



ANNUAL STATEMENT  
FOR THE YEAR ENDED DECEMBER 31, 2013  
OF THE CONDITION AND AFFAIRS OF THE  
OHA INSURANCE SOLUTIONS, INC

NAIC Group Code	0000	(Current Period)	0000	(Prior Period)	NAIC Company Code	11841	Employer's ID Number	41-2111662
Organized under the Laws of	Ohio				State of Domicile or Port of Entry			Ohio
Country of Domicile	United States							
Incorporated/Organized	10/17/2003				Commenced Business			01/01/2004
Statutory Home Office	155 EAST BROAD STREET Suite 302				COLUMBUS, OH, US 43215-3619			
	(Street and Number)				(City or Town, State, Country and Zip Code)			
Main Administrative Office	155 EAST BROAD STREET Suite 302				COLUMBUS, OH, US 43215-3619			614-255-4840-140
	(Street and Number)				(City or Town, State, Country and Zip Code)			(Area Code) (Telephone Number)
Mail Address	155 EAST BROAD STREET Suite 302				COLUMBUS, OH, US 43215-3619			
	(Street and Number or P.O. Box)				(City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	155 EAST BROAD STREET Suite 302				COLUMBUS, OH, US 43215-3619			614-255-4840-140
	(Street and Number)				(City or Town, State, Country and Zip Code)			(Area Code) (Telephone Number)
Internet Website Address	WWW.OHAINSURANCE.COM							
Statutory Statement Contact	Ralph E Burnheimer				614-255-4840-140			
	(Name)				(Area Code) (Telephone Number) (Extension)			
	rburnheimer@ohainsurance.com				614-255-4839			
	(E-mail Address)				(Fax Number)			

OFFICERS

Name	Title	Name	Title
Gregg L. Hanson #	Chair, Chief Executive Officer & President	Richard G. Hayes #	Vice President, Treasurer
Amy T. Irish #	Vice President, Assistant Treasurer & Secretary	Mary L. Ursul #	Senior Vice President

OTHER OFFICERS

Wayne T. Zack #	Senior Vice President	Bradley D Lonsberry #	Vice President
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DIRECTORS OR TRUSTEES

Gregg L. Hanson #	Richard G Hayes #	Mary L. Ursul #	Wayne T. Zack #
Bradley D. Lonsberry #			

State of .....MA.....  
County of .....Suffolk..... ss

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

Gregg L. Hanson Chair, Chief Executive Officer & President	Richard G. Hayes Treasurer, Vice President	Amy T. Irish Vice President, Asst Treasurer & Secretary
Subscribed and sworn to before me this 01 day of 03, 2014		a. Is this an original filing? Yes [ X ] No [ ] b. If no, 1. State the amendment number 2. Date filed 02/28/2014 3. Number of pages attached
Catherine M. Gorman Notary Public March 7, 2014		



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHA INSURANCE SOLUTIONS, INC

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0000		BUSINESS IN THE STATE OF Ohio						DURING THE YEAR 2013				NAIC Company Code 11841	
Line of Business		Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire .....												
2.1	Allied lines .....												
2.2	Multiple peril crop .....												
2.3	Federal flood .....												
3.	Farmowners multiple peril .....												
4.	Homeowners multiple peril .....												
5.1	Commercial multiple peril (non-liability portion) .....												
5.2	Commercial multiple peril (liability portion) .....												
6.	Mortgage guaranty .....												
8.	Ocean marine .....												
9.	Inland marine .....												
10.	Financial guaranty .....												
11.	Medical professional liability .....	5,536,176	5,299,745		2,097,230	3,920,083	1,521,423	11,318,765	1,002,025	1,493,772	4,643,861	399,147	5,903
12.	Earthquake .....												
13.	Group accident and health (b).....												
14.	Credit A & H (group and individual) .....												
15.1	Collectively renewable A & H (b).....												
15.2	Non-cancelable A & H (b).....												
15.3	Guaranteed renewable A & H (b).....												
15.4	Non-renewable for stated reasons only (b).....												
15.5	Other accident only .....												
15.6	Medicare Title XVIII exempt from state taxes or fees.....												
15.7	All other A & H (b).....												
15.8	Federal Employees Health Benefits Plan premium (b).....												
16.	Workers' compensation .....												
17.1	Other liability - Occurrence.....					(53,529)		118,863		(25,622)	26,597		
17.2	Other Liability - Claims-Made.....	2,788,877	2,817,122		528,240	750,000	(1,497,863)	10,533,451	9,616	(139,745)	1,164,738	201,072	2,974
17.3	Excess workers' compensation .....												
18.	Products liability .....												
19.1	Private passenger auto no-fault (personal injury protection) .....												
19.2	Other private passenger auto liability .....												
19.3	Commercial auto no-fault (personal injury protection) .....												
19.4	Other commercial auto liability .....												
21.1	Private passenger auto physical damage .....												
21.2	Commercial auto physical damage .....												
22.	Aircraft (all perils) .....												
23.	Fidelity .....												
24.	Surety .....												
26.	Burglary and theft .....												
27.	Boiler and machinery .....												
28.	Credit .....												
30.	Warranty .....												
34.	Aggregate write-ins for other lines of business .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTALS (a) .....	8,325,053	8,116,867	0	2,625,470	4,670,083	(29,969)	21,971,079	1,011,641	1,328,405	5,835,196	600,220	8,877
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0 .  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHA INSURANCE SOLUTIONS, INC

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0000		BUSINESS IN THE STATE OF Consolidated				DURING THE YEAR 2013				NAIC Company Code 11841			
Line of Business		Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.1	Allied lines .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.2	Multiple peril crop .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.3	Federal flood .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3.	Farmowners multiple peril .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4.	Homeowners multiple peril .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1	Commercial multiple peril (non-liability portion) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2	Commercial multiple peril (liability portion) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6.	Mortgage guaranty .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8.	Ocean marine .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9.	Inland marine .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
10.	Financial guaranty .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11.	Medical professional liability .....	5,536,176	5,299,745	.0	2,097,230	3,920,083	1,521,423	11,318,765	1,002,025	1,493,772	4,643,861	399,147	5,903
12.	Earthquake .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
13.	Group accident and health (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14.	Credit A & H (group and individual) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1	Collectively renewable A & H (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2	Non-cancelable A & H (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3	Guaranteed renewable A & H (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.4	Non-renewable for stated reasons only (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.5	Other accident only .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.6	Medicare Title XVIII exempt from state taxes or fees.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.7	All other A & H (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.8	Federal Employees Health Benefits Plan premium (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
16.	Workers' compensation .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1	Other liability - Occurrence.....	.0	.0	.0	.0	.0	(53,529)	118,863	.0	(25,622)	26,597	.0	.0
17.2	Other Liability - Claims-Made.....	2,788,877	2,817,122	.0	528,240	750,000	(1,497,863)	10,533,451	9,616	(139,745)	1,164,738	201,072	2,974
17.3	Excess workers' compensation .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.	Products liability .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.1	Private passenger auto no-fault (personal injury protection) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2	Other private passenger auto liability .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3	Commercial auto no-fault (personal injury protection) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4	Other commercial auto liability .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.1	Private passenger auto physical damage .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2	Commercial auto physical damage .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
22.	Aircraft (all perils) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
23.	Fidelity .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
24.	Surety .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
26.	Burglary and theft .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
27.	Boiler and machinery .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
28.	Credit .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
30.	Warranty .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
34.	Aggregate write-ins for other lines of business .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
35.	TOTALS (a) .....	8,325,053	8,116,867	0	2,625,470	4,670,083	(29,969)	21,971,079	1,011,641	1,328,405	5,835,196	600,220	8,877
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0

