



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2013

OF THE CONDITION AND AFFAIRS OF THE

Utica National Insurance Company of Ohio

NAIC Group Code 0201 (Current) 0201 (Prior) NAIC Company Code 13998 Employer's ID Number 27-2764004

Organized under the Laws of Ohio, State of Domicile or Port of Entry Ohio

Country of Domicile United States of America

Incorporated/Organized 04/06/2010 Commenced Business 12/22/2010

Statutory Home Office 2600 Corporate Exchange Drive (Street and Number) Columbus, OH, US 43231 (City or Town, State, Country and Zip Code)

Main Administrative Office 180 Genesee Street (Street and Number) New Hartford, NY, US 13413 (City or Town, State, Country and Zip Code) 315-734-2000 (Area Code) (Telephone Number)

Mail Address Post Office Box 530 (Street and Number or P.O. Box) Utica, NY, US 13503-0530 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 180 Genesee Street (Street and Number) New Hartford, NY, US 13413 (City or Town, State, Country and Zip Code) 315-734-2000 (Area Code) (Telephone Number)

Internet Website Address www.uticanational.com

Statutory Statement Contact Sandra Jean Giehl (Name) 315-734-2192 (Area Code) (Telephone Number) sandy.giehl@uticanational.com (E-mail Address) 315-734-2994 (FAX Number) (FAX Number)

OFFICERS

Chairman & CEO James Douglas Robinson EVP # & Secretary Kristen Holly Martin

President & COO Brian Patrick Lytwynec SVP, CFO & Treasurer Raymond Edward Cox

OTHER

Richard Patrick Creedon Executive Vice President

DIRECTORS OR TRUSTEES

James Porter Carhart Raymond Edward Cox Richard Patrick Creedon

Steven Paul Guzski Brian Patrick Lytwynec Robert Francis Manfredo

Kristen Holly Martin James Douglas Robinson

State of New York SS:

County of Oneida

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.

Brian Patrick Lytwynec President & COO Raymond Edward Cox SVP, CFO & Treasurer Kristen Holly Martin EVP & Secretary

Subscribed and sworn to before me this day of

a. Is this an original filing? Yes [ X ] No [ ]

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

ASSETS

|   | Current Statement Date |                         |   | 4<br>December 31<br>Prior Year Net<br>Admitted Assets |
|---|------------------------|-------------------------|---|---|
|   | 1<br>Assets            | 2<br>Nonadmitted Assets | 3<br>Net Admitted Assets<br>(Cols. 1 - 2) |   |
| 1. Bonds .....  | 9,704,843              |                         | 9,704,843                                 | 8,201,902   |
| 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 \$ .....<br>encumbrances) .....  |                        |                         |   |   |
| 4.2 Properties held for the production of income (less<br>\$ ..... encumbrances) .....  |                        |                         |   |   |
| 4.3 Properties held for sale (less \$ .....<br>encumbrances) .....  |                        |                         |   |   |
| 5. Cash (\$ .....212,665 ), cash equivalents<br>(\$ ..... ) and short-term<br>investments (\$ ..... ) .....   | 212,665                |                         | 212,665                                   | 2,050,279   |
| 6. Contract loans (including \$ ..... 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) .....   | 9,917,508              |                         | 9,917,508                                 | 10,252,182  |
| 13. Title plants less \$ ..... charged off (for Title insurers<br>only) .....   |                        |                         |   |   |
| 14. Investment income due and accrued .....   | 58,169                 |                         | 58,169                                    | 47,008  |
| 15. Premiums and considerations:  |                        |                         |   |   |
| 15.1 Uncollected premiums and agents' balances in the course of collection .....  |                        |                         |   |   |
| 15.2 Deferred premiums, agents' balances and installments booked but<br>deferred and not yet due (including \$ .....<br>earned but unbilled premiums) ..... |                        |                         |   |   |
| 15.3 Accrued retrospective premiums .....   |                        |                         |   |   |
| 16. Reinsurance:  |                        |                         |   |   |
| 16.1 Amounts recoverable from reinsurers .....  |                        |                         |   |   |
| 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 .....  | 276,957                |                         | 276,957                                   |   |
| 18.2 Net deferred tax asset .....   |                        |                         |   | 248,900   |
| 19. Guaranty funds receivable or on deposit .....   |                        |                         |   |   |
| 20. Electronic data processing equipment and software .....   |                        |                         |   |   |
| 21. Furniture and equipment, including health care delivery assets<br>(\$ ..... ) .....   |                        |                         |   |   |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates .....  |                        |                         |   |   |
| 23. Receivables from parent, subsidiaries and affiliates .....  |                        |                         |   |   |
| 24. Health care (\$ ..... ) and other amounts receivable .....  |                        |                         |   |   |
| 25. Aggregate write-ins for other than invested assets .....  |                        |                         |   |   |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and<br>Protected Cell Accounts (Lines 12 to 25) .....                                     | 10,252,634             |                         | 10,252,634                                | 10,548,089  |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell<br>Accounts .....  |                        |                         |   |   |
| 28. Total (Lines 26 and 27)   | 10,252,634             |                         | 10,252,634                                | 10,548,089  |
| DETAILS OF WRITE-INS  |                        |                         |   |   |
| 1101. ....  |                        |                         |   |   |
| 1102. ....  |                        |                         |   |   |
| 1103. ....  |                        |                         |   |   |
| 1198. Summary of remaining write-ins for Line 11 from overflow page .....   |                        |                         |   |   |
| 1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)   |                        |                         |   |   |
| 2501. ....  |                        |                         |   |   |
| 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)   |                        |                         |   |   |

