



35602201120100103

2011

Document Code: 201

**QUARTERLY STATEMENT**  
**AS OF SEPTEMBER 30, 2011**  
**OF THE CONDITION AND AFFAIRS OF THE**  
**OHIC Insurance Company**

NAIC Group Code <u>0831</u> (current period)	NAIC Company Code <u>35602</u>	Employer's ID Number <u>31-0926059</u>
Organized under the Laws of <u>Ohio</u> ,	State of Domicile or Port of Entry <u>Ohio</u>	
Country of Domicile <u>UNITED STATES OF AMERICA</u>		
Incorporated/Organized <u>02/09/1978</u>	Commenced Business <u>03/01/1978</u>	
Statutory Home Office <u>155 E BROAD STREET, 4TH FLOOR</u> (Street and Number)	COLUMBUS, OH 43215-3614 (City, or Town, State and Zip Code)	
Main Administrative Office <u>185 GREENWOOD ROAD</u> (Street and Number)	<u>(707)226-0100</u> (Area Code)(Telephone Number)	
<u>NAPA, CA 94558</u> (City, or Town, State and Zip Code)	<u>NAPA, CA 94558</u> (City, or Town, State and Zip Code)	
Primary Location of Books and Records <u>185 GREENWOOD ROAD</u> (Street and Number)	<u>(707)226-0100</u> (Area Code)(Telephone Number)	
<u>NAPA, CA 94558</u> (City, or Town, State and Zip Code)	<u>(707)226-0100</u> (Area Code)(Telephone Number)	
Internet Website Address <u>www.thedoctors.com</u>		
Statutory Statement Contact <u>DOUGLAS CHARLES WILL</u> (Name)	<u>(707)226-0100</u> (Area Code)(Telephone Number)	
<u>statefilingohic@thedoctors.com</u> (E-Mail Address)	<u>(707)226-0180</u> (Fax Number)	

**OFFICERS**

Name	Title
RICHARD ELLIOTT ANDERSON MD	PRESIDENT, CHIEF EXECUTIVE OFFICER
THOMAS GEORGE LUFFY	TREASURER
DAVID ARMAND MCHALE	SECRETARY

**OTHERS**

DAVID GERARD PREIMESBERGER, CHIEF FINANCIAL OFFICER  
 ROBERT DAVID FRANCIS, CHIEF OPERATING OFFICER  
 THOMAS GEORGE LUFFY, VICE PRESIDENT  
 DOUGLAS WILLIAM BOLTZ, ASSISTANT VICE PRESIDENT

DARRELL BLAIR RANUM, REGIONAL VICE PRESIDENT  
 DOUGLAS CHARLES WILL, VICE PRESIDENT  
 MICHAEL YACOB, SENIOR VICE PRESIDENT #

**DIRECTORS OR TRUSTEES**

RICHARD ELLIOTT ANDERSON MD	ROBERT DAVID FRANCIS
DAVID GERARD PREIMESBERGER	DENNIS BRYAN LAWTON PhD
DAVID ARMAND MCHALE	

State of CaliforniaCounty of NAPA ss

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

(Signature) <hr/> ROBERT DAVID FRANCIS (Printed Name) 1. CHIEF OPERATING OFFICER (Title)	(Signature) <hr/> DAVID ARMAND MCHALE (Printed Name) 2. SECRETARY (Title)	(Signature) <hr/> DAVID GERARD PREIMESBERGER (Printed Name) 3. CHIEF FINANCIAL OFFICER (Title)
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Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 2011, by Robert David Francis, proved to me on the basis of satisfactory evidence to be the person who appeared before me, and David Armand McHale, proved to me on the basis of satisfactory evidence to be the person who appeared before me, and David Gerard Preimesberger, proved to me on the basis of satisfactory evidence to be the person who appeared before me.

a. Is this an original filing?

Yes[X] No[ ]

b. If no: 1. State the amendment number 0  
 2. Date filed  
 3. Number of pages attached 0

(Notary Public Signature)

**ASSETS**

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	170,952,659		170,952,659	180,857,949
2. Stocks:				
2.1 Preferred stocks .....				
2.2 Common stocks .....				
3. Mortgage loans on real estate:				
3.1 First liens .....				
3.2 Other than first liens .....				
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances) .....				
4.2 Properties held for the production of income (less \$.....0 encumbrances) .....				
4.3 Properties held for sale (less \$.....0 encumbrances) .....				
5. Cash (\$.....1,500,524), cash equivalents (\$.....0) and short-term investments (\$.....263,017) .....	1,763,541		1,763,541	8,323,674
6. Contract loans (including \$.....0 premium notes) .....				
7. Derivatives .....				
8. Other invested assets .....				
9. Receivables for securities .....				
10. Securities lending reinvested collateral assets .....				
11. Aggregate write-ins for invested assets .....				
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	172,716,200		172,716,200	189,181,624
13. Title plants less \$.....0 charged off (for Title insurers only) .....				
14. Investment income due and accrued .....	1,675,423		1,675,423	2,083,945
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	982,157		982,157	94,232
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums) .....	1,185,888		1,185,888	1,046,045
15.3 Accrued retrospective premiums .....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	5,365,392		5,365,392	5,227,132
16.2 Funds held by or deposited with reinsured companies .....				
16.3 Other amounts receivable under reinsurance contracts .....				
17. Amounts receivable relating to uninsured plans .....				
18.1 Current federal and foreign income tax recoverable and interest thereon .....	26,140		26,140	
18.2 Net deferred tax asset .....	4,065,827	2,106,086	1,959,741	1,865,860
19. Guaranty funds receivable or on deposit .....				
20. Electronic data processing equipment and software .....				
21. Furniture and equipment, including health care delivery assets (\$.....0) .....				
22. Net adjustments in assets and liabilities due to foreign exchange rates .....				
23. Receivables from parent, subsidiaries and affiliates .....	68,172		68,172	57,529
24. Health care (\$.....0) and other amounts receivable .....				
25. Aggregate write-ins for other than invested assets .....	2,856,108	2,625,743	230,365	1,265,158
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	188,941,307	4,731,829	184,209,478	200,821,525
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....				
28. Total (Lines 26 and 27) .....	188,941,307	4,731,829	184,209,478	200,821,525
<b>DETAILS OF WRITE-INS</b>				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....				
1199. <b>TOTALS</b> (Lines 1101 through 1103 plus 1198) (Line 11 above) .....				
2501. Miscellaneous Assets .....	230,365		230,365	1,265,158
2502. Prepaid Pension Costs .....	2,625,743	2,625,743		
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....				
2599. <b>TOTALS</b> (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	2,856,108	2,625,743	230,365	1,265,158

**LIABILITIES, SURPLUS AND OTHER FUNDS**

		1 Current Statement Date	2 December 31 Prior Year
1.	Losses (current accident year \$.....248,436)	28,954,651	31,490,521
2.	Reinsurance payable on paid losses and loss adjustment expenses		
3.	Loss adjustment expenses	5,157,881	5,474,711
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)	2,795,917	2,915,747
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	83,908	231,870
7.1	Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses))		10,211,920
7.2	Net deferred tax liability		
8.	Borrowed money \$.....0 and interest thereon \$.....0		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$.....0 and including warranty reserves of \$.....0)	2,618,504	1,250,703
10.	Advance premium		
11.	Dividends declared and unpaid:		
11.1	Stockholders	28,971,594	9,600,000
11.2	Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)	1,527,197	5,416,260
13.	Funds held by company under reinsurance treaties	34,047,134	29,914,564
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance	1,124,062	1,124,062
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates	205,236	421,961
20.	Derivatives		
21.	Payable for securities		
22.	Payable for securities lending		
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$.....0 and interest thereon \$.....0		
25.	Aggregate write-ins for liabilities	41,033,945	
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)	146,520,029	98,052,318
27.	Protected cell liabilities		
28.	Total liabilities (Lines 26 and 27)	146,520,029	98,052,318
29.	Aggregate write-ins for special surplus funds		
30.	Common capital stock	3,591,990	3,591,990
31.	Preferred capital stock		
32.	Aggregate write-ins for other than special surplus funds		
33.	Surplus notes		
34.	Gross paid in and contributed surplus	16,971,594	58,000,000
35.	Unassigned funds (surplus)	17,125,865	41,177,217
36.	Less treasury stock, at cost:		
36.1	.....0 shares common (value included in Line 30 \$.....0)		
36.2	.....0 shares preferred (value included in Line 31 \$.....0)		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)	37,689,449	102,769,207
38.	Totals (Page 2, Line 28, Col. 3)	184,209,478	200,821,525
<b>DETAILS OF WRITE-INS</b>			
2501.	Return of Capital to TDC	41,033,945	
2502.			
2503.			
2598.	Summary of remaining write-ins for Line 25 from overflow page		
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)	41,033,945	
2901.			
2902.			
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page		
2999.	TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above)		
3201.			
3202.			
3203.			
3298.	Summary of remaining write-ins for Line 32 from overflow page		
3299.	TOTALS (Lines 3201 through 3203 plus 3298) (Line 32 above)		

**STATEMENT OF INCOME**

		1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
<b>UNDERWRITING INCOME</b>				
1.	Premiums earned			
1.1	Direct (written \$.....5,993,446)	4,839,885	6,321,951	8,140,720
1.2	Assumed (written \$.....0)			
1.3	Ceded (written \$.....4,519,191)	4,733,431	10,324,461	11,861,600
1.4	Net (written \$.....1,474,255)	106,454	(4,002,510)	(3,720,880)
<b>DEDUCTIONS:</b>				
2.	Losses incurred (current accident year \$.....248,436)			
2.1	Direct	7,012,414	7,927,464	(32,752,035)
2.2	Assumed			
2.3	Ceded	8,218,117	10,265,175	10,482,177
2.4	Net	(1,205,703)	(2,337,712)	(43,234,211)
3.	Loss adjustment expenses incurred	2,146,536	4,633,641	5,111,006
4.	Other underwriting expenses incurred	615,611	981,284	1,734,400
5.	Aggregate write-ins for underwriting deductions			
6.	Total underwriting deductions (Lines 2 through 5)	1,556,444	3,277,214	(36,388,805)
7.	Net income of protected cells			
8.	Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	(1,449,990)	(7,279,724)	32,667,926
<b>INVESTMENT INCOME</b>				
9.	Net investment income earned	5,218,616	5,822,323	7,706,271
10.	Net realized capital gains (losses) less capital gains tax of \$.....817,634	1,503,683	1,112,764	1,666,337
11.	Net investment gain (loss) (Lines 9 + 10)	6,722,299	6,935,087	9,372,609
<b>OTHER INCOME</b>				
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0)			
13.	Finance and service charges not included in premiums			
14.	Aggregate write-ins for miscellaneous income	(1,272,134)	(1,166,752)	(1,567,743)
15.	Total other income (Lines 12 through 14)	(1,272,134)	(1,166,752)	(1,567,743)
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	4,000,175	(1,511,389)	40,472,792
17.	Dividends to policyholders		319	319
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)	4,000,175	(1,511,708)	40,472,473
19.	Federal and foreign income taxes incurred	(826,187)	(1,934,065)	9,712,355
20.	Net income (Line 18 minus Line 19) (to Line 22)	4,826,361	422,357	30,760,118
<b>CAPITAL AND SURPLUS ACCOUNT</b>				
21.	Surplus as regards policyholders, December 31 prior year	102,769,207	80,380,423	80,380,422
22.	Net income (from Line 20)	4,826,361	422,357	30,760,118
23.	Net transfers (to) or from Protected Cell accounts			
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$.....0			
25.	Change in net unrealized foreign exchange capital gain (loss)			
26.	Change in net deferred income tax	(1,381,116)	(3,152,458)	(4,434,093)
27.	Change in nonadmitted assets	1,474,997	3,205,188	3,558,559
28.	Change in provision for reinsurance		0	2,104,201
29.	Change in surplus notes			
30.	Surplus (contributed to) withdrawn from Protected cells			
31.	Cumulative effect of changes in accounting principles			
32.	Capital changes:			
32.1	Paid in			
32.2	Transferred from surplus (Stock Dividend)			
32.3	Transferred to surplus			
33.	Surplus adjustments:			
33.1	Paid in	(41,028,406)		
33.2	Transferred to capital (Stock Dividend)			
33.3	Transferred from capital			
34.	Net remittances from or (to) Home Office			
35.	Dividends to stockholders	(28,971,594)		(9,600,000)
36.	Change in treasury stock			
37.	Aggregate write-ins for gains and losses in surplus			
38.	Change in surplus as regards policyholders (Lines 22 through 37)	(65,079,758)	475,088	22,388,785
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	37,689,449	80,855,510	102,769,207
<b>DETAILS OF WRITE-INS</b>				
0501.				
0502.				
0503.				
0598.	Summary of remaining write-ins for Line 5 from overflow page			
0599.	TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)			
1401.	Interest on FWA	(1,272,134)	(1,166,752)	(1,567,743)
1402.				
1403.				
1498.	Summary of remaining write-ins for Line 14 from overflow page			
1499.	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)	(1,272,134)	(1,166,752)	(1,567,743)
3701.				
3702.				
3703.				
3798.	Summary of remaining write-ins for Line 37 from overflow page			
3799.	TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above)			

