported as Sales

N/A

B. Transfers and Servicing of Financial Assets

N/A

C. Wash Sales

The Company had no wash sales during the years ended December 31, 2018 and 2017.

- 18. Gain or Loss to the Reporting Entity from Uninsured A & H Plans and the Uninsured portion of Partially Insured plans.
  - A. ASO Plans

N/A

B. ASC Plans

N/A

C. Medicare or Similarly Structured Cost Based Reimbursement Contract

N/A

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

N/A

- 20. Fair Value Measurements
  - A. Asset and Liabilities Measured and Reported at Fair Value

Type of Financial Instrument	(Level 1)	(Lev	(Level 2) (Level 3)		vel 3)	Total	Net Asset Value (NAV) Included in Level 2	
Financial instruments – assets: Other money market mutual fund	\$ 13,069,021	\$	-	\$	-	\$ 13,069,021	\$	-
Total assets at fair value	\$ 13,069,021	\$	_	\$	-	\$ 13,069,021	\$	-

B. Other Fair Value Disclosures

N/A

C. Fair Values for All Financial Instruments

Type of Financial Instrument	A	ggregate Fair Value	Admitted Assets	(Level 1)	(Level2)	(Level 3)	ot Practical (Carrying Value)
Financial instruments – assets: Bonds Common stock - Affiliated	\$	88,694,568 4,081,512	\$ 90,251,594 4,105,615	\$ -	\$ 88,694,568	\$ 4,081,512	\$ -
Cash, cash equivalents and short-term investments		102,807,812	102,802,125	102,807,812	-	-	
Total assets	\$	195,583,892	\$ 197,159,334	\$ 102,807,812	\$ 88,694,568	\$ 4,081,512	\$ -

- D. N/A
- 21. Other Items
  - A. Unusual or Infrequent Events

N/A

B. Troubled Debt Restructuring: Debtors

N/A

C. Other Disclosures

The Company is required to maintain security deposits with various state insurance departments. The security deposits had a carrying value of \$1,302,504 and \$601,992 at December 31, 2018 and 2017, respectively.

D. Business Interruption Insurance Recoveries

N/A

E. State Transferable and Non-Transferable Tax Credits

N/A

F. Subprime-Mortgage-Related Risk Exposure

The Company had no subprime mortgage risk exposure during the years ended December 31, 2018 and 2017.

G. Insurance-Linked Securities (ILS) Contracts

N/A

22. Events Subsequent

N/A

#### 23. Reinsurance

#### A. Unsecured Reinsurance Recoverables

Nε

FEIN	NAIC#	Reinsurer	Net Recoverable
22-2005057	26921	Everest Reinsurance Company	38,395,000
95-2371728	22667	ACE American Insurance Company	32,659,000
AA-3194161	00000	Catlin Insurance Company Ltd.	20,048,000
75-1444207	30058	Scor Reinsurance Company	12,552,000
13-4924125	10227	Munich Reins Amer Inc	9,922,000
23-1641984	10219	QBE Reinsurance Corporation	9,537,000
30-0703280	15529	Tokio Millennium Re	8,194,000
AA-3194139	0000	Axis Specialty Ltd	8,053,000
47-0698507	23680	Odyssey Reinsurance Company	7,549,000
AA-1340125	00000	Hannover Rück SE	4,885,000
06-0237820	20699	ACE Property & Casualty Insurance Company	3,951,000
06-1182357	22730	Allied World Insurance Company	3,229,000
47-0574325	32603	Berkley Insurance Company	2,731,000
			161,705,000

reinsurance recoverables exceeding 3% of surplus include:

#### B. Reinsurance Recoverable in Dispute

N/A

#### C. Reinsurance Assumed and Ceded:

(1)

	,	A	ssumed I	Reins	surance	Ceded Reinsurance			Net			
		Pre	mium	С	ommission	Premium		Commission	Premium	(	Commission	
		Re	serve		Equity	Reserve		Equity	Reserve		Equity	
a.	Affiliates	\$	-	\$	-	\$ _	\$	-	\$ -	\$	-	
b.	All other		-		-	\$ 147,189,870	\$	66,858,190	\$ 147,189,870	\$	66,858,190	
c.	Total	\$	-	\$	-	\$ 147,189,870	\$	66,858,190	\$ 147,189,870	\$	66,858,190	
d	Direct Unearned P	remium	Reserve			\$ 176 957 021						

#### (2) Commissions predicated on profit sharing arrangements:

		Direct		Assumed	Ceded	Net
a.	Contingent commission	\$	-	\$ -	\$ 15,890	\$ 15,890
b.	Sliding scale adjustments		-	-	-	-
c.	Other profit commission arrangements		-	=	=	=
d.	Total	\$	-	\$ -	\$ 15,890	\$ 15,890

(3) N/A

#### D. Uncollectible Reinsurance

The Company had no significant write-offs of uncollectible reinsurance balances during the years ended December 31, 2018 and 2017.

#### E. Commutation of Ceded Reinsurance

There were no reinsurance treaties commuted in 2018 and in 2017.

#### F. Retroactive Reinsurance

N/A

#### G. Reinsurance Accounted for as a Deposit

N/A

### H. Disclosures for the Transfer of Property and Casualty Run-Off Agreements

### I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation $N/\Delta$

#### J. Reinsurance Agreements Qualifying for Reinsurer Aggregation N/A

#### 24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

N/A

#### 25. Changes in Incurred Losses and Loss Adjustment Expenses

The Company's net incurred loss and loss adjustment expenses for the years ended December 31, 2018 and 2017 include favorable loss development on prior accident years of \$980,656 and \$2,849,452, respectively. Original ultimate loss and loss adjustment expense estimates are increased or decreased over time as additional information becomes known regarding individual claims.