LIABILITIES, SURPLUS AND OTHER FUNDS

|  | 1<br>Current<br>Statement Date | 2<br>December 31,<br>Prior Year |
|--|--------------------------------|---------------------------------|
| 1. Losses (current accident year \$ ..... ) .....  |                                |                                 |
| 2. Reinsurance payable on paid losses and loss adjustment expenses .....   |                                |                                 |
| 3. Loss adjustment expenses .....  |                                |                                 |
| 4. Commissions payable, contingent commissions and other similar charges .....   | 180,996                        | 15,696                          |
| 5. Other expenses (excluding taxes, licenses and fees) .....   | 1,815                          | 1,720                           |
| 6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....   | 160,500                        | 33,800                          |
| 7.1 Current federal and foreign income taxes (including \$ ..... 2,721 on realized capital gains (losses)) .....   | 2,721                          | 49,398                          |
| 7.2 Net deferred tax liability .....   | 782                            |                                 |
| 8. Borrowed money \$ ..... and interest thereon \$ .....   |                                |                                 |
| 9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ .....4,911,601 and including warranty reserves of \$ ..... and accrued accident and health experience rating refunds including \$ ..... for medical loss ratio rebate per the Public Health Service Act) ..... |                                |                                 |
| 10. Advance premium .....  |                                |                                 |
| 11. Dividends declared and unpaid:   |                                |                                 |
| 11.1 Stockholders .....  |                                |                                 |
| 11.2 Policyholders .....   |                                |                                 |
| 12. Ceded reinsurance premiums payable (net of ceding commissions) .....   |                                |                                 |
| 13. Funds held by company under reinsurance treaties .....   |                                |                                 |
| 14. Amounts withheld or retained by company for account of others .....  | 2,722                          |                                 |
| 15. Remittances and items not allocated .....  |                                |                                 |
| 16. Provision for reinsurance (including \$ ..... certified) .....   |                                |                                 |
| 17. Net adjustments in assets and liabilities due to foreign exchange rates .....  |                                |                                 |
| 18. Drafts outstanding .....   |                                |                                 |
| 19. Payable to parent, subsidiaries and affiliates .....   | 5,119                          | 528,832                         |
| 20. Derivatives .....  |                                |                                 |
| 21. Payable for securities .....   |                                |                                 |
| 22. Payable for securities lending .....   |                                |                                 |
| 23. Liability for amounts held under uninsured plans .....   |                                |                                 |
| 24. Capital notes \$ ..... and interest thereon \$ .....   |                                |                                 |
| 25. Aggregate write-ins for liabilities .....  |                                |                                 |
| 26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) .....  | 354,655                        | 629,446                         |
| 27. Protected cell liabilities .....   |                                |                                 |
| 28. Total liabilities (Lines 26 and 27) .....  | 354,655                        | 629,446                         |
| 29. Aggregate write-ins for special surplus funds .....  |                                |                                 |
| 30. Common capital stock .....   | 4,000,000                      | 4,000,000                       |
| 31. Preferred capital stock .....  |                                |                                 |
| 32. Aggregate write-ins for other than special surplus funds .....   |                                |                                 |
| 33. Surplus notes .....  |                                |                                 |
| 34. Gross paid in and contributed surplus .....  | 6,229,204                      | 6,229,204                       |
| 35. Unassigned funds (surplus) .....   | (331,225)                      | (310,561)                       |
| 36. Less treasury stock, at cost:  |                                |                                 |
| 36.1 ..... shares common (value included in Line 30 \$ ..... ) .....   |                                |                                 |
| 36.2 ..... shares preferred (value included in Line 31 \$ ..... ) .....  |                                |                                 |
| 37. Surplus as regards policyholders (Lines 29 to 35, less 36) .....   | 9,897,979                      | 9,918,643                       |
| 38. Totals (Page 2, Line 28, Col. 3)   | 10,252,634                     | 10,548,089                      |
| DETAILS OF WRITE-INS   |                                |                                 |
| 2501. ....   |                                |                                 |
| 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)  |                                |                                 |
| 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                       | 2                     | 3                               |
|---|-------------------------|-----------------------|---------------------------------|
|   | Current<br>Year to Date | Prior Year<br>to Date | Prior Year Ended<br>December 31 |
| UNDERWRITING INCOME   |                         |                       |                                 |
| 1. Premiums earned:   |                         |                       |                                 |
| 1.1 Direct (written \$ 6,341,207 )  | 2,625,367               | 191,494               | 382,031                         |
| 1.2 Assumed (written \$ )   |                         |                       |                                 |
| 1.3 Ceded (written \$ 6,341,207 )   | 2,625,367               | 191,494               | 382,031                         |
| 1.4 Net (written \$ )   |                         |                       |                                 |
| DEDUCTIONS:   |                         |                       |                                 |
| 2. Losses incurred (current accident year \$ )::  |                         |                       |                                 |
| 2.1 Direct  | 2,255,572               | 12,200                | 282,324                         |
| 2.2 Assumed   |                         |                       |                                 |
| 2.3 Ceded   | 2,255,572               | 12,200                | 282,324                         |
| 2.4 Net   |                         |                       |                                 |
| 3. Loss adjustment expenses incurred  |                         | 37                    | 37                              |
| 4. Other underwriting expenses incurred   | 211,537                 | 336,389               | 898,891                         |
| 5. Aggregate write-ins for underwriting deductions  |                         |                       |                                 |
| 6. Total underwriting deductions (Lines 2 through 5)  | 211,537                 | 336,426               | 898,928                         |
| 7. Net income of protected cells  |                         |                       |                                 |
| 8. Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)   | (211,537)               | (336,426)             | (898,928)                       |
| INVESTMENT INCOME   |                         |                       |                                 |
| 9. Net investment income earned   | 159,441                 | 151,319               | 201,587                         |
| 10. Net realized capital gains (losses) less capital gains tax of \$ 2,721  | 5,008                   | 1,779                 | 22,504                          |
| 11. Net investment gain (loss) (Lines 9 + 10)   | 164,448                 | 153,099               | 224,091                         |
| OTHER INCOME  |                         |                       |                                 |
| 12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$ )  |                         |                       |                                 |
| 13. Finance and service charges not included in premiums  |                         |                       |                                 |
| 14. Aggregate write-ins for miscellaneous income  |                         |                       |                                 |
| 15. Total other income (Lines 12 through 14)  |                         |                       |                                 |
| 16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)     | (47,088)                | (183,328)             | (674,838)                       |
| 17. Dividends to policyholders  |                         |                       |                                 |
| 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) | (47,088)                | (183,328)             | (674,838)                       |
| 19. Federal and foreign income taxes incurred   | (276,106)               |                       | (6,325)                         |
| 20. Net income (Line 18 minus Line 19)(to Line 22)  | 229,018                 | (183,328)             | (668,513)                       |
| CAPITAL AND SURPLUS ACCOUNT   |                         |                       |                                 |
| 21. Surplus as regards policyholders, December 31 prior year  | 9,918,643               | 10,338,019            | 10,338,019                      |
| 22. Net income (from Line 20)   | 229,018                 | (183,328)             | (668,513)                       |
| 23. Net transfers (to) from Protected Cell accounts   |                         |                       |                                 |
| 24. Change in net unrealized capital gains (losses) less capital gains tax of \$ (424)  | 424                     | (207)                 | (187)                           |
| 25. Change in net unrealized foreign exchange capital gain (loss)   |                         |                       |                                 |
| 26. Change in net deferred income tax   | (250,106)               |                       | 249,324                         |
| 27. Change in nonadmitted assets  |                         |                       |                                 |
| 28. Change in provision for reinsurance   |                         |                       |                                 |
| 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  |                         |                       |                                 |
| 33.2 Transferred to capital (Stock Dividend)  |                         |                       |                                 |
| 33.3 Transferred from capital   |                         |                       |                                 |
| 34. Net remittances from or (to) Home Office  |                         |                       |                                 |
| 35. Dividends to stockholders   |                         |                       |                                 |
| 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)  | (20,664)                | (183,535)             | (419,376)                       |
| 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)   | 9,897,979               | 10,154,484            | 9,918,643                       |
| DETAILS OF WRITE-INS  |                         |                       |                                 |
| 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.   |                         |                       |                                 |
| 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)   |                         |                       |                                 |
| 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<br>Current Year<br>To Date | 2<br>Prior Year<br>To Date | 3<br>Prior Year Ended<br>December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| <b>Cash from Operations</b>   |                              |                            |                                      |
| 1. Premiums collected net of reinsurance .....  |                              |                            |                                      |
| 2. Net investment income .....  | 200,756                      | 194,465                    | 262,579                              |
| 3. Miscellaneous income .....   |                              |                            |                                      |
| 4. Total (Lines 1 to 3) .....   | 200,756                      | 194,465                    | 262,579                              |
| 5. Benefit and loss related payments .....  |                              |                            |                                      |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....                                |                              |                            |                                      |
| 7. Commissions, expenses paid and aggregate write-ins for deductions .....  | (80,463)                     | 322,607                    | 849,432                              |
| 8. Dividends paid to policyholders .....  |                              |                            |                                      |
| 9. Federal and foreign income taxes paid (recovered) net of \$ ..... 2,721 tax on capital<br>gains (losses) .....           | (199,075)                    | 472                        | 472                                  |
| 10. Total (Lines 5 through 9) .....   | (279,538)                    | 323,079                    | 849,904                              |
| 11. Net cash from operations (Line 4 minus Line 10) .....   | 480,294                      | (128,614)                  | (587,325)                            |
| <b>Cash from Investments</b>  |                              |                            |                                      |
| 12. Proceeds from investments sold, matured or repaid:  |                              |                            |                                      |
| 12.1 Bonds .....  | 1,194,009                    | 526,611                    | 1,622,756                            |
| 12.2 Stocks .....   |                              |                            |                                      |
| 12.3 Mortgage loans .....   |                              |                            |                                      |
| 12.4 Real estate .....  |                              |                            |                                      |
| 12.5 Other invested assets .....  |                              |                            |                                      |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....                                       | (16)                         |                            |                                      |
| 12.7 Miscellaneous proceeds .....   |                              | 150,950                    |                                      |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) .....   | 1,193,993                    | 677,561                    | 1,622,756                            |
| 13. Cost of investments acquired (long-term only):  |                              |                            |                                      |
| 13.1 Bonds .....  | 2,741,587                    | 1,010,055                  | 2,573,643                            |
| 13.2 Stocks .....   |                              |                            |                                      |
| 13.3 Mortgage loans .....   |                              |                            |                                      |
| 13.4 Real estate .....  |                              |                            |                                      |
| 13.5 Other invested assets .....  |                              |                            |                                      |
| 13.6 Miscellaneous applications .....   |                              |                            |                                      |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) .....  | 2,741,587                    | 1,010,055                  | 2,573,643                            |
| 14. Net increase (or decrease) in contract loans and premium notes .....  |                              |                            |                                      |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....   | (1,547,594)                  | (332,494)                  | (950,887)                            |
| <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 .....   |                              |                            |                                      |
| 16.3 Borrowed funds .....   |                              |                            |                                      |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities .....   |                              |                            |                                      |
| 16.5 Dividends to stockholders .....  |                              |                            |                                      |
| 16.6 Other cash provided (applied) .....  | (770,315)                    | 300,383                    | 526,367                              |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5<br>plus Line 16.6) ..... | (770,315)                    | 300,383                    | 526,367                              |
| <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) .....                   | (1,837,614)                  | (160,725)                  | (1,011,845)                          |
| 19. Cash, cash equivalents and short-term investments:  |                              |                            |                                      |
| 19.1 Beginning of year .....  | 2,050,279                    | 3,062,125                  | 3,062,125                            |
| 19.2 End of period (Line 18 plus Line 19.1) .....   | 212,665                      | 2,901,400                  | 2,050,279                            |

Note: Supplemental disclosures of cash flow information for non-cash transactions:

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|

STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

NOTES TO FINANCIAL STATEMENTS

Note 1 – Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of Utica National Insurance Company of Ohio are presented on the basis of accounting practices prescribed or permitted by the Ohio Insurance Department.

The Ohio Insurance Department recognizes only statutory accounting practices prescribed or permitted by the state of Ohio for determining and reporting the financial condition and results of operations of an insurance company and for determining its solvency under the Ohio Insurance Laws. The National Association of Insurance Commissioners’ (NAIC) *Accounting Practices and Procedures* manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Ohio. The state of Ohio has adopted some practices that differ from NAIC SAP; however, none of those changes would impact the financial results of Utica National Insurance Company of Ohio.

A reconciliation of the Company’s net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the state of Ohio is not required since there are no differences.

| <u>Net Income</u>   | State of<br><u>Domicile</u> | <u>2013</u>      | <u>2012</u>      |
|---|-----------------------------|------------------|------------------|
| (1) Net Income, state basis (Page 4, Line 20, Columns 1 & 3)        | Ohio                        | 229,018          | (668,513)        |
| (2) State Prescribed Practices that increase/(decrease) NAIC SAP    | Ohio                        | 0                | 0                |
| (3) State Permitted Practices that increase/(decrease) NAIC SAP     | Ohio                        | 0                | 0                |
| (4) Net Income, NAIC SAP (1 - 2 - 3 = 4)                            | Ohio                        | <u>229,018</u>   | <u>(668,513)</u> |
| <u>Surplus</u>  |                             |                  |                  |
| (1) Statutory surplus, state basis (Page 3, Line 37, Columns 1 & 2) | Ohio                        | 9,897,979        | 9,918,643        |
| (2) State Prescribed Practices that increase/(decrease) NAIC SAP    | Ohio                        | 0                | 0                |
| (3) State Permitted Practices that increase/(decrease) NAIC SAP     | Ohio                        | 0                | 0                |
| (4) Statutory Surplus, NAIC SAP (1 - 2 - 3 = 4)                     | Ohio                        | <u>9,897,979</u> | <u>9,918,643</u> |

B. No change.

C. No change.

Note 2 – Accounting Changes and Corrections of Errors

No change.

Note 3 – Business Combinations and Goodwill

No change.

Note 4 – Discontinued Operations

No change.

Note 5 - Investments

- A. No change.
- B. No change.
- C. No change.