**CASH FLOW**

		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>				
1.	Premiums collected net of reinsurance .....	(3,442,576)	1,101,296	1,508,199
2.	Net investment income .....	6,312,727	6,531,446	8,527,503
3.	Miscellaneous income .....	(1,272,134)	(1,166,752)	(1,567,743)
4.	Total (Lines 1 to 3) .....	1,598,017	6,465,990	8,467,960
5.	Benefit and loss related payments .....	433,635	(550,842)	(3,882,126)
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
7.	Commissions, expenses paid and aggregate write-ins for deductions .....	3,346,769	4,548,921	10,683,911
8.	Dividends paid to policyholders .....		319	319
9.	Federal and foreign income taxes paid (recovered) net of \$.....817,634 tax on capital gains (losses) .....	10,229,506	(2,664,576)	(2,664,576)
10.	Total (Lines 5 through 9) .....	14,009,910	1,333,822	4,137,528
11.	Net cash from operations (Line 4 minus Line 10) .....	(12,411,893)	5,132,168	4,330,432
<b>Cash from Investments</b>				
12.	Proceeds from investments sold, matured or repaid:			
12.1	Bonds .....	81,822,578	59,279,376	86,209,832
12.2	Stocks .....			25,000
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 .....			
12.7	Miscellaneous proceeds .....	0	0	1,143,341
12.8	Total investment proceeds (Lines 12.1 to 12.7) .....	81,822,578	59,279,376	87,378,173
13.	Cost of investments acquired (long-term only):			
13.1	Bonds .....	70,281,560	40,017,717	67,593,171
13.2	Stocks .....			
13.3	Mortgage loans .....			
13.4	Real estate .....			
13.5	Other invested assets .....			
13.6	Miscellaneous applications .....		18,642	
13.7	Total investments acquired (Lines 13.1 to 13.6) .....	70,281,560	40,036,359	67,593,171
14.	Net increase (or decrease) in contract loans and premium notes .....			
15.	Net cash from investments (Line 12.8 minus Lines 13.7 and 14) .....	11,541,018	19,243,017	19,785,002
<b>Cash from Financing and Miscellaneous Sources</b>				
16.	Cash provided (applied):			
16.1	Surplus notes, capital notes .....			
16.2	Capital and paid in surplus, less treasury stock .....	(41,028,406)		
16.3	Borrowed funds .....			
16.4	Net deposits on deposit-type contracts and other insurance liabilities .....			
16.5	Dividends to stockholders .....	9,600,000	18,700,000	18,700,000
16.6	Other cash provided (applied) .....	44,939,148	524,780	698,451
17.	Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6) .....	(5,689,258)	(18,175,220)	(18,001,549)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>				
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(6,560,133)	6,199,965	6,113,885
19.	Cash, cash equivalents and short-term investments:			
19.1	Beginning of year .....	8,323,674	2,209,790	2,209,789
19.2	End of period (Line 18 plus Line 19.1) .....	1,763,541	8,409,755	8,323,674

Note: Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions:

20.0001				
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# **Notes to Financial Statement**

## **1. Summary of Significant Accounting Policies**

### Accounting Practices

- A. The accompanying financial statements of OHIC Insurance Company (OHIC or The Company) have been prepared on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance. The State of Ohio requires insurance companies domiciled in the State of Ohio to prepare their statutory financial statements in accordance with the National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* (NAIC SAP) subject to any deviations prescribed or permitted by the Ohio Department of Insurance. OHIC has no prescribed or permitted practices exceptions.
- B. Use of Estimates in the Preparation of the Financial Statements  
No significant change
- C. Accounting Policies  
No significant change

## **2. Accounting Changes and Correction of Errors**

None

## **3. Business Combinations and Goodwill**

None

## **4. Discontinued Operations**

Not applicable.

## **5. Investments**

### A. Mortgage Loans

None

### B. Troubled Debt Restructuring for Creditors

None

### C. Reverse Mortgages

None

### D. Loan-backed Securities

1.) Prepayment assumptions for single class and multi-class mortgage-backed/asset-backed securities were obtained from broker dealer survey values or internal estimates.

2.) Securities within the scope of SSAP No. 43R with a recognized other-than-temporary impairment

None

3) Security with a recognized other-than-temporary impairment, currently held by the reporting entity, as the present value of cash flows expected to be collected is less than the amortized cost basis of the securities:

None

4) Securities with fair value less than amortized cost for which an other-than-temporary impairment has not been recognized in earnings as realized loss.

Unrealized loss for	Amort Cost	Fair Value	Unrealized Loss
Less than 12 months	\$5,741,697	\$5,701,818	(\$ 39,879)
Greater than 12 months	\$ 220,999	\$ 196,031	(\$24,968)

5) The company also considers broker estimates of expected redemption value in reaching the conclusion that the impairments are not other-than-temporary.

STATEMENT AS OF **September 30, 2011** OF THE **OHIC Insurance Company**  
**Notes to Financial Statement**

**6. Joint Ventures, Partnerships and Limited Liability Corporations**

None

**7. Investment Income**

**A. Accrued Investment Income**

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

**B. Amounts Nonadmitted**

None

**8. Derivative Instruments**

None

**9. Income Taxes**

**A.** The components of the Deferred Tax Asset (DTA) and the Deferred Tax Liability (DTL) at September 30, 2011 and December 31, 2010 are as follows

Description	September 30, 2011		
	Ordinary	Capital	Total
Total Gross Deferred Tax Assets	4,110,157	-	4,110,157
Statutory Valuation Allowance	-	-	-
Adjusted Gross Deferred Tax Assets	4,110,157	-	4,110,157
Total Gross Deferred Tax Liabilities	(44,330)	-	(44,330)
Net Deferred Tax Assets	4,065,827	-	4,065,827
Non-Admitted Deferred Tax Assets	(2,106,086)	-	(2,106,086)
Net Admitted Deferred Tax Assets	1,959,741	-	1,959,741

Description	December 31, 2010		
	Ordinary	Capital	Ordinary
Total Gross Deferred Tax Assets	5,527,737	-	5,527,737
Statutory Valuation Allowance	-	-	-
Adjusted Gross Deferred Tax Assets	5,527,737	-	5,527,737
Total Gross Deferred Tax Liabilities	(80,794)	-	(80,794)
Net Deferred Tax Assets	5,446,943	-	5,446,943
Non-Admitted Deferred Tax Assets	(3,581,083)	-	(3,581,083)
Net Admitted Deferred Tax Assets	1,865,860	-	1,865,860

Description	Change		
	Ordinary	Capital	Total
Total Gross Deferred Tax Assets	(1,417,580)	-	(1,417,580)
Statutory Valuation Allowance	-	-	-
Adjusted Gross Deferred Tax Assets	(1,417,580)	-	(1,417,580)
Total Gross Deferred Tax Liabilities	36,464	-	36,464
Net Deferred Tax Assets	(1,381,116)	-	(1,381,116)
Non-Admitted Deferred Tax Assets	1,474,997	-	1,474,997
Net Admitted Deferred Tax Assets	93,881	-	93,881

The Company has not elected to admit additional DTAs pursuant to SSAP 10R, paragraph 10(e). The current period election does not differ from the prior reporting period.

# **Notes to Financial Statement**

The amount of each result or component of the calculation by tax character, of SSAP 10R, paragraphs 10.a, 10.b.i., 10.b.ii., 10.c.

Description	September 30, 2011		
	Ordinary	Capital	Total
Can be recovered through loss carrybacks (10.a.)	1,959,741	-	1,959,741
Lesser of:			
Expected to be recognized within one year (10.b.i.)	-	-	-
Ten percent of adjusted capital and surplus (10.b.ii.)	10,090,335	-	10,090,335
Adjusted gross DTAs offset against existing DTLs (10.c.)	44,330	-	44,330
Risk-based capital level used in paragraph 10.d.			
Total adjusted capital			37,689,449
Authorized control level			3,720,182

Description	December 31, 2010		
	Ordinary	Capital	Total
Can be recovered through loss carrybacks (10.a.)	1,865,860	-	1,865,860
Lesser of:			
Expected to be recognized within one year (10.b.i.)	-	-	-
Ten percent of adjusted capital and surplus (10.b.ii.)	7,789,171	-	7,789,171
Adjusted gross DTAs offset against existing DTLs (10.c.)	80,794	-	80,794
Risk-based capital level used in paragraph 10.d.			
Total adjusted capital			102,769,207
Authorized control level			3,720,182

Description	Change		
	Ordinary	Capital	Total
Can be recovered through loss carrybacks (10.a.)	93,881	-	93,881
Lesser of:			
Expected to be recognized within one year (10.b.i.)	-	-	-
Ten percent of adjusted capital and surplus (10.b.ii.)	2,301,164	-	2,301,164
Adjusted gross DTAs offset against existing DTLs (10.c.)	(36,464)	-	(36,464)
Risk-based capital level used in paragraph 10.d.			
Total adjusted capital			(65,079,758)
Authorized control level			-

The following amounts result from the calculation in SSAP 10R, paragraphs 10.a., 10.b., and 10.c.

	September 30, 2011		
	Ordinary	Capital	Total
Admitted Deferred Tax Assets	1,959,741	-	1,959,741
Admitted Assets			184,209,478
Adjusted Statutory Surplus*			35,729,708
Total Adjusted Capital from DTAs			1,959,741
Increases due to SSAP No. 10R, Paragraph 10e			
Admitted Deferred Tax Assets	-	-	-
Admitted Assets	-	-	-
Statutory Surplus	-	-	-

	December 31, 2010		
	Ordinary	Capital	Total
Admitted Deferred Tax Assets	1,865,860	-	1,865,860
Admitted Assets			200,821,525
Adjusted Statutory Surplus*			100,903,347
Total Adjusted Capital from DTAs			1,865,860
Increases due to SSAP No. 10R, Paragraph 10e			
Admitted Deferred Tax Assets	-	-	-
Admitted Assets	-	-	-
Statutory Surplus	-	-	-

STATEMENT AS OF **September 30, 2011** OF THE **OHIC Insurance Company**  
**Notes to Financial Statement**

	Change		
	Ordinary	Capital	Total
Admitted Deferred Tax Assets	93,881	-	93,881
Admitted Assets			(16,612,047)
Adjusted Statutory Surplus*			(65,173,639)
Total Adjusted Capital from DTAs			93,881
Increases due to SSAP No. 10R, Paragraph 10e			
Admitted Deferred Tax Assets	-	-	-
Admitted Assets	-	-	-
Statutory Surplus	-	-	-

\*As reported on the statutory balance sheet for the most recently filed statement with the domiciliary state commissioner adjusted in accordance with SSAP No. 10R, paragraph 10bii.