26. Intercompany Pooling Arrangements

N/A

27. Structured Settlements

N/A

28. Health Care Receivables

N/A

29. Participating Policies

N/A

30. Premium Deficiency Reserves

N/A

31. High Deductibles

N/A

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

N/A

33. Asbestos/Environmental Reserves

N/A

34. Subscriber Savings Accounts

N/A

35. Multiple Peril Crop Insurance

N/A

36. Financial Guaranty Insurance

N/A

### **GENERAL INTERROGATORIES**

#### **PART 1 - COMMON INTERROGATORIES**

#### **GENERAL**

1.1	Is the reporting entity a member of an Insurance Holding Company System consistin which is an insurer?	g of two or more affiliated	persons, one or more of		X ] No [ ]
	If yes, complete Schedule Y, Parts 1, 1A and 2.				
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance Comm regulatory official of the state of domicile of the principal insurer in the Holding Comp disclosure substantially similar to the standards adopted by the National Association of Insurance Holding Company System Regulatory Act and model regulations pertaining standards and disclosure requirements substantially similar to those required by such Act	any System, a registration f Insurance Commissioners g thereto, or is the report	statement providing (NAIC) in its Model ing entity subject to	s [X]No[	] N/A [ ]
1.3	State Regulating? RHODE ISLAND				
1.4	Is the reporting entity publicly traded or a member of a publicly traded group?			Yes [	X ] No [ ]
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SE $$	C for the entity/group.		0001598665	
2.1	Has any change been made during the year of this statement in the charter, by-laws, reporting entity?	articles of incorporation, or	deed of settlement of the		] No [ X ]
	If yes, date of change:				40/04/0040
3.1	State as of what date the latest financial examination of the reporting entity was made of	· ·			12/31/2013
	State the as of date that the latest financial examination report became available from e date should be the date of the examined balance sheet and not the date the report was State as of what date the latest financial examination report became available to other s	completed or released.			12/31/2013
3.3	the reporting entity. This is the release date or completion date of the examination reportate.		amination (balance sheet	t	05/07/2015
3.4	By what department or departments? RHODE ISLAND DEPARTMENT OF BUSINESS	REGULATION - INSURANC	E DIVISION		
3.5	Have all financial statement adjustments within the latest financial examination report	been accounted for in a			1 N/A f V 1
	statement filed with Departments?			. , .	] N/A [ X ]
3.6	Have all of the recommendations within the latest financial examination report been com-	plied with?	Yes	; [ X ] No [	] N/A [ ]
4.1	During the period covered by this statement, did any agent, broker, sales representate combination thereof under common control (other than salaried employees of the recontrol a substantial part (more than 20 percent of any major line of business measured premiums) of:  4.11	porting entity) receive cred			X ] No [ ]
	4.12	renewals?		Yes [	] No [ X ]
4.2	During the period covered by this statement, did any sales/service organization own affiliate, receive credit or commissions for or control a substantial part (more than 20 direct premiums) of:				
	. ,	sales of new business?		Yes [	] No [ X ]
	4.22	renewals?		Yes [	] No [ X ]
5.1	Has the reporting entity been a party to a merger or consolidation during the period cover	red by this statement?		Yes [	] No [ X ]
	If yes, complete and file the merger history data file with the NAIC.				
5.2	If yes, provide the name of the entity, NAIC company code, and state of domicile (use	two letter state abbreviation	n) for any entity that has	}	
	ceased to exist as a result of the merger or consolidation.				
	4	2	2		
	1 Name of Entity		3 State of Domicile		
6.1	Has the reporting entity had any Certificates of Authority, licenses or registrations (incl or revoked by any governmental entity during the reporting period?	uding corporate registration	, if applicable) suspended	d Yes [	1 No [ X ]
6.2	If yes, give full information			·	
7.1	Does any foreign (non-United States) person or entity directly or indirectly control 10% o	more of the reporting entity	?	Yes [	] No [ X ]
1.2	If yes, 7.21 State the percentage of foreign control				0.0 %
	7.21 State the percentage of foreign control  7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the	entity is a mutual or recipro	ocal, the nationality of its	s	
	manager or attorney-in-fact and identify the type of entity(s) (e.g., indivin-fact).				
	1	2		]	
	Nationality	Type of Entity			
				†	
				_	
				4	
				]	
				1	
				J	

### **GENERAL INTERROGATORIES**

8.1	Is the company a subsidiary of a bank holding company reg	gulated by the Federal Reserve Board?				Yes [	] N	[ X ] c
8.2	If response to 8.1 is yes, please identify the name of the ba	ank holding company.						
8.3 8.4	Is the company affiliated with one or more banks, thrifts or If response to 8.3 is yes, please provide the names and loc financial regulatory services agency [i.e. the Federal Reser Federal Deposit Insurance Corporation (FDIC) and the Secregulator.	cations (city and state of the main office) or rve Board (FRB), the Office of the Comptro	oller of the Cu	rrency (OCC)	, the	Yes [	] N	o [ X ]
	1	2	3	4	5	6	7	
	'	Location		7		U		
	Affiliate Name	(City, State)	FRB	occ	FDIC	SEC	-	
	What is the name and address of the independent certified PLANTE MORAN, 1111 MICHIGAN AVENUE, SUITE 100, Has the insurer been granted any exemptions to the proh	, EAST LANSING, MI 48823					_	
. •	requirements as allowed in Section 7H of the Annual Final law or regulation?					Yes [	] No	[ X ]
10.2	If the response to 10.1 is yes, provide information related to	o this exemption:				.00 [	1	[ ~ ]
10.3	Has the insurer been granted any exemptions related to allowed for in Section 18A of the Model Regulation, or substitutions.		inancial Repo	rting Model F	Regulation as	Yes [	] No	[ X ]
10.4	If the response to 10.3 is yes, provide information related to	o this exemption:						
10.5	Has the reporting entity established an Audit Committee in	compliance with the domiciliary state insu	rance laws?		Yes [	X ] No [	1 N/	1 1
	If the response to 10.5 is no or n/a, please explain	. , ,				, .	,	. ,
	What is the name, address and affiliation (officer/emplor consulting firm) of the individual providing the statement of JOEL S. CHANSKY, MILLIMAN INC, 289 EDGEWATER	actuarial opinion/certification? DR, WAKEFIELD, MA 01880						
12.1	Does the reporting entity own any securities of a real estate			=		Yes [	•	
		12.11 Name of rea 12.12 Number of p						
		12.13 Total book/a	adjusted carry	ing value	\$			
12.2	If yes, provide explanation							
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTIN	NG ENTITIES ONLY:						
13.1	What changes have been made during the year in the Unit	ed States manager or the United States tr	rustees of the	reporting enti	ty?			
13.2	Does this statement contain all business transacted for the	reporting entity through its United States	Branch on ris	ks wherever lo	ocated?	Yes [	] N	0 [ ]
13.3	Have there been any changes made to any of the trust inde	entures during the year?				Yes [	] N	0 [ ]
13.4	If answer to (13.3) is yes, has the domiciliary or entry state				Yes [	] No [	] N/	A [ ]
14.1	Are the senior officers (principal executive officer, principal similar functions) of the reporting entity subject to a code of	al financial officer, principal accounting of of ethics, which includes the following stan	fficer or contro idards?	ller, or person	ns performing	Yes [ )	X ] N	0 [ ]
	<ul> <li>a. Honest and ethical conduct, including the ethical hand relationships;</li> </ul>	ling of actual or apparent conflicts of inte	erest between	personal and	d professional			
	b. Full, fair, accurate, timely and understandable disclosure	e in the periodic reports required to be filed	d by the report	ing entity;				
	c. Compliance with applicable governmental laws, rules an	d regulations;						
	d. The prompt internal reporting of violations to an appropr e. Accountability for adherence to the code.	iate person or persons identified in the co	de; and					
14.11	If the response to 14.1 is no, please explain:							
14 2	Has the code of ethics for senior managers been amondon	12				Yes [	] N	o [ X ]
	Has the code of ethics for senior managers been amended If the response to 14.2 is yes, provide information related to					100 [	] 11	υ[Λ]
	Have any provisions of the code of ethics been waived for					Yes [	] N	o [ X ]
14.31	If the response to 14.3 is yes, provide the nature of any wa	iivei(s).						