D. Loan-Backed Securities

- (1) Our asset manager uses a proprietary model for loss assumptions and widely accepted models for prepayment assumptions in valuing mortgage-backed and asset-backed securities with inputs from major third party data providers. The models combine the effects of interest rates, volatility, and pre-payment speeds based on various scenarios (Monte Carlo), simulations with resulting effective analytics (spreads, duration, convexity) and cash flows on a monthly basis. Credit sensitive cash flows are calculated using a proprietary model which estimates future loan defaults in terms of timing and severity. Model assumptions are specific to asset class and collateral types and are regularly evaluated and adjusted where appropriate.
- (2) Not applicable.
- (3) Not applicable.
- (4) Unrealized Losses

a. The aggregate amount of unrealized losses:

|                     |                        |         |
|---------------------|------------------------|---------|
| Less than 12 months | Greater than 12 months | Total   |
| 132,039             | 0                      | 132,028 |

STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

NOTES TO FINANCIAL STATEMENTS

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

|                     |                        |           |
|---------------------|------------------------|-----------|
| Less than 12 months | Greater than 12 months | Total     |
| 4,142,434           | 0                      | 4,142,434 |

(5) There are a number of factors considered in determining if an other-than-temporary impairment does not exist for an investment, including but not limited to, debt burden, credit rating, sector, liquidity, financial flexibility, company management, expected earnings and cash flow stream, and economic prospects associated with the investment.

- E. The Company does not have any repurchase agreements or securities lending transactions in its portfolio.
- F. No change.
- G. No change.

**Note 6 – Joint Ventures, Partnerships, and Limited Liability Companies**

No change.

**Note 7 – Investment Income**

No change.

**Note 8 – Derivative Instruments**

No change.

**Note 9 – Income Taxes**

No change.

**Note 10 – Information Concerning Parent, Subsidiaries, and Affiliates**

No change.

**Note 11 - Debt**

No change.

**Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences, and Other Postretirement Benefit Plans**

No change.

**Note 13 – Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations**

No change.

**Note 14 - Contingencies**

No change.

**Note 15 – Leases**

No change.

**Note 16 – Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk**

No change.

**Note 17 – Sale, Transfer, and Servicing of Financial Assets and Extinguishments of Liabilities**

- A. No change.
- B. No change.
- C. Not applicable.

STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**NOTES TO FINANCIAL STATEMENTS**

***Note 18 – Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Plans***

No change.

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

No change.

***Note 20 – Fair Value Measurement***

A. Assets Measured at Fair Value on a Recurring Basis

- (1) Not applicable.
- (2) Not applicable.
- (3) Not applicable.
- (4) The following are the levels of the hierarchy and a brief description of the type of valuation inputs that are used to establish each level:

Pricing Level 1 – Valuations based on unadjusted quoted prices in active markets for identical assets that our pricing sources have the ability to access. Since the valuations are based on quoted prices that are readily and regularly available in an active market, valuation of these securities does not entail a significant amount or degree of judgment.

Pricing Level 2 – Valuations based upon quoted prices for similar assets in active markets, quoted prices for identical or similar assets in inactive markets; or valuations based on models where significant inputs are observable (e.g. interest rates, yield curves, prepayment speeds, default rates, loss severities) or can be corroborated by observable market data.

Pricing Level 3 – Valuations that are derived from techniques in which one or more of the significant inputs are unobservable, including broker quotes which are non-binding.

- (5) Not applicable.
- B. Not applicable.
- C.

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | Level 1 | Level 2   | Level 3 | Not Practicable (Carrying Value) |
|------------------------------|----------------------|-----------------|---------|-----------|---------|----------------------------------|
| Bonds                        | 9,730,068            | 9,704,843       | 0       | 9,730,068 | 0       | 0                                |

- D. Not applicable.

***Note 21 – Other Items***

No change.

***Note 22 – Events Subsequent***

No change.

**Property & Casualty Specific Notes**

***Note 23 – Reinsurance***

No change.

***Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination***

No change.

***Note 25 – Change in Incurred Losses and Loss Adjustment Expenses***

No change.

***Note 26 – Intercompany Pooling Arrangements***

No change.



STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**NOTES TO FINANCIAL STATEMENTS**

***Note 27 – Structured Settlements***

No change.

***Note 28 – Health Care Receivables***

No change.

***Note 29 –Participating Policies***

No change.

***Note 30 –Premium Deficiency Reserves***

No change.

***Note 31 – High Deductibles***

No change.

***Note 32 – Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses***

No change.

***Note 33 – Asbestos / Environmental Reserves***

No change.

***Note 34 – Subscriber Savings Accounts***

No change

***Note 35 –Multiple Peril Crop Insurance***

No change.

***Note 36 –Financial Guaranty Insurance***

No change.

STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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 [ ☒ ]
- 1.2

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

Yes [ ☐ ] No [ ☐ ]
- 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 [ ☒ ]
- 2.2

If yes, date of change: .....
- 3.1

Have there been any substantial changes in the organizational chart since the prior quarter end? .....

Yes [ ☒ ] No [ ☐ ]
- 3.2

If the response to 3.1 is yes, provide a brief description of those changes.  
Uni-Service Excess Facilities Insurance Agency of New England was dissolved on 5/8/2013
- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? .....

Yes [ ☐ ] No [ ☒ ]
- 4.2

If yes, provide the name of the 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<br>Name of Entity | 2<br>NAIC Company Code | 3<br>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 [ ☐ ] 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. ....
- 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. ....
- 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). ....
- 6.4

By what department or departments?
- 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 [ ☒ ]
- 6.6

Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [ ☐ ] No [ ☐ ] N/A [ ☒ ]
- 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 [ ☒ ]
- 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 [ ☒ ]
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms? .....

Yes [ ☐ ] No [ ☒ ]
- 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 Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

| 1<br>Affiliate Name | 2<br>Location (City, State) | 3<br>FRB | 4<br>OCC | 5<br>FDIC | 6<br>SEC |
|---------------------|-----------------------------|----------|----------|-----------|----------|
|                     |                             |          |          |           |          |

GENERAL INTERROGATORIES

- 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? .....  
(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.

Yes [ X ] No [ ]
- 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 [ ] No [ X ]
- 10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount: .....

\$ .....

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: .....

\$ .....
13.

Amount of real estate and mortgages held in short-term investments: .....

\$ .....
- 14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates? .....

Yes [ ] No [ X ]
- 14.2

If yes, please complete the following:
- |   | 1   | 2  |
|---|---|--|
|   | Prior Year-End<br>Book/Adjusted<br>Carrying Value | Current Quarter<br>Book/Adjusted<br>Carrying Value |
| 14.21 Bonds .....   | \$ .....  | \$ .....   |
| 14.22 Preferred Stock .....   | \$ .....  | \$ .....   |
| 14.23 Common Stock .....  | \$ .....  | \$ .....   |
| 14.24 Short-Term Investments .....  | \$ .....  | \$ .....   |
| 14.25 Mortgage 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 [ ]

STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

GENERAL INTERROGATORIES

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

16.3 Total payable for securities lending reported on the liability page.
- \$

\$

\$

17. 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 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?
- Yes [ X ] No [ ]

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

| 1<br>Name of Custodian(s) | 2<br>Custodian Address        |
|---------------------------|-------------------------------|
| Bank of New York Mellon   | One Wall Street, New York, NY |

- 17.2 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<br>Name(s) | 2<br>Location(s) | 3<br>Complete Explanation(s) |
|--------------|------------------|------------------------------|
|              |                  |                              |

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?
- Yes [ ] No [ X ]

- 17.4 If yes, give full information relating thereto:

| 1<br>Old Custodian | 2<br>New Custodian | 3<br>Date of Change | 4<br>Reason |
|--------------------|--------------------|---------------------|-------------|
|                    |                    |                     |             |

- 17.5 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<br>Central Registration Depository | 2<br>Name(s)             | 3<br>Address                      |
|--------------------------------------|--------------------------|-----------------------------------|
| 107423                               | Conning Asset Management | One Financial Plaza, Hartford, CT |

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?
- Yes [ X ] No [ ]

- 18.2 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? .....  
If yes, attach an explanation.

Yes [ ] No [ ] N/A [ X ]
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? .....  
If yes, attach an explanation.

Yes [ ] No [ X ]
- 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:

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

5.

Operating Percentages:

5.1 A&H loss percent ..... %

5.2 A&H cost containment percent ..... %

5.3 A&H expense percent excluding cost containment expenses ..... %
- 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 .....\$.....
- 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 .....\$.....

## STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

[illegible]