B. Deferred tax liabilities have all been recognized.

C. Current Tax and Change in Deferred Tax

The provisions for income taxes incurred on earnings are as follow:

	2011	2010	Change
Federal	(826,187)	9,712,355	(10,538,542)
Foreign	-	-	-
Realized Capital Gains Tax	817,634	871,139	(53,505)
Federal and foreign income taxes incurred	(8,553)	10,583,494	(10,592,047)

The tax effects of temporary differences that give rise to significant portions of the deferred tax assets and deferred tax liabilities are as follows:

Deferred Tax Assets	Sep. 30, 2011	Dec. 31, 2010	Change	Character
Discounting of unpaid losses and LAE	1,114,714	1,120,931	(6,217)	Ordinary
Unearned Premium Reserve	183,295	87,549	95,746	Ordinary
OTTI	-	-	-	Capital
Unrealized Loss	-	-	-	Capital
Net Operating Loss	1,934,213	3,376,245	(1,442,032)	Ordinary
Other	877,935	943,012	(65,077)	Ordinary
Gross Deferred Tax Assets	4,110,157	5,527,737	(1,417,580)	
Non-Admitted Deferred Tax Assets	2,106,086	3,581,083	(1,474,997)	
Admitted Deferred Tax Assets	2,004,071	1,946,654	57,417	
Deferred Tax Liabilities			-	
Unrealized Gain	-	-	-	Capital
Advanced Premium Addback	-	-	-	Ordinary
Bond Discount Accretion	44,330	80,794	(36,464)	Ordinary
Other	-	-	-	Ordinary
Gross Deferred Tax Liabilities	44,330	80,794	(36,464)	
Net Admitted Deferred Tax Asset	1,959,741	1,865,860	93,881	

The change in Net Deferred Income Taxes is comprised of the following:

	Sep. 30, 2011	Dec. 31, 2010	Change
Total Gross Deferred Tax Assets	4,110,157	5,527,737	(1,417,580)
Total Gross Deferred Tax Liabilities	44,330	80,794	(36,464)
Net Deferred Tax Asset	4,065,827	5,446,943	(1,381,116)
Deferred Tax on Change in Unrealized Capital Gains			-
Change in Net Deferred Income Tax			(1,381,116)

## **Notes to Financial Statement**

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

The significant items that cause the difference between statutory federal income tax rate of 35% and the Company's effective income tax rate are as follows:

	Sep. 30, 2011	Effective Tax Rate
Provision Computed at Statutory Rate	1,686,233	35%
Increase/(Decrease) in taxes resulting from:		
Tax-exempt Interest	(732,898)	-15%
Loss and LAE Reserves	11,370	1%
Accrued Market Discount	36,483	1%
Unearned Premium Reserves	95,746	2%
OTTI	-	%
Capital Gains	-	%
Net Operating Loss	(1,081,524)	-22%
Other	(23,963)	-1%
Total Current Provision	(8,553)	1%
Current Provision excluding Capital Gains/(Losses)	(8,553)	1%
Provision for Capital Gain/(Losses)	817,634	17%
Subtotal Current Provision	809,081	18%
Provision for Realized Capital Gains/(Losses)	(817,634)	-17%
Total Current Provision	(8,553)	1%

### E. At September 30, 2011, the Company had

Net operating loss carryforward	\$ 5,526,324
Capital loss carryforward	-
AMT credit carryforward of	-

The following is income tax expense for 2011 and 2010 that is available for recoupment in the event of future net losses.

Year	Amount
2011	-
2010	10,211,919

F. The Company's Federal Income Tax Return are consolidated with The Doctors Company ("TDC") and its subsidiaries. See Schedule Y for a complete list of the entities with which the Federal Tax Return is consolidated for the current year. The method of allocation between the companies is subject to a written agreement approved by the Board of Directors. Tax payments are made to, or refunds received from TDC in amounts which would result from filing separate tax returns with federal taxing authorities.

### **10. Information Concerning Parent, Subsidiaries and Affiliates**

#### D. Amounts Due to or from Related Parties:

	<b>(Due To)</b>	<b>Due From</b>
TDC	\$ 0	\$ 68,172
TDCIS	\$ 404	\$ 0
TDMC	\$ 203,902	\$ 0
SCPIE	\$ 930	\$ 0
Total Due (To/From)	\$ 205,236	\$ 68,172

### **11. Debt**

None

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

On April 1, 2010, the Board of Directors voted to terminate the OHIC Pension Plan. The Company received a favorable determination letter from the IRS on September 1, 2011. The Company expects all payouts to plan participants to be completed in December 2011. All expected payouts are either funded or accrued as of September 30, 2011.

### **13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations –**

No significant change

## **Notes to Financial Statement**

**14. Contingencies**

No significant change

**15. Leases**

None

**16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk**

None

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

None

**B. Transfers and Servicing of Financial Assets**

None

**C. Wash Sales**

None

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

None

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

None

**20. Fair Value Measurement**

None

**21. Other Items**

No significant change

**22. Events Subsequent**

None

**23. Reinsurance**

No significant change

**24. Retrospectively Rated Contracts and Contracts Subject to Redetermination**

None

**25. Change in Incurred Losses and Loss Adjustment Expenses**

Incurred losses and loss adjustment expenses attributable to insured events of prior years has increased by \$495,247 from \$737,795,251 in 2010 to \$738,290,499 in 2011 as a result of reestimation of unpaid losses and loss adjustment expenses on medical malpractice lines of insurance. This increase is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

**26. Intercompany Pooling Arrangements**

None

**27. Structured Settlements**

OHIC has no structured settlements where it is contingently liable.

**28. Health Care Receivables**

None

STATEMENT AS OF **September 30, 2011** OF THE **OHIC Insurance Company**  
**Notes to Financial Statement**

**29. Participating Policies**

None

**30. Premium Deficiency Reserves**

1) Liability carried for premium deficiency reserves	\$0
2) Date of the most recent evaluation of this liability	December 31, 2010
3) Was anticipated investment income utilized in the calculation?	No

**31. High Deductibles**

None

**32. Discounting of Liabilities for Unpaid Losses and Unpaid Loss Adjustment Expenses**

OHIC does not discount reserves.

**33. Asbestos / Environmental Reserves**

None

**34. Subscriber Savings Accounts**

None

**35. Multiple Peril Crop Insurance**

None

**36. Financial Guarantee Insurance**

None

**GENERAL INTERROGATORIES****PART 1 - COMMON INTERROGATORIES**  
**GENERAL**

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes[ ] No[X]  
Yes[ ] No[ ] N/A[X]

1.2 If yes, has the report been filed with the domiciliary state? .....

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes[ ] No[X]

2.2 If yes, date of change: .....

3. Have there been any substantial changes in the organizational chart since the prior quarter end? Yes[X] No[ ]  
If yes, complete the Schedule Y - Part 1 - organizational chart.

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes[ ] No[X]

4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation. .....

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
.....	.....	.....

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes[ ] No[X] N/A[ ]  
If yes, attach an explanation.

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2008 .....

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2008 .....

6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 12/04/2009 .....

6.4 By what department or departments?  
OHIO

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes[ ] No[ ] N/A[X]  
Yes[X] No[ ] N/A[ ]

6.6 Have all of the recommendations within the latest financial examination report been complied with?

7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes[ ] No[X]

7.2 If yes, give full information

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes[ ] No[X]

8.2 If response to 8.1 is yes, please identify the name of the bank holding company. Yes[ ] No[X]

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes[ ] No[X]

8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Office of Thrift Supervision (OTS), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 OTS	6 FDIC	7 SEC
.....	.....	Yes[ ] No[X]				

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes[X] No[ ]  
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  
(c) Compliance with applicable governmental laws, rules and regulations;  
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  
(e) Accountability for adherence to the code.

9.11 If the response to 9.1 is No, please explain: .....

9.2 Has the code of ethics for senior managers been amended? Yes[ ] No[X]

9.21 If the response to 9.2 is Yes, provide information related to amendment(s). .....

9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes[ ] No[X]

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s). .....

**FINANCIAL**

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes[X] No[ ]  
10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ ..... 68,172

**INVESTMENT**

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes[ ] No[X]

11.2 If yes, give full and complete information relating thereto: .....

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$ ..... 0

13. Amount of real estate and mortgages held in short-term investments: \$ ..... 0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes[ ] No[X]

**GENERAL INTERROGATORIES (Continued)****INVESTMENT**

14.2 If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds .....	.....	.....
14.22 Preferred Stock .....	.....	.....
14.23 Common Stock .....	.....	.....
14.24 Short-Term Investments .....	.....	.....
14.25 Mortgages Loans on Real Estate .....	.....	.....
14.26 All Other .....	.....	.....
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) .....	.....	.....
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above .....	.....	.....

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes[ ] No[X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

If no, attach a description with this statement.

Yes[ ] No[ ] N/A[X]

16. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 3, III Conducting Examinations, F - Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes[X] No[ ]

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

1 Name of Custodian(s)	2 Custodian Address
Union Bank .....	350 California Street, Flr 6, San Francisco, CA 94104

16.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
.....	.....	.....

16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter?

Yes[ ] No[X]

16.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
.....	.....	.....	.....

16.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
104518 .....	Deutsche Investment Management Americas Inc .....	345 Park Avenue, New York, NY 10154 .....

17.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?

Yes[X] No[ ]

17.2 If no, list exceptions:

**GENERAL INTERROGATORIES****PART 2 - PROPERTY & CASUALTY INTERROGATORIES**

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?  Yes  No  N/A  X  
If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?  Yes  No  X  
If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled?  Yes  No  X  
3.2 If yes, give full and complete information thereto

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see annual statement instructions pertaining to disclosure of discounting for definition of "tabular reserves"), discounted at a rate of interest greater than zero?  Yes  No  X  
4.2 If yes, complete the following schedule:

1 Line of Business	2 Maximum Interest	3 Discount Rate	TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 TOTAL	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 TOTAL
04.2999 Total .....			.....	.....	.....	.....	.....	.....	.....	.....

5. Operating Percentages:

5.1 A&H loss percent	.....	0.000%
5.2 A&H cost containment percent	.....	0.000%
5.3 A&H expense percent excluding cost containment expenses	.....	0.000%

6.1 Do you act as a custodian for health savings accounts?  Yes  No  X  
6.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$..... 0  
6.3 Do you act as an administrator for health savings accounts?  Yes  No  X  
6.4 If yes, please provide the balance of the funds administered as of the reporting date. \$..... 0

**SCHEDULE F - CEDED REINSURANCE****Showing all new reinsurers - Current Year to Date**

1 NAIC Company Code	2 Federal ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Is Insurer Authorized? (Yes or No)
<b>U.S. insurers</b>				
38636 ...	13-3031176 ...	PARTNER REINS CO OF THE US .....	NY .....	... Yes[X] No[ ] .
30058 ...	75-1444207 ...	SCOR REINS CO .....	NY .....	... Yes[X] No[ ] .

**SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN****Current Year to Date - Allocated by States and Territories**

States, Etc.	1 Active Status	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. Alabama (AL) .....	N .....						
2. Alaska (AK) .....	L .....						
3. Arizona (AZ) .....	L .....						
4. Arkansas (AR) .....	L .....						
5. California (CA) .....	N .....				(249,975)		
6. Colorado (CO) .....	L .....						
7. Connecticut (CT) .....	N .....						
8. Delaware (DE) .....	N .....						
9. District of Columbia (DC) .....	N .....						
10. Florida (FL) .....	N .....						
11. Georgia (GA) .....	L .....						
12. Hawaii (HI) .....	N .....						
13. Idaho (ID) .....	L .....						
14. Illinois (IL) .....	L .....			370,000	4,773,397	8,072,219	
15. Indiana (IN) .....	L .....			519,252	1,570,437	3,593,662	
16. Iowa (IA) .....	L .....						
17. Kansas (KS) .....	L .....		5,000				
18. Kentucky (KY) .....	L .....		75,000	100,000	3,000,000	8,319,550	
19. Louisiana (LA) .....	N .....						
20. Maine (ME) .....	N .....						
21. Maryland (MD) .....	L .....			1,197,500	10,912,003	2,253,055	
22. Massachusetts (MA) .....	N .....						
23. Michigan (MI) .....	L .....						143,400
24. Minnesota (MN) .....	L .....						
25. Mississippi (MS) .....	N .....						
26. Missouri (MO) .....	L .....						
27. Montana (MT) .....	L .....						
28. Nebraska (NE) .....	L .....						
29. Nevada (NV) .....	L .....						
30. New Hampshire (NH) .....	N .....						
31. New Jersey (NJ) .....	E .....						
32. New Mexico (NM) .....	L .....						
33. New York (NY) .....	L .....						
34. North Carolina (NC) .....	N .....						
35. North Dakota (ND) .....	L .....						
36. Ohio (OH) .....	L .....	5,993,446	7,120,172	455,500	6,429,032	43,496,847	76,796,308
37. Oklahoma (OK) .....	L .....						
38. Oregon (OR) .....	L .....						
39. Pennsylvania (PA) .....	L .....			60,000	750,000	1,118,796	
40. Rhode Island (RI) .....	N .....						
41. South Carolina (SC) .....	N .....						
42. South Dakota (SD) .....	L .....						
43. Tennessee (TN) .....	L .....						
44. Texas (TX) .....	L .....						
45. Utah (UT) .....	L .....						
46. Vermont (VT) .....	N .....						
47. Virginia (VA) .....	N .....						
48. Washington (WA) .....	L .....				150,000	150,000	
49. West Virginia (WV) .....	L .....		30,000				644,017
50. Wisconsin (WI) .....	L .....	288,581	1,033,333	(100,000)	1,430,836	1,891,924	
51. Wyoming (WY) .....	L .....				250,000	161,881	
52. American Samoa (AS) .....	N .....						
53. Guam (GU) .....	N .....						
54. Puerto Rico (PR) .....	N .....						
55. U.S. Virgin Islands (VI) .....	N .....						
56. Northern Mariana Islands (MP) .....	N .....						
57. Canada (CN) .....	N .....						
58. Aggregate other alien (OT) .....	X X X .....						
59. Totals .....	(a) 33	5,993,446	7,408,753	1,598,833	8,325,809	66,333,520	103,144,812