### **GENERAL INTERROGATORIES**

Yes [ ] No [ X ]

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

10.2		of the Letter of Credit and describe the			and the name of the issuing or confirmied.	19				
		1	2		3		4			
		American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstance	s That Can Trigger the Letter of Credit	Д	Amount			
			BOARD OF D	DIRECTORS	3					
16.	Is the		of the reporting entity passed upon e	either by the boa	rd of directors or a subordinate comm	ittee	Yes	[ X ]	No	ı
17.		the reporting entity keep a complete	permanent record of the proceeding	gs of its board o	f directors and all subordinate commit	tees	Yes			
18.	Has th	ne reporting entity an established proc			ees of any material interest or affiliation		169	. ^ ]	NO	l
		art of any of its officers, directors, trus person?	tees or responsible employees that	is in conflict or is	s likely to conflict with the official dutie	s of	Yes [	Х ]	No	[
			FINANCIAL							
19.		nis statement been prepared using a ba	asis of accounting other than Statutor	y Accounting Pri	nciples (e.g., Generally Accepted		Yes [	1	No	гν
20.1		inting Principles)? amount loaned during the year (inclusiv	ve of Separate Accounts, exclusive of	f policy loans):	20.11 To directors or other officers	\$	res [			
		J. 17		, ,	20.12 To stockholders not officers	\$				
					20.13 Trustees, supreme or grand (Fraternal only)	\$				
20.2		amount of loans outstanding at the end loans):	of year (inclusive of Separate Accou	ınts, exclusive of	20.21 To directors or other officers	s				
	p = ,				20.22 To stockholders not officers	•				
					20.23 Trustees, supreme or grand (Fraternal only)	¢				
21.1		any assets reported in this statement s	subject to a contractual obligation to to	ransfer to anothe	,	Ψ				
1 2	Ū	tion being reported in the statement? state the amount thereof at December	r 31 of the current year:	21.21 Rented fr	om others	\$	Yes			
.1.2	11 yes,	state the amount thereof at December	of of the current year.	21.22 Borrowed		•				
				21.23 Leased fr	om others	\$				
				21.24 Other		\$				
22.1		this statement include payments for as nty association assessments?	sessments as described in the Annua	al Statement Inst	tructions other than guaranty fund or		Yes	[ ]	No	[ X
22.2	If ansv	wer is yes:		22.21 Amount	paid as losses or risk adjustment	\$				
				22.22 Amount	paid as expenses					
				22.23 Other an	•	\$				
		the reporting entity report any amounts indicate any amounts receivable from	•	_	of this statement?	¢	Yes	. ,		
	ii yes,	indicate any amounts receivable nom	INVEST			Ψ				
4.01		all the stocks, bonds and other securiti stual possession of the reporting entity			ne reporting entity has exclusive control addressed in 24.03)	, in	Yes [	X ]	No	[
4.02	If no, (	give full and complete information, rela	ting thereto							
4.03		ecurity lending programs, provide a d er collateral is carried on or off-balance			eral and amount of loaned securities, this information is also provided)	and				
	Instru	ctions?		forming program	as outlined in the Risk-Based Capita	Yes [	] No	•	•	•
		wer to 24.04 is yes, report amount of co wer to 24.04 is no, report amount of co	- · -			\$ \$				
	Does	your securities lending program requi	, ,	105% (foreign s	ecurities) from the counterparty at the	9				
4 OO		t of the contract?	a colletoral received from the annual control	norty falls bele	1009/ 2		] No			
		the reporting entity non-admit when the	•		100%? curities Lending Agreement (MSLA) to		] No	L.	j INA	Į,
r.U3		interreporting entity of the reporting e act securities lending?	mary a securities renaing agent utilize	o are master se	canalog conding Agreement (MOLA) to		] No	[	] NA	[ X
4.10	For the	e reporting entity's security lending pro		=	•	_				0
			of reinvested collateral assets reporte		,	\$				
		-	sted/carrying value of reinvested colla	-	•	\$ \$				
		27. 100 TOTAL PAYABLE 10	r securities lending reported on the lia	ability page	•	μ				,

### **GENERAL INTERROGATORIES**

25.1	control of the	e reportin		entity s	old or trans				rent year not exclusively undo on contract that is currently in f		Yes	. [ X	] No	]
25.2	If yes, state t	he amour	nt thereof at December 31 of	the cu	rrent year:									
			25.	21 Su	bject to repu	urchase agre	ements			\$				
			25.	22 Su	bject to reve	erse repurcha	ase agreeme	nts		\$				
			25.	23 Su	bject to dolla	ar repurchas	e agreements	S		\$				
			25.	24 Su	bject to reve	erse dollar re	purchase ag	reements		\$				
			25.	25 Pla	aced under o	option agreer	ments			\$				
			25.	26 Let	tter stock or	securities re	stricted as to	sale – exclu	ding FHLB Capital Stock	\$				
			25.	27 FH	ILB Capital	Stock				\$				
			25.	28 On	deposit wit	h states				\$			1,302	,504
			25.	29 On	deposit wit	h other regul	atory bodies			\$				
					-	=	=	eral pledged to	o an FHLB	\$				
					-		=		king funding agreements					
				32 Otl				.g doodto bao	and tanding agreements					
25.3	For category	(25 26) n	provide the following:	02 01	101					Ψ				
20.0	1 of category	(20.20) p	novide the following.											
			1			I		2		$\overline{}$	3		_	
			Nature of Restriction					Description	on		Amour	nt		
						İ								
						İ				ı				
26.1	Does the rep	orting en	tity have any hedging transa	ctions r	eported on	Schedule DE	3?				Yes	[ ]	No [	х ]
26.2	If yes, has a	comprehe	ensive description of the hed	ging pr	ogram beer	n made availa	able to the do	omiciliary stat	e?	Yes [	] No	[ ]	N/A [	X ]
			tion with this statement.	5 51				,			,		٠	•
27.1	Were any pre			Decemb	per 31 of the	e current yea	r mandatorily	convertible in	nto equity, or, at the option of		Yes	[ ]	No [	Х]
27.2	If yes, state t	he amour	nt thereof at December 31 of	the cu	rrent year.					\$				
28.	entity's office pursuant to a	s, vaults custodia	nedule E – Part 3 – Special I or safety deposit boxes, wer Il agreement with a qualified tsourcing of Critical Functior	e all sto bank o	ocks, bonds r trust comp	and other se	ecurities, own dance with S	ned throughousection 1, III –	General Examination		Yes	[ X ]	No [	1
28.01		nts that c	omply with the requirements	of the	NAIC Finan	ncial Conditio	n Examiners	Handbook, c	complete the following:					,
				1					2	٦				
			Name of 0	Custodi	an(s)			Custodia	an's Address					
			BANK OF AMERICA				100 WESTMINS	STER STREET,	PROVIDENCE, RI 02903					
28.02			at do not comply with the req te explanation:	uireme	nts of the N	AIC <i>Financia</i>	ıl Condition E	Examiners Ha	andbook, provide the name,					
			1 Name(a)			2 Lagation	2(2)		3 Complete Evalenction(s)					
			Name(s)			Location	1(S)		Complete Explanation(s)	$\longrightarrow$				
			changes, including name champlete information relating the		in the custo	dian(s) identi	fied in 28.01	during the cu	urrent year?		Yes	[ ]	No [	Х ]
			1			2		3	4					
						_		Date of						
		С	Old Custodian		New	Custodian		Change	Reason					

#### GENERAL INTERROGATORIES

28.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
BlackRock Investment Mgmt, LLC	U
KIRK HOWARD LUSK	1

28.0597	For	those t	firms/ir	ndividu	als list	ted in tl	he table	for	Question	28.05,	do any	/ firms/ir	ndividuals	unaffiliate	ed with	the repo	orting entit	y
	(i.e	desia	nated	with a '	"U") m	nanage	more th	nan	10% of th	e repor	tina en	titv's as	sets?					

Yes [ X ] No [ ] 28.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets? Yes [ X ] No [ ]

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
108928	BlackRock Investment Mgmt,			

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D - Part 2 (diversified according to the Securities and

Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?
29.2 If yes, complete the following schedule:

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

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

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

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

2 Excess of Statement over Fair Value (-), or Fair Value Statement (Admitted) Value Fair Value over Statement (+) 30.1 Bonds. ...92,948,607 ...91,397,267 .(1,551,340) 30.2 Preferred Stocks... 0 0 92.948.607 91,397,267 (1.551.340)30.3 Totals

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

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?