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

| Current Year to Date - Allocated by States and Territories           |                    |                           |                         |  |                         |                           |                         |
|--|--------------------|---------------------------|-------------------------|--|-------------------------|---------------------------|-------------------------|
| States, etc.   | 1<br>Active Status | Direct Premiums Written   |                         | Direct Losses Paid (Deducting Salvage) |                         | Direct Losses Unpaid      |                         |
|  |                    | 2<br>Current Year To Date | 3<br>Prior Year To Date | 4<br>Current Year To Date              | 5<br>Prior Year To Date | 6<br>Current Year To Date | 7<br>Prior Year To Date |
| 1. Alabama AL  | N                  |                           |                         |  |                         |                           |                         |
| 2. Alaska AK   | N                  |                           |                         |  |                         |                           |                         |
| 3. Arizona AZ  | N                  |                           |                         |  |                         |                           |                         |
| 4. Arkansas AR   | N                  |                           |                         |  |                         |                           |                         |
| 5. California CA   | N                  |                           |                         |  |                         |                           |                         |
| 6. Colorado CO   | N                  |                           |                         |  |                         |                           |                         |
| 7. Connecticut CT  | N                  |                           |                         |  |                         |                           |                         |
| 8. Delaware DE   | N                  |                           |                         |  |                         |                           |                         |
| 9. District of Columbia DC   | N                  |                           |                         |  |                         |                           |                         |
| 10. Florida FL   | N                  |                           |                         |  |                         |                           |                         |
| 11. Georgia GA   | N                  |                           |                         |  |                         |                           |                         |
| 12. Hawaii HI  | N                  |                           |                         |  |                         |                           |                         |
| 13. Idaho ID   | N                  |                           |                         |  |                         |                           |                         |
| 14. Illinois IL  | N                  |                           |                         |  |                         |                           |                         |
| 15. Indiana IN   | N                  |                           |                         |  |                         |                           |                         |
| 16. Iowa IA  | N                  |                           |                         |  |                         |                           |                         |
| 17. Kansas KS  | N                  |                           |                         |  |                         |                           |                         |
| 18. Kentucky KY  | N                  |                           |                         |  |                         |                           |                         |
| 19. Louisiana LA   | N                  |                           |                         |  |                         |                           |                         |
| 20. Maine ME   | N                  |                           |                         |  |                         |                           |                         |
| 21. Maryland MD  | N                  |                           |                         |  |                         |                           |                         |
| 22. Massachusetts MA   | N                  |                           |                         |  |                         |                           |                         |
| 23. Michigan MI  | N                  |                           |                         |  |                         |                           |                         |
| 24. Minnesota MN   | N                  |                           |                         |  |                         |                           |                         |
| 25. Mississippi MS   | N                  |                           |                         |  |                         |                           |                         |
| 26. Missouri MO  | N                  |                           |                         |  |                         |                           |                         |
| 27. Montana MT   | N                  |                           |                         |  |                         |                           |                         |
| 28. Nebraska NE  | N                  |                           |                         |  |                         |                           |                         |
| 29. Nevada NV  | N                  |                           |                         |  |                         |                           |                         |
| 30. New Hampshire NH   | N                  |                           |                         |  |                         |                           |                         |
| 31. New Jersey NJ  | N                  |                           |                         |  |                         |                           |                         |
| 32. New Mexico NM  | N                  |                           |                         |  |                         |                           |                         |
| 33. New York NY  | L                  | 6,323,076                 | 569,581                 | 151,880                                |                         | 2,379,680                 | 12,200                  |
| 34. North Carolina NC  | N                  |                           |                         |  |                         |                           |                         |
| 35. North Dakota ND  | N                  |                           |                         |  |                         |                           |                         |
| 36. Ohio OH  | L                  | 18,131                    |                         |  |                         |                           |                         |
| 37. Oklahoma OK  | N                  |                           |                         |  |                         |                           |                         |
| 38. Oregon OR  | N                  |                           |                         |  |                         |                           |                         |
| 39. Pennsylvania PA  | N                  |                           |                         |  |                         |                           |                         |
| 40. Rhode Island RI  | N                  |                           |                         |  |                         |                           |                         |
| 41. South Carolina SC  | N                  |                           |                         |  |                         |                           |                         |
| 42. South Dakota SD  | N                  |                           |                         |  |                         |                           |                         |
| 43. Tennessee TN   | N                  |                           |                         |  |                         |                           |                         |
| 44. Texas TX   | N                  |                           |                         |  |                         |                           |                         |
| 45. Utah UT  | N                  |                           |                         |  |                         |                           |                         |
| 46. Vermont VT   | N                  |                           |                         |  |                         |                           |                         |
| 47. Virginia VA  | N                  |                           |                         |  |                         |                           |                         |
| 48. Washington WA  | N                  |                           |                         |  |                         |                           |                         |
| 49. West Virginia WV   | N                  |                           |                         |  |                         |                           |                         |
| 50. Wisconsin WI   | N                  |                           |                         |  |                         |                           |                         |
| 51. Wyoming WY   | N                  |                           |                         |  |                         |                           |                         |
| 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 CAN   | N                  |                           |                         |  |                         |                           |                         |
| 58. Aggregate Other Alien OT   | XXX                |                           |                         |  |                         |                           |                         |
| 59. Totals   | (a) 2              | 6,341,207                 | 569,581                 | 151,880                                |                         | 2,379,680                 | 12,200                  |
| DETAILS OF WRITE-INS   |                    |                           |                         |  |                         |                           |                         |
| 58001.   | XXX                |                           |                         |  |                         |                           |                         |
| 58002.   | XXX                |                           |                         |  |                         |                           |                         |
| 58003.   | XXX                |                           |                         |  |                         |                           |                         |
| 58998. Summary of remaining write-ins for Line 58 from overflow page | XXX                |                           |                         |  |                         |                           |                         |
| 58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)  | XXX                |                           |                         |  |                         |                           |                         |

(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.

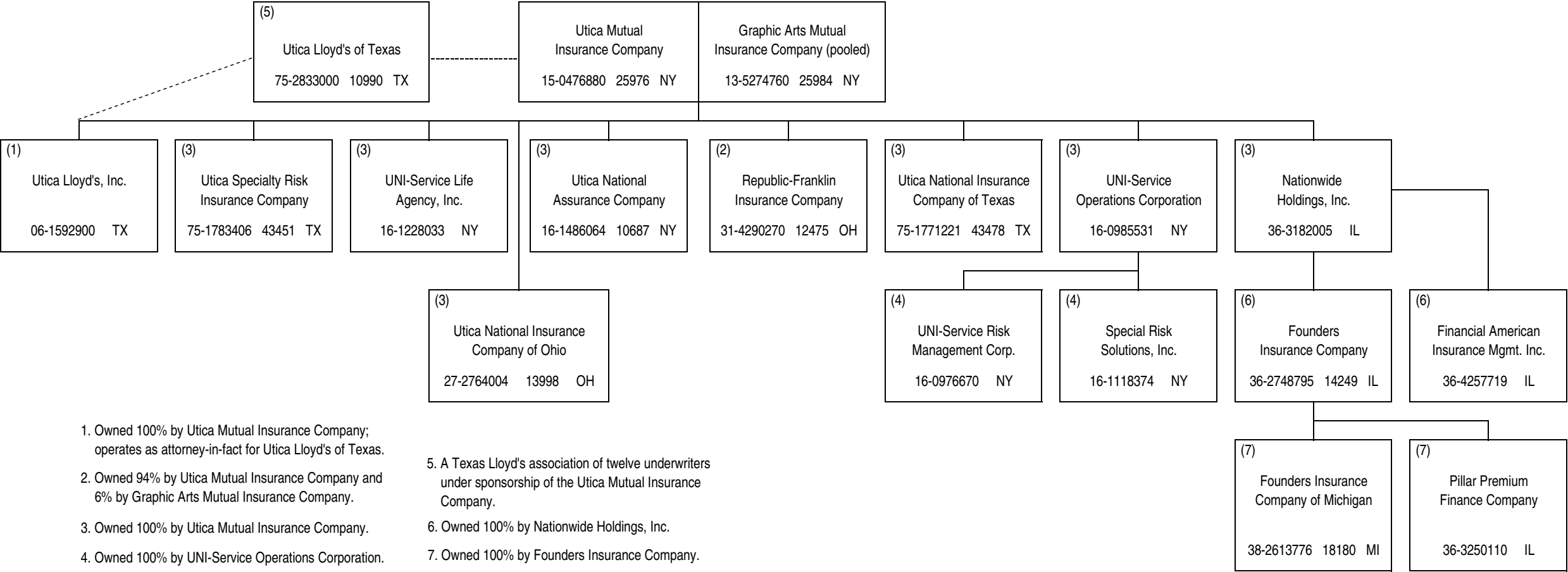
(a) Insert the number of L responses except for Canada and Other Alien.

STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

PART 1 - ORGANIZATIONAL CHART

UTICA NATIONAL INSURANCE GROUP      ORGANIZATION STRUCTURE      SEPTEMBER 30, 2013





**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

| Asterisk | Explanation  |
|----------|--|
| 1 .....  | Owned 6% by Graphic Arts Mutual Insurance Company. ....  |
| 2 .....  | A Texas Lloyd's association of twelve underwriters under the sponsorship of the Utica Mutual Insurance Company. .... |

PART 1 - LOSS EXPERIENCE

| Line of Business     |   | Current Year to Date           |                                |                                | 4<br>Prior Year to Date<br>Direct Loss<br>Percentage |
|----------------------|---|--------------------------------|--------------------------------|--------------------------------|--|
|                      |   | 1<br>Direct Premiums<br>Earned | 2<br>Direct Losses<br>Incurred | 3<br>Direct Loss<br>Percentage |  |
| 1.                   | Fire .....  | 121                            |                                |                                |  |
| 2.                   | Allied Lines .....  | 212                            |                                |                                |  |
| 3.                   | Farmowners multiple peril .....                                     |                                |                                |                                |  |
| 4.                   | Homeowners multiple peril .....                                     |                                |                                |                                |  |
| 5.                   | Commercial multiple peril .....                                     | 136,404                        | 170,000                        | 124.6                          |  |
| 6.                   | Mortgage guaranty .....   |                                |                                |                                |  |
| 8.                   | Ocean marine .....  |                                |                                |                                |  |
| 9.                   | Inland marine .....   | 57                             |                                |                                |  |
| 10.                  | Financial guaranty .....  |                                |                                |                                |  |
| 11.1                 | Medical professional liability - occurrence .....                   |                                |                                |                                |  |
| 11.2                 | Medical professional liability - claims-made .....                  |                                |                                |                                |  |
| 12.                  | Earthquake .....  |                                |                                |                                |  |
| 13.                  | Group accident and health .....                                     |                                |                                |                                |  |
| 14.                  | Credit accident and health .....                                    |                                |                                |                                |  |
| 15.                  | Other accident and health .....                                     |                                |                                |                                |  |
| 16.                  | Workers' compensation .....   | 2,391,163                      | 2,085,572                      | 87.2                           | 6.4  |
| 17.1                 | Other liability - occurrence .....                                  | 52,101                         |                                |                                |  |
| 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 .....                                     | 38,766                         |                                |                                |  |
| 21.                  | Auto physical damage .....  | 6,543                          |                                |                                |  |
| 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  | 2,625,367                      | 2,255,572                      | 85.9                           | 6.4  |
| 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               | 2                       | 3                          |
|----------------------|---|-----------------|-------------------------|----------------------------|
|                      |   | Current Quarter | Current<br>Year to Date | Prior Year<br>Year to Date |
| 1.                   | Fire .....  | 6,291           | 6,291                   |                            |
| 2.                   | Allied Lines .....  | 10,984          | 10,984                  |                            |
| 3.                   | Farmowners multiple peril .....                                     |                 |                         |                            |
| 4.                   | Homeowners multiple peril .....                                     |                 |                         |                            |
| 5.                   | Commercial multiple peril .....                                     | 1,489,771       | 1,493,081               |                            |
| 6.                   | Mortgage guaranty .....   |                 |                         |                            |
| 8.                   | Ocean marine .....  |                 |                         |                            |
| 9.                   | Inland marine .....   | 2,945           | 2,945                   |                            |
| 10.                  | Financial guaranty .....  |                 |                         |                            |
| 11.1                 | Medical professional liability - occurrence .....                   |                 |                         |                            |
| 11.2                 | Medical professional liability - claims-made .....                  |                 |                         |                            |
| 12.                  | Earthquake .....  |                 |                         |                            |
| 13.                  | Group accident and health .....                                     |                 |                         |                            |
| 14.                  | Credit accident and health .....                                    |                 |                         |                            |
| 15.                  | Other accident and health .....                                     |                 |                         |                            |
| 16.                  | Workers' compensation .....   | 1,684,072       | 3,600,987               | 569,581                    |
| 17.1                 | Other liability - occurrence .....                                  | 745,301         | 745,301                 |                            |
| 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 .....                                     | 411,717         | 411,717                 |                            |
| 21.                  | Auto physical damage .....  | 69,901          | 69,901                  |                            |
| 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  | 4,420,982       | 6,341,207               | 569,581                    |
| 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)           |                 |                         |                            |

STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

|  | 1   | 2   | 3  | 4  | 5  | 6  | 7   | 8  | 9                                    | 10  | 11  | 12   | 13  |
|--|---|---|--|--|--|--|---|--|--------------------------------------|---|---|--|---|
| Years in Which Losses Occurred                     | Prior Year-End Known Case Loss and LAE Reserves | Prior Year-End IBNR Loss and LAE Reserves | Total Prior Year-End Loss and LAE Reserves (Cols. 1+2) | 2013 Loss and LAE Payments on Claims Reported as of Prior Year-End | 2013 Loss and LAE Payments on Claims Unreported as of Prior Year-End | Total 2013 Loss and LAE Payments (Cols. 4+5) | Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End | Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End | Q.S. Date IBNR Loss and LAE Reserves | Total Q.S. Loss and LAE Reserves (Cols.7+8+9) | Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1) | Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2) | Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12) |
| 1. 2010 + Prior .....                              |   |   |  |  |  |  |   |  |                                      |   |   |  |   |
| 2. 2011 .....                                      |   |   |  |  |  |  |   |  |                                      |   |   |  |   |
| 3. Subtotals 2011 + Prior .....                    |   |   |  |  |  |  |   |  |                                      |   |   |  |   |
| 4. 2012 .....                                      |   |   |  |  |  |  |   |  |                                      |   |   |  |   |
| 5. Subtotals 2012 + Prior .....                    |   |   |  |  |  |  |   |  |                                      |   |   |  |   |
| 6. 2013 .....                                      | XXX   | XXX                                       | XXX  | XXX  |  |  | XXX   |  |                                      |   | XXX   | XXX  | XXX   |
| 7. Totals .....                                    |   |   |  |  |  |  |   |  |                                      |   |   |  |   |
| 8. Prior Year-End Surplus As Regards Policyholders | 9,919   |   |  |  |  |  |   |  |                                      |   | 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   |
|  |   |   |  |  |  |  |   |  |                                      |   | 1.  | 2.   | 3.  |
|  |   |   |  |  |  |  |   |  |                                      |   | Col. 13, Line 7 As a % of Col. 1 Line 8   |  |   |
|  |   |   |  |  |  |  |   |  |                                      |   | 4.  |  |   |

STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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.

|  | Response |
|--|----------|
| 1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement? .....                         | NO       |
| 2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement? .....                         | NO       |
| 3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement? .....                | NO       |
| 4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement? ..... | YES      |

Explanations:

1.
2.
3.

Bar Codes:

1. Trusteed Surplus Statement [Document Identifier 490]



2. Supplement A to Schedule T [Document Identifier 455]



3. Medicare Part D Coverage Supplement [Document Identifier 365]





SCHEDULE A - VERIFICATION

Real Estate

|  | 1<br>Year to Date | 2<br>Prior Year Ended<br>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<br>Year to Date | 2<br>Prior Year Ended<br>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 and commitment fees .....                                  |                   |                                      |
| 9. Total foreign exchange change in book value/recorded investment excluding accrued interest .....                       |                   |                                      |
| 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<br>Year to Date | 2<br>Prior Year Ended<br>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<br>Year to Date | 2<br>Prior Year Ended<br>December 31 |
|---|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....      | 8,201,904         | 7,290,557                            |
| 2. Cost of bonds and stocks acquired .....  | 2,741,587         | 2,573,643                            |
| 3. Accrual of discount .....  | 1,341             | 1,291                                |
| 4. Unrealized valuation increase (decrease) .....   |                   |                                      |
| 5. Total gain (loss) on disposals .....   | 7,745             | 22,504                               |
| 6. Deduct consideration for bonds and stocks disposed of .....                            | 1,194,009         | 1,622,756                            |
| 7. Deduct amortization of premium .....   | 53,723            | 63,335                               |
| 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) ..... | 9,704,845         | 8,201,904                            |
| 11. Deduct total nonadmitted amounts .....  |                   |                                      |
| 12. Statement value at end of current period (Line 10 minus Line 11)                      | 9,704,845         | 8,201,904                            |

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<br>Book/Adjusted<br>Carrying Value<br>Beginning<br>of Current Quarter | 2<br>Acquisitions<br>During<br>Current Quarter | 3<br>Dispositions<br>During<br>Current Quarter | 4<br>Non-Trading Activity<br>During<br>Current Quarter | 5<br>Book/Adjusted<br>Carrying Value<br>End of<br>First Quarter | 6<br>Book/Adjusted<br>Carrying Value<br>End of<br>Second Quarter | 7<br>Book/Adjusted<br>Carrying Value<br>End of<br>Third Quarter | 8<br>Book/Adjusted<br>Carrying Value<br>December 31<br>Prior Year |
|-------------------------------------|---|--|--|--|---|--|---|---|
| BONDS                               |   |  |  |  |   |  |   |   |
| 1. Class 1 (a) .....                | 9,044,162   | 73,020   | 149,304  | (264,381)  | 9,391,123   | 9,044,162  | 8,703,497   | 9,868,991   |
| 2. Class 2 (a) .....                | 317,783   | 435,176  |  | 248,385  | 232,831   | 317,783  | 1,001,344   | 232,768   |
| 3. Class 3 (a) .....                |   |  |  |  |   |  |   |   |
| 4. Class 4 (a) .....                |   |  |  |  |   |  |   |   |
| 5. Class 5 (a) .....                |   |  |  |  |   |  |   |   |
| 6. Class 6 (a) .....                |   |  |  |  |   |  |   |   |
| 7. Total Bonds                      | 9,361,945   | 508,196  | 149,304  | (15,996)   | 9,623,954   | 9,361,945  | 9,704,841   | 10,101,759  |
| PREFERRED STOCK                     |   |  |  |  |   |  |   |   |
| 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 and Preferred Stock | 9,361,945   | 508,196  | 149,304  | (15,996)   | 9,623,954   | 9,361,945  | 9,704,841   | 10,101,759  |

(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 \$ ..... ; NAIC 2 \$ ..... ; NAIC 3 \$ ..... ;  
NAIC 4 \$ ..... ; NAIC 5 \$ ..... ; NAIC 6 \$ .....

SCHEDULE DA - PART 1

Short-Term Investments

|                | 1                               | 2              | 3           | 4                                  | 5  |
|----------------|---------------------------------|----------------|-------------|------------------------------------|--|
|                | Book/Adjusted<br>Carrying Value | Prior<br>Value | Actual Cost | Interest Collected<br>Year-to-Date | Paid for<br>Accrued Interest<br>Year-to-Date |
| 9199999 Totals |                                 | XXX            |             |                                    |  |

NONE

SCHEDULE DA - VERIFICATION

Short-Term Investments

|   | 1            | 2                               |
|---|--------------|---------------------------------|
|   | Year To Date | Prior Year Ended<br>December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year .....                          | 449,943      |                                 |
| 2. Cost of short-term investments acquired .....  |              | 449,936                         |
| 3. Accrual of discount .....  | 34           | 7                               |
| 4. Unrealized valuation increase (decrease) .....   |              |                                 |
| 5. Total gain (loss) on disposals .....   | ( 15)        |                                 |
| 6. Deduct consideration received on disposals .....                                       | 449,963      |                                 |
| 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) ..... |              | 449,943                         |
| 11. Deduct total nonadmitted amounts .....  |              |                                 |
| 12. Statement value at end of current period (Line 10 minus Line 11)                      |              | 449,943                         |



SCHEDULE DB - PART A - VERIFICATION

Options, Caps, Floors, Collars, Swaps and Forwards

|     |   |  |  |
|-----|---|--|--|
| 1.  | Book/Adjusted Carrying Value, December 31, prior year (Line 9, prior year)    |  |  |
| 2.  | Cost Paid/(Consideration Received) on additions                               |  |  |
| 3.  | Unrealized Valuation increase/(decrease)                                      |  |  |
| 4.  | Total gain (loss) on termination recognized                                   |  |  |
| 5.  | Considerations received/(paid) on terminations                                |  |  |
| 6.  | Amortization  |  |  |
| 7.  | Adjustment to the Book/Adjusted Carrying Value of hedged item                 |  |  |
| 8.  | Total foreign exchange change in Book/Adjusted Carrying Value                 |  |  |
| 9.  | Book/Adjusted Carrying Value at End of Current Period (Lines 1+2+3+4-5+6+7+8) |  |  |
| 10. | Deduct nonadmitted assets   |  |  |
| 11. | Statement value at end of current period (Line 9 minus Line 10)               |  |  |