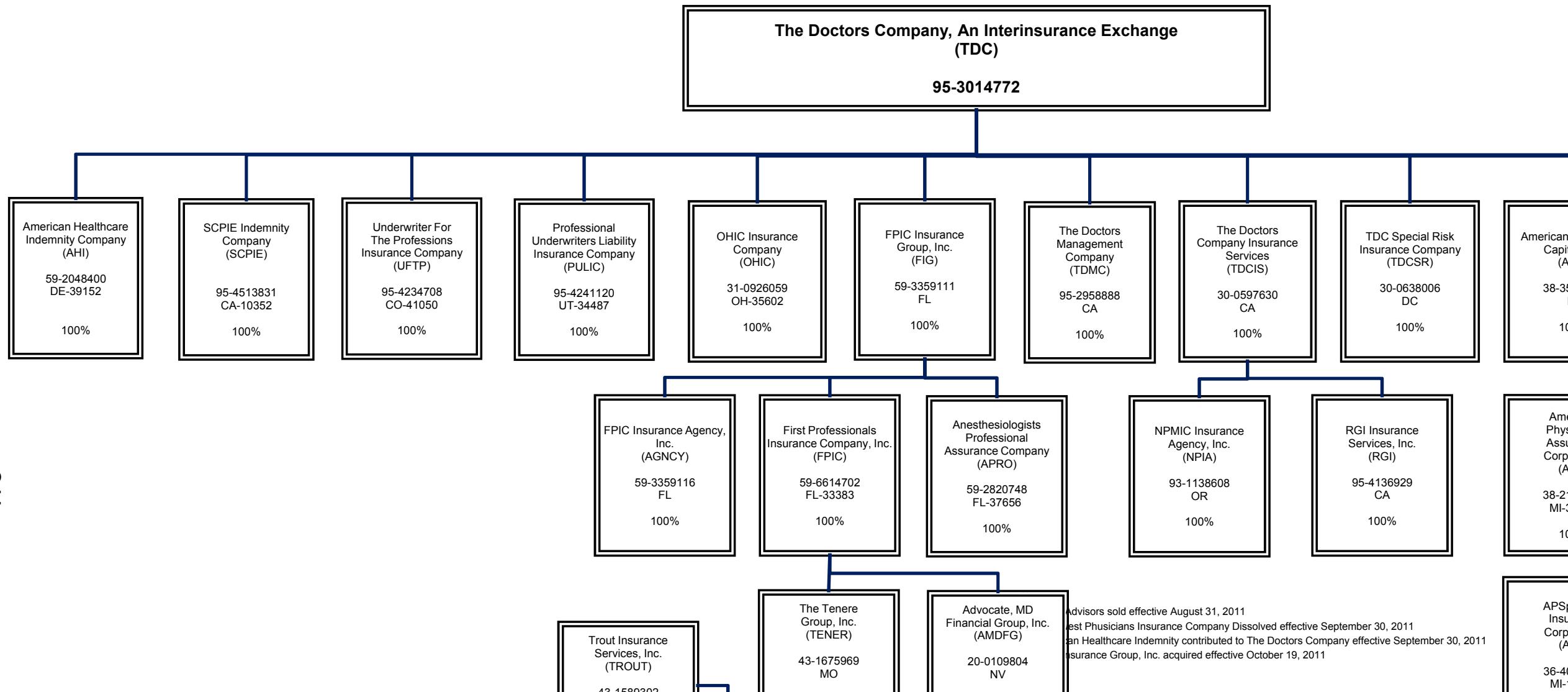
**DETAILS OF WRITE-INS**

5801. ....	X X X .....						
5802. ....	X X X .....						
5803. ....	X X X .....						
5898. Summary of remaining write-ins for Line 58 from overflow page .....	X X X .....						
5899. TOTALS (Lines 5801 through 5803 plus 5898) (Line 58 above) .....	X X X .....						

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**



STATEMENT AS OF **September 30, 2011** OF THE **OHIC Insurance Company**  
**PART 1 - LOSS EXPERIENCE**

Line of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire .....				
2. Allied lines .....				
3. Farmowners multiple peril .....				
4. Homeowners multiple peril .....				
5. Commercial multiple peril .....				
6. Mortgage guaranty .....				
8. Ocean marine .....				
9. Inland marine .....				
10. Financial guaranty .....				
11.1 Medical professional liability - occurrence .....	406,719	5,861,613	1,441.196	611.020
11.2 Medical professional liability - claims made .....	4,433,167	1,150,801	25.959	56.000
12. Earthquake .....				
13. Group accident and health .....				
14. Credit accident and health .....				
15. Other accident and health .....				
16. Workers' compensation .....				
17.1 Other liability - occurrence .....				
17.2 Other liability - claims made .....				
17.3 Excess Workers' Compensation .....				
18.1 Products liability - occurrence .....				
18.2 Products liability - claims made .....				
19.1 19.2 Private passenger auto liability .....				
19.3 19.4 Commercial auto liability .....				
21. Auto physical damage .....				
22. Aircraft (all perils) .....				
23. Fidelity .....				
24. Surety .....				
26. Burglary and theft .....				
27. Boiler and machinery .....				
28. Credit .....				
29. International .....				
30. Warranty .....				
31. Reinsurance-Nonproportional Assumed Property .....	XXX	XXX	XXX	XXX
32. Reinsurance-Nonproportional Assumed Liability .....	XXX	XXX	XXX	XXX
33. Reinsurance-Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business .....				
35. TOTALS .....	4,839,885	7,012,414	144.888	125.396
DETAILS OF WRITE-INS				
3401. ....				
3402. ....				
3403. ....				
3498. Summary of remaining write-ins for Line 34 from overflow page .....				
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above) .....				

**PART 2 - DIRECT PREMIUMS WRITTEN**

Line of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire .....			
2. Allied lines .....			
3. Farmowners multiple peril .....			
4. Homeowners multiple peril .....			
5. Commercial multiple peril .....			
6. Mortgage guaranty .....			
8. Ocean marine .....			
9. Inland marine .....			
10. Financial guaranty .....			
11.1 Medical professional liability - occurrence .....	87,056	529,170	936,366
11.2 Medical professional liability - claims made .....	1,065,636	5,464,276	6,472,387
12. Earthquake .....			
13. Group accident and health .....			
14. Credit accident and health .....			
15. Other accident and health .....			
16. Workers' compensation .....			
17.1 Other liability - occurrence .....			
17.2 Other liability - claims made .....			
17.3 Excess Workers' Compensation .....			
18.1 Products liability - occurrence .....			
18.2 Products liability - claims made .....			
19.1 19.2 Private passenger auto liability .....			
19.3 19.4 Commercial auto liability .....			
21. Auto physical damage .....			
22. Aircraft (all perils) .....			
23. Fidelity .....			
24. Surety .....			
26. Burglary and theft .....			
27. Boiler and machinery .....			
28. Credit .....			
29. International .....			
30. Warranty .....			
31. Reinsurance-Nonproportional Assumed Property .....	XXX	XXX	XXX
32. Reinsurance-Nonproportional Assumed Liability .....	XXX	XXX	XXX
33. Reinsurance-Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business .....			
35. TOTALS .....	1,152,692	5,993,446	7,408,753
DETAILS OF WRITE-INS			
3401. ....			
3402. ....			
3403. ....			
3498. Summary of remaining write-ins for Line 34 from overflow page .....			
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above) .....			

**PART 3 (000 omitted)**  
**LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE**

Years in Which Losses Occurred	1 Prior Year-End Known Case Loss and LAE Reserves	2 Prior Year-End IBNR Loss and LAE Reserves	3 Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	4 2011 Loss and LAE Payments on Claims Reported as of Prior Year-End	5 2011 Loss and LAE Payments on Claims Unreported as of Prior Year-End	6 Total 2011 Loss and LAE Payments (Cols. 4 + 5)	7 Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year-End	8 Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year-End	9	10 Total Q.S. Loss and LAE Reserves (Cols. 7 + 8 + 9)	11 Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 4 + 7 minus Col. 1)	12 Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	13 Prior Year-End Total Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 11 + 12)
1. 2008 + Prior .....	20,457	15,584	36,041	3,903		3,903	18,669		13,916	32,585	2,115	(1,668)	447
2. 2009 .....	27	229	256	(114)		(114)	150		260	410	9	31	40
3. Subtotals 2009 + Prior .....	20,484	15,813	36,297	3,789		3,789	18,819		14,176	32,995	2,124	(1,637)	487
4. 2010 .....	231	437	668	(19)		(19)	138		557	695	(112)	120	8
5. Subtotals 2010 + Prior .....	20,715	16,250	36,965	3,770		3,770	18,957		14,733	33,690	2,012	(1,517)	495
6. 2011 .....	XXX	XXX	XXX	XXX	24	24	XXX	132	290	422	XXX	XXX	XXX
7. Totals .....	20,715	16,250	36,965	3,770	24	3,794	18,957	132	15,023	34,112	2,012	(1,517)	495
											Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
8. Prior Year-End's Surplus As Regards Policyholders .....	102,769										1.....9.713	2.....(9.335)	3.....1.339
													Col. 13, Line 7 Line 8
													4.....0.482

Q13

## **SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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

### **RESPONSES**

1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?
4. Will the Director and Officer Supplement be filed with the state of domicile and the NAIC with this statement?

No  
Yes  
No  
No

Explanations:

Bar Codes:

Trusted Surplus Statement



3560220114900003

2011

Document Code: 490

Medicare Part D Coverage Supplement



3560220113650003

2011

Document Code: 365

Director and Officer Supplement



3560220115050003

2011

Document Code: 505

**N O N E**

STATEMENT AS OF **September 30, 2011** OF THE **OHIC Insurance Company**  
**SCHEDULE A - VERIFICATION**

Real Estate

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	.....	.....
2. Cost of acquired:	.....	.....
2.1 Actual cost at time of acquisition .....	.....	.....
2.2 Additional investment made after acquisition .....	.....	.....
3. Current year change in encumbrances .....	.....	.....
4. Total gain (loss) on disposals .....	.....	.....
5. Deduct amounts received on disposals .....	.....	.....
6. Total foreign exchange change in book/adjusted carrying value .....	.....	.....
7. Deduct current year's other than temporary impairment recognized .....	.....	.....
8. Deduct current year's depreciation .....	.....	.....
9. Book/adjusted carrying value at the end of current period (Lines 1 + 2 + 3 + 4 - 5 + 6 - 7 - 8) .....	.....	.....
10. Deduct total nonadmitted amounts .....	.....	.....
11. Statement value at end of current period (Line 9 minus Line 10) .....	.....	.....

**SCHEDULE B - VERIFICATION**

Mortgage Loans

	1 Year To Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year .....	.....	.....
2. Cost of acquired:	.....	.....
2.1 Actual cost at time of acquisition .....	.....	.....
2.2 Additional investment made after acquisition .....	.....	.....
3. Capitalized deferred interest and other .....	.....	.....
4. Accrual of discount .....	.....	.....
5. Unrealized valuation increase (decrease) .....	.....	.....
6. Total gain (loss) on disposals .....	.....	.....
7. Deduct amounts received on disposals .....	.....	.....
8. Deduct amortization of premium and mortgage interest points .....	.....	.....
9. Total foreign exchange change in book value/recorded investment .....	.....	.....
10. Deduct current year's other than temporary impairment recognized .....	.....	.....
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10) .....	.....	.....
12. Total valuation allowance .....	.....	.....
13. Subtotal (Line 11 plus Line 12) .....	.....	.....
14. Deduct total nonadmitted amounts .....	.....	.....
15. Statement value at end of current period (Line 13 minus Line 14) .....	.....	.....

**SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	.....	.....
2. Cost of acquired:	.....	.....
2.1 Actual cost at time of acquisition .....	.....	.....
2.2 Additional investment made after acquisition .....	.....	.....
3. Capitalized deferred interest and other .....	.....	.....
4. Accrual of discount .....	.....	.....
5. Unrealized valuation increase (decrease) .....	.....	.....
6. Total gain (loss) on disposals .....	.....	.....
7. Deduct amounts received on disposals .....	.....	.....
8. Deduct amortization of premium and depreciation .....	.....	.....
9. Total foreign exchange change in book/adjusted carrying value .....	.....	.....
10. Deduct current year's other than temporary impairment recognized .....	.....	.....
11. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10) .....	.....	.....
12. Deduct total nonadmitted amounts .....	.....	.....
13. Statement value at end of current period (Line 11 minus Line 12) .....	.....	.....

**SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	180,857,949	197,588,965
2. Cost of bonds and stocks acquired .....	70,281,560	67,593,171
3. Accrual of discount .....	15,387	234,501
4. Unrealized valuation increase (decrease) .....	2,321,317	2,537,476
5. Total gain (loss) on disposals .....	81,822,578	86,234,832
6. Deduct consideration for bonds and stocks disposed of .....	700,976	861,332
7. Deduct amortization of premium .....	.....	.....
8. Total foreign exchange change in book/adjusted carrying value .....	.....	.....
9. Deduct current year's other than temporary impairment recognized .....	.....	.....
10. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9) .....	170,952,659	180,857,949
11. Deduct total nonadmitted amounts .....	.....	.....
12. Statement value at end of current period (Line 10 minus Line 11) .....	170,952,659	180,857,949

**SCHEDULE D - PART 1B**  
**Showing the Acquisitions, Dispositions and Non-Trading Activity**  
**During the Current Quarter for all Bonds and Preferred Stock by Rating Class**

	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. Class 1 (a) .....	146,828,182	46,807,321	40,132,971	(741,156)	154,125,198	146,828,182	152,761,376	174,825,881
2. Class 2 (a) .....	15,359,649	2,588,216	4,368	510,803	15,724,641	15,359,649	18,454,300	13,180,729
3. Class 3 (a) .....								
4. Class 4 (a) .....								
5. Class 5 (a) .....								
6. Class 6 (a) .....								
7. Total Bonds .....	162,187,831	49,395,537	40,137,339	(230,353)	169,849,839	162,187,831	171,215,676	188,006,610
<b>PREFERRED STOCK</b>								
8. Class 1 .....								
9. Class 2 .....								
10. Class 3 .....								
11. Class 4 .....								
12. Class 5 .....								
13. Class 6 .....								
14. Total Preferred Stock .....								
15. Total Bonds & Preferred Stock .....	162,187,831	49,395,537	40,137,339	(230,353)	169,849,839	162,187,831	171,215,676	188,006,610

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$.....0; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0

**SCHEDULE DA - PART 1****Short - Term Investments**

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999. Totals .....	263,017	XXX	263,017	655	

**SCHEDULE DA - Verification****Short-Term Investments**

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	7,148,661	603,936
2. Cost of short-term investments acquired .....	9,726,372	39,363,421
3. Accrual of discount .....		
4. Unrealized valuation increase (decrease) .....		
5. Total gain (loss) on disposals .....		
6. Deduct consideration received on disposals .....	16,612,016	32,818,696
7. Deduct amortization of premium .....		
8. Total foreign exchange change in book/adjusted carrying value .....		
9. Deduct current year's other than temporary impairment recognized .....		
10. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9) .....	263,017	7,148,661
11. Deduct total nonadmitted amounts .....		
12. Statement value at end of current period (Line 10 minus Line 11) .....	263,017	7,148,661

**SI04 Schedule DB - Part A Verification . . . . .** **NONE**

**SI04 Schedule DB - Part B Verification . . . . .** **NONE**

**SI05 Schedule DB Part C Section 1 . . . . .** **NONE**

**SI06 Schedule DB Part C Section 2 . . . . .** **NONE**

**SI07 Schedule DB - Verification . . . . .** **NONE**

**SI08 Schedule E - Verification (Cash Equivalents) . . . . .** **NONE**

**E01 Schedule A Part 2 .....** **NONE**

**E01 Schedule A Part 3 .....** **NONE**

**E02 Schedule B Part 2 .....** **NONE**

**E02 Schedule B Part 3 .....** **NONE**

**E03 Schedule BA Part 2 .....** **NONE**

**E03 Schedule BA Part 3 .....** **NONE**

**SCHEDULE D - PART 3**

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator (a)
<b>Bonds - U.S. Governments</b>									
912810QQ4	UNITED STATES TREAS BDS		08/04/2011	Goldman Sachs	XXX	1,365,435	1,250,000.00	12,186	1
912810QS0	UNITED STATES TREAS BDS		09/30/2011	VARIOUS	XXX	13,062,713	11,750,000.00	40,633	1
912828QN3	UNITED STATES TREAS NTS		08/09/2011	VARIOUS	XXX	9,414,685	9,250,000.00	47,958	1
0599999	Subtotal - Bonds - U.S. Governments				XXX	23,842,833	22,250,000.00	100,777	XXX
<b>Bonds - U.S. Special Revenue, Special Assessment</b>									
3128M5NL0	FHLMC PC GOLD COMB 30		09/01/2011	Barclay Capital	XXX	1,390,904	1,265,357.34	2,320	1
31396FFR9	FHLMC REMIC SERIES 3068		09/02/2011	BNP PARIBAS SECURITIES CO	XXX	1,922,222	1,723,000.00	1,675	1
3138ANL68	FNMA PASS-THRU LNG 30 YEAR		09/01/2011	JP Morgan Chase	XXX	3,709,452	3,491,992.47	4,739	1
3138EGEY6	FNMA PASS-THRU LNG 30 YEAR		09/01/2011	JP Morgan Chase	XXX	1,541,229	1,473,318.12	1,964	1
31418MSR4	FNMA PASS-THRU LNG 30 YEAR		09/01/2011	JP Morgan Chase	XXX	1,849,190	1,682,037.31	3,084	1
3138EGGS7	FNMA PASS-THRU LNG 30 YEAR 4.500 2		07/12/2011	BEAR STEARNS	XXX	2,074,552	1,987,074.16	3,229	1
38377QQB6	GNMA REMIC TRUST 2011-29		09/29/2011	NOMURA	XXX	2,127,048	1,917,338.84	6,950	1
3199999	Subtotal - Bonds - U.S. Special Revenue, Special Assessment				XXX	14,614,597	13,540,118.24	23,961	XXX
<b>Bonds - Industrial and Miscellaneous (Unaffiliated)</b>									
14040HAX3	CAPITAL ONE FINL CORP		07/14/2011	Barclays Capital	XXX	613,456	615,000.00		2FE
423074AM5	HEINZ H J CO		09/07/2011	JP Morgan Chase	XXX	1,974,760	2,000,000.00		2FE
428236BQ5	HEWLETT PACKARD CO		09/13/2011	Barclays Capital	XXX	499,080	500,000.00		1FE
46636VAC0	JP MORGAN CHASE CMBS 2011-C5		09/16/2011	JP Morgan Chase	XXX	757,498	750,000.00		1Z*
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)				XXX	3,844,794	3,865,000.00	2,433	XXX
8399997	Subtotal - Bonds - Part 3				XXX	42,302,224	39,655,118.24	127,171	XXX
8399998	Summary Item from Part 5 for Bonds (N/A to Quarterly)				XXX	XXX	XXX	XXX	XXX
8399999	Subtotal - Bonds				XXX	42,302,224	39,655,118.24	127,171	XXX
8999998	Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly)				XXX	XXX	XXX	XXX	XXX
9799998	Summary Item from Part 5 for Common Stocks (N/A to Quarterly)				XXX	XXX	XXX	XXX	XXX
9899999	Subtotal - Preferred and Common Stocks				XXX		XXX		XXX
9999999	Total - Bonds, Preferred and Common Stocks				XXX	42,302,224	XXX	127,171	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....0.

QE04

## SCHEDULE D - PART 4

Show All Long-Term Bonds and Stocks Sold, Redeemed, or Otherwise Disposed of  
During the Current Quarter

1	2	3 F o r e i g n	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22			
										Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's Temporarily Impaired Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11 + 12 - 13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Maturity Date	NAIC Designation or Market Indicator (a)		
CUSIP Identification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Actual Value	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's Temporarily Impaired Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11 + 12 - 13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Maturity Date	NAIC Designation or Market Indicator (a)			
<b>Bonds - U.S. Governments</b>																								
36207JZ7	GNMA #433752	09/15/2011	PRINCIPAL RECEIPT	XXX	218	218.41	221	219		(1)			(1)							10	05/15/2028	1		
36208WCM3	GNMA #462776	09/15/2011	PRINCIPAL RECEIPT	XXX	810	809.84	809	809												36	07/15/2028	1		
36209HGJ8	GNMA #471901	09/15/2011	PRINCIPAL RECEIPT	XXX	80	79.60	81	80												4	05/15/2028	1		
36209NCP5	GNMA #476278	09/15/2011	PRINCIPAL RECEIPT	XXX	136	135.67	137	136												6	05/15/2028	1		
36295QVU1	GNMA #677527	09/15/2011	PRINCIPAL RECEIPT	XXX	20,721	20,720.77	20,886	20,874		(153)			(153)							871	11/15/2037	1		
36295XZZ1	GNMA #683960	09/15/2011	PRINCIPAL RECEIPT	XXX	18,216	18,215.69	18,401	18,405		(189)			(189)							786	02/15/2038	1		
36296DAT5	GNMA #687718	09/15/2011	PRINCIPAL RECEIPT	XXX	7,739	7,739.08	7,641	7,656		83			83							286	07/15/2038	1		
36296DLE6	GNMA #688025	09/15/2011	PRINCIPAL RECEIPT	XXX	30,645	30,644.75	31,090	31,071		(426)			(426)							1,279	10/15/2038	1		
36296GRY9	GNMA #690903	09/15/2011	PRINCIPAL RECEIPT	XXX	45,784	45,783.78	46,327	46,330		(547)			(547)							1,722	06/15/2038	1		
36296KMW9	GNMA #693473	09/15/2011	PRINCIPAL RECEIPT	XXX	13,318	13,317.64	13,393	13,396		(78)			(78)							453	06/15/2038	1		
36241KPD4	GNMA #78220	09/15/2011	PRINCIPAL RECEIPT	XXX	25,836	25,836.31	26,042	26,008		(172)			(172)							1,049	11/15/2037	1		
91281QOQ4	UNITED STATES TREAS BDS	08/09/2011	RBC Capital Markets	XXX	1,414,453	1,250,000.00	1,365,435			(29)			(29)							49,047	05/15/2041	1		
91281QSQ0	UNITED STATES TREAS BDS	09/28/2011	CREDIT USA	XXX	7,629,609	6,750,000.00	7,290,818			(573)			(573)							12,929	05/15/2041	1		
91282BQN3	UNITED STATES TREAS NTS	09/08/2011	VARIOUS	XXX	9,989,817	9,250,000.00	9,414,685			(1,441)			(1,441)							339,364	30,953	08/15/2041	1	
0599999 Subtotal - Bonds - U.S. Governments				XXX	19,197,382	17,413,501.54	18,235,966	164,985		(3,525)			(3,525)						964,984	964,984	130,186	XXX	XXX	
<b>Bonds - U.S. States, Territories and Possessions</b>																								
605580KB4	MISSISSIPPI ST	08/05/2011	JP Morgan Chase	XXX	1,147,590	1,000,000.00	1,082,030	1,045,459		(6,606)			(6,606)						1,038,853		108,737	108,737	40,688	
1799999 Subtotal - Bonds - U.S. States, Territories and Possessions				XXX	1,147,590	1,000,000.00	1,082,030	1,045,459		(6,606)			(6,606)						1,038,853		108,737	108,737	40,688	
<b>Bonds - U.S. Political Subdivisions of States, Territories and Possessions</b>																								
34711GAZ6	FORT COLLINS CO	09/08/2011	BMO NESBIT	XXX	1,031,390	1,000,000.00	1,039,780	1,012,266		(5,845)			(5,845)						1,006,421		24,969	24,969	39,167	
2499999 Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions				XXX	1,031,390	1,000,000.00	1,039,780	1,012,266		(5,845)			(5,845)						1,006,421		24,969	24,969	39,167	
<b>Bonds - U.S. Special Revenue, Special Assessment</b>																								
196558PA2	COLORADO RIVER TX MUN WTR	08/19/2011	JP Morgan Chase	XXX	1,145,100	1,000,000.00	1,059,120	1,037,991		(4,385)			(4,385)						1,033,606		111,494	111,494	57,361	
3128K65B2	FHLMC A46242	09/15/2011	PRINCIPAL RECEIPT	XXX	199,585	199,584.99	190,604	193,689		5,896			5,896						199,585		6,673	07/01/2035	1	
3128KNR88	FHLMC A59511	09/15/2011	PRINCIPAL RECEIPT	XXX	20,205	20,204.79	19,940	20,031		174			174						20,205		796	04/01/2037	1	
3128AV93	FHLMC C72440	09/15/2011	PRINCIPAL RECEIPT	XXX	20,373	20,373.08	20,934	20,652		(279)			(279)						20,373		753	10/01/2032	1	
3128M4S33	FHLMC G02940	09/15/2011	PRINCIPAL RECEIPT	XXX	53,127	53,127.11	50,961	51,945		1,182			1,182						53,127		1,962	05/01/2037	1	
3128M5ED8	FHLMC G03432	09/15/2011	PRINCIPAL RECEIPT	XXX	52,328	52,327.74	52,164	52,174		154			154						52,328		1,946	11/01/2037	1	
3128PST49	FHLMC PC GOLD 15 YR	09/15/2011	PRINCIPAL RECEIPT	XXX	65,130	65,130.02	66,300	66,297		(1,167)			(1,167)						65,130		1,528	10/01/2025	1	
3128M8AW4	FHLMC PC GOLD COMB 30 5.500 20400	09/15/2011	PRINCIPAL RECEIPT	XXX	129,527	129,527.33	140,315			(10,788)			(10,788)						129,527		1,199	01/01/2040	1	
31395GZT2	FHLMC REMIC SERIES 2874	09/15/2011	PRINCIPAL RECEIPT	XXX	56,446	56,445.96	57,919	57,211		(765)			(765)						56,446		1,522	06/15/2018	1	
31395MQ36	FHLMC REMIC SERIES 2935	09/15/2011	PRINCIPAL RECEIPT	XXX	50,291	50,290.76	51,666	51,154		(863)			(863)						50,291		1,564	06/15/2023	1	
31398VLX2	FHLMC REMIC SERIES 3656	09/15/2011	PRINCIPAL RECEIPT	XXX	34,225	34,225.40	36,427	36,408		(2,183)			(2,183)						34,225		1,140	10/15/2036	1	
31398VTM8	FHLMC REMIC SERIES 3659	09/15/2011	PRINCIPAL RECEIPT	XXX	45,439	45,439.88	48,720			(644)			(644)						48,076		(2,637)	1,527	10/15/2031	1
3137A0LE3	FHLMC REMIC SERIES 3695	09/15/2011	PRINCIPAL RECEIPT	XXX	39,446	39,445.84	41,763	41,742		(2,296)			(2,296)						39,446		1,179	09/15/2035	1	
31414DZQ2	FNMA #963451	09/26/2011	PRINCIPAL RECEIPT	XXX	12,609	12,608.79	12,654	12,628		(19)			(19)						12,609		433	06/01/2023	1	
31383SSP6	FNMA #511826	09/26/2011	PRINCIPAL RECEIPT	XXX	2,320	2,319.76	2,366	2,335		(15)			(15)						2,320		93	07/01/2016	1	
31384VV33	FNMA #535334	09/26/2011	PRINCIPAL RECEIPT	XXX	3,838	3,838.05	3,965	3,913		(75)			(75)						3,838		203	06/01/2030	1	
31385JEL8	FNMA #545639	09/26/2011	PRINCIPAL RECEIPT	XXX	6,808	6,807.64	7,035	6,924		(116)			(116)						6,808		298	04/01/2032	1	
31385JEM6	FNMA #545640	09/26/2011	PRINCIPAL RECEIPT	XXX	17,855	17,855.36	18,740	18,320		(465)			(465)						17,855		847	04/01/2032	1	
31386TM51	FNMA #572881	09/26/2011	PRINCIPAL RECEIPT	XXX	3,595	3,595.02	3,593	3,590		5			5						3,595		132	04/01/2016	1	
31388NGU4	FNMA #609611	09/26/2011	PRINCIPAL RECEIPT	XXX	5,780	5,780.42	5,801	5,776		4			4						5,780		220	11/01/2016	1	
31388TFK4	FNMA #614070	09/26/20																						

