



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | 250 |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | 250 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 3. Farmowners multiple peril | | | | | | | | | | | | |
| 4. Homeowners multiple peril | 503,047 | .134,316 | | 368,731 | .7,372 | .62,438 | .55,066 | | .13,162 | .13,162 | 108,296 | .10,061 |
| 5.1 Commercial multiple peril (non-liability portion) | | | | | | | | | | | | |
| 5.2 Commercial multiple peril (liability portion) | | | | | | | | | | | | |
| 6. Mortgage guaranty | | | | | | | | | | | | |
| 8. Ocean marine | | | | | | | | | | | | |
| 9. Inland marine | 105,488 | .22,985 | | .82,503 | | .15,974 | .15,974 | | 2,666 | 2,666 | 22,110 | 2,110 |
| 10. Financial guaranty | | | | | | | | | | | | |
| 11. Medical professional liability | | | | | | | | | | | | |
| 12. Earthquake | 15,286 | .3,927 | | .11,359 | | | | | | | | 3,274 |
| 13. Group accident and health (b) | | | | | | | | | | | | 306 |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health(b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | .117,012 | .29,249 | | .87,763 | | .25,657 | .25,657 | | .3,423 | .3,423 | .25,103 | 2,340 |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | 276,425 | .64,132 | | 212,293 | .8,400 | .15,775 | .7,375 | | 5,323 | 5,323 | .44,908 | 5,553 |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 Other commercial auto liability | | | | | | | | | | | | |
| 21.1 Private passenger auto physical damage | 156,758 | .36,237 | | .120,521 | .7,870 | .12,037 | .4,167 | | .3,008 | .3,008 | .25,282 | 3,135 |
| 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | 1,174,016 | 290,846 | | 883,170 | 23,642 | 131,881 | 108,239 | | 27,582 | 27,582 | 228,973 | 23,505 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$ 998

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 014

BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2014

NAIC Company Code 18961

(a) Finance and service charges not included in Lines 1 to 35 \$

(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

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ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF California

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | 9,131 | 7,030 | | 6,196 | 2,843 | 2,990 | 1,032 | 269 | 356 | 233 | 876 | 246 |
| 2.1 Allied lines | 1,921 | 1,540 | | 1,178 | 230 | 227 | 151 | 83 | 113 | 62 | 181 | 52 |
| 2.2 Multiple peril crop | | | | | | | | | | | | |
| 2.3 Federal flood | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 3. Farmowners multiple peril | | | | | | | | | | | | |
| 4. Homeowners multiple peril | 8,253,747 | 5,263,925 | | 4,907,081 | 4,831,843 | 5,666,990 | 1,295,935 | 50 | 250,665 | 365,740 | 1,872,225 | 266,876 |
| 5.1 Commercial multiple peril (non-liability portion) | | | | | | | | | | | | |
| 5.2 Commercial multiple peril (liability portion) | | | | | | | | | | | | |
| 6. Mortgage guaranty | | | | | | | | | | | | |
| 8. Ocean marine | | | | | | | | | | | | |
| 9. Inland marine | 1,091,521 | 655,549 | | 637,099 | 135,829 | 393,505 | 264,634 | | 41,560 | .42,279 | 243,839 | 28,758 |
| 10. Financial guaranty | | | | | | | | | | | | |
| 11. Medical professional liability | | | | | | | | | | | | |
| 12. Earthquake | 50,532 | 18,529 | | 32,002 | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health(b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | 106,578 | 35,801 | | 70,777 | 960 | 7,500 | 6,540 | | | | 22,594 | 3,005 |
| 17.1 Other Liability - occurrence | 1,209,785 | 644,025 | | 743,656 | | 357,918 | 455,118 | | | | 263,881 | .31,025 |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | 9,031 | 29,007 | | 1,048 | | 17,068 | 17,068 | | | | | |
| 27. Boiler and machinery | | | | | | | | | | | | |
| 28. Credit | | | | | | | | | | | | |
| 30. Warranty | | | | | | | | | | | | |
| 34. Aggregate write-ins for other lines of business | | | | | | | | | | | | |
| 35. TOTALS (a) | 10,732,246 | 6,655,406 | | 6,399,037 | 4,988,773 | 6,446,198 | 2,023,410 | 402 | 338,984 | 456,147 | 2,417,132 | 332,083 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$ 25,712