Schedule F - Part 1

NONE

Schedule F - Part 2

NONE

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHA INSURANCE SOLUTIONS, INC

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable On								Reinsurance Payable		18	19		
						7	8	9	10	11	12	13	14	15	16			17	
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commis- sions	Cols. 7 thru 14 Totals	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17]	Funds Held By Company Under Reinsurance Treaties	
0499999 - Total - Authorized - Affiliates - U.S. Non-Pool														0			0		
0799999 - Total - Authorized - Affiliates - Other (Non-U.S.)														0			0		
0899999 - Total - Authorized - Affiliates						0	0	0	0	0	0	0	0	0	0	0	0	0	0
47-0698507	23680	Odyssey American Reinsurance Corp.	CT		344			213	5	1,199	192	54		1,662	325		1,338		
52-1952955	10357	Platinum Underwriters Reinsurance Inc.	MD		152			188	4	1,226	136	29		1,582	55		1,526		
13-5616275	19453	Transatlantic Reinsurance Company	NY		308	7	1	88	2	791	165	37		1,091	336		754		
13-3031176	38636	Partner Reinsurance Company of the US	NY					0	0	102	18			119	35		84		
42-0635534	15865	NCMIC Insurance Company	IA					0	0	71	17			88	27		62		
75-1444207	30058	SCOR Reinsurance Company	NY		326	7	1	0	0	361	74	45		488	183		305		
13-3138390	42307	Navigators Re	NY		109			0	0	78	14	15		107	40		66		
0999998 - Other U.S. Unaffil Insurers (Under \$100,000)														0			0		
0999999 - Authorized - Other U.S. Unaffiliated Insurers						1,240	14	2	488	11	3,827	615	180		5,137	1,002		4,135	
		Aspen Insurance UK Ltd.	GBR		293			209	5	1,226	191	45		1,675	304		1,372		
		Lloyd's Syndicate # 190 (FRW)	GBR							9	1			10	5		5		
		Lloyd's Syndicate # 435 (FDY)	GBR		424				0	1,127	178	63		1,367	293		1,074		
		Lloyd's Syndicate # 566 (STN)	GBR		267				0	644	119	35		798	223		576		
		Lloyd's Syndicate # 1200 (HMA)	GBR							165	28			193	47		146		
		Lloyd's Syndicate # 1955 (BAR)	GBR		172				0	404	85	27		516	187		329		
		Lloyd's Syndicate # 2000 (HAR)	GBR					98	2	67	8			175	3		173		
		Lloyd's Syndicate # 2001 (AML)	GBR		129				0	268	59	14		341	115		226		
		Lloyd's Syndicate # 2003 (SJC)	GBR		431			68	2	1,054	198	55		1,378	376		1,002		
		Lloyd's Syndicate # 2488 (AGM)	GBR					51	1	7	1			60	8		53		
		Lloyd's Syndicate # 2791 (MAP)	GBR							200	23			222	3		219		
		Lloyd's Syndicate # 2987 (BRT)	GBR		76					221	24	14		260	25		235		
		Lloyd's Syndicate # 4020 (ARK)	GBR		379				0	874	189	45		1,108	388		720		
		Lloyd's Syndicate # 4472 (LIB)	GBR		461			147	4	1,289	230	61		1,731	408		1,323		
		Hannover Ru.	DEU							0	0			0	3		(3)		
		Montpelier Re	BMU					77	2	46	5			130			130		
1299998 - Authorized - Other Non-U.S. Insurers (Under \$100,000)														0			0		
1299999 - Authorized - Other Non-U.S. Insurers						2,632		651	16	7,600	1,339	359		9,965	2,387		7,578		
1399999 - Total - Authorized						3,872	14	2	1,139	28	11,426	1,954	539	0	15,103	3,389	0	11,713	0
1799999 - Total - Unauthorized - Affiliates - U.S. Non-Pool														0			0		
2099999 - Total - Unauthorized - Affiliates - Other (Non-U.S.)														0			0		
2199999 - Total - Unauthorized - Affiliates						0	0	0	0	0	0	0	0	0	0	0	0	0	
2299998 - Unauthorized - Other U.S. Unaffiliated Insurers (Under \$100,000)														0			0		
		Paris Re	FRA							91	20			111	46		65		
		Alea London Re	GBR							39	4			44	5		39		
		Catlin Insurance Ltd.	BMU		348			111	3	1,033	177	48		1,372	307		1,064		
		QBE Reinsurance (Europe) Ltd.	GBR							29	3			32	5		27		
		American Safety Reinsurance Ltd.	BMU		131	2	0		0	218	41	18		280	83		197		
2599998 - Unauthorized - Other Non-U.S. Insurers (Under \$100,000)														0			0		
2599999 - Unauthorized - Other Non-U.S. Insurers						479	2	0	111	3	1,410	246	67		1,839	445		1,393	
2699999 - Total - Unauthorized						479	2	0	111	3	1,410	246	67	0	1,839	445	0	1,393	0
3099999 - Total - Certified - Affiliates - U.S. Non-Pool														0			0		
3399999 - Total - Certified - Affiliates - Other (Non-U.S.)														0			0		
3499999 - Total Certified - Affiliates						0	0	0	0	0	0	0	0	0	0	0	0	0	
3599998 - Certified - Other U.S. Unaffiliated Insurers (Under \$100,000)														0			0		
3899998 - Certified - Other Non-U.S. Insurers (under \$100,000)														0			0		
3999999 - Total Certified						0	0	0	0	0	0	0	0	0	0	0	0	0	0
4099999 - Total Authorized, Unauthorized and Certified						4,351	17	2	1,250	30	12,836	2,200	606	0	16,941	3,834	0	13,107	0

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHA INSURANCE SOLUTIONS, INC

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (000 Omitted)																		
1	2	3	4	5	6	Reinsurance Recoverable On									Reinsurance Payable		18	19
						7	8	9	10	11	12	13	14	15	16	17		
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commis- sions	Cols. 7 thru 14 Totals	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17]	Funds Held By Company Under Reinsurance Treaties
4199999 - Total Protected Cells														0			0	
9999999 Totals					4,351	17	2	1,250	30	12,836	2,200	606	0	16,941	3,834	0	13,107	0

NOTE: Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

	1	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1.	.....		
2.	.....		
3.	.....		
4.	.....		
5.	.....		

Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on the total recoverables, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
1.	Lloyd's Syndicate # 4472 (LIB).....	1,730,855	461,304	Yes [ ] No [ X ]
2.	Aspen Insurance UK Ltd.....	1,675,419	293,484	Yes [ ] No [ X ]
3.	Odyssey American Reinsurance Corp.....	1,662,328	344,121	Yes [ ] No [ X ]
4.	Platium Underwriters Reinsurance Inc.....	1,581,732	151,911	Yes [ ] No [ X ]
5.	Lloyd's syndicate # 2003 (SJC).....	1,378,106	430,922	Yes [ ] No [ X ]