## SCHEDULE D - PART 4

Show All Long-Term Bonds and Stocks Sold, Redeemed, or Otherwise Disposed of  
During the Current Quarter

1 CUSIP Identification	2 Description	3 F o r e i n g	4 Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consideration	8 Par Value	9 Actual Cost	10 Prior Year Book/ Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					16 Book/ Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest/ Stock Dividends Received During Year	21 Maturity Date	22 NAIC Designation or Market Indicator (a)		
										11 Unrealized Valuation Increase/ (Decrease)	12 Current Year's (Amortization)/ Accretion	13 Current Year's Other Than Temporary Impairment Recognized	14 Total Change in B./A.C.V. (11 + 12 - 13)	15 Total Foreign Exchange Change in B./A.C.V.									
3138ANL68 .	FNMA PASS-THRU LNG 30 YEAR		09/26/2011	PRINCIPAL RECEIPT	XXX	3,362	3,361.94	3,561		(199)			(199)							13	08/01/2041	1	
31402CVY5 .	FNMA PASS-THRU LNG 30 YEAR		09/26/2011	PRINCIPAL RECEIPT	XXX	83,231	83,231.28	88,056	88,078	(4,847)			(4,847)							2,677	02/01/2033	1	
31403C6L0 .	FNMA PASS-THRU LNG 30 YEAR		09/26/2011	PRINCIPAL RECEIPT	XXX	86,645	86,644.78	91,695	91,696	(5,051)			(5,051)							2,908	02/01/2036	1	
31410GCW1 .	FNMA PASS-THRU LNG 30 YEAR		09/26/2011	PRINCIPAL RECEIPT	XXX	17,079	17,079.44	17,637	17,639	(560)			(560)							521	06/01/2037	1	
31418MWR9 .	FNMA PASS-THRU LNG 30 YEAR		09/26/2011	PRINCIPAL RECEIPT	XXX	19,605	19,605.05	20,279	20,281	(676)			(676)							579	04/01/2037	1	
31417YFC5 .	FNMA PASS-THRU SHRT 10 YEAR		09/26/2011	PRINCIPAL RECEIPT	XXX	24,587	24,587.44	25,367	25,271	(684)			(684)							661	09/01/2019	1	
31417YLD7 .	FNMA PASS-THRU SHRT 10 YEAR		09/26/2011	PRINCIPAL RECEIPT	XXX	37,157	37,157.02	39,143	38,856	(1,699)			(1,699)							1,122	02/01/2020	1	
3138EGGS7 .	FNMA PASS-THRU LNG 30 YEAR 4,500 2		09/26/2011	PRINCIPAL RECEIPT	XXX	15,957	15,956.52	16,659		(702)			(702)							85	05/01/2041	1	
31398MLQ7 .	FNMA REMIC TRUST 2010-24		09/26/2011	PRINCIPAL RECEIPT	XXX	70,477	70,477.19	73,428	73,321	(2,844)			(2,844)							1,698	07/25/2023	1	
375306AF4 .	GILBERT AZ WTR RES MUN		08/09/2011	PIPER JAFFRAY	XXX	1,076,900	1,000,000.00	1,045,830	1,021,552	(4,538)			(4,538)							59,886	43,194	10/01/2013	
38373MLA6 .	GNMA REMIC TRUST 2004-20		09/16/2011	PRINCIPAL RECEIPT	XXX	18,475	18,475.13	19,410	19,273	(798)			(798)							546	04/16/2034	1	
597749YE4 .	MIDLAND TX REV		09/08/2011	SOUTHWEST SECURITIES	INC.	1,348,433	1,320,000.00	1,365,751	1,332,352	(7,195)			(7,195)							23,276	23,276	68,200	
602409FM1 .	MILWAUKEE WI MET SEW DIST		08/09/2011	Goldman Sachs	XXX	1,096,830	1,000,000.00	1,050,760	1,023,904	(5,038)			(5,038)							1,018,866	77,964	43,194	
64983RGD3 .	NEW YORK ST DORM AUTH REV'S		08/09/2011	VARIOUS	XXX	1,187,098	1,100,000.00	1,153,735	1,124,082	(5,605)			(5,605)							1,118,477	68,621	61,264	
76222WAM3 .	RHODE ISLAND ST & PROVIDENCE		08/08/2011	VARIOUS	XXX	1,030,090	1,000,000.00	1,038,700	1,011,404	(5,073)			(5,073)							1,006,331	23,759	38,889	
812643DX9 .	SEATTLE WASH MUN LT & PWR REV																						
95639RBJ7 .	REV		08/19/2011	MORGAN KEEGAN & CO	XXX	1,198,320	1,000,000.00	1,117,860	1,111,404	(6,667)			(6,667)							1,104,737	93,583	62,222	
	WEST VA HIGHER ED POL COMMUN		08/09/2011	PIPER JAFFRAY	XXX	1,104,000	1,000,000.00	1,057,780	1,029,575	(5,224)			(5,224)							1,024,351	79,649	43,194	
3199999 Subtotal - Bonds - U.S. Special Revenue, Special Assessment					XXX	11,031,936	10,265,166.59	10,779,163	10,373,038	(85,952)			(85,952)							10,496,341		535,595	
<b>Bonds - Industrial and Miscellaneous (Unaffiliated)</b>																							
126650BP4 .	CVS CAREMARK CORPORATION		09/13/2011	Sink PMT @ 100.000000	XXX	4,368	4,368.49	4,456	4,456	(88)			(88)							4,368		169	12/10/2028
36158YHA0 .	GE CAP CMBS 2002-3		09/10/2011	PRINCIPAL RECEIPT	XXX	42,705	42,705.30	41,958	42,418	287			287							42,705		1,244	12/10/2037
61748HAR2 .	MORGAN STANLEY CAP 2004-5AR		09/26/2011	PRINCIPAL RECEIPT	XXX	5,566	5,565.54	5,587	5,524	42			42							5,566		96	07/25/2034
929766EA7 .	WACHOVIA CMBS 2003-C4		09/15/2011	PRINCIPAL RECEIPT	XXX	16,017	16,016.64	15,471	15,820	197			197						16,017		437	04/15/2035	
3899999 Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					XXX	68,656	68,655.97	67,472	68,218	438			438							68,656		1,946	XXX
8399997 Subtotal - Bonds - Part 4					XXX	32,476,954	29,747,324.10	31,204,411	12,663,966	(101,490)			(101,490)							30,842,669		1,634,285	687,458
8399998 Summary Item from Part 5 for Bonds (N/A to Quarterly)					XXX	XXX	XXX	XXX	XXX	XXX			XXX							XXX	XXX	XXX	XXX
8399999 Subtotal - Bonds					XXX	32,476,954	29,747,324.10	31,204,411	12,663,966	(101,490)			(101,490)							30,842,669		1,634,285	687,458
8999998 Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly)					XXX	XXX	XXX	XXX	XXX	XXX			XXX							XXX	XXX	XXX	XXX
9799998 Summary Item from Part 5 for Common Stocks (N/A to Quarterly)					XXX	XXX	XXX	XXX	XXX	XXX			XXX							XXX	XXX	XXX	XXX
9899999 Subtotal - Preferred and Common Stocks					XXX		XXX																XXX
9999999 Total - Bonds, Preferred and Common Stocks					XXX	32,476,954	XXX	31,204,411	12,663,966	(101,490)			(101,490)							30,842,669		1,634,285	687,458

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....0.

QE05.1

**E06 Schedule DB Part A Section 1 .....** **NONE**

**E07 Schedule DB Part B Section 1 .....** **NONE**

**E08 Schedule DB Part D .....** **NONE**

**E09 Schedule DL - Part 1 - Securities Lending Collateral Assets .....** **NONE**

**E10 Schedule DL - Part 2 - Securities Lending Collateral Assets .....** **NONE**

**SCHEDULE E - PART 1 - CASH****Month End Depository Balances**

1 Depository		2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
						6 First Month	7 Second Month	8 Third Month	
<b>open depositories</b>									
Wells Fargo - Operating .....	175 S. Third St, Suite 150, Columbus, OH .....		0.010	65		3,132,071	1,431,423	1,500,524	XXX
0199998 Deposits in .....	0 depositories that do not exceed the allowable limit in any one depository - open depositories .....	XXX	XXX ..						XXX
0199999 Totals - Open Depositories .....		XXX	XXX ..	65		3,132,071	1,431,423	1,500,524	XXX
0299998 Deposits in .....	0 depositories that do not exceed the allowable limit in any one depository - suspended depositories .....	XXX	XXX ..						XXX
0299999 Totals - Suspended Depositories .....		XXX	XXX ..						XXX
0399999 Total Cash On Deposit .....		XXX	XXX ..	65		3,132,071	1,431,423	1,500,524	XXX
0499999 Cash in Company's Office .....		XXX	XXX ..	XXX	XXX ..				XXX
0599999 Total Cash .....		XXX	XXX ..	65		3,132,071	1,431,423	1,500,524	XXX

**SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Show Investments Owned End of Current Quarter

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
8699999 Total - Cash Equivalents .....							