Yes [ ] No [ X ]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?

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

Yes [ ] No [ ]

Yes [ ] No [ X ]

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?

Yes [ X ] No [ ]

32.2 If no, list exceptions:

#### GENERAL INTERROGATORIES

- By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:
  - a.Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
  - b.Issuer or obligor is current on all contracted interest and principal payments.
  - c.The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities?

Yes [ ] No [ X ]

- By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
  a. The security was purchased prior to January 1, 2018.
  b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
  c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance
  - d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities?

Yes [ ] No [ X ]

.1,066,895

#### **OTHER**

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

Name **Amount Paid** Commonwealth of Massachusetts.... 360,392 Insurance Services... .706,503

36.1 Amount of payments for legal expenses, if any?

297 973

36.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
Greenberg & Traurig	\$185,783
Nixon & Peabody	\$112,190

37.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?

37.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

Name	Amount Paid
	\$
	s
	s

### **GENERAL INTERROGATORIES**

#### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supp	ement Insurance in force?	·				Yes [	] No	[ X ]
1.2	If yes, indicate premium earned on U. S. business only					\$			0
1.3	1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?								
	1.31 Reason for excluding								
1.4	Indicate amount of earned premium attributable to Canad	dian and/or Other Alien no	t included in	ı Item (1.2) above		\$			
1.5	Indicate total incurred claims on all Medicare Supplement	t insurance.				\$			0
1.6	Individual policies:								
			Most curren	nt three years:					
			1.61 Total	premium earned		\$			0
			1.62 Total	incurred claims		\$			0
			1.63 Numb	ber of covered lives					0
			-	ior to most current thre	-				
			1.64 Total	premium earned		\$			0
			1.65 Total	incurred claims		\$			0
			1.66 Numb	ber of covered lives					0
1.7	Group policies:								
			Most curren	nt three years:					
			1.71 Total	premium earned		•			
			1.72 Total	incurred claims		\$			0
			1.73 Numb	ber of covered lives					0
				ior to most current thre	-				
			1.74 Total	premium earned		\$			0
			1.75 Total	incurred claims		\$			0
			1.76 Numb	ber of covered lives					0
•	Usant Teat								
2.	Health Test:								
				1		2			
	2.4	Described No. 100	•	Current Year		Prior Year			
	2.1	Premium Numerator		0	•	0			
	2.2	Premium Denominator		74,489,598	•	47 , 101 , 131			
	2.3	Premium Ratio (2.1/2.2)		0.00.00		0.000			
	2.4	Reserve Numerator		0	•	0			
	2.5	Reserve Denominator	•	53,171,882	•	57,736,957			
	2.6	Reserve Ratio (2.4/2.5)		0.000		0.000			
3.1						,	1 20/	1 Nc	. [ V ]
3.2	Does the reporting entity issue both participating and nor If yes, state the amount of calendar year premiums writte					I	es [	] INC	) [ X ]
0.2	in yes, state the amount of calendar year premiums write		3.21 Partic	ipating policies		\$			
				participating policies					
4.	For Mutual reporting entities and Reciprocal Exchanges	-				,	/ r	1 N.	
4.1 4.2	Does the reporting entity issue assessable policies?						/es [ /es [		
4.3	If assessable policies are issued, what is the extent of the								
4.4	Total amount of assessments paid or ordered to be paid								
5.	For Reciprocal Exchanges Only:						/ '	1 11	
5.1	Does the exchange appoint local agents?						es [	] No	) [ ]
5.2	If yes, is the commission paid:		5.21 Out of	f Attorney's-in-fact com	nensation	Yes	[ ] No	[ ] N/	A [ ]
				irect expense of the ex	-		[ ] No		
5.3	What expenses of the Exchange are not paid out of the o	compensation of the Attorn	ey-in-fact?	·	-		-		
_								,	
5.4	Has any Attorney-in-fact compensation, contingent on ful	fillment of certain condition	ns, been de	terred?			es [	] No	) [ ]
5.5	If yes, give full information								

## **GENERAL INTERROGATORIES**

	PART 2 - PROPERTY & CASUALTY INTERROGATORIES				
6.1	What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss:  THE COMPANY DOES NOT ISSUE WORKERS COMPENSATION INSURANCE.				
6.2	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:  THE COMPANY CALCULATES THE PML BY STATE USING AIR IN THE ESTIMATION PROCESS.				
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?				
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	Yes	ſ	1	No [ X
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss  COVERAGE AVAILABLE FOR 2ND EVENT FROM REINSTATEMENT TO SLIGHTLY BELOW 1 IN 100 DUE TO LOWER 2ND EVENT RETENTION.	.00	ı	J	[
7.1	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?	Yes	[ X	1	No [
7.2 7.3	If yes, indicate the number of reinsurance contracts containing such provisions.  If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?				
8.1 8.2	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?		•	•	No [ X
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:				
	(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;				
	(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;				
	(c) Aggregate stop loss reinsurance coverage;				
	(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;				
	(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or				
	(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity	Yes	[	]	No [ X
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:				
	(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or				
9.3	(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:	Yes	[	]	No [ X
	(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;				
	(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and				
	(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.				
9.4	Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R - Property and Casualty Reinsurance, has the				

reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:

(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or

(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?

9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.

The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:

(a) The entity does not utilize reinsurance; or,
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation

(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.

If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?

Yes	[	]	No	[	χ	]
Yes	[	]	No	[	χ	]
Yes	[	]	No	[	χ	]
Yes [	] No	]	] N/	Ά	[)	(]

Yes [ ] No [ X ]

### **GENERAL INTERROGATORIES**

#### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

	Has the reporting entity guaranteed If yes, give full information					Yes	[ ]	No [X]
12.1	If the reporting entity recorded accr the amount of corresponding liabilit	ued retrospective premiums	on insurance contracts on	Line 15.3 of the asset sch	edule, Page 2, state			
		g expenses (including loss a						
12.3	Of the amount on Line 15.3, Page 2 If the reporting entity underwrites of accepted from its insureds covering	2, state the amount that is se ommercial insurance risks, s gunpaid premiums and/or ur	ecured by letters of credit, output as workers' compensational losses?	collateral and other funds?. tion, are premium notes of	\$ r promissory notes			
12.4		rates charged under such n						
	Are letters of credit or collateral and promissory notes taken by a reporti losses under loss deductible feature	d other funds received from ing entity, or to secure any o	nsureds being utilized by the first the reporting entity's repo	ne reporting entity to secur orted direct unpaid loss res	e premium notes or erves, including unpaid			No [ ]
12.6	If yes, state the amount thereof at D						0.4	050 000
		r funds						
	12.62 Collateral and othe	r tunas			Φ			10,090
13.1 13.2	Largest net aggregate amount insul Does any reinsurance contract cons	sidered in the calculation of	this amount include an agg	regate limit of recovery wit	thout also including a	Voc		369,700 No[X]
13.3	reinstatement provision?State the number of reinsurance co facilities or facultative obligatory col	ntracts (excluding individual	facultative risk certificates	but including facultative p	rograms, automatic			
14.1 14.2	Is the reporting entity a cedant in a If yes, please describe the method PROPORTIONAL TO MODELED LOSS IN	of allocating and recording r	einsurance among the ced	ants:		Yes	[ X ]	No [ ]
14.3	If the answer to 14.1 is yes, are the contracts?					Yes	[ X ]	No [ ]
	If the answer to 14.3 is no, are all the lifthe answer to 14.4 is no, please e	explain:				Yes	[ ]	No [ ]
	Has the reporting entity guaranteed If yes, give full information	any financed premium acco	ounts?			Yes	[ ]	No [ X ]
16.1	Does the reporting entity write any	warranty business?				Yes	[ ]	No [ X ]
	If yes, disclose the following information	ation for each of the followin	g types of warranty covera	ge:				
	, ,		,	•				
		1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned		5 ect Prer Earned	b
16.11	Home	\$	\$	\$	\$	. \$		
16.12	Products	\$	\$	\$	\$	. \$		
	Automobile							
	Other*							