SCHEDULE F - PART 4

Aging of Ceded Reinsurance as of December 31, Current Year (000 Omitted)												
Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses												
1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Current					11 Total Due Cols. 5 + 10		12 Percentage Overdue Col. 10/Col. 11	13 Percentage more Than 120 Days Overdue Col. 9 / Col. 11
				6 1 to 29 Days	7 30 - 90 Days	8 91 - 120 Days	9 Over 120 Days	10 Total Overdue Cols. 6 + 7 + 8 + 9				
0199999 - Authorized - Affiliates - U.S. Intercompany Pooling												0.0
0299999 - Authorized - Affiliates - U.S. Non-Pool - Captive												0.0
0399999 - Authorized - Affiliates - U.S. Non-Pool - Other												0.0
0499999 - Total - Authorized - Affiliates - U.S. Non-Pool								0	0			0.0
0599999 - Authorized - Affiliates - Other (Non-U.S.) - Captive												0.0
0699999 - Authorized - Affiliates - Other (Non-U.S.) - Other												0.0
0799999 - Total - Authorized - Affiliates - Other (Non-U.S.)								0	0			0.0
0899999 - Total - Authorized - Affiliates				0				0	0			0.0
13-5616275-19453-19453-Transatlantic Reinsurance Company			NY	8				8	8			0.0
75-1444207-30058-30058-SCOR Reinsurance Company			NY	8				8	8			0.0
0999999 - Authorized - Other U.S. Unaffiliated Insurers				16				16	16			0.0
1099999 - Authorized - Pools - Mandatory Pools												0.0
1199999 - Authorized - Pools - Voluntary Pools												0.0
1299999 - Authorized - Other Non-U.S. Insurers												0.0
1399999 - Total - Authorized												0.0
1499999 - Unauthorized - Affiliates - U.S. Intercompany Pooling				0		0	0	16	16			0.0
1599999 - Unauthorized - Affiliates - U.S. Non-Pool - Captive												0.0
1699999 - Unauthorized - Affiliates - U.S. Non-Pool - Other												0.0
1799999 - Total - Unauthorized - Affiliates - U.S. Non-Pool								0	0			0.0
1899999 - Unauthorized - Affiliates - Other (Non-U.S.) - Captive												0.0
1999999 - Unauthorized - Affiliates - Other (Non-U.S.) - Other												0.0
2099999 - Total - Unauthorized - Affiliates - Other (Non-U.S.)								0	0			0.0
2199999 - Total - Unauthorized - Affiliates				0		0	0	0	0			0.0
2299999 - Unauthorized - Other U.S. Unaffiliated Insurers												0.0
2399999 - Unauthorized - Pools - Mandatory Pools												0.0
2499999 - Unauthorized - Pools - Voluntary Pools												0.0
2599999 - Unauthorized - American Safety Reinsurance Ltd			BMU	2				2	2			0.0
2599999 - Unauthorized - Other Non-U.S. Insurers				2				2	2			0.0
2699999 - Total - Unauthorized				0		0	0	2	2			0.0
2799999 - Certified - Affiliates - U.S. Intercompany Pooling												0.0
2899999 - Certified - Affiliates - U.S. Non-Pool - Captive												0.0
2999999 - Certified - Affiliates - U.S. Non-Pool - Other												0.0
3099999 - Total - Certified - Affiliates - U.S. Non-Pool												0.0
3199999 - Certified - Affiliates - Other (Non-U.S.) - Captive									0			0.0
3299999 - Certified - Affiliates - Other (Non-U.S.) - Other												0.0
3399999 - Total - Certified - Affiliates												0.0
3499999 - Total - Certified - Affiliates				0		0	0	0	0			0.0
3599999 - Certified - Other U.S. Unaffiliated Insurers												0.0
3699999 - Certified - Pools - Mandatory Pools												0.0
3799999 - Certified - Pools - Voluntary Pools												0.0
3899999 - Certified - Other Non-U.S. Insurers												0.0
3999999 - Total - Certified				0		0	0	0	0			0.0
4099999 - Total - Authorized, Unauthorized and Certified				0		19	0	19	19			0.0
4199999 - Total - Protected Cells								0	0			0.0
99999999 Totals				0		19	0	19	19			0.0

## SCHEDULE F - PART 5

[illegible]

- (a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
1.	1	21000021	Nalixis	160
2.	1	021000089	Citibank	143
3.	1	021000089	Citibank	1,607
4.	1	021000089	Citibank	117
5.	1	72000096	Comerica	286



Schedule F - Part 6 SN 1

NONE

Schedule F - Part 6 SN1A Footnote Detail

NONE

Schedule F - Part 6 SN 2

NONE

Schedule F - Part 7

NONE

Schedule F - Part 8

NONE

SCHEDULE F - PART 9

Restatement of Balance Sheet to Identify Net Credit for Reinsurance			
	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<u>ASSETS</u> (Page 2, Col. 3)			
1. Cash and invested assets (Line 12) .....	41,169,837		41,169,837
2. Premiums and considerations (Line 15) .....	1,541,840		1,541,840
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	18,682		18,682
4 Funds held by or deposited with reinsured companies (Line 16.2).....	0		0
5. Other assets .....	905,152		905,152
6. Net amount recoverable from reinsurers .....		16,922,479	16,922,479
7. Protected cell assets (Line 27) .....	0		0
8. Totals (Line 28) .....	43,635,511	16,922,479	60,557,990
<u>LIABILITIES</u> (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	12,785,240	16,316,916	29,102,156
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	192,406		192,406
11. Unearned premiums (Line 9) .....	2,019,907	605,563	2,625,470
12. Advance premiums (Line 10) .....	49,200		49,200
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12) .....	3,834,428		3,834,428
15. Funds held by company under reinsurance treaties (Line 13) .....	0		0
16. Amounts withheld or retained by company for account of others (Line 14) .....	604,087		604,087
17. Provision for reinsurance (Line 16) .....	0		0
18. Other liabilities .....	269,000		269,000
19. Total liabilities excluding protected cell business (Line 26) .....	19,754,268	16,922,479	36,676,747
20. Protected cell liabilities (Line 27) .....	0		0
21. Surplus as regards policyholders (Line 37) .....	23,881,243	X X X	23,881,243
22. Totals (Line 38)	43,635,511	16,922,479	60,557,990

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?      Yes [    ] No [ X ]

If yes, give full explanation:  
.....

Schedule H - Part 1

NONE

Schedule H - Part 2

NONE

Schedule H - Part 3

NONE

Schedule H - Part 4

NONE

Schedule H - Part 5

NONE

Schedule P - Part 1A - Home/Farm

NONE

Schedule P - Part 1B - Private Passenger

NONE

Schedule P - Part 1C - Comm Auto/Truck

NONE

Schedule P - Part 1D - Workers' Comp

NONE

Schedule P - Part 1E - Comm Multi Peril

NONE

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

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12	
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10		11
				4	5	6	7	8	9		Salvage and Subrogation Received	
	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2004	98	26	72	0	0	0	0	0	0	0	0	0
3. 2005	290	87	203	0	0	0	0	0	0	0	0	0
4. 2006	615	161	454	0	0	1	0	12	0	0	13	1
5. 2007	291	22	269	0	0	0	0	0	0	0	0	0
6. 2008	240	19	221	0	0	0	0	0	0	0	0	0
7. 2009	155	36	120	0	0	3	0	0	0	0	3	0
8. 2010	600	48	552	1,025	500	148	55	32	0	0	651	3
9. 2011	316	25	290	0	0	0	0	4	0	0	4	1
10. 2012	352	28	323	0	0	0	0	0	0	0	0	0
11. 2013	198	16	182	0	0	7	0	13	0	0	20	1
12. Totals	XXX	XXX	XXX	1,025	500	160	55	61	0	0	691	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23  Salvage and Subrogation Anticipated	24  Total Net Losses and Expenses Unpaid	25  Number of Claims Outstanding - Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13  Direct and Assumed	14  Ceded	15  Direct and Assumed	16  Ceded	17  Direct and Assumed	18  Ceded	19  Direct and Assumed	20  Ceded					
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	2	1	0	0	1	0	0	0	0	2	0
4.	0	0	8	3	0	0	4	1	1	0	0	9	0
5.	0	0	7	3	0	0	3	1	1	0	0	7	0
6.	0	0	11	4	0	0	5	1	1	0	0	12	0
7.	0	0	15	6	0	0	8	2	2	0	0	17	0
8.	0	0	117	45	0	0	59	15	16	0	0	132	0
9.	0	0	95	34	0	0	48	10	13	0	0	111	0
10.	0	0	168	56	0	0	84	16	23	0	0	203	0
11.	10	0	115	39	13	0	58	11	17	0	0	162	1
12.	10	0	539	191	13	0	270	57	74	0	0	657	1

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	1	0	0	0.6	0.8	0.5	0	0	0.0	0	0
3.	4	1	3	1.3	1.3	1.3	0	0	0.0	1	1
4.	26	4	22	4.3	2.6	4.9	0	0	0.0	5	4
5.	11	4	7	3.8	16.1	2.8	0	0	0.0	4	3
6.	18	6	12	7.5	30.6	5.5	0	0	0.0	7	5
7.	28	8	20	17.8	22.0	16.6	0	0	0.0	9	8
8.	1,398	615	783	232.8	1,279.7	141.7	0	0	0.0	72	60
9.	159	44	115	50.4	174.1	39.7	0	0	0.0	61	50
10.	275	72	203	78.3	257.2	62.8	0	0	0.0	112	91
11.	232	50	182	117.0	312.5	100.0	0	0	0.0	86	76
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	358	299