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 014

BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2014

NAIC Company Code 18961

(a) Finance and service charges not included in Lines 1 to 35 \$

(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

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ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

1 8 9 6 1 2 0 1 4 4 3 0 0 9 0 0

(a) Finance and service charges not included in Lines 1 to 35 \$

(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

19 DC



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 014

BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2014

NAIC Company Code 18961

(a) Finance and service charges not included in Lines 1 to 35 \$

(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

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ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0140 | BUSINESS IN THE STATE OF Illinois | | DURING THE YEAR 2014 | | | | | | | NAIC Company Code | 18961 | |
|---|-----------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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 | | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | | |
| 3. Farmowners multiple peril | | | | | | | | | | | | | |
| 4. Homeowners multiple peril | 1,440,294 | 686,107 | | | 814,400 | 583,428 | 898,496 | 318,193 | | .67,238 | .67,238 | 323,542 | 21,818 |
| 5.1 Commercial multiple peril (non-liability portion) | | | | | | | | | | | | | |
| 5.2 Commercial multiple peril (liability portion) | | | | | | | | | | | | | |
| 6. Mortgage guaranty | | | | | | | | | | | | | |
| 8. Ocean marine | | | | | | | | | | | | | |
| 9. Inland marine | 228,338 | 103,212 | | | 130,694 | 27,024 | 97,956 | 71,732 | | .11,973 | .11,973 | 50,954 | 3,413 |
| 10. Financial guaranty | | | | | | | | | | | | | |
| 11. Medical professional liability | | | | | | | | | | | | | |
| 12. Earthquake | 35,361 | 11,285 | | | 24,076 | | | | | | | | 7,827 |
| 13. Group accident and health (b) | | | | | | | | | | | | | 523 |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health(b) | | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | 285,301 | 134,383 | | | 165,375 | | 117,350 | 117,975 | | .15,723 | .15,723 | .63,829 | 4,283 |
| 17.2 Other Liability - claims made | | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | 660,040 | 309,183 | | | 381,944 | 87,225 | 164,793 | 79,319 | | .25,662 | .25,662 | 115,973 | .10,010 |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | | |
| 19.4 Other commercial auto liability | | | | | | | | | | | | | |
| 21.1 Private passenger auto physical damage | 398,655 | .210,400 | | | 209,214 | 178,320 | 208,460 | .31,390 | | .17,463 | .17,463 | .71,171 | .5,833 |
| 21.2 Commercial auto physical damage | | | | | | | | | | | | | .86 |
| 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 | | | | | | | | | | | | | |
| 35. TOTALS (a) | 3,047,989 | 1,454,570 | | | 1,725,703 | 882,763 | 1,493,721 | 618,609 | | 138,059 | 138,059 | 633,296 | 45,966 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$ 3,246