<sup>\*</sup> Disclose type of coverage:

# GENERAL INTERROGATORIES PART 2 - PROPERTY & CASUALTY INTERROGATORIES

17.1		uthorized reinsurance in Schedule F – Part 3 that is exempt from the statuto		Yes [	] N	o [ X ]
	Incurred but not reported losses on contracts in force prior to provision for unauthorized reinsurance. Provide the following i	July 1, 1984, and not subsequently renewed are exempt from the statutonformation for this exemption:	ory			
	17.11	Gross amount of unauthorized reinsurance in Schedule F – Part 3 exempt from the statutory provision for unauthorized reinsurance	\$			
	17.12	Unfunded portion of Interrogatory 17.11	\$			
	17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11		\$			
17.14 Case reserves portion of Interrogato		Case reserves portion of Interrogatory 17.11	\$			
	17.15	Incurred but not reported portion of Interrogatory 17.11	\$			
	17.16	Unearned premium portion of Interrogatory 17.11	\$			
	17.17	Contingent commission portion of Interrogatory 17.11	\$			
18.1	Do you act as a custodian for health savings accounts?			Yes [	] N	lo [X]
18.2	3.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$					
18.3	8.3 Do you act as an administrator for health savings accounts?			Yes [	] N	lo [X]
18.4						
19.	Is the reporting entity licensed or chartered, registered, qualifie	d, eligible or writing business in at least two states?		Yes [ X	] N	lo [ ]
19.1				Yes [	] N	lo [ ]

#### ANNUAL STATEMENT FOR THE YEAR 2018 OF THE NARRAGANSETT BAY INSURANCE COMPANY

#### FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e., 17.6. 2018 2017 2016 2015 2014 Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3) 1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) 2.311.794 2 111 003 2.057.012 1 954 192 1.851.321 7.520.547 7.005.882 Property lines (Lines 1, 2, 9, 12, 21 & 26). 9.411.134 7.474.527 6.496.348 Property and liability combined lines (Lines 3, 4, 5, 3. 8. 22 & 27). 327 890 962 321 870 373 297 090 005 269 057 565 231 928 053 All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .0 0 .0 ٥. .0 5. Nonproportional reinsurance lines (Lines 31, 32 & N n 6. Total (Line 35) .339,613,890 331 501 924 .306 ,621 ,544 278 017 639 .240 , 275 , 722 Net Premiums Written (Page 8, Part 1B, Col. 6) Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 7. 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) 251 248 202 465 43 997 641 854 321 249 Property lines (Lines 1, 2, 9, 12, 21 & 26) .5,065,930 .1,725,393 .2.385.336 2.691.418 .3,291,925 Property and liability combined lines 9. (Lines 3, 4, 5, 8, 22 & 27) 58 787 760 45 255 043 49 206 311 75 022 366 66 502 965 All other lines 10. (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 0 0 0 0 0 11. Nonproportional reinsurance lines (Lines 31, 32 & 33) ... 12 Total (Line 35) 64 104 938 47 182 901 51 635 644 78 355 638 70 116 139 Statement of Income (Page 4) (6.409.511) 26.717.019 13. Net underwriting gain (loss) (Line 8) 20.343.448 8.748.366 1.810.941 .2,637,531 3,448,399 .2,211,544 .1,562,461 1,020,851 Net investment gain (loss) (Line 11) 14. 15. Total other income (Line 15) .2,987,646 .5,562,079 .4,801,428 .3,812,347 .2,492,495 Dividends to policyholders (Line 17) 0 0 0 17. Federal and foreign income taxes incurred 3,650,479 2,622,249 1,445,193 4,292,079 384,656 18 Net income (Line 20) (3,623,946).25,920,809 .32,284,798 .9,831,095 .4,939,631 Balance Sheet Lines (Pages 2 and 3) Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3) ..... 19. 278, 154, 101 227, 267, 575 225,323,286 .187, 145, 913 138,941,675 20 Premiums and considerations (Page 2, Col. 3) .6,244,083 .6,216,967 .6,180,244 .5,495,317 .4,896,211 20.1 In course of collection (Line 15.1) .21,128,997 .22,192,664 .21,562,034 .20, 161, 196 .18,472,600 20.2 Deferred and not yet due (Line 15.2) 20.3 Accrued retrospective premiums (Line 15.3) ۵. ...0 ...0 Total liabilities excluding protected cell business (Page 3, Line 26) 21. 165,160,997 116,162,656 135,959,667 127,887,172 91,346,370 Losses (Page 3, Line 1) ... 15,955,920 11.234.402 16,720,770 .16,748,941 10.963.829 6 552 281 5 454 214 5 268 751 7 111 824 23 Loss adjustment expenses (Page 3, Line 3) 6 320 143 .41,048,341 40,966,571 .55,233,761 47,671,277 .30,663,681 24. Unearned premiums (Page 3, Line 9). 25. Capital paid up (Page 3, Lines 30 & 31). 4.000.000 4.000.000 4.000.000 4.000.000 .4,000,000 Surplus as regards policyholders (Page 3, Line 37) 112,993,104 111,104,919 .59,258,741 47,595,305 .89,363,619 Cash Flow (Page 5) 27. Net cash from operations (Line 11). .33,206,611 17,575,506 .29,984,145 .20,613,627 28.286.854 Risk-Based Capital Analysis 112.993.104 111.104.919 89.363.619 59.258.741 47.595.305 28. Total adjusted capital. 10,947,997 .29.504.476 .25.557.749 11.294.494 12.156.238 29. Authorized control level risk-based capital Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3)(Item divided by Page 2, Line 12, Col. 3) x 100.0 Bonds (Line 1) 45.8 .66.2 54.9 .68.6 Stocks (Lines 2.1 & 2.2) .. .0.0 2.1 .1.8 0.0 32. Mortgage loans on real estate (Lines 3.1 and 3.2) 0.0 0.0 0.0 0.0 0.0 33. Real estate (Lines 4.1, 4.2 & 4.3) 0.0 0.0 .0.0 0.0 0.0 Cash, cash equivalents and short-term investments 34. 52 1 31 9 32 3 45 1 31 4 (Line 5) 0.0 .0.0 .0.0 .0.0 Contract loans (Line 6) 0.0. 35 0.0 36 Derivatives (Line 7)... 0.0 0.0 0.0 Other invested assets (Line 8) 0 0 0 0 0 0 0 0 0 0 37. 38 Receivables for securities (Line 9). 0.0 0.0 0.0 0.0 0.0 Securities lending reinvested collateral assets (Line 39. 10). 0 0 0 0 0 0 0 0 0 0 40. Aggregate write-ins for invested assets (Line 11) 0.0 0.0 0.0 0.0 0.0 41. Cash, cash equivalents and invested assets (Line 12) 100.0 100.0 100.0 100.0 100.0 nvestments in Parent, Subsidiaries and Affiliates Affiliated bonds, (Sch. D, Summary, Line 12, Col. 1) .0 .0 0 0 42. 0 Affiliated preferred stocks 43. 0 0 (Sch. D, Summary, Line 18, Col. 1) 0 0 0 Affiliated common stocks 44. (Sch. D, Summary, Line 24, Col. 1) 4.105.615 2.667.389 1.667.421 0 0 Affiliated short-term investments (subtotals included 45. in Schedule DA Verification, Col. 5, Line 10) Q. n n n n 46 Affiliated mortgage loans on real estate 0 0 0 0 0 47. 0 0 0 All other affiliated ... 0 48. Total of above Lines 42 to 47 4.105.615 2,667,389 1,667,421 0 0 Total Investment in parent included in Lines 42 to 47 .O .O ۵. ۵. above. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 3.6 1.9 0.0 0.0 2.4