SCHEDULE P - PART 1F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12	
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	12
				4	5	6	7	8	9			
Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported - Direct and Assumed	
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2004	1,873	531	1,342	0	0	17	0	315	0	0	332	1
3. 2005	6,179	1,557	4,622	1,849	500	646	137	364	0	0	2,222	37
4. 2006	8,396	2,032	6,364	3,042	760	957	49	618	0	0	3,808	35
5. 2007	8,234	2,130	6,104	2,731	800	1,400	133	561	0	0	3,759	47
6. 2008	8,262	1,150	7,112	2,540	1,000	1,785	92	528	0	0	3,762	38
7. 2009	7,770	1,772	5,998	2,965	500	1,551	55	663	0	0	4,625	61
8. 2010	7,166	1,789	5,377	1,270	25	680	3	596	0	0	2,518	57
9. 2011	5,984	1,546	4,438	1,988	458	728	80	492	0	0	2,670	43
10. 2012	5,266	1,500	3,765	522	72	261	9	391	0	0	1,093	29
11. 2013	5,102	1,695	3,406	0	0	35	0	140	0	0	176	11
12. Totals	XXX	XXX	XXX	16,909	4,115	8,060	558	4,669	0	0	24,965	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23  Salvage and Subrogation Anticipated	24  Total Net Losses and Expenses Unpaid	25  Number of Claims Outstanding - Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13  Direct and Assumed	14  Ceded	15  Direct and Assumed	16  Ceded	17  Direct and Assumed	18  Ceded	19  Direct and Assumed	20  Ceded					
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	10	0	0	0	0	0	0	10	1
5.	1,000	500	(20)	0	22	11	0	0	46	0	0	537	1
6.	525	0	(33)	4	163	0	4	2	31	0	0	685	4
7.	225	0	557	265	27	0	279	100	49	0	0	772	2
8.	450	0	408	330	200	0	217	154	59	0	0	850	5
9.	900	0	1,031	618	174	0	546	258	122	0	0	1,896	8
10.	565	0	1,833	773	219	3	939	265	162	0	0	2,678	15
11.	455	0	2,873	1,003	121	0	1,441	295	220	0	0	3,811	11
12.	4,120	500	6,649	2,993	936	14	3,426	1,073	689	0	0	11,240	47

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	332	0	332	17.7	0.0	24.8	0	0	0.0	0	0
3.	2,859	637	2,222	46.3	40.9	48.1	0	0	0.0	0	0
4.	4,627	809	3,818	55.1	39.8	60.0	0	0	0.0	0	10
5.	5,740	1,445	4,296	69.7	67.8	70.4	0	0	0.0	480	57
6.	5,545	1,098	4,447	67.1	95.4	62.5	0	0	0.0	489	196
7.	6,316	919	5,397	81.3	51.9	90.0	0	0	0.0	517	255
8.	3,880	512	3,368	54.1	28.6	62.6	0	0	0.0	528	322
9.	5,981	1,414	4,567	99.9	91.5	102.9	0	0	0.0	1,312	584
10.	4,892	1,121	3,771	92.9	74.7	100.2	0	0	0.0	1,626	1,052
11.	5,285	1,298	3,987	103.6	76.6	117.0	0	0	0.0	2,325	1,487
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	7,277	3,964

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

(\$000 Omitted)												
Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12  Number of Claims Reported - Direct and Assumed
	1  Direct and Assumed	2  Ceded	3  Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2004	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2005	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2006	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2007	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2008	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2009	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2010	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2011	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2012	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2013	0	0	0	0	0	0	0	0	0	0	0	XXX
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding - Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1.	xxx	xxx	xxx	xxx	xxx	xxx	0	0	xxx	0	0
2.	0	0	0	0.0	0	0.0	0	0	0.0	0	0
3.	0	0	0	0.0	0	0.0	0	0	0.0	0	0
4.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	xxx	xxx	xxx	xxx	xxx	xxx	0	0	xxx	0	0

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

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported - Direct and Assumed
				4	5	6	7	8	9			
Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)		
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2004	0	0	0	0	0	0	0	0	0	0	0	0
3. 2005	0	0	0	0	0	0	0	0	0	0	0	0
4. 2006	0	0	0	0	0	0	0	0	0	0	0	0
5. 2007	0	0	0	0	0	0	0	0	0	0	0	0
6. 2008	0	0	0	0	0	0	0	0	0	0	0	0
7. 2009	0	0	0	0	0	0	0	0	0	0	0	0
8. 2010	179	2	177	700	700	77	77	0	0	0	0	0
9. 2011	66	1	65	0	0	0	0	0	0	0	0	0
10. 2012	17	1	16	0	0	0	0	0	0	0	0	0
11. 2013	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	700	700	77	77	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23  Salvage and Subrogation Anticipated	24  Total Net Losses and Expenses Unpaid	25  Number of Claims Outstanding - Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13  Direct and Assumed	14  Ceded	15  Direct and Assumed	16  Ceded	17  Direct and Assumed	18  Ceded	19  Direct and Assumed	20  Ceded					
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	80	80	0	0	11	6	4	0	0	9	0
9.	0	0	39	39	0	0	7	3	2	0	0	5	0
10.	0	0	0	0	0	0	9	(1)	0	0	0	10	0
11.	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	0	0	119	119	0	0	27	9	7	0	0	24	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1.	xxx	xxx	xxx	xxx	xxx	xxx	0	0	xxx	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	872	863	9	487.4	47,712.2	5.2	0	0	0.0	0	9
9.	48	43	5	72.5	6,189.0	8.1	0	0	0.0	0	5
10.	9	(1)	10	53.3	(39.0)	61.3	0	0	0.0	0	10
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	xxx	xxx	xxx	xxx	xxx	xxx	0	0	xxx	0	24

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

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported - Direct and Assumed
	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	4	5	6	7	8	9	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2004	0	0	0	0	0	0	0	0	0	0	0	0
3. 2005	1,922	1,907	14	1	0	0	0	0	0	0	1	2
4. 2006	3,796	3,526	270	4	0	14	0	11	0	0	29	5
5. 2007	4,447	4,165	282	1,150	1,150	229	229	3	0	0	3	1
6. 2008	4,574	4,279	294	2,834	2,800	196	167	134	0	0	197	10
7. 2009	4,489	4,059	430	8	0	5	0	55	0	0	68	6
8. 2010	4,761	4,601	160	5	0	11	0	25	0	0	41	3
9. 2011	4,533	4,337	196	2	0	0	0	35	0	0	37	4
10. 2012	3,481	3,212	270	4	0	1	0	37	0	0	42	3
11. 2013	2,817	2,626	191	0	0	9	0	38	0	0	47	3
12. Totals	XXX	XXX	XXX	4,007	3,950	465	396	339	0	0	465	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23  Salvage and Subrogation Anticipated	24  Total Net Losses and Expenses Unpaid	25  Number of Claims Outstanding - Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13  Direct and Assumed	14  Ceded	15  Direct and Assumed	16  Ceded	17  Direct and Assumed	18  Ceded	19  Direct and Assumed	20  Ceded					
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	60	60	0	0	7	7	3	0	0	3	0
4.	0	0	208	208	0	0	23	23	10	0	0	10	0
5.	750	750	387	387	17	17	43	43	54	0	0	54	0
6.	0	0	524	524	0	0	58	58	26	0	0	26	0
7.	0	0	824	824	0	0	92	92	41	0	0	42	0
8.	0	0	1,417	1,415	0	0	158	158	71	0	0	74	0
9.	0	0	1,973	1,961	0	0	223	219	99	0	0	114	0
10.	85	0	2,070	2,041	20	0	239	229	109	0	0	253	2
11.	45	0	2,190	2,114	26	0	260	234	113	0	0	286	2
12.	880	750	9,653	9,533	62	17	1,102	1,061	526	0	0	864	4

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26  Direct and Assumed	27  Ceded	28  Net	29  Direct and Assumed	30  Ceded	31  Net	32  Loss	33  Loss Expense		35  Losses Unpaid	36 Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	71	67	4	3.7	3.5	27.7	0	0	0.0	0	3
4.	270	231	39	7.1	6.6	14.5	0	0	0.0	0	10
5.	2,632	2,575	57	59.2	61.8	20.3	0	0	0.0	0	54
6.	3,772	3,549	223	82.5	82.9	75.9	0	0	0.0	0	26
7.	1,025	915	110	22.8	22.5	25.5	0	0	0.0	1	41
8.	1,688	1,572	115	35.4	34.2	72.1	0	0	0.0	2	72
9.	2,331	2,180	151	51.4	50.3	77.3	0	0	0.0	12	103
10.	2,564	2,269	295	73.6	70.7	109.2	0	0	0.0	115	138
11.	2,682	2,348	334	95.2	89.4	174.7	0	0	0.0	121	166
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	250	614