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0140 | BUSINESS IN THE STATE OF Indiana | | DURING THE YEAR 2014 | | | | | | | NAIC Company Code | 18961 | |
|---|---------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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 | | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | | |
| 3. Farmowners multiple peril | | | | | | | | | | | | | |
| 4. Homeowners multiple peril | 310,518 | 47,657 | | | 262,861 | | 19,534 | 19,534 | | 4,669 | 4,669 | 64,071 | 4,658 |
| 5.1 Commercial multiple peril (non-liability portion) | | | | | | | | | | | | | |
| 5.2 Commercial multiple peril (liability portion) | | | | | | | | | | | | | |
| 6. Mortgage guaranty | | | | | | | | | | | | | |
| 8. Ocean marine | | | | | | | | | | | | | |
| 9. Inland marine | 59,582 | 9,437 | | | 50,145 | | 6,559 | 6,559 | | 1,095 | 1,095 | 12,151 | 894 |
| 10. Financial guaranty | | | | | | | | | | | | | |
| 11. Medical professional liability | | | | | | | | | | | | | |
| 12. Earthquake | 20,582 | 3,382 | | | 17,200 | | | | | | | 4,172 | 309 |
| 13. Group accident and health (b) | | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health(b) | | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | 55,039 | 8,682 | | | 46,358 | | 7,609 | 7,609 | | 1,017 | 1,017 | 11,349 | 826 |
| 17.2 Other Liability - claims made | | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | 104,637 | 15,302 | | | 89,334 | 2,128 | 3,888 | 1,760 | | 1,270 | 1,270 | 16,386 | 1,581 |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | | |
| 19.4 Other commercial auto liability | | | | | | | | | | | | | |
| 21.1 Private passenger auto physical damage | 86,117 | 12,689 | | | 73,428 | 15,328 | 20,928 | 5,600 | | 1,053 | 1,053 | 13,548 | 1,292 |
| 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 | | | | | | | | | | | | | |
| 35. TOTALS (a) | 636,475 | 97,149 | | | 539,326 | 17,456 | 58,518 | 41,062 | | 9,104 | 9,104 | 121,677 | 9,560 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$ 588

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

(a) Finance and service charges not included in Lines 1 to 35 \$

(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

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ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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

NONE



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | 250 |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | 250 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | 1,500 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 3. Farmowners multiple peril | | | | | | | | | | | | |
| 4. Homeowners multiple peril | 54,590 | 3,316 | | 51,275 | | 1,359 | 1,359 | | 325 | 325 | 11,222 | 6,424 |
| 5.1 Commercial multiple peril (non-liability portion) | | | | | | | | | | | | |
| 5.2 Commercial multiple peril (liability portion) | | | | | | | | | | | | |
| 6. Mortgage guaranty | | | | | | | | | | | | |
| 8. Ocean marine | | | | | | | | | | | | |
| 9. Inland marine | 4,805 | 258 | | 4,547 | | 179 | 179 | | 30 | 30 | 966 | 168 |
| 10. Financial guaranty | | | | | | | | | | | | |
| 11. Medical professional liability | | | | | | | | | | | | |
| 12. Earthquake | 3,333 | 94 | | 3,239 | | | | | | | 763 | 117 |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health(b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | 6,284 | 426 | | 5,858 | | 373 | 373 | | 50 | 50 | 1,275 | 220 |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | 20,698 | 1,322 | | 19,376 | | 152 | 152 | | 110 | 110 | 3,172 | 728 |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 Other commercial auto liability | | | | | | | | | | | | |
| 21.1 Private passenger auto physical damage | 12,348 | 755 | | 11,593 | | 87 | 87 | | 63 | 63 | 1,901 | 432 |
| 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | 102,058 | 6,171 | | 95,888 | | 2,150 | 2,150 | | 578 | 578 | 19,299 | 8,089 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$ 77

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

(a) Finance and service charges not included in Lines 1 to 35 \$

(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

19.NH



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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

NONE



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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

NONE



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 3. Farmowners multiple peril | | | | | | | | | | | | |
| 4. Homeowners multiple peril | 223,978 | 34,186 | | 189,792 | | 14,016 | 14,016 | | 3,350 | 3,350 | .48,572 | 5,527 |
| 5.1 Commercial multiple peril (non-liability portion) | | | | | | | | | | | | |
| 5.2 Commercial multiple peril (liability portion) | | | | | | | | | | | | |
| 6. Mortgage guaranty | | | | | | | | | | | | |
| 8. Ocean marine | | | | | | | | | | | | |
| 9. Inland marine | 37,307 | 6,639 | | 30,668 | 6,487 | 11,101 | 4,614 | | 770 | 770 | 8,145 | 560 |
| 10. Financial guaranty | | | | | | | | | | | | |
| 11. Medical professional liability | | | | | | | | | | | | |
| 12. Earthquake | 6,101 | .757 | | 5,344 | | | | | | | | .1,248 |
| 13. Group accident and health (b) | | | | | | | | | | | | .92 |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health(b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | 32,585 | 5,141 | | 27,445 | | 4,513 | 4,513 | | 601 | 601 | 6,926 | 489 |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | 81,565 | 13,480 | | 68,084 | 1,462 | 3,012 | 1,550 | | 1,119 | 1,119 | .13,400 | 1,231 |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 Other commercial auto liability | | | | | | | | | | | | |
| 21.1 Private passenger auto physical damage | 81,617 | 12,961 | | 68,656 | | 1,491 | 1,491 | | 1,076 | 1,076 | .13,592 | 1,224 |
| 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | 463,153 | 73,164 | | 389,989 | 7,949 | 34,133 | 26,184 | | 6,916 | 6,916 | 91,883 | 9,123 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$ 336