**N O N E**



Designate the type of health care providers reported on this page:

**Physicians, including surgeons and osteopaths**

**SUPPLEMENT "A" TO SCHEDULE T**  
**EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN**  
**ALLOCATED BY STATES AND TERRITORIES**

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred but not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama (AL) .....								
2. Alaska (AK) .....								
3. Arizona (AZ) .....								
4. Arkansas (AR) .....								
5. California (CA) .....								
6. Colorado (CO) .....								
7. Connecticut (CT) .....								
8. Delaware (DE) .....								
9. District of Columbia (DC) .....								
10. Florida (FL) .....								
11. Georgia (GA) .....								
12. Hawaii (HI) .....								
13. Idaho (ID) .....								
14. Illinois (IL) .....					18,049	262,500	2	80,549
15. Indiana (IN) .....					87,001	1,211,311	8	
16. Iowa (IA) .....								
17. Kansas (KS) .....								
18. Kentucky (KY) .....						3,000,000	2	
19. Louisiana (LA) .....								
20. Maine (ME) .....								
21. Maryland (MD) .....					1,000,000	3,001,000	3	
22. Massachusetts (MA) .....								
23. Michigan (MI) .....					(143,400)			
24. Minnesota (MN) .....								
25. Mississippi (MS) .....								
26. Missouri (MO) .....								
27. Montana (MT) .....								
28. Nebraska (NE) .....								
29. Nevada (NV) .....								
30. New Hampshire (NH) .....								
31. New Jersey (NJ) .....								
32. New Mexico (NM) .....								
33. New York (NY) .....								
34. North Carolina (NC) .....								
35. North Dakota (ND) .....								
36. Ohio (OH) .....	757,178	722,455	275,500	4	1,097,734	7,384,311	30	14,782,484
37. Oklahoma (OK) .....								
38. Oregon (OR) .....								
39. Pennsylvania (PA) .....						750,000	1	
40. Rhode Island (RI) .....								
41. South Carolina (SC) .....								
42. South Dakota (SD) .....								
43. Tennessee (TN) .....								
44. Texas (TX) .....								
45. Utah (UT) .....								
46. Vermont (VT) .....								
47. Virginia (VA) .....								
48. Washington (WA) .....								
49. West Virginia (WV) .....			30,000	1	(1,974,039)			
50. Wisconsin (WI) .....			1,033,333	2	693,333	255,000	2	
51. Wyoming (WY) .....						150,000	2	
52. American Samoa (AS) .....								
53. Guam (GU) .....								
54. Puerto Rico (PR) .....								
55. U.S. Virgin Islands (VI) .....								
56. Northern Mariana Islands (MP) .....								
57. Canada (CN) .....								
58. Aggregate other alien (OT) .....								
59. Totals .....	757,178	722,455	1,338,833	7	778,678	16,014,122	50	14,863,033
<b>DETAILS OF WRITE-INS</b>								
5801. ....								
5802. ....								
5803. ....								
5898. Summary of remaining write-ins for Line 58 from overflow page .....								
5899. TOTALS (Lines 5801 through 5803 plus 5898) (Line 58 above) .....								



Designate the type of health care providers reported on this page:

**Hospitals**

**SUPPLEMENT "A" TO SCHEDULE T**  
**EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN**  
**ALLOCATED BY STATES AND TERRITORIES**

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred but not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama (AL) .....	.....	.....	.....	.....	.....	.....	.....	.....
2. Alaska (AK) .....	.....	.....	.....	.....	.....	.....	.....	.....
3. Arizona (AZ) .....	.....	.....	.....	.....	.....	.....	.....	.....
4. Arkansas (AR) .....	.....	.....	.....	.....	.....	.....	.....	.....
5. California (CA) .....	.....	.....	.....	.....	.....	.....	.....	.....
6. Colorado (CO) .....	.....	.....	.....	.....	.....	.....	.....	.....
7. Connecticut (CT) .....	.....	.....	.....	.....	.....	.....	.....	.....
8. Delaware (DE) .....	.....	.....	.....	.....	.....	.....	.....	.....
9. District of Columbia (DC) .....	.....	.....	.....	.....	.....	.....	.....	.....
10. Florida (FL) .....	.....	.....	.....	.....	.....	.....	.....	.....
11. Georgia (GA) .....	.....	.....	.....	.....	.....	.....	.....	.....
12. Hawaii (HI) .....	.....	.....	.....	.....	.....	.....	.....	.....
13. Idaho (ID) .....	.....	.....	.....	.....	.....	.....	.....	.....
14. Illinois (IL) .....	.....	.....	.....	.....	.....	.....	.....	.....
15. Indiana (IN) .....	.....	.....	.....	.....	.....	.....	.....	.....
16. Iowa (IA) .....	.....	.....	.....	.....	.....	.....	.....	.....
17. Kansas (KS) .....	.....	.....	5,000	1	.....	5,000	.....	.....
18. Kentucky (KY) .....	.....	.....	75,000	1	.....	(925,000)	.....	.....
19. Louisiana (LA) .....	.....	.....	.....	.....	.....	.....	.....	.....
20. Maine (ME) .....	.....	.....	.....	.....	.....	.....	.....	.....
21. Maryland (MD) .....	.....	.....	.....	.....	.....	7,408,999	7,911,003	14
22. Massachusetts (MA) .....	.....	.....	.....	.....	.....	.....	.....	.....
23. Michigan (MI) .....	.....	.....	.....	.....	.....	.....	.....	.....
24. Minnesota (MN) .....	.....	.....	.....	.....	.....	.....	.....	.....
25. Mississippi (MS) .....	.....	.....	.....	.....	.....	.....	.....	.....
26. Missouri (MO) .....	.....	.....	.....	.....	.....	.....	.....	.....
27. Montana (MT) .....	.....	.....	.....	.....	.....	.....	.....	.....
28. Nebraska (NE) .....	.....	.....	.....	.....	.....	.....	.....	.....
29. Nevada (NV) .....	.....	.....	.....	.....	.....	.....	.....	.....
30. New Hampshire (NH) .....	.....	.....	.....	.....	.....	.....	.....	.....
31. New Jersey (NJ) .....	.....	.....	.....	.....	.....	.....	.....	.....
32. New Mexico (NM) .....	.....	.....	.....	.....	.....	.....	.....	.....
33. New York (NY) .....	.....	.....	.....	.....	.....	.....	.....	.....
34. North Carolina (NC) .....	.....	.....	.....	.....	.....	.....	.....	.....
35. North Dakota (ND) .....	.....	.....	.....	.....	.....	.....	.....	.....
36. Ohio (OH) .....	4,576,304	3,479,364	180,000	4	.....	489,009	13,972,421	54
37. Oklahoma (OK) .....	.....	.....	.....	.....	.....	.....	.....	.....
38. Oregon (OR) .....	.....	.....	.....	.....	.....	.....	.....	.....
39. Pennsylvania (PA) .....	.....	.....	.....	.....	.....	.....	.....	.....
40. Rhode Island (RI) .....	.....	.....	.....	.....	.....	.....	.....	.....
41. South Carolina (SC) .....	.....	.....	.....	.....	.....	.....	.....	.....
42. South Dakota (SD) .....	.....	.....	.....	.....	.....	.....	.....	.....
43. Tennessee (TN) .....	.....	.....	.....	.....	.....	.....	.....	.....
44. Texas (TX) .....	.....	.....	.....	.....	.....	.....	.....	.....
45. Utah (UT) .....	.....	.....	.....	.....	.....	.....	.....	.....
46. Vermont (VT) .....	.....	.....	.....	.....	.....	.....	.....	.....
47. Virginia (VA) .....	.....	.....	.....	.....	.....	.....	.....	.....
48. Washington (WA) .....	.....	.....	.....	.....	.....	.....	.....	.....
49. West Virginia (WV) .....	.....	.....	.....	.....	.....	.....	.....	.....
50. Wisconsin (WI) .....	.....	.....	.....	.....	.....	145,836	1,030,000	3
51. Wyoming (WY) .....	.....	.....	.....	.....	.....	.....	.....	.....
52. American Samoa (AS) .....	.....	.....	.....	.....	.....	.....	.....	.....
53. Guam (GU) .....	.....	.....	.....	.....	.....	.....	.....	.....
54. Puerto Rico (PR) .....	.....	.....	.....	.....	.....	.....	.....	.....
55. U.S. Virgin Islands (VI) .....	.....	.....	.....	.....	.....	.....	.....	.....
56. Northern Mariana Islands (MP) .....	.....	.....	.....	.....	.....	.....	.....	.....
57. Canada (CN) .....	.....	.....	.....	.....	.....	.....	.....	.....
58. Aggregate other alien (OT) .....	.....	.....	.....	.....	.....	.....	.....	.....
59. Totals .....	4,576,304	3,479,364	260,000	6	.....	5,905,242	27,132,552	83
<b>DETAILS OF WRITE-INS</b>								
5801. ....	.....	.....	.....	.....	.....	.....	.....	.....
5802. ....	.....	.....	.....	.....	.....	.....	.....	.....
5803. ....	.....	.....	.....	.....	.....	.....	.....	.....
5898. Summary of remaining write-ins for Line 58 from overflow page .....	.....	.....	.....	.....	.....	.....	.....	.....
5899. TOTALS (Lines 5801 through 5803 plus 5898) (Line 58 above) .....	.....	.....	.....	.....	.....	.....	.....	.....



Designate the type of health care providers reported on this page:

**Other health care professionals, including dentists**

**SUPPLEMENT "A" TO SCHEDULE T**  
**EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN**  
**ALLOCATED BY STATES AND TERRITORIES**

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred but not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama (AL) .....								
2. Alaska (AK) .....								
3. Arizona (AZ) .....								
4. Arkansas (AR) .....								
5. California (CA) .....								
6. Colorado (CO) .....								
7. Connecticut (CT) .....								
8. Delaware (DE) .....								
9. District of Columbia (DC) .....								
10. Florida (FL) .....								
11. Georgia (GA) .....								
12. Hawaii (HI) .....								
13. Idaho (ID) .....								
14. Illinois (IL) .....								
15. Indiana (IN) .....								
16. Iowa (IA) .....								
17. Kansas (KS) .....								
18. Kentucky (KY) .....								
19. Louisiana (LA) .....								
20. Maine (ME) .....								
21. Maryland (MD) .....								
22. Massachusetts (MA) .....								
23. Michigan (MI) .....								
24. Minnesota (MN) .....								
25. Mississippi (MS) .....								
26. Missouri (MO) .....								
27. Montana (MT) .....								
28. Nebraska (NE) .....								
29. Nevada (NV) .....								
30. New Hampshire (NH) .....								
31. New Jersey (NJ) .....								
32. New Mexico (NM) .....								
33. New York (NY) .....								
34. North Carolina (NC) .....								
35. North Dakota (ND) .....								
36. Ohio (OH) .....	865	2,333						
37. Oklahoma (OK) .....								
38. Oregon (OR) .....								
39. Pennsylvania (PA) .....								
40. Rhode Island (RI) .....								
41. South Carolina (SC) .....								
42. South Dakota (SD) .....								
43. Tennessee (TN) .....								
44. Texas (TX) .....								
45. Utah (UT) .....								
46. Vermont (VT) .....								
47. Virginia (VA) .....								
48. Washington (WA) .....								
49. West Virginia (WV) .....								
50. Wisconsin (WI) .....								
51. Wyoming (WY) .....								
52. American Samoa (AS) .....								
53. Guam (GU) .....								
54. Puerto Rico (PR) .....								
55. U.S. Virgin Islands (VI) .....								
56. Northern Mariana Islands (MP) .....								
57. Canada (CN) .....								
58. Aggregate other alien (OT) .....								
59. Totals .....	865	2,333						

**DETAILS OF WRITE-INS**

5801. ....	.....	.....	.....	.....	.....	.....	.....	.....
5802. ....	.....	.....	.....	.....	.....	.....	.....	.....
5803. ....	.....	.....	.....	.....	.....	.....	.....	.....
5898. Summary of remaining write-ins for Line 58 from overflow page .....	.....	.....	.....	.....	.....	.....	.....	.....
5899. TOTALS (Lines 5801 through 5803 plus 5898) (Line 58 above) .....	.....	.....	.....	.....	.....	.....	.....	.....