Schedule P - Part 1I - Special Property

NONE

Schedule P - Part 1J - Auto Physical

NONE

Schedule P - Part 1K - Fidelity/Surety

NONE

Schedule P - Part 1L - Other

NONE

Schedule P - Part 1M - International

NONE

Schedule P - Part 1N - Reinsurance A

NONE

Schedule P - Part 1O - Reinsurance B

NONE

Schedule P - Part 1P - Reinsurance C

NONE

Schedule P - Part 1R - Prod Liab Occur

NONE

Schedule P - Part 1R - Prod Liab Claims

NONE

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

NONE

Schedule P - Part 1T - Warranty

NONE

Schedule P - Part 2A

NONE

Schedule P - Part 2B

NONE

Schedule P - Part 2C

NONE

Schedule P - Part 2D

NONE

Schedule P - Part 2E

NONE

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	One Year	Two Year
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	49	31	24	13	7	4	1	.1	.0	.0	.0	.0
3. 2005	XXX	115	98	57	34	20	7	.5	.3	2	(1)	(2)
4. 2006	XXX	XXX	259	162	107	68	30	18	10	9	(2)	(9)
5. 2007	XXX	XXX	XXX	97	72	50	24	15	8	7	(2)	(8)
6. 2008	XXX	XXX	XXX	XXX	86	66	39	24	14	11	(3)	(13)
7. 2009	XXX	XXX	XXX	XXX	XXX	65	46	35	21	18	(4)	(18)
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	347	458	779	735	(44)	277
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	169	123	99	(24)	(71)
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	226	180	(46)	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	153	XXX	XXX
12. Totals											(125)	156

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	886	525	343	167	15	15	17	17	17	17	.0	.0
3. 2005	XXX	2,977	2,806	2,758	2,297	2,137	1,962	1,970	1,858	1,858	.0	(112)
4. 2006	XXX	XXX	4,159	3,996	3,986	3,474	3,451	3,401	3,354	3,200	(154)	(201)
5. 2007	XXX	XXX	XXX	4,122	3,774	4,387	3,685	3,498	3,716	3,689	(27)	191
6. 2008	XXX	XXX	XXX	XXX	4,324	4,109	4,607	4,952	4,615	3,887	(728)	(1,065)
7. 2009	XXX	XXX	XXX	XXX	XXX	4,977	5,155	4,773	4,313	4,685	372	(88)
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	4,435	4,088	3,775	2,713	(1,062)	(1,375)
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,205	4,098	3,953	(145)	(252)
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,219	3,219	.99	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,627	XXX	XXX
12. Totals											(1,645)	(2,902)

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX
12. Totals											.0	.0

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	16	13	10	5	(5)	(8)
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	5	3	(2)	(3)
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	9	(4)	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX
12. Totals											(11)	(11)

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	129	104	62	34	11	1	1	1	1	.0	.0
4. 2006	XXX	XXX	255	200	129	50	18	19	18	18	.0	.0
5. 2007	XXX	XXX	XXX	265	193	67	34	26	18	.0	(18)	(26)
6. 2008	XXX	XXX	XXX	XXX	328	225	158	161	95	63	(32)	(97)
7. 2009	XXX	XXX	XXX	XXX	XXX	294	173	102	60	13	(47)	(89)
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	232	213	100	19	(81)	(193)
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	200	140	17	(122)	(183)
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	178	149	(29)	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	182	XXX	XXX
12. Totals											(330)	(589)

Schedule P - Part 2I  
**NONE**

Schedule P - Part 2J  
**NONE**

Schedule P - Part 2K  
**NONE**

Schedule P - Part 2L  
**NONE**

Schedule P - Part 2M  
**NONE**

Schedule P - Part 2N  
**NONE**

Schedule P - Part 2O  
**NONE**

Schedule P - Part 2P  
**NONE**

Schedule P - Part 2R - Prod Liab Occur  
**NONE**

Schedule P - Part 2R - Prod Liab Claims  
**NONE**

Schedule P - Part 2S  
**NONE**

Schedule P - Part 2T  
**NONE**

Schedule P - Part 3A  
**NONE**

Schedule P - Part 3B  
**NONE**

Schedule P - Part 3C  
**NONE**

Schedule P - Part 3D  
**NONE**

Schedule P - Part 3E  
**NONE**

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013		
1. Prior	.000.	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.1	.1	.1	.1	.1	.1	.1	.1	.0	.1
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.3	.3	.3	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	69	619	619	.2	.1
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.1
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	0	0

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

1. Prior	.000.	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.13	.15	.15	.15	.15	.17	.17	.17	.17	.0	.1
3. 2005	XXX	.121	.283	.1,247	.1,329	.1,438	.1,458	.1,465	.1,858	.1,858	.7	.30
4. 2006	XXX	XXX	.34	.1,040	.1,848	2,743	3,134	3,151	3,156	3,190	.11	.23
5. 2007	XXX	XXX	XXX	.172	.594	1,943	2,982	3,100	3,165	3,198	.9	.37
6. 2008	XXX	XXX	XXX	XXX	.154	.911	.1,739	2,707	2,871	3,233	.10	.24
7. 2009	XXX	XXX	XXX	XXX	XXX	.385	.912	1,990	3,177	3,962	.13	.46
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.100	.627	1,341	1,922	.8	.44
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.428	1,065	2,178	.4	.31
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.52	.702	.0	.14
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	0	0

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

1. Prior	.000.	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	XXX	XXX
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	XXX	XXX
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	XXX	XXX
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX	XXX
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	XXX
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

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

1. Prior	.000.	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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

1. Prior	.000.	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.1	.1	.1	.1	.1	.1	.1	.1	.1	.1
4. 2006	XXX	XXX	.4	.18	.18	.18	.18	.18	.18	.18	.4	.1
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.1
6. 2008	XXX	XXX	XXX	XXX	.23	.50	.56	.78	.63	.63	.7	.3
7. 2009	XXX	XXX	XXX	XXX	XXX	.3	.9	.12	.12	.12	.5	.1
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.13	.16	.16	.1	.2
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.2	.2	.2	.2	.2
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.4	.5	.1	.0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9	0	1

Schedule P - Part 3I  
**NONE**

Schedule P - Part 3J  
**NONE**

Schedule P - Part 3K  
**NONE**

Schedule P - Part 3L  
**NONE**

Schedule P - Part 3M  
**NONE**

Schedule P - Part 3N  
**NONE**

Schedule P - Part 3O  
**NONE**

Schedule P - Part 3P  
**NONE**

Schedule P - Part 3R - Prod Liab Occur  
**NONE**

Schedule P - Part 3R - Prod Liab Claims  
**NONE**

Schedule P - Part 3S  
**NONE**

Schedule P - Part 3T  
**NONE**

Schedule P - Part 4A  
**NONE**

Schedule P - Part 4B  
**NONE**

Schedule P - Part 4C  
**NONE**

Schedule P - Part 4D  
**NONE**

Schedule P - Part 4E  
**NONE**



SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.49	.31	.24	.13	.7	.4	.1	.1	.0	.0
3. 2005	XXX	115	98	57	34	20	.7	4	.3	.2
4. 2006	XXX	XXX	258	162	107	68	29	.17	10	.8
5. 2007	XXX	XXX	XXX	97	72	50	24	.15	.8	.7
6. 2008	XXX	XXX	XXX	XXX	.86	66	39	24	14	11
7. 2009	XXX	XXX	XXX	XXX	XXX	65	46	32	18	15
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	254	.66	161	.116
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	169	123	.99
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	226	180
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	123

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	842	.444	.329	.152	.0	.0	.0	.0	.0	.0
3. 2005	XXX	1,658	.658	.545	189	188	.0	.0	.0	.0
4. 2006	XXX	XXX	3,025	1,042	429	235	101	.52	29	.0
5. 2007	XXX	XXX	XXX	2,236	936	193	244	269	(9)	(20)
6. 2008	XXX	XXX	XXX	XXX	2,370	736	166	(9)	19	(34)
7. 2009	XXX	XXX	XXX	XXX	XXX	2,333	313	239	152	472
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	2,381	1,266	489	141
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,892	1,048	701
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,444	1,735
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,015