#### ANNUAL STATEMENT FOR THE YEAR 2018 OF THE NARRAGANSETT BAY INSURANCE COMPANY

#### **FIVE-YEAR HISTORICAL DATA**

(Continued) 2018 2017 2016 2015 2014 Capital and Surplus Accounts (Page 4) 0 .1,438,226 ..1,008,441 .1,658,938 0 51. Net unrealized capital gains (losses) (Line 24) 52. Dividends to stockholders (Line 35) 0 0 0 0 Change in surplus as regards policyholders for the year (Line 38) 1,888,185 21,741,300 30,104,878 11,663,436 5,689,203 Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2) Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) ..... .161,378 878.240 .288,305 ..176,410 .1,140,502 55. Property lines (Lines 1, 2, 9, 12, 21 & 26) 3.591.788 2.500.956 2.119.881 2.611.959 1.855.165 Property and liability combined lines .159, 129, 936 .110,524,918 .100,820,616 .119,918,447 .75,931,970 (Lines 3, 4, 5, 8, 22 & 27) ... All other lines 57. 0 0 0 0 0 (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) Nonproportional reinsurance lines (Lines 31, 32 & 33) ..... 58. 162,883,102 113,904,114 .122,706,816 .78,927,637 59. Total (Line 35) 103.228.802 Net Losses Paid (Page 9, Part 2, Col. 4) 60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 145.071 276.700 85.321 134.910 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) 162.377 61. Property lines (Lines 1, 2, 9, 12, 21 & 26) .1,215,171 .899,267 .795,935 .918,066 1,023,380 Property and liability combined lines .33,418,636 18,351,992 .23,420,885 .28, 122, 322 .23,891,348 (Lines 3, 4, 5, 8, 22 & 27). All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 0 .0 .0 0 0 Nonproportional reinsurance lines 0 0 0 0 (Lines 31, 32 & 33). 65. Total (Line 35) .34.778.878 19 527 959 .24.302.141 .29.175.297 25 077 105 Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0 .100.0 .100.0 .100.0 100.0. .100.0 66. Premiums earned (Line 1) 53.0 29.8 36.8 49.4 42.1 67. Losses incurred (Line 2). .14.5 .17.8 .15.6 .10.7 .16.1 68. Loss expenses incurred (Line 3) 9.2 .7.0 27.5 .38.9 41.1 69. Other underwriting expenses incurred (Line 4) 70. Net underwriting gain (loss) (Line 8) .(8.6) .43.2 .40.5 .12.4 2.8 Other Percentages 71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0) ....... .43.1 (2.6) .(0.3) 20.0 32.0 Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0) 67.5 47.6 52.4 60.1 .58.2 73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0) .56.7 .42.5 .57 .8 132.2 147.3 One Year Loss Development (\$000 omitted) 74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) .(995)(1.840)(2.317)(808). .3.617 75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) .(0.9) (2.1) .(3.9) .(1.7)8.6 Two Year Loss Development (\$000 omitted) 76. Development in estimated losses and loss expense incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) (2,864) (4,205) (2,841) .2,387 .5,705 77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by 17.3 (3.2)(7.1)(6.0)Page 4, Line 21, Col. 2 x 100.0)

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

Yes [ ] No [ ]

If no, please explain

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

(\$000 Omitted)													
		Pr	emiums Earn	ed			Los	s and Loss Ex	xpense Paym	ents			12
Years	s in	1	2	3				and Cost	Adjusting	and Other	10	11	
Whic					Loss Pa	yments	Containmer	nt Payments	Payr	nents	]		Number of
Premiu					4	5	6	7	8	9	Salvage	Total Net	Claims
Were Ea					l <u>.</u>				l <u>.</u>		and	Paid (Cols.	Reported
and Los Were Inc		Direct and	0-4-4	Net	Direct and	0-4-4	Direct and	0-4-4	Direct and	0-4-4	Subrogation	4-5+6-	Direct and
vvere inc	Junea	Assumed	Ceded	(Cols. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	7 + 8 - 9)	Assumed
1. P	rior	XXX	XXX	XXX	(1)	0	1	0	0	0	0	0	XXX
2. 20	900	19,748	9,233	10,515	2,954	185	444	25	466	0	131	3,654	XXX
3. 20	010	43 , 561	14,664	28,897	12,695	2,721	1,728	367	1,461	0	83	12,796	XXX
4. 20	011	83,366	23,561	59,805	33,913	942	3,912	169	2,659	0	468	39,373	XXX
5. 20	012	146,626	88 ,610	58,016	176,064	132,301	25,706	17 , 151	8,363	0	1,625	60,681	XXX
6. 20	013	184 , 236	135,712	48,524	61,887	41,026	6, 101	3,855	1,825	0	1,504	24,932	XXX
7. 20	014	218 , 161	154 , 149	64,012	77 , 737	55,077	8 , 188	5 , 556	4,756	0	1,355	30,048	XXX
8. 20	015	258,645	187 , 852	70,793	130,202	98,506	11,616	8, 121	6 , 625	0	1,674	41,816	XXX
9. 20	016	292,723	226 , 820	65,903	108,893	83,592	7 , 649	5,335	5 , 568	0	1,295	33 , 183	XXX
10. 20	017	319,483	272,381	47 , 101	102,211	87,837	7,066	5,496	6,037	0	1,516	21,981	XXX
11. 20	:018	334,260	259,770	74,490	130,491	99,393	9,829	7,089	5,369	0	327	39,208	XXX
12. T	otals	XXX	XXX	XXX	837,046	601,580	82,240	53,163	43,130	0	9,979	307,672	XXX