Designate the type of health care providers reported on this page:  
**Other health care facilities**

**SUPPLEMENT "A" TO SCHEDULE T**  
**EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN**  
**ALLOCATED BY STATES AND TERRITORIES**

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred but not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama (AL) .....								
2. Alaska (AK) .....								
3. Arizona (AZ) .....								
4. Arkansas (AR) .....								
5. California (CA) .....								
6. Colorado (CO) .....								
7. Connecticut (CT) .....								
8. Delaware (DE) .....								
9. District of Columbia (DC) .....								
10. Florida (FL) .....								
11. Georgia (GA) .....								
12. Hawaii (HI) .....								
13. Idaho (ID) .....								
14. Illinois (IL) .....								
15. Indiana (IN) .....								
16. Iowa (IA) .....								
17. Kansas (KS) .....								
18. Kentucky (KY) .....								
19. Louisiana (LA) .....								
20. Maine (ME) .....								
21. Maryland (MD) .....								
22. Massachusetts (MA) .....								
23. Michigan (MI) .....								
24. Minnesota (MN) .....								
25. Mississippi (MS) .....								
26. Missouri (MO) .....								
27. Montana (MT) .....								
28. Nebraska (NE) .....								
29. Nevada (NV) .....								
30. New Hampshire (NH) .....								
31. New Jersey (NJ) .....								
32. New Mexico (NM) .....								
33. New York (NY) .....								
34. North Carolina (NC) .....								
35. North Dakota (ND) .....								
36. Ohio (OH) .....	659,099	635,733			228,495	106,000	1	122,495
37. Oklahoma (OK) .....								
38. Oregon (OR) .....								
39. Pennsylvania (PA) .....								
40. Rhode Island (RI) .....								
41. South Carolina (SC) .....								
42. South Dakota (SD) .....								
43. Tennessee (TN) .....								
44. Texas (TX) .....								
45. Utah (UT) .....								
46. Vermont (VT) .....								
47. Virginia (VA) .....								
48. Washington (WA) .....								
49. West Virginia (WV) .....								
50. Wisconsin (WI) .....								
51. Wyoming (WY) .....					100,000	100,000	1	
52. American Samoa (AS) .....								
53. Guam (GU) .....								
54. Puerto Rico (PR) .....								
55. U.S. Virgin Islands (VI) .....								
56. Northern Mariana Islands (MP) .....								
57. Canada (CN) .....								
58. Aggregate other alien (OT) .....								
59. Totals .....	659,099	635,733			328,495	206,000	2	122,495
<b>DETAILS OF WRITE-INS</b>								
5801. ....								
5802. ....								
5803. ....								
5898. Summary of remaining write-ins for Line 58 from overflow page .....								
5899. TOTALS (Lines 5801 through 5803 plus 5898) (Line 58 above) .....								



## **MEDICARE PART D COVERAGE SUPPLEMENT**

### Net of Reinsurance

NAIC Group Code: 0831

NAIC Company Code: 35602

	Individual Coverage		Group Coverage		5 Total Cash
	1 Insured	2 Uninsured	3 Insured	4 Uninsured	
1. Premiums Collected .....		XXX .....		XXX .....	
2. Earned Premiums .....		XXX .....		XXX .....	XXX .....
3. Claims Paid .....		XXX .....		XXX .....	
4. Claims Incurred .....		XXX .....		XXX .....	XXX .....
5. Reinsurance Coverage and Low Income Cost Sharing - Claims Paid Net of Reimbursements Applied (a) .....	XXX .....		XXX .....		
6. Aggregate Policy Reserves - change .....		XXX .....		XXX .....	XXX .....
7. Expenses Paid .....		XXX .....		XXX .....	
8. Expenses Incurred .....		XXX .....		XXX .....	XXX .....
9. Underwriting Gain or Loss .....		XXX .....		XXX .....	XXX .....
10. Cash Flow Results .....	XXX .....	XXX .....	XXX .....	XXX .....	

(a) Uninsured Receivable/Payable with CMS at End of Quarter: \$.....0 due from CMS or \$.....0 due to CMS

**DIRECTOR AND OFFICER SUPPLEMENT**

Year to Date For the Period Ended September 30

NAIC Group Code: 0831 NAIC Company Code: 35602

**Company Name: OHIC Insurance Company**

If the reporting entity writes any director and officer (D&amp;O) business, please provide the following:

Description	1 Direct Written Premium	2 Direct Earned Premium	3 Direct Losses Incurred
1. Monoline Policies .....			

## 2. Commercial Multiple Peril (CMP) Packaged Policies

2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy?  
 2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated?  
 2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&O liability coverage in CMP packaged policies

Yes[ ] No[X]  
Yes[ ] No[X]

2.31 Amount quantified:

\$..... 0

2.32 Amount estimated using reasonable assumptions:

\$..... 0

2.4 If the answer to question 2.1 is yes, provide direct losses incurred (losses paid plus change in case reserves) for the D&O liability coverage provided in CMP packaged policies.

\$..... 0

## **INDEX TO PROPERTY & CASUALTY QUARTERLY STATEMENT**

Accident and Health Insurance; Q3; Q12  
Accounting Changes and Corrections of Errors; Q6, Note 2  
Accounting Practices and Policies; Q6, Note 1  
Admitted Assets; Q2; QSI01  
Affiliated Transactions; Q2; Q3; Q7; Q7.1  
Asbestos Losses and Loss Adjustment Expenses; Q6, Note 33  
Bonds; Q2; Q5; Q7.1; Q7.2; QSI01; QSI02; QE04; QE05; QSupp2  
Business Combinations and Goodwill; Q6, Note 3  
Capital Gains (Losses); Q3; Q4; Q5  
Capital Stock; Q3; Q4; Q6, Note 13  
Capital Notes; Q3; Q5; Q6, Note 11  
Caps; QE06; QSI04  
Cash; Q2; Q5; QE11; QSupp2  
Cash Equivalents; Q2; Q5; QE12  
Collars; QE06; QSI04  
Commissions; Q3; Q5  
Common Stock; Q2; Q7.1; Q7.2; QSI01; QE04; QE05; QSupp2  
Counterparty Exposure; Q6, Note 8; QE06; QE08  
Contingencies; Q6, Note 14  
Debt; Q6, Note 11  
Deferred Compensation; Q6, Note 12  
Derivative Instruments; Q6, Note 8; QSI04; QSI05; QSI06; QSI07; QE06; QE07; QE08  
Director and Officer; QSupp7  
Discontinued Operations; Q6, Note 4  
Discounting of Liabilities; Q6, Note 32; Q8  
Electronic Data Processing Equipment; Q2  
Environmental Losses and Loss Adjustment Expenses; Q6, Note 33  
Exchange or Counterparty; QE06; QE08  
Expenses; Q3; Q4; Q5; Q8; QE01; QSupp3  
Extinguishment of Liabilities; Q6, Note 17  
Extraordinary Items; Q6, Note 21  
Fair Value; Q7, Note 20  
Federal ID Number; Q9  
Federal Reserve Board; Q7  
Finance and Service Charge; Q4  
Floors; QE06; QSI04  
Foreign Exchange; Q2; Q3; Q4; QSI01; QSI02; QSI03; QE04; QE05  
Forwards; QE06; QSI04  
Futures Contracts; QE07; QSI04  
Guaranty Fund; Q2  
Health Care Receivables; Q6, Note 28  
Hedging Transactions; Q7.1; QE06; QE07  
High Deductible Policies; Q6, Note 31  
Holding Company; Q7; Q11  
Income Generation Transactions; QE06; QE07  
Income Taxes; Q2; Q3; Q4; Q5; Q6, Note 9  
Intercompany Pooling; Q6, Note 26  
Investment Income; Q2; Q4; Q5; Q6, Note 7; QSupp2  
Investments; Q2; Q4; Q6, Note 5; Q7.1; Q7.2; QSI01; QSI03; QE03; QE04; QE05; QE08; QE12; QSupp2  
Joint Venture; Q6, Note 6  
Leases; Q6, Note 15  
Licensing; Q3; Q7; Q10  
Limited Liability Company (LLC); Q6, Note 6  
Limited Partnership; Q6, Note 6  
Lines of Business; Q8; Q12  
Long-Term Invested Assets; QSI01; QE03  
Loss Development; Q6  
Losses; Q3; Q4; Q5; Q6, Note 25; Q8; Q10; Q12; Q13; QSupp1; QSupp3  
Loss Adjustment Expenses; Q3; Q6, Note 26; Q8; Q13; QSupp3  
Managing General Agents; Q6, Note 19; Q7  
Medical Malpractice Insurance; Q12; Q14; QSupp5  
Medicare Part D Coverage; QSupp6  
Mortgage Loans; Q2; Q5; Q7.1; QSI01; QE02; QSupp2  
Multiple Peril Crop Insurance; Q6, Note 35  
Nonadmitted Assets; Q2; Q4; QSI01; QSI03  
Non-Tabular Discount; Q6, Note 32  
Off-Balance Sheet Risk; Q6, Note 16

## **INDEX TO PROPERTY & CASUALTY QUARTERLY STATEMENT**

Options; Q7.1; QE06; QSI04  
Organizational Chart; Q7; Q11  
Other Derivative Transactions; QE06; QE07  
Parent, Subsidiaries and Affiliates; Q2; Q3; Q6, Note 10; Q7.1  
Participating Policies; Q6, Note 29  
Pharmaceutical Rebates; Q6, Note 28  
Policyholder Dividends; Q3; Q4; Q5  
Postemployment Benefits; Q6, Note 12  
Postretirement Benefits; Q6, Note 12  
Preferred Stock; Q2; Q7.1; Q7.2; QSI01; QSI02; QE04; QSupp2  
Premium Deficiency Reserves; Q6, Note 30  
Premium Notes; Q2; Q5  
Premiums; Q3; Q5; QSupp3  
    Accrued Retrospective; Q2  
    Advance; Q3  
    Direct; Q10; Q12  
    Earned; Q4; Q10; Q12; QSupp5  
    Earned but Unbilled; Q2  
    Unearned; Q3  
    Written; Q4; Q10; Q12; QSupp5  
Quasi Reorganizations; Q6, Note 13  
Real Estate; Q2; Q5; Q7.1; QSI01; QE01; QSupp2  
Redetermination, Contract Subject to; Q6, Note 24  
Reinsurance; Q6, Note 23  
    Assumed; Q12  
    Ceded; Q3; Q9; QSupp3  
    Commutation; Q6, Note 23  
    Funds Held; Q2; Q3  
    Losses; Q3; Q4; Q8; QSupp3  
    Payable; Q3; QSupp3  
    Premiums; Q3; QSupp3  
    Receivable; Q2; QSupp3  
    Unsecured; Q6, Note 23  
    Uncollectible; Q6, Note 23  
Reserves  
    Incurred but Not Reported (IBNR); Q8; Q13  
    Unpaid Loss Adjustment Expense (LAE); Q13  
Retirement Plans; Q6, Note 12  
Retrospectively Rated Contracts; Q6, Note 24  
Salvage and Subrogation; Q10  
Securities Lending; Q2; Q3; QE9; QE10  
Servicing of Financial Assets; Q6, Note 17  
Short-Term Investments; Q2; Q5; Q7.1; QSI03; QSupp2  
Special Deposits; QSupp2  
Stockholder Dividends; Q3; Q4; Q5  
Structured Settlements; Q6, Note 27  
Subscriber Savings Accounts; Q6, Note 34  
Subsequent Events; Q6, Note 22  
Surplus; Q3; Q4; Q5; Q6, Note 13; Q13; Q14; QSupp1; QSupp2; QSupp3  
Surplus Notes; Q3; Q4; Q5  
Swaps; QE07; QSI04  
Synthetic Assets; QSI04; QSI05  
Tabular Discount; Q6, Note 32  
Third Party Administrator; Q6, Note 19; Q7  
Treasury Stock; Q3; Q4; Q5  
Underwriting Expenses; Q4  
Uninsured Accident and Health; Q3; Q6, Note 18  
Valuation Allowance; QSI01  
Wash Sales; Q6, Note 17