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | 1,000 |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | 1,000 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 3. Farmowners multiple peril | | | | | | | | | | | | |
| 4. Homeowners multiple peril | 36,119 | 7,287 | | | 28,832 | | | 2,988 | 2,988 | 714 | 714 | 7,931 |
| 5.1 Commercial multiple peril (non-liability portion) | | | | | | | | | | | | 542 |
| 5.2 Commercial multiple peril (liability portion) | | | | | | | | | | | | |
| 6. Mortgage guaranty | | | | | | | | | | | | |
| 8. Ocean marine | | | | | | | | | | | | |
| 9. Inland marine | 4,742 | 847 | | | 3,895 | | | 589 | 589 | .98 | .98 | 984 |
| 10. Financial guaranty | | | | | | | | | | | | .71 |
| 11. Medical professional liability | | | | | | | | | | | | |
| 12. Earthquake | 2,966 | 563 | | | 2,402 | | | | | | | 650 |
| 13. Group accident and health (b) | | | | | | | | | | | | .45 |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health(b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | 5,989 | 1,241 | | | 4,748 | | | 1,088 | 1,088 | 145 | 145 | 1,331 |
| 17.2 Other Liability - claims made | | | | | | | | | | | | .90 |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | 3,052 | 504 | | | 2,548 | | | .58 | .58 | .42 | .42 | 475 |
| 19.2 Other private passenger auto liability | 16,664 | 2,874 | | | 13,790 | | | 330 | 330 | 239 | 239 | 2,614 |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | .46 |
| 19.4 Other commercial auto liability | | | | | | | | | | | | 251 |
| 21.1 Private passenger auto physical damage | 6,835 | 1,245 | | | 5,589 | | | 143 | 143 | 103 | 103 | 1,076 |
| 21.2 Commercial auto physical damage | | | | | | | | | | | | 103 |
| 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | 76,367 | 14,561 | | | 61,804 | | | 5,196 | 5,196 | 1,341 | 1,341 | 15,061 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$ 63

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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

NONE



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | 100 |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | 100 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 3. Farmowners multiple peril | | | | | | | | | | | | |
| 4. Homeowners multiple peril | 113,582 | 6,013 | | 107,569 | | 2,465 | 2,465 | | 599 | 599 | 22,961 | 1,817 |
| 5.1 Commercial multiple peril (non-liability portion) | | | | | | | | | | | | |
| 5.2 Commercial multiple peril (liability portion) | | | | | | | | | | | | |
| 6. Mortgage guaranty | | | | | | | | | | | | |
| 8. Ocean marine | | | | | | | | | | | | |
| 9. Inland marine | 17,547 | 848 | | 16,699 | | 590 | 590 | | .98 | .98 | 3,563 | 281 |
| 10. Financial guaranty | | | | | | | | | | | | |
| 11. Medical professional liability | | | | | | | | | | | | |
| 12. Earthquake | 695 | 69 | | .626 | | | | | | | | 139 |
| 13. Group accident and health (b) | | | | | | | | | | | | 11 |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health(b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | 15,829 | .779 | | 15,050 | | .683 | .683 | | .91 | .91 | 3,231 | 253 |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | 3,496 | .160 | | 3,336 | | .18 | .18 | | .13 | .13 | 529 | .56 |
| 19.2 Other private passenger auto liability | 44,689 | 2,179 | | 42,510 | | 251 | 251 | | 181 | 181 | 6,831 | 574 |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 Other commercial auto liability | | | | | | | | | | | | |
| 21.1 Private passenger auto physical damage | 35,213 | 1,841 | | 33,372 | | .212 | .212 | | .153 | .153 | 5,355 | 564 |
| 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | 231,051 | 11,889 | | 219,162 | | 4,219 | 4,219 | | 1,125 | 1,125 | 42,609 | 3,556 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$ 168