		Losses	Unpaid		Defens	e and Cost (	Containment	Unpaid	Adjusting Unp		23	24	25
	Case		Bulk +		Case Basis Bulk + IBNR			21	22		Total	Number of	
	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 Subrog- ation Anticipated	Net Losses and Expenses Unpaid	Claims Outstand- ing Direct and Assumed
1	0	0	0	0	0	0	0	0	0	0	0	0	XXX
2	0	0	0	0	0	0	0	0	0	0	0	0	XXX
3	0	0	3	3	0	0	2	2	0	0	0	1	XXX
4	0	0	12	10	0	0	3	2	1	0	0	5	xxx
5	777	419	57	53	143	52	30	28	19	0	0	474	XXX
6	691	98	80	51	47	2	15	1	16	0	0	697	XXX
7	490	198	777	453	133	42	277	143	48	0	0	890	xxx
8	3,742	2,574	2,726	2,363	474	304	566	411	191	0	0	2,048	XXX
9	6,159	4,755	6,586	5,904	1,083	734	1,245	933	400	0	0	3,147	XXX
10	8,272	7,741	11,039	10,523	1,416	1,150	2, 128	1,778	632	0	0	2,294	xxx
11.	29,527	24,618	22,068	17,288	2,200	1,552	4,156	3,024	1,485	0	0	12,953	XXX
12.	49,658	40,404	43,349	36,647	5,497	3,836	8,421	6,323	2,793	0	0	22,508	xxx

		Total			oss Expense F				34	Net Balar	
	Losses and	d Loss Expense	es Incurred 28	(Incurre	ed/Premiums E 30	arned) 31	Nontabula 32	r Discount 33	Inter- Company	Reserves At	ter Discount 36
	Direct and Assumed	Ceded	26 Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1	XXX	XXX	XXX	xxx	XXX	XXX	0	0	xxx	0	0
2	3,864	210	3 ,654	19.6	2.3	34.7	0	0		0	0
3	15,890	3,093	12,797	36.5	21.1	44.3	0	0		0	1
4	40,500	1 , 123	39,377	48.6	4.8	658	0	0		3	2
5	211 , 160	150,005	61 , 155	144.0	169.3	105.4	0	0		361	112
6	70,662	45,033	25,629	38.4	33.2	52.8	0	0		622	75
7	92,407	61,469	30,938	42.4	39.9	48.3	0	0		617	274
8	156 , 143	112,278	43,865	60.4	59.8	62.0	0				516
9	137 , 582	101,253	36,330	47.0	44.6	55 . 1	0	0		2,086	1,060
10	138,800	114,525	24,275	43.4	42.0	51.5	0	0		1,046	1,248
11.	205,125	152,964	52,161	61.4	58.9	70.0	0	0		9,688	3,265
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	15,956	6,552

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

#### ANNUAL STATEMENT FOR THE YEAR 2018 OF THE NARRAGANSETT BAY INSURANCE COMPANY

## **SCHEDULE P - PART 2 - SUMMARY**

	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END											
					(\$000 OI	MITTED)					DEVELO	PMENT
Years in Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	One Year	Two Year
1. Prior	326	260	344	253	265	254	254	253	252	252	0	(1)
2. 2009	3,664	3,069	3,095	3,160	3,205	3,205	3,196	3,187	3,191	3,188	(3)	1
3. 2010	XXX	11,607	11,217	11,083	11 ,417	11,538	11,547	11,559	11,547	11,336	(212)	(223)
4. 2011	XXX	xxx	35 , 433	37 , 424	37,029	37 ,752	37 , 117	36,822	36,726	36,717	(9)	(104)
5. 2012	xxx	xxx	XXX	48 , 175	51,778	53,051	52,364	52,482	52,884	52,772	(112)	290
6. 2013	XXX	XXX	XXX	XXX	24 , 152	25,664	25,757	25,076	23,817	23 ,787	(30)	(1,289)
7. 2014	xxx	xxx	XXX	xxx	XXX	27 ,969	28,391	27 ,213	26,561	26 , 134	(427)	(1,079)
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX	38 , 130	37 ,845	37,570	37,048	(522)	(797)
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	xxx	30,024	30,071	30,362	291	338
10. 2017	xxx	XXX	XXX	xxx	XXX	xxx	xxx	xxx	17 ,578	17,606	28	xxx
11. 2018	xxx	XXX	XXX	XXX	XXX	xxx	xxx	XXX	XXX	45,307	XXX	xxx
										12. Totals	(995)	(2,864)

## **SCHEDULE P - PART 3 - SUMMARY**

			<del>•••</del>			. ,	0 - 0		<b></b>				
	CUMULAT	UMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)											
Years in Which	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With	Number of Claims Closed Without	
Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Loss Payment	Loss Payment	
1. Prior	000	87	174	252	251	253	253	253	252	252	XXX	XXX	
2. 2009	1,794	2,778	2,788	2,992	3,058	3,128	3,186	3 , 186	3,188	3,188	xxx	xxx	
3. 2010	xxx	8,589	10 , 194	10,418	10,792	11,024	11,309	11,336	11,333	11,335	xxx	xxx	
4. 2011	XXX	xxx	28 , 767	35,575	35,953	36 , 546	36,800	36 ,711	36,683	36,713	xxx	xxx	
5. 2012	XXX	XXX	XXX	42,427	49,422	49,873	50,558	50 ,879	51,735	52,317	xxx	xxx	
6. 2013	XXX	xxx	XXX	xxx	17 , 146	21,693	23 , 175	22,325	22,898	23 , 107	xxx	xxx	
7. 2014	XXX	XXX	XXX	xxx	XXX	21,324	24 , 144	22 , 115	24,088	25,292	xxx	xxx	
8. 2015	XXX	xxx	XXX	xxx	XXX	xxx	27,608	32,387	34,484	35,191	xxx	xxx	
9. 2016	XXX	XXX	XXX	xxx	XXX	xxx	xxx	24,908	27 , 115	27,616	xxx	xxx	
10. 2017	xxx	xxx	XXX	xxx	xxx	xxx	xxx	xxx	14,395	15,944	xxx	xxx	
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33,839	XXX	XXX	

## **SCHEDULE P - PART 4 - SUMMARY**

		J		ULL	- L <b>W</b> IV I	4 - 30	, IAIIAI WI	<b>\ I</b>		
Years in Which	BULK AND IE	BNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	00 OMITTED)
Losses Were Incurred	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018
1. Prior	134	41	17	0	4	0	1	0	0	0
2. 2009	765	100	60	20	(3)	0	3	1	0	0
3. 2010	xxx	1 , 285	514	208	16	0	22	7	2	1
4. 2011	xxx	XXX	2,091	909	241	570	220	51	6	4
5. 2012	xxx	XXX	xxx	3,670	819	1,759	289	66	84	6
6. 2013	xxx	XXX	xxx	XXX	3,248	2,200	1,359	1,003	303	43
7. 2014	xxx	XXX	xxx	XXX	XXX	3,929	2,544	2,697	917	458
8. 2015	xxx	XXX	xxx	XXX	XXX	XXX	5,565	3,180	1 , 175	518
9. 2016	xxx	xxx	xxx	XXX	XXX	XXX	xxx	3,978	1,844	994
10. 2017	xxx	XXX	xxx	XXX	XXX	XXX	xxx	XXX	2,508	866
11. 2018	l xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5.911