SCHEDULE DB - PART B - VERIFICATION

Futures Contracts

|      |  |  |  |
|------|--|--|--|
| 1.   | Book/Adjusted carrying value, December 31 of prior year (Line 6, prior year)                               |  |  |
| 2.   | Cumulative cash change (Section 1, Broker Name/Net Cash Deposits Footnote - Cumulative Cash Change column) |  |  |
| 3.1  | Add:   |  |  |
|      | Change in variation margin on open contracts - Highly Effective Hedges                                     |  |  |
| 3.11 | Section 1, Column 15, current year to date minus   |  |  |
| 3.12 | Section 1, Column 15, prior year   |  |  |
|      | Change in variation margin on open contracts - All Other   |  |  |
| 3.13 | Section 1, Column 18, current year to date minus   |  |  |
| 3.14 | Section 1, Column 18, prior year   |  |  |
| 3.2  | Add:   |  |  |
|      | Change in adjustment to basis of hedged item   |  |  |
| 3.21 | Section 1, Column 17, current year to date minus   |  |  |
| 3.22 | Section 1, Column 17, prior year   |  |  |
|      | Change in amount recognized  |  |  |
| 3.23 | Section 1, Column 19, current year to date minus   |  |  |
| 3.24 | Section 1, Column 19, prior year   |  |  |
| 3.3  | Subtotal (Line 3.1 minus Line 3.2)   |  |  |
| 4.1  | Cumulative variation margin on terminated contracts during the year  |  |  |
| 4.2  | Less:  |  |  |
|      | 4.21 Amount used to adjust basis of hedged item  |  |  |
|      | 4.22 Amount recognized   |  |  |
| 4.3  | Subtotal (Line 4.1 minus Line 4.2)   |  |  |
| 5.   | Dispositions gains (losses) on contracts terminated in prior year:   |  |  |
|      | 5.1 Total gain (loss) recognized for terminations in prior year  |  |  |
|      | 5.2 Total gain (loss) adjusted into the hedged item(s) for terminations in prior year                      |  |  |
| 6.   | Book/Adjusted carrying value at end of current period (Lines 1+2+3.3-4.3-5.1-5.2)                          |  |  |
| 7.   | Deduct total nonadmitted amounts   |  |  |
| 8.   | Statement value at end of current period (Line 6 minus Line 7)   |  |  |

## SCHEDULE DB - PART C - SECTION 1

[illegible]

STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE DB - PART C - SECTION 2**

Replication (Synthetic Asset) Transactions Open

|   | First Quarter                  |  | Second Quarter                 |  | Third Quarter                  |  | Fourth Quarter                 |  | Year To Date                   |   |
|---|--------------------------------|--|--------------------------------|--|--------------------------------|--|--------------------------------|--|--------------------------------|---|
|   | 1<br>Number<br>of<br>Positions | 2<br>Total Replication<br>(Synthetic Asset)<br>Transactions<br>Statement Value | 3<br>Number<br>of<br>Positions | 4<br>Total Replication<br>(Synthetic Asset)<br>Transactions<br>Statement Value | 5<br>Number<br>of<br>Positions | 6<br>Total Replication<br>(Synthetic Asset)<br>Transactions<br>Statement Value | 7<br>Number<br>of<br>Positions | 8<br>Total Replication<br>(Synthetic Asset)<br>Transactions<br>Statement Value | 9<br>Number<br>of<br>Positions | 10<br>Total Replication<br>(Synthetic Asset)<br>Transactions<br>Statement Value |
| 1. Beginning Inventory .....  |                                |  |                                |  |                                |  |                                |  |                                |   |
| 2. Add: Opened or Acquired Transactions.....  |                                |  |                                |  |                                |  |                                |  |                                |   |
| 3. Add: Increases in Replication (Synthetic Asset)<br>Transactions Statement Value..... | XXX                            |  | XXX                            |  | XXX                            |  | XXX                            |  | XXX                            |   |
| 4. Less: Closed or Disposed of Transactions.....  |                                |  |                                |  |                                |  |                                |  |                                |   |
| 5. Less: Positions Disposed of for Failing Effectiveness<br>Criteria.....               |                                |  |                                |  |                                |  |                                |  |                                |   |
| 6. Less: Decreases in Replication (Synthetic Asset)<br>Transactions Statement Value     | XXX                            |  | XXX                            |  | XXX                            |  | XXX                            |  | XXX                            |   |
| 7. Ending Inventory   |                                |  |                                |  |                                |  |                                |  |                                |   |

SCHEDULE DB - VERIFICATION

Verification of Book/Adjusted Carrying Value, Fair Value and Potential Exposure of all Open Derivative Contracts

|     |   | Book/Adjusted Carrying Value Check |
|-----|---|------------------------------------|
| 1.  | Part A, Section 1, Column 14.....   | .....                              |
| 2.  | Part B, Section 1, Column 15 plus Part B, Section 1 Footnote - Total Ending Cash Balance..... | .....                              |
| 3.  | Total (Line 1 plus Line 2) .....  | .....                              |
| 4.  | Part D, Section 1, Column 5 .....   | .....                              |
| 5.  | Part D, Section 1, Column 6 .....   | .....                              |
| 6.  | Total (Line 3 minus Line 4 minus Line 5) .....  | .....                              |
|     |   | Fair Value Check                   |
| 7.  | Part A, Section 1, Column 16 .....  | .....                              |
| 8.  | Part B, Section 1, Column 13 .....  | .....                              |
| 9.  | Total (Line 7 plus Line 8) .....  | .....                              |
| 10. | Part D, Section 1, Column 8 .....   | .....                              |
| 11. | Part D, Section 1, Column 9 .....   | .....                              |
| 12. | Total (Line 9 minus Line 10 minus Line 11) .....  | .....                              |
|     |   | Potential Exposure Check           |
| 13. | Part A, Section 1, Column 21 .....  | .....                              |
| 14. | Part B, Section 1, Column 20 .....  | .....                              |
| 15. | Part D, Section 1, Column 11 .....  | .....                              |
| 16. | Total (Line 13 plus Line 14 minus Line 15) .....  | .....                              |

NONE

SCHEDULE E - VERIFICATION

(Cash Equivalents)

|   | 1            | 2                               |
|---|--------------|---------------------------------|
|   | Year To Date | Prior Year Ended<br>December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year .....                          | 1,449,913    | (1)                             |
| 2. Cost of cash equivalents acquired .....  |              | 1,449,873                       |
| 3. Accrual of discount .....  | 86           | 41                              |
| 4. Unrealized valuation increase (decrease) .....   |              |                                 |
| 5. Total gain (loss) on disposals .....   | (2)          |                                 |
| 6. Deduct consideration received on disposals .....                                       | 1,449,998    |                                 |
| 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) ..... |              | 1,449,913                       |
| 11. Deduct total nonadmitted amounts .....  |              |                                 |
| 12. Statement value at end of current period (Line 10 minus Line 11)                      |              | 1,449,913                       |

STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

SCHEDULE A - PART 2

Showing All Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

| 1                       | Location |       | 4             | 5              | 6                                  | 7                      | 8  | 9  |
|-------------------------|----------|-------|---------------|----------------|------------------------------------|------------------------|--|--|
|                         | 2        | 3     |               |                |                                    |                        |  |  |
| Description of Property | City     | State | Date Acquired | Name of Vendor | Actual Cost at Time of Acquisition | Amount of Encumbrances | Book/Adjusted Carrying Value Less Encumbrances | Additional Investment Made After Acquisition |
|                         |          |       | NONE          |                |                                    |                        |  |  |
|                         |          |       |               |                |                                    |                        |  |  |
|                         |          |       |               |                |                                    |                        |  |  |
|                         |          |       |               |                |                                    |                        |  |  |
|                         |          |       |               |                |                                    |                        |  |  |
|                         |          |       |               |                |                                    |                        |  |  |
|                         |          |       |               |                |                                    |                        |  |  |
|                         |          |       |               |                |                                    |                        |  |  |
|                         |          |       |               |                |                                    |                        |  |  |
|                         |          |       |               |                |                                    |                        |  |  |
| 0399999 - Totals        |          |       |               |                |                                    |                        |  |  |

SCHEDULE A - PART 3

Showing All Real Estate DISPOSED During the Quarter, Including Payments During the Final Year on "Sales Under Contract"

| 1<br><br>Description of Property | Location      |                | 4<br><br>Disposal Date | 5<br><br>Name of Purchaser | 6<br><br>Actual Cost | 7<br>Expended for Additions, Permanent Improvements and Changes in Encumbrances | 8<br>Book/ Adjusted Carrying Value Less Encumbrances Prior Year | Change in Book/Adjusted Carrying Value Less Encumbrances |   |   |   |  | 14<br>Book/ Adjusted Carrying Value Less Encumbrances on Disposal | 15<br>Amounts Received During Year | 16<br>Foreign Exchange Gain (Loss) on Disposal | 17<br>Realized Gain (Loss) on Disposal | 18<br>Total Gain (Loss) on Disposal | 19<br>Gross Income Earned Less Interest Incurred on Encumbrances | 20<br>Taxes, Repairs and Expenses Incurred |  |  |  |  |  |  |  |  |  |  |  |  |
|----------------------------------|---------------|----------------|------------------------|----------------------------|----------------------|---|---|--|---|---|---|--|---|------------------------------------|--|--|-------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|                                  | 2<br><br>City | 3<br><br>State |                        |                            |                      |   |   | 9<br>Current Year's Depreciation                         | 10<br>Current Year's Other Than Temporary Impairment Recognized | 11<br>Current Year's Change in Encumbrances | 12<br>Total Change in Book/ Adjusted Carrying Value (11-9-10) | 13<br>Total Foreign Exchange Change in Book/ Adjusted Carrying Value |   |                                    |  |  |                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                  |               |                |                        |                            |                      | NONE  |   |  |   |   |   |  |   |                                    |  |  |                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                  |               |                |                        |                            |                      |   |   |  |   |   |   |  |   |                                    |  |  |                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                  |               |                |                        |                            |                      |   |   |  |   |   |   |  |   |                                    |  |  |                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                  |               |                |                        |                            |                      |   |   |  |   |   |   |  |   |                                    |  |  |                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                  |               |                |                        |                            |                      |   |   |  |   |   |   |  |   |                                    |  |  |                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                  |               |                |                        |                            |                      |   |   |  |   |   |   |  |   |                                    |  |  |                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                  |               |                |                        |                            |                      |   |   |  |   |   |   |  |   |                                    |  |  |                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                  |               |                |                        |                            |                      |   |   |  |   |   |   |  |   |                                    |  |  |                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                  |               |                |                        |                            |                      |   |   |  |   |   |   |  |   |                                    |  |  |                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                  |               |                |                        |                            |                      |   |   |  |   |   |   |  |   |                                    |  |  |                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 0399999 - Totals                 |               |                |                        |                            |                      |   |   |  |   |   |   |  |   |                                    |  |  |                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## SCHEDULE B - PART 2