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 3. Farmowners multiple peril | | | | | | | | | | | | |
| 4. Homeowners multiple peril | 365,828 | 74,569 | | 291,259 | | 30,571 | 30,571 | | 7,307 | 7,307 | .77,853 | 7,259 |
| 5.1 Commercial multiple peril (non-liability portion) | | | | | | | | | | | | |
| 5.2 Commercial multiple peril (liability portion) | | | | | | | | | | | | |
| 6. Mortgage guaranty | | | | | | | | | | | | |
| 8. Ocean marine | | | | | | | | | | | | |
| 9. Inland marine | 150,807 | 29,698 | | 121,110 | | 20,640 | 20,640 | | 3,445 | 3,445 | .31,833 | 3,016 |
| 10. Financial guaranty | | | | | | | | | | | | |
| 11. Medical professional liability | | | | | | | | | | | | |
| 12. Earthquake | 140,579 | 28,457 | | 112,122 | | | | | | | | 30,413 |
| 13. Group accident and health (b) | | | | | | | | | | | | 2,812 |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health(b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | 136,792 | 25,469 | | 111,323 | | 22,319 | 22,319 | | 2,980 | 2,980 | .28,840 | 2,736 |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | 41,543 | 7,375 | | 34,168 | | 846 | 846 | | 610 | 610 | .6,555 | 831 |
| 19.2 Other private passenger auto liability | 230,888 | 40,159 | | 190,728 | | 6,121 | 6,121 | | 3,335 | 3,335 | .36,390 | 4,639 |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 Other commercial auto liability | | | | | | | | | | | | |
| 21.1 Private passenger auto physical damage | 130,430 | 23,366 | | 107,064 | 568 | 3,255 | 2,687 | | 1,939 | 1,939 | .20,713 | 2,609 |
| 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | 1,196,867 | 229,093 | | 967,774 | 3,884 | 87,068 | 83,184 | | 19,616 | 19,616 | .232,597 | 23,902 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$ 784

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | 208 |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | 208 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancellable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | | | | | | | | | | | | |
| 17.1 Other Liability - occurrence | | | | | | | | | | | | |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.2 Other private passenger auto liability | | | | | | | | | | | | |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 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 | | | | | | | | | | | | |
| 35. TOTALS (a) | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$

(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 2014 OF THE CRESTBROOK INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0140

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2014

NAIC Company Code 18961

| 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 | 9,131 | 7,030 | | 6,196 | 2,843 | 2,990 | 1,032 | 269 | 356 | 233 | 876 | 246 |
| 2.1 Allied lines | 1,921 | 1,540 | | 1,178 | 230 | 227 | 151 | 83 | 113 | 62 | 181 | 52 |
| 2.2 Multiple peril crop | | | | | | | | | | | | |
| 2.3 Federal flood | | | | | | | | | | | | |
| 2.4. Private crop | | | | | | | | | | | | |
| 3. Farmowners multiple peril | | | | | | | | | | | | |
| 4. Homeowners multiple peril | 11,301,703 | 6,257,376 | | 7,021,800 | 5,422,643 | 6,698,857 | 1,740,127 | 50 | 348,019 | 463,094 | 2,536,673 | 326,482 |
| 5.1 Commercial multiple peril (non-liability portion) | | | | | | | | | | | | |
| 5.2