## **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

						ated By States A	and Territories				
			1	Gross Premiu Policy and Mer Less Return F Premiums on Tak	mbership Fees Premiums and Policies Not sen	4 Dividends Paid	5	6	7	8 Finance and	9 Direct Premium Written for Federal
	States, etc.		Active Status (a)	2 Direct Premiums Written	3 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Losses Paid (Deducting Salvage)	Direct Losses	Direct Losses Unpaid	Service Charges Not Included in Premiums	Purchasing Groups (Included in Col. 2)
1	· · · · · · · · · · · · · · · · · · ·	AL	N	0	0	0	0	0	0	0	COI. 2)
		AKI	N	0	0	0	0	0	0	0	
		AZ	N	0	0	0	0	0	0	0	
		AR	N	0	0	0	0	0	0	0	
		CA	N	0	0	0	0	0	0	0	
		col	N	0	0	0	0	0	0	0	
		СТ	L	7 ,517 ,994	5 , 522 , 437	0	4 , 155 , 885	5,398,228	1,612,923	18,220	
8.	Delaware	DE	N	0	0	0	0	0	0	0	
9.	Dist. Columbia	DC	N	0	0	0	0	0	0	0	
10.		FL	N	0	0	0	0	0	0	0	
		GA	N	0	0	0	0	0	]0	]0	
		HI	N	0	0	0	0	0	0	J0	
		ID	N	0	0	0	0	0	J	J	
		IL	N			0	0	0	J	J	
		IN	N N	0   n	 n	0 ∩	0 N	0 ∩	0	l	
		KS	N	0	0	0	0	n	n	n	
		KY	N	l0 l	0	0	0	0	0	0	
19.	Louisiana	LA	N	0	0	0	0	0	0	0	
		ME	N	0	0	0	0	0	0	0	
		MD	N	0	0	0	0	05.665.655	J0	J0	
	Massachusetts		L	60 , 105 , 145	58,293,132	ļ0	26,934,830	25,885,073	8,915,700	303,090	
23.		MI	N	0		0	0	0	0	0	
	Minnesota	MN MS	N	 n	 n l	0	0	0	J0	J0	
	Mississippi		N	0 N	0 N	0	0 N	0 N	J0	J	
	Montana		N	0	0	0	0	0	0	0	
1		NE	N	0	0	0	0	0	0	0	
1		NV	N	0	0	0	0	0	0	0	
	New Hampshire	NH	N	0	0	0	0	0	0	0	
31.	New Jersey	NJ	L	70,501,830	70,993,212	0	32,458,126	35,982,897	19,729,011	266,889	
	New Mexico		N	0	0	0	0	0	0	0	
	New York		L	179,900,809	178 , 785 , 598	0	89,064,537	96,784,367	55,732,459	768,413	
		NC	N	0	0	0	0	0	0	J0	
		ND OH	N N	U		0	0	0	J	J	
1		ОП ОК	N	0 N	0 N	0	0	0	J	J0	
		OR	N	0 N	 0	0 N	0 N	0 N	J0	J	
39.		PA	1	0	0	0	0	0	0	0	
		RI	L	21,588,113	20,665,391	0	10,269,722	10,875,714	7,016,738	118,195	
41.		sc	N	0	0	0	0	0	0	0	
		SD	N	0	0	0	0	0	0	0	
	Tennessee		N	0	0	0	0	0	0	0	
1		TX	N	0	0	<u>0</u>	<u>0</u>	J0	ļ	ļ	
		UT	N			0	0	0	J0	J0	
		VT VA	N	 	 n	U	U	U	U	0 	
	Virginia Washington		L	n l	 n	0 ∩	0 N	0 ∩	n	l	
	West Virginia		N	0	o l	0	0	0	0	0	
	Wisconsin		N	0	0	0	0	0	0	0	
		WY	N	0	0	0	0	0	0	0	
	American Samoa		N	0	0	0	0	0	0	<b>0</b>	
		GU	N	0		0	0	J0	J	J	
	Puerto Rico	PR	N	ļ0	0	0	0	J0	J0	J0	
55.	U.S. Virgin Islands	,,	N.		^	^	^	^	_	_	
56.	Northern Mariana		N		U	0	0	0	J	J	
57	Islands	MP CAN.	N	U 	ا ۱	U	U	U	0 	<sup>U</sup>	
	Aggregate other	UAIN.	IN	∪		0	0	0	l0	l0	
] 36.	alien	оτΙ	xxx	[n	ol	n	0	0	0	0	n l
59.	Totals		XXX	339,613,891	334,259,770	0	162,883,100	174,926,279	93,006,831	1,474,807	0
DETAI	LS OF WRITE-INS										
58001.			XXX	ļ							
58002.			XXX								
58003.			XXX	ļ						<b> </b>	
58998.	Sum. of remaining										
	write-ins for Line 58		VVV		_	_	_	_	_	_	
58000	from overflow page. Totals (Lines 58001		XXX	ا الاست	0	0	LD	l0	l	l	ا <sup>0</sup> ۔۔۔۔۔۔
50999.	through 58003 + 58										
	(Line 58 above)	555)	xxx	0	0	0	0	0	0	0	0
	,,			<u> </u>	Ů	•			·		

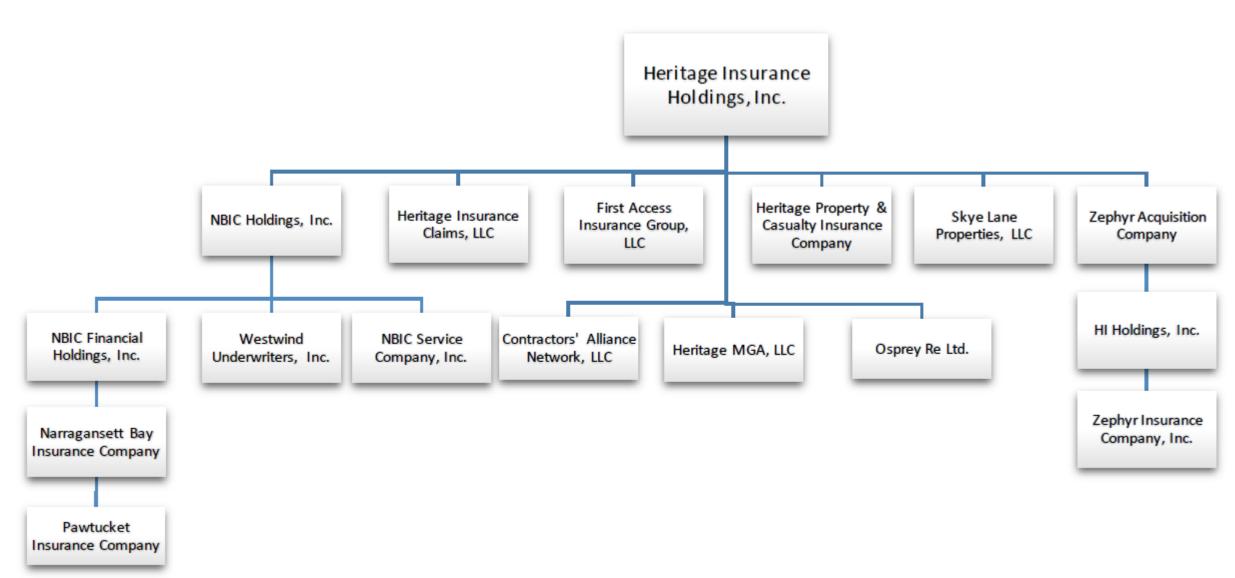
(a) Active Status Counts

L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG	.7	R – Registered – Non-domiciled RRGs0	
E – Eligible – Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile – See DSLI)	.0	Q – Qualified – Qualified or accredited reinsurer0	
D – Domestic Surplus Lines Insurer (DSLI) – Reporting entities authorized to write surplus lines in the state of domicile	Λ	N – None of the above – Not allowed to write business in the state 50	

<sup>(</sup>b) Explanation of basis of allocation of premiums by states, etc.

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

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Schedule D – Part 1A – Section 1	SI05
Schedule D – Part 1A – Section 2	SI08
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<b>ANNUAL STATEMENT E</b>	BLANK (	(Continued)
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