Showing All Mortgage Loans ACQUIRED AND ADDITIONS MADE During the Current Quarter

[illegible]

## SCHEDULE B - PART 3

Showing All Mortgage Loans DISPOSED, Transferred or Repaid During the Current Quarter

[illegible]

## STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

[illegible]

## SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

[illegible]



STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

SCHEDULE D - PART 3

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

| 1                    | 2  | 3       | 4             | 5                                   | 6                         | 7           | 8         | 9                                       | 10                                       |
|----------------------|--|---------|---------------|-------------------------------------|---------------------------|-------------|-----------|---|--|
| CUSIP Identification | Description  | Foreign | Date Acquired | Name of Vendor                      | Number of Shares of Stock | Actual Cost | Par Value | Paid for Accrued Interest and Dividends | NAIC Designation or Market Indicator (a) |
| 31417G-TF-3          | FN AB9549  |         | .06/17/2013   | RBC CAPITAL MARKETS SECURITIES - US |                           | (476)       | (475)     | (1)                                     | 1  |
| 3199999              | Subtotal - Bonds - U.S. Special Revenues                       |         |               |                                     |                           | (476)       | (475)     | (1)                                     | XXX                                      |
| 05348E-AS-8          | AVALONBAY COMMUNITIES IN                                       |         | .09/16/2013   | DEUTSCHE BANK                       |                           | 34,905      | 35,000    |   | 2FE                                      |
| 06051G-EB-1          | BANK OF AMERICA CORP   |         | .08/27/2013   | CITIGROUP GLOBAL MARKETS            |                           | 73,496      | 70,000    | 1,304                                   | 1FE                                      |
| 118230-AJ-0          | BUCKEYE PARTNERS LP  |         | .09/26/2013   | WELLS FARGO SECURITIES LLC          |                           | 51,796      | 50,000    | .399                                    | 2FE                                      |
| 42217K-AY-2          | HEALTH CARE REIT INC   |         | .09/17/2013   | WELLS FARGO SECURITIES LLC          |                           | 52,215      | 50,000    | .968                                    | 2FE                                      |
| 65339K-AH-3          | NEXTERA ENERGY CAPITAL   |         | .08/06/2013   | CREDIT SUISSE                       |                           | 75,274      | 75,000    |   | 2FE                                      |
| 68268N-AK-9          | ONEOK PARTNERS LP  |         | .09/09/2013   | ROYAL BANK OF SCOTLAND US           |                           | 44,971      | 45,000    |   | 2FE                                      |
| 756109-AK-0          | REALTY INCOME CORP   |         | .09/17/2013   | WELLS FARGO SECURITIES LLC          |                           | 58,576      | 50,000    | .328                                    | 2FE                                      |
| 958254-AC-8          | WESTERN GAS PARTNERS   |         | .08/05/2013   | WELLS FARGO SECURITIES LLC          |                           | 69,915      | 70,000    |   | 2FE                                      |
| 71647N-AB-5          | PETROBRAS GLOBAL FINANCE                                       | F       | .07/23/2013   | BARCLAYS AMERICAN                   |                           | 47,526      | 50,000    | .275                                    | 2FE                                      |
| 3899999              | Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) |         |               |                                     |                           | 508,674     | 495,000   | 3,274                                   | XXX                                      |
| 8399997              | Total - Bonds - Part 3   |         |               |                                     |                           | 508,198     | 494,525   | 3,273                                   | XXX                                      |
| 8399998              | Total - Bonds - Part 5   |         |               |                                     |                           | XXX         | XXX       | XXX                                     | XXX                                      |
| 8399999              | Total - Bonds  |         |               |                                     |                           | 508,198     | 494,525   | 3,273                                   | XXX                                      |
| 8999997              | Total - Preferred Stocks - Part 3                              |         |               |                                     |                           |             | XXX       |   | XXX                                      |
| 8999998              | Total - Preferred Stocks - Part 5                              |         |               |                                     |                           | XXX         | XXX       | XXX                                     | XXX                                      |
| 8999999              | Total - Preferred Stocks                                       |         |               |                                     |                           |             | XXX       |   | XXX                                      |
| 9799997              | Total - Common Stocks - Part 3                                 |         |               |                                     |                           |             | XXX       |   | XXX                                      |
| 9799998              | Total - Common Stocks - Part 5                                 |         |               |                                     |                           | XXX         | XXX       | XXX                                     | XXX                                      |
| 9799999              | Total - Common Stocks  |         |               |                                     |                           |             | XXX       |   | XXX                                      |
| 9899999              | Total - Preferred and Common Stocks                            |         |               |                                     |                           |             | XXX       |   | XXX                                      |
| 9999999              | Totals   |         |               |                                     |                           | 508,198     | XXX       | 3,273                                   | XXX                                      |

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

STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

SCHEDULE D - PART 4

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

| 1   | 2               | 3            | 4                | 5                    | 6                               | 7                  | 8         | 9              | 10   | Change In Book/Adjusted Carrying Value             |  |   |   |   | 16  | 17   | 18  | 19                                  | 20   | 21   | 22  |
|---|-----------------|--------------|------------------|----------------------|---------------------------------|--------------------|-----------|----------------|--|--|--|---|---|---|---|--|---|-------------------------------------|--|--|---|
|   |                 |              |                  |                      |                                 |                    |           |                |  | 11   | 12   | 13  | 14  | 15  |   |  |   |                                     |  |  |   |
| CUSIP<br>Ident-<br>ification  | Description     | For-<br>eign | Disposal<br>Date | Name<br>of Purchaser | Number of<br>Shares of<br>Stock | Consid-<br>eration | Par Value | Actual<br>Cost | Prior Year<br>Book/<br>Adjusted<br>Carrying<br>Value | Unrealized<br>Valuation<br>Increase/<br>(Decrease) | Current<br>Year's<br>(Amor-<br>tization)/<br>Accretion | Current<br>Year's<br>Other Than<br>Temporary<br>Impairment<br>Recog-<br>nized | Total<br>Change in<br>Book/<br>Adjusted<br>Carrying<br>Value<br>(11 + 12 -<br>13) | Total<br>Foreign<br>Exchange<br>Change in<br>Book<br>/Adjusted<br>Carrying<br>Value | Book/<br>Adjusted<br>Carrying<br>Value at<br>Disposal<br>Date | Foreign<br>Exchange<br>Gain<br>(Loss) on<br>Disposal | Realized<br>Gain<br>(Loss) on<br>Disposal | Total Gain<br>(Loss) on<br>Disposal | Bond<br>Interest/<br>Stock<br>Dividends<br>Received<br>During Year | Stated<br>Con-<br>tractual<br>Maturity<br>Date | NAIC<br>Desig-<br>nation<br>or<br>Market<br>In-<br>dicator<br>(a) |
| 36178W-GL-7   | GN AB9203       |              | 09/01/2013       | MBS PAYMENT          |                                 | 4,266              | 4,266     | 4,558          | 4,298  |  | (32)   |   | (32)  |   | 4,266   |  |   |                                     | .86  | 11/15/2042                                     | 1   |
| 36202F-M7-8   | G2 4882         |              | 09/01/2013       | MBS PAYMENT          |                                 | 11,312             | 11,312    | 11,574         | 11,359   |  | (47)   |   | (47)  |   | 11,312  |  |   |                                     | .296   | 12/20/2040                                     | 1   |
| 36202F-PF-7   | G2 4922         |              | 09/01/2013       | MBS PAYMENT          |                                 | 11,216             | 11,216    | 11,504         | 11,269   |  | (52)   |   | (52)  |   | 11,216  |  |   |                                     | .294   | 01/20/2041                                     | 1   |
| 36202F-TL-0   | G2 5055         |              | 09/01/2013       | MBS PAYMENT          |                                 | 23,138             | 23,138    | 24,512         | 23,430   |  | (292)  |   | (292)   |   | 23,138  |  |   |                                     | .682   | 05/20/2041                                     | 1   |
| 36202F-UE-4   | G2 5081         |              | 09/01/2013       | MBS PAYMENT          |                                 | 13,695             | 13,695    | 14,082         | 13,769   |  | (75)   |   | (75)  |   | 13,695  |  |   |                                     | .363   | 06/20/2041                                     | 1   |
| 36202F-UF-1   | G2 5082         |              | 09/01/2013       | MBS PAYMENT          |                                 | 12,612             | 12,612    | 13,322         | 12,757   |  | (145)  |   | (145)   |   | 12,612  |  |   |                                     | .370   | 06/20/2041                                     | 1   |
| 36202F-Y5-9   | G2 5232         |              | 09/01/2013       | MBS PAYMENT          |                                 | 24,845             | 24,845    | 25,734         | 24,974   |  | (129)  |   | (129)   |   | 24,845  |  |   |                                     | .566   | 11/20/2041                                     | 1   |
| 36241L-S3-1   | GN 783238       |              | 09/01/2013       | MBS PAYMENT          |                                 | 11,610             | 11,610    | 11,966         | 11,685   |  | (74)   |   | (74)  |   | 11,610  |  |   |                                     | .304   | 01/15/2041                                     | 1   |
| 0599999. Subtotal - Bonds - U.S. Governments                            |                 |              |                  |                      |                                 | 112,694            | 112,694   | 117,252        | 113,541  |  | (846)  |   | (846)   |   | 112,694   |  |   |                                     | 2,961  | XXX  | XXX   |
| 31326D-RW-4   | FG 000501       |              | 09/01/2013       | MBS PAYMENT          |                                 | 9,031              | 9,031     | 9,362          | 9,090  |  | (59)   |   | (59)  |   | 9,031   |  |   |                                     | .241   | 05/01/2041                                     | 1   |
| 31417E-H2-0   | FN AB7448       |              | 09/01/2013       | MBS PAYMENT          |                                 | 6,510              | 6,510     | 6,750          |  |  | (21)   |   | (21)  |   | 6,510   |  |   |                                     | .81  | 01/01/2028                                     | 1   |
| 31417G-TF-3   | FN AB9549       |              | 09/01/2013       | MBS PAYMENT          |                                 | 848                | 848       | 850            |  |  |  |   |   |   | 848   |  |   |                                     | .3   | 06/01/2043                                     | 1   |
| 3199999. Subtotal - Bonds - U.S. Special Revenues                       |                 |              |                  |                      |                                 | 16,389             | 16,390    | 16,962         | 9,090  |  | (80)   |   | (80)  |   | 16,389  |  |   |                                     | 325  | XXX  | XXX   |
| 02005X-AC-2   | ALLYA 2011-4 A3 |              | 09/15/2013       | MBS PAYMENT          |                                 | 20,220             | 20,220    | 20,164         | 20,199   |  | 21   |   | 21  |   | 20,220  |  |   |                                     | .106   | 09/15/2015                                     | 1FE   |
| 3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) |                 |              |                  |                      |                                 | 20,220             | 20,220    | 20,164         | 20,199   |  | 21   |   | 21  |   | 20,220  |  |   |                                     | .106   | XXX  | XXX   |
| 8399997. Total - Bonds - Part 4   |                 |              |                  |                      |                                 | 149,303            | 149,304   | 154,378        | 142,830  |  | (905)  |   | (905)   |   | 149,303   |  |   |                                     | 3,392  | XXX  | XXX   |
| 8399998. Total - Bonds - Part 5   |                 |              |                  |                      |                                 | XXX                | XXX       | XXX            | XXX  | XXX  | XXX  | XXX   | XXX   | XXX   | XXX   | XXX  | XXX                                       | XXX                                 | XXX  | XXX  | XXX   |
| 8399999. Total - Bonds  |                 |              |                  |                      |                                 | 149,303            | 149,304   | 154,378        | 142,830  |  | (905)  |   | (905)   |   | 149,303   |  |   |                                     | 3,392  | XXX  | XXX   |
| 8999997. Total - Preferred Stocks - Part 4                              |                 |              |                  |                      |                                 |                    | XXX       |                |  |  |  |   |   |   |   |  |   |                                     |  | XXX  | XXX   |
| 8999998. Total - Preferred Stocks - Part 5                              |                 |              |                  |                      |                                 | XXX                | XXX       | XXX            | XXX  | XXX  | XXX  | XXX   | XXX   | XXX   | XXX   | XXX  | XXX                                       | XXX                                 | XXX  | XXX  | XXX   |
| 8999999. Total - Preferred Stocks                                       |                 |              |                  |                      |                                 |                    | XXX       |                |  |  |  |   |   |   |   |  |   |                                     |  | XXX  | XXX   |
| 9799997. Total - Common Stocks - Part 4                                 |                 |              |                  |                      |                                 |                    | XXX       |                |  |  |  |   |   |   |   |  |   |                                     |  | XXX  | XXX   |
| 9799998. Total - Common Stocks - Part 5                                 |                 |              |                  |                      |                                 | XXX                | XXX       | XXX            | XXX  | XXX  | XXX  | XXX   | XXX   | XXX   | XXX   | XXX  | XXX                                       | XXX                                 | XXX  | XXX  | XXX   |
| 9799999. Total - Common Stocks  |                 |              |                  |                      |                                 |                    | XXX       |                |  |  |  |   |   |   |   |  |   |                                     |  | XXX  | XXX   |
| 9899999. Total - Preferred and Common Stocks                            |                 |              |                  |                      |                                 |                    | XXX       |                |  |  |  |   |   |   |   |  |   |                                     |  | XXX  | XXX   |
| 9999999 - Totals  |                 |              |                  |                      |                                 | 149,303            | XXX       | 154,378        | 142,830  |  | (905)  |   | (905)   |   | 149,303   |  |   |                                     | 3,392  | XXX  | XXX   |