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.5
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.3
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.14	.9
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.1
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.3
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	16
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	174	40
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	102

Schedule P - Part 4I - Special Property

NONE

Schedule P - Part 4J

NONE

Schedule P - Part 4K

NONE

Schedule P - Part 4L

NONE

Schedule P - Part 4M

NONE

Schedule P - Part 4N

NONE

Schedule P - Part 4O

NONE

Schedule P - Part 4P

NONE

Schedule P - Part 4R - Prod Liab Occur

NONE

Schedule P - Part 4R - Prod Liab Claims

NONE

Schedule P - Part 4S

NONE

Schedule P - Part 4T  
**NONE**

Schedule P - Part 5A- SN1  
**NONE**

Schedule P - Part 5A- SN2  
**NONE**

Schedule P - Part 5A- SN3  
**NONE**

Schedule P - Part 5B- SN1  
**NONE**

Schedule P - Part 5B- SN2  
**NONE**

Schedule P - Part 5B- SN3  
**NONE**

Schedule P - Part 5C- SN1  
**NONE**

Schedule P - Part 5C- SN2  
**NONE**

Schedule P - Part 5C- SN3  
**NONE**

Schedule P - Part 5D- SN1  
**NONE**

Schedule P - Part 5D- SN2

NONE

Schedule P - Part 5D- SN3

NONE

Schedule P - Part 5E- SN1

NONE

Schedule P - Part 5E- SN2

NONE

Schedule P - Part 5E- SN3

NONE

SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	2	2
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	1	3	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	1	1	1	1	1	1	1	1
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	1	3	3	3
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	1	5	6	6	6	6	7	7
4. 2006	XXX	XXX	0	4	6	10	11	11	11	11
5. 2007	XXX	XXX	XXX	1	2	3	7	9	9	9
6. 2008	XXX	XXX	XXX	XXX	1	3	3	8	9	10
7. 2009	XXX	XXX	XXX	XXX	XXX	1	2	8	12	13
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	3	4	6	8
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	2	4
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	1	1	0	0	0	0	0	0	0	0
3. 2005	XXX	19	11	7	6	2	1	1	0	0
4. 2006	XXX	XXX	23	18	13	4	2	2	2	1
5. 2007	XXX	XXX	XXX	32	27	14	5	3	2	1
6. 2008	XXX	XXX	XXX	XXX	20	20	18	12	7	4
7. 2009	XXX	XXX	XXX	XXX	XXX	34	34	19	4	2
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	31	24	12	5
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	14	8
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	15
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	1	1	1	1	1	1	1	1	1	1
3. 2005	XXX	26	34	37	37	37	37	37	37	37
4. 2006	XXX	XXX	22	35	35	35	35	35	35	35
5. 2007	XXX	XXX	XXX	35	46	46	46	47	47	47
6. 2008	XXX	XXX	XXX	XXX	22	37	38	38	38	38
7. 2009	XXX	XXX	XXX	XXX	XXX	41	59	61	61	61
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	35	55	57	57
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34	43	43
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	29
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2004	0	0	0	0	0	0	0	0	0	0
3. 2005	XXX	0	0	0	0	0	0	0	0	0
4. 2006	XXX	XXX	0	0	0	0	0	0	0	0
5. 2007	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2008	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2009	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.1	.1	.1	.1	.1	.1	.1	.1
4. 2006	XXX	XXX	.4	.4	.4	.4	.4	.4	.4	.4
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.4	.6	.6	.6	.7	.7
7. 2009	XXX	XXX	XXX	XXX	XXX	.4	.5	.5	.5	.5
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.1	.1	.1
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.2	.2	.2
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.1	.1
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.1	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.6	.3	.1	.1	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.2	.1	.0	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.1	.2	.0	.0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.2
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.2

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.2	.2	.2	.2	.2	.2	.2	.2
4. 2006	XXX	XXX	.4	.5	.5	.5	.5	.5	.5	.5
5. 2007	XXX	XXX	XXX	.1	.1	.1	.1	.1	.1	.1
6. 2008	XXX	XXX	XXX	XXX	.10	.10	.10	.10	.10	.10
7. 2009	XXX	XXX	XXX	XXX	XXX	.6	.6	.6	.6	.6
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.1	.3	.3	.3
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.4	.4	.4
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.1	.3
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.3



Schedule P - Part 5R- SN1A

NONE

Schedule P - Part 5R- SN2A

NONE

Schedule P - Part 5R- SN3A

NONE

Schedule P - Part 5R- SN1B

NONE

Schedule P - Part 5R- SN2B

NONE

Schedule P - Part 5R- SN3B

NONE

Schedule P - Part 5T- SN1

NONE

Schedule P - Part 5T- SN2

NONE

Schedule P - Part 5T- SN3

NONE

Schedule P - Part 6C - SN1

NONE

Schedule P - Part 6C - SN2

NONE

Schedule P - Part 6D - SN1

NONE

Schedule P - Part 6D - SN2

NONE

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Premiums (Sch P, Part 1)	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Premiums (Sch P, Part 1)	0	0	0	0	0	0	0	0	0	0	XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.66	.66
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.17	.17	.0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.66
13. Earned Premiums (Sch P, Part 1)	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2009	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2010	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.1	.1
10. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.1	.1	.0
11. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.1
13. Earned Premiums (Sch P, Part 1)	0	0	0	0	0	0	0	0	0	0	XXX

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHA INSURANCE SOLUTIONS, INC

SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
1. Prior .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004 .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005 .....	XXX	1,922	1,922	1,922	1,922	1,922	1,922	1,922	1,922	1,922	.0
4. 2006 .....	XXX	XXX	3,796	3,796	3,796	3,796	3,796	3,796	3,796	3,796	.0
5. 2007 .....	XXX	XXX	XXX	4,447	4,447	4,447	4,447	4,447	4,447	4,447	.0
6. 2008 .....	XXX	XXX	XXX	XXX	4,574	4,574	4,574	4,574	4,574	4,574	.0
7. 2009 .....	XXX	XXX	XXX	XXX	XXX	4,489	4,489	4,489	4,489	4,489	.0
8. 2010 .....	XXX	XXX	XXX	XXX	XXX	XXX	4,716	4,716	4,716	4,716	.0
9. 2011 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,533	4,533	4,533	.0
10. 2012 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,481	3,481	.0
11. 2013 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,817	2,817
12. Total .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,817
13. Earned Premiums (Sch P, Part 1)	0	1,922	3,796	4,447	4,574	4,489	4,761	4,533	3,481	2,817	XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
1. Prior .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004 .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005 .....	XXX	1,907	1,907	1,907	1,907	1,907	1,907	1,907	1,907	1,907	.0
4. 2006 .....	XXX	XXX	3,526	3,526	3,526	3,526	3,526	3,526	3,526	3,526	.0
5. 2007 .....	XXX	XXX	XXX	4,165	4,165	4,165	4,165	4,165	4,165	4,165	.0
6. 2008 .....	XXX	XXX	XXX	XXX	4,279	4,279	4,279	4,279	4,279	4,279	.0
7. 2009 .....	XXX	XXX	XXX	XXX	XXX	4,059	4,059	4,059	4,059	4,059	.0
8. 2010 .....	XXX	XXX	XXX	XXX	XXX	XXX	4,601	4,601	4,601	4,601	.0
9. 2011 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,337	4,337	4,337	.0
10. 2012 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,212	3,212	.0
11. 2013 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,626	2,626
12. Total .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,626
13. Earned Premiums (Sch P, Part 1)	0	1,907	3,526	4,165	4,279	4,059	4,601	4,337	3,212	2,626	XXX

SCHEDULE P - PART 6M - INTERNATIONAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
1. Prior .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004 .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005 .....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006 .....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007 .....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008 .....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2009 .....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2010 .....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2011 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2012 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2013 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Premiums (Sch P, Part 1)	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
1. Prior .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2004 .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2005 .....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2006 .....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2007 .....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008 .....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2009 .....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2010 .....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2011 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2012 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2013 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Premiums (Sch P, Part 1)	0	0	0	0	0	0	0	0	0	0	XXX

Schedule P - Part 6N - SN1

NONE

Schedule P - Part 6N - SN2

NONE

Schedule P - Part 6O - SN1

NONE

Schedule P - Part 6O - SN2

NONE

Schedule P - Part 6R - SN1A

NONE

Schedule P - Part 6R - SN2A

NONE

Schedule P - Part 6R - SN1B

NONE

Schedule P - Part 6R - SN2B

NONE

Schedule P - Part 7A - Section 1

NONE

Schedule P - Part 7A - Section 2

NONE

Schedule P - Part 7A - Section 3

NONE

Schedule P - Part 7A - Section 4  
**NONE**

Schedule P - Part 7A - Section 5  
**NONE**

Schedule P - Part 7B - Section 1  
**NONE**

Schedule P - Part 7B - Section 2  
**NONE**

Schedule P - Part 7B - Section 3  
**NONE**

Schedule P - Part 7B - Section 4  
**NONE**

Schedule P - Part 7B - Section 5  
**NONE**

Schedule P - Part 7B - Section 6  
**NONE**

Schedule P - Part 7B - Section 7  
**NONE**

SCHEDULE P INTERROGATORIES

1.

The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1

Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost?  
If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:

Yes [ X ] No [ ]
- 1.2

What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?

.....574,000
- 1.3

Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65?

Yes [ X ] No [ ]
- 1.4

Does the company report any DDR reserve as loss or loss adjustment expense reserve?

Yes [ ] No [ X ]
- 1.5

If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2?

Yes [ X ] No [ ] N/A [ ]
- 1.6

If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior .....		
1.602	2004 .....		
1.603	2005 .....		
1.604	2006 .....		
1.605	2007 .....		
1.606	2008 .....		
1.607	2009 .....		
1.608	2010 .....		
1.609	2011 .....		
1.610	2012 .....		
1.611	2013 .....		
1.612	Totals	0	0

2.

The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement?

Yes [ X ] No [ ]
3.

The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Answer:

Yes [ X ] No [ ]
4.

Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10?

Yes [ ] No [ X ]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.

Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.
5.

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

5.1Fidelity

.....

5.2Surety

.....
6.

Claim count information is reported per claim or per claimant (indicate which).....CLAIM  
If not the same in all years, explain in Interrogatory 7.
- 7.1

The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses?

Yes [ ] No [ X ]
- 7.2

An extended statement may be attached.  
.....

SCHEDULE T – PART 2  
INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN

Allocated By States and Territories

States, Etc.		Direct Business Only					
		1	2	3	4	5	6
		Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	Totals
1. Alabama .....	AL .....						0
2. Alaska .....	AK .....						0
3. Arizona .....	AZ .....						0
4. Arkansas .....	AR .....						0
5. California .....	CA .....						0
6. Colorado .....	CO .....						0
7. Connecticut .....	CT .....						0
8. Delaware .....	DE .....						0
9. District of Columbia .....	DC .....						0
10. Florida .....	FL .....						0
11. Georgia .....	GA .....						0
12. Hawaii .....	HI .....						0
13. Idaho .....	ID .....						0
14. Illinois .....	IL .....						0
15. Indiana .....	IN .....						0
16. Iowa .....	IA .....						0
17. Kansas .....	KS .....						0
18. Kentucky .....	KY .....						0
19. Louisiana .....	LA .....						0
20. Maine .....	ME .....						0
21. Maryland .....	MD .....						0
22. Massachusetts .....	MA .....						0
23. Michigan .....	MI .....						0
24. Minnesota .....	MN .....						0
25. Mississippi .....	MS .....						0
26. Missouri .....	MO .....						0
27. Montana .....	MT .....						0
28. Nebraska .....	NE .....						0
29. Nevada .....	NV .....						0
30. New Hampshire .....	NH .....						0
31. New Jersey .....	NJ .....						0
32. New Mexico .....	NM .....						0
33. New York .....	NY .....						0
34. North Carolina .....	NC .....						0
35. North Dakota .....	ND .....						0
36. Ohio .....	OH .....						0
37. Oklahoma .....	OK .....						0
38. Oregon .....	OR .....						0
39. Pennsylvania .....	PA .....						0
40. Rhode Island .....	RI .....						0
41. South Carolina .....	SC .....						0
42. South Dakota .....	SD .....						0
43. Tennessee .....	TN .....						0
44. Texas .....	TX .....						0
45. Utah .....	UT .....						0
46. Vermont .....	VT .....						0
47. Virginia .....	VA .....						0
48. Washington .....	WA .....						0
49. West Virginia .....	WV .....						0
50. Wisconsin .....	WI .....						0
51. Wyoming .....	WY .....						0
52. American Samoa .....	AS .....						0
53. Guam .....	GU .....						0
54. Puerto Rico .....	PR .....						0
55. US Virgin Islands .....	VI .....						0
56. Northern Mariana Islands .....	MP .....						0
57. Canada .....	CAN .....						0
58. Aggregate Other Alien .....	OT .....						0
59. Totals		0	0	0	0	0	0

NONE



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

[illegible]

## 68

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHA INSURANCE SOLUTIONS, INC

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING

	RESPONSES
1. Will an actuarial opinion be filed by March 1?	.....YES.....
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	.....YES.....
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	.....YES.....
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	.....YES.....

APRIL FILING

5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	.....YES.....
6. Will Management's Discussion and Analysis be filed by April 1?	.....YES.....
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	.....YES.....

MAY FILING

8. Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	.....SEE EXPLANATION.....
---	---------------------------

JUNE FILING

9. Will an audited financial report be filed by June 1?	.....YES.....
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	.....YES.....

AUGUST FILING

11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	.....YES.....
--	---------------

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **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.

MARCH FILING

12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	.....SEE EXPLANATION.....
13. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	.....NO.....
14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	.....NO.....
15. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	.....YES.....
16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
17. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	.....NO.....
18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	.....SEE EXPLANATION.....
19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
20. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	.....YES.....
21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	.....YES.....
22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	.....SEE EXPLANATION.....
23. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
24. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
25. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	.....SEE EXPLANATION.....
26. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	.....SEE EXPLANATION.....
27. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	.....SEE EXPLANATION.....

APRIL FILING

28. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	.....NO.....
29. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	.....NO.....
30. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	.....NO.....
31. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	.....NO.....
32. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?	.....NO.....

AUGUST FILING

33. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	.....SEE EXPLANATION.....
--	---------------------------

Explanation:

8. Not Applicable
12. Not Required
13.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

14.

16.

17.

18. Not Required

19.

22. No Exceptions

23.

24.

25. N/A - No approval requested

26. N/A - No approval requested

27. N/A - No approval requested

28.

29.













30.

31.

32.

33. Not required.

Bar Code:

13.	 1 1 8 4 1 2 0 1 3 2 4 0 0 0 0 0 0
14.	 1 1 8 4 1 2 0 1 3 3 6 0 5 9 0 0 0
16.	 1 1 8 4 1 2 0 1 3 4 9 0 0 0 0 0 0
17.	 1 1 8 4 1 2 0 1 3 3 8 5 0 0 0 0 0
19.	 1 1 8 4 1 2 0 1 3 3 6 5 0 0 0 0 0
23.	 1 1 8 4 1 2 0 1 3 5 0 0 0 0 0 0 0
24.	 1 1 8 4 1 2 0 1 3 5 0 5 5 9 0 0 0
28.	 1 1 8 4 1 2 0 1 3 2 3 0 5 9 0 0 0
29.	 1 1 8 4 1 2 0 1 3 3 0 6 0 0 0 0 0
30.	 1 1 8 4 1 2 0 1 3 2 1 0 0 0 0 0 0
31.	 1 1 8 4 1 2 0 1 3 2 1 6 5 9 0 0 0
32.	 1 1 8 4 1 2 0 1 3 2 1 7 0 0 0 0 0

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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**OVERFLOW PAGE FOR WRITE-INS**

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SUPPLEMENT FOR DECEMBER 31, 2013 OF THE OHA INSURANCE SOLUTIONS, INC