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

SCHEDULE DB - PART A - SECTION 1

Showing all Options, Caps, Floors, Collars, Swaps and Forwards Open as of Current Statement Date

| 1                | 2   | 3                            | 4                      | 5   | 6          | 7                              | 8                  | 9               | 10  | 11   | 12   | 13                  | 14                            | 15   | 16         | 17  | 18   | 19                                       | 20  | 21                 | 22                                 | 23  |
|------------------|---|------------------------------|------------------------|---|------------|--------------------------------|--------------------|-----------------|---|--|--|---------------------|-------------------------------|------|------------|---|--|--|---|--------------------|------------------------------------|---|
| Description      | Description of Item(s) Hedged, Used for Income Generation or Replicated | Schedule/ Exhibit Identifier | Type(s) of Risk(s) (a) | Exchange, Counterparty or Central Clearinghouse | Trade Date | Date of Maturity or Expiration | Number or Contract | Notional Amount | Strike Price or Rate or Index Received (Paid) | Cumulative Price Year(s) Initial Cost or Premium (Received) Paid | Current Year Initial Cost or Premium Received Paid | Current Year Income | Book/ Adjusted Carrying Value | Code | Fair Value | Unrealized Valuation Increase/ (Decrease) | Total Foreign Exchange Change in B./A.C.V. | Current Year's (Amortization)/ Accretion | Adjustment to Carrying Value of Hedged Item | Potential Exposure | Credit Quality of Reference Entity | Hedge Effectiveness at Inception and at Quarter-end (b) |
| 1449999 - Totals |   |                              |                        |   |            |                                |                    |                 |   |  |  |                     |                               |      | XXX        |   |  |  |   |                    | XXX                                | XXX   |

|     |      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-----|------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| (a) | Code | Description of Hedged Risk(s)  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|     |      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|     |      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| (b) | Code | Financial or Economic Impact of the Hedge at the End of the Reporting Period |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|     |      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|     |      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## SCHEDULE DB - PART B - SECTION 1

[illegible][illegible]

E07

STATEMENT AS OF SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## SCHEDULE DB - PART D - SECTION 1

Counterparty Exposure for Derivative Instruments Open as of Current Statement Date

[illegible]

## Collateral for Derivative Instruments Open as of Current Statement Date

[illegible]

| 1  | 2                     | 3                       | 4           | 5          | 6         | 7                                  | 8                | 9                                 |
|--|-----------------------|-------------------------|-------------|------------|-----------|------------------------------------|------------------|-----------------------------------|
| Exchange, Counterparty<br>or Central Clearinghouse | Type of Asset Pledged | CUSIP<br>Identification | Description | Fair Value | Par Value | Book/Adjusted<br>Carrying<br>Value | Maturity<br>Date | Type of<br>Margin<br>(I, V or IV) |
| NONE   |                       |                         |             |            |           |                                    |                  |                                   |
| 02999999 - Total                                   |                       |                         |             |            |           | XXX                                | XXX              | XXX                               |

**SCHEDULE DL - PART 1**  
**SECURITIES LENDING COLLATERAL ASSETS**

| 1<br>CUSIP<br>Identification | 2<br>Description | 3<br>Code | 4<br>NAIC<br>Designation/<br>Market Indicator | 5<br>Fair Value | 6<br>Book/Adjusted<br>Carrying Value | 7<br>Maturity Date |
|------------------------------|------------------|-----------|---|-----------------|--------------------------------------|--------------------|
| NONE                         |                  |           |   |                 |                                      |                    |
| 9999999 - Totals             |                  |           |   |                 |                                      | XXX                |

General Interrogatories:

1. Total activity for the year to date Fair Value \$ ..... Book/Adjusted Carrying Value \$ .....
2. Average balance for the year to date Fair Value \$ ..... Book/Adjusted Carrying Value \$ .....
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:
- NAIC 1 \$ ..... NAIC 2 \$ ..... NAIC 3 \$ ..... NAIC 4 \$ ..... NAIC 5 \$ ..... NAIC 6 \$ .....

**SCHEDULE DL - PART 2**  
**SECURITIES LENDING COLLATERAL ASSETS**

| 1<br>CUSIP<br>Identification | 2<br>Description | 3<br>Code | 4<br>NAIC<br>Designation/<br>Market Indicator | 5<br>Fair Value | 6<br>Book/Adjusted<br>Carrying Value | 7<br>Maturity Date |
|------------------------------|------------------|-----------|---|-----------------|--------------------------------------|--------------------|
| NONE                         |                  |           |   |                 |                                      |                    |
| 9999999 - Totals             |                  |           |   |                 |                                      | XXX                |

General Interrogatories:

- E11



## SCHEDULE E - PART 1 - CASH

[illegible]

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

| 1                                | 2    | 3             | 4                | 5             | 6                               | 7                                     | 8                              |
|----------------------------------|------|---------------|------------------|---------------|---------------------------------|---------------------------------------|--------------------------------|
| Description                      | Code | Date Acquired | Rate of Interest | Maturity Date | Book/Adjusted<br>Carrying Value | Amount of Interest<br>Due and Accrued | Amount Received<br>During Year |
| NONE                             |      |               |                  |               |                                 |                                       |                                |
| 8699999 - Total Cash Equivalents |      |               |                  |               |                                 |                                       |                                |



SUPPLEMENT FOR THE QUARTER ENDING SEPTEMBER 30, 2013 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

Year To Date For The Period Ended SEPTEMBER 30, 2013

NAIC Group Code 0201 NAIC Company Code 13998

Company Name UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

1. Monoline Policies

|                                |                               |                                |
|--------------------------------|-------------------------------|--------------------------------|
| 1<br>Direct Written<br>Premium | 2<br>Direct Earned<br>Premium | 3<br>Direct Losses<br>Incurred |
| \$                             | \$                            | \$                             |

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?

Yes [ X ] No [ ]
- 2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated?

Yes [ X ] No [ ]
- 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

2.31 Amount quantified:

\$528

2.32 Amount estimated using reasonable assumptions:

\$
- 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.

\$