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

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

States, Etc.		1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
				3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama	AL								
2. Alaska	AK								
3. Arizona	AZ								
4. Arkansas	AR								
5. California	CA								
6. Colorado	CO								
7. Connecticut	CT								
8. Delaware	DE								
9. District of Columbia	DC								
10. Florida	FL								
11. Georgia	GA								
12. Hawaii	HI								
13. Idaho	ID								
14. Illinois	IL								
15. Indiana	IN								
16. Iowa	IA								
17. Kansas	KS								
18. Kentucky	KY								
19. Louisiana	LA								
20. Maine	ME								
21. Maryland	MD								
22. Massachusetts	MA								
23. Michigan	MI								
24. Minnesota	MN								
25. Mississippi	MS								
26. Missouri	MO								
27. Montana	MT								
28. Nebraska	NE								
29. Nevada	NV								
30. New Hampshire	NH								
31. New Jersey	NJ								
32. New Mexico	NM								
33. New York	NY								
34. North Carolina	NC								
35. North Dakota	ND								
36. Ohio	OH	2,785,653	2,499,045	1,476,000	3	580,598	1,160,005	10	2,454,142
37. Oklahoma	OK								
38. Oregon	OR								
39. Pennsylvania	PA								
40. Rhode Island	RI								
41. South Carolina	SC								
42. South Dakota	SD								
43. Tennessee	TN								
44. Texas	TX								
45. Utah	UT								
46. Vermont	VT								
47. Virginia	VA								
48. Washington	WA								
49. West Virginia	WV								
50. Wisconsin	WI								
51. Wyoming	WY								
52. American Samoa	AS								
53. Guam	GU								
54. Puerto Rico	PR								
55. U.S. Virgin Islands	VI								
56. Northern Mariana Islands	MP								
57. Canada	CAN								
58. Aggregate other alien	OT	0	0	0	0	0	0	0	0
59. Totals		2,785,653	2,499,045	1,476,000	3	580,598	1,160,005	10	2,454,142
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998.	Sum. of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	0	0	0	0	0	0	0	0

SUPPLEMENT FOR DECEMBER 31, 2013 OF THE OHA INSURANCE SOLUTIONS, INC

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

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

States, Etc.		1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
				3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama	AL								
2. Alaska	AK								
3. Arizona	AZ								
4. Arkansas	AR								
5. California	CA								
6. Colorado	CO								
7. Connecticut	CT								
8. Delaware	DE								
9. District of Columbia	DC								
10. Florida	FL								
11. Georgia	GA								
12. Hawaii	HI								
13. Idaho	ID								
14. Illinois	IL								
15. Indiana	IN								
16. Iowa	IA								
17. Kansas	KS								
18. Kentucky	KY								
19. Louisiana	LA								
20. Maine	ME								
21. Maryland	MD								
22. Massachusetts	MA								
23. Michigan	MI								
24. Minnesota	MN								
25. Mississippi	MS								
26. Missouri	MO								
27. Montana	MT								
28. Nebraska	NE								
29. Nevada	NV								
30. New Hampshire	NH								
31. New Jersey	NJ								
32. New Mexico	NM								
33. New York	NY								
34. North Carolina	NC								
35. North Dakota	ND								
36. Ohio	OH	2,750,523	2,800,700	2,444,083	7	1,690,825	2,970,010	37	4,734,607
37. Oklahoma	OK								
38. Oregon	OR								
39. Pennsylvania	PA								
40. Rhode Island	RI								
41. South Carolina	SC								
42. South Dakota	SD								
43. Tennessee	TN								
44. Texas	TX								
45. Utah	UT								
46. Vermont	VT								
47. Virginia	VA								
48. Washington	WA								
49. West Virginia	WV								
50. Wisconsin	WI								
51. Wyoming	WY								
52. American Samoa	AS								
53. Guam	GU								
54. Puerto Rico	PR								
55. U.S. Virgin Islands	VI								
56. Northern Mariana Islands	MP								
57. Canada	CAN								
58. Aggregate other alien	OT	0	0	0	0	0	0	0	0
59. Totals		2,750,523	2,800,700	2,444,083	7	1,690,825	2,970,010	37	4,734,607
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998. Sum. of remaining write-ins for Line 58 from overflow page		0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)		0	0	0	0	0	0	0	0





SUPPLEMENT FOR DECEMBER 31, 2013 OF THE OHA INSURANCE SOLUTIONS, INC

Designate the type of health care providers  
reported on this page  
Other Health Care Professionals

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

States, Etc.		1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
				3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama	AL								
2. Alaska	AK								
3. Arizona	AZ								
4. Arkansas	AR								
5. California	CA								
6. Colorado	CO								
7. Connecticut	CT								
8. Delaware	DE								
9. District of Columbia	DC								
10. Florida	FL								
11. Georgia	GA								
12. Hawaii	HI								
13. Idaho	ID								
14. Illinois	IL								
15. Indiana	IN								
16. Iowa	IA								
17. Kansas	KS								
18. Kentucky	KY								
19. Louisiana	LA								
20. Maine	ME								
21. Maryland	MD								
22. Massachusetts	MA								
23. Michigan	MI								
24. Minnesota	MN								
25. Mississippi	MS								
26. Missouri	MO								
27. Montana	MT								
28. Nebraska	NE								
29. Nevada	NV								
30. New Hampshire	NH								
31. New Jersey	NJ								
32. New Mexico	NM								
33. New York	NY								
34. North Carolina	NC								
35. North Dakota	ND								
36. Ohio	OH								
37. Oklahoma	OK								
38. Oregon	OR								
39. Pennsylvania	PA								
40. Rhode Island	RI								
41. South Carolina	SC								
42. South Dakota	SD								
43. Tennessee	TN								
44. Texas	TX								
45. Utah	UT								
46. Vermont	VT								
47. Virginia	VA								
48. Washington	WA								
49. West Virginia	WV								
50. Wisconsin	WI								
51. Wyoming	WY								
52. American Samoa	AS								
53. Guam	GU								
54. Puerto Rico	PR								
55. U.S. Virgin Islands	VI								
56. Northern Mariana Islands	MP								
57. Canada	CAN								
58. Aggregate other alien	OT	0	0	0	0	0	0	0	0
59. Totals		0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998. Sum. of remaining write-ins for Line 58 from overflow page		0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)		0	0	0	0	0	0	0	0



SUPPLEMENT FOR DECEMBER 31, 2013 OF THE OHA INSURANCE SOLUTIONS, INC

Designate the type of health care providers  
reported on this page  
Other Health Care Facilities

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

States, Etc.		1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
				3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama	AL								
2. Alaska	AK								
3. Arizona	AZ								
4. Arkansas	AR								
5. California	CA								
6. Colorado	CO								
7. Connecticut	CT								
8. Delaware	DE								
9. District of Columbia	DC								
10. Florida	FL								
11. Georgia	GA								
12. Hawaii	HI								
13. Idaho	ID								
14. Illinois	IL								
15. Indiana	IN								
16. Iowa	IA								
17. Kansas	KS								
18. Kentucky	KY								
19. Louisiana	LA								
20. Maine	ME								
21. Maryland	MD								
22. Massachusetts	MA								
23. Michigan	MI								
24. Minnesota	MN								
25. Mississippi	MS								
26. Missouri	MO								
27. Montana	MT								
28. Nebraska	NE								
29. Nevada	NV								
30. New Hampshire	NH								
31. New Jersey	NJ								
32. New Mexico	NM								
33. New York	NY								
34. North Carolina	NC								
35. North Dakota	ND								
36. Ohio	OH								
37. Oklahoma	OK								
38. Oregon	OR								
39. Pennsylvania	PA								
40. Rhode Island	RI								
41. South Carolina	SC								
42. South Dakota	SD								
43. Tennessee	TN								
44. Texas	TX								
45. Utah	UT								
46. Vermont	VT								
47. Virginia	VA								
48. Washington	WA								
49. West Virginia	WV								
50. Wisconsin	WI								
51. Wyoming	WY								
52. American Samoa	AS								
53. Guam	GU								
54. Puerto Rico	PR								
55. U.S. Virgin Islands	VI								
56. Northern Mariana Islands	MP								
57. Canada	CAN								
58. Aggregate other alien	OT	0	0	0	0	0	0	0	0
59. Totals		0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998.	Sum. of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	0	0	0	0	0	0	0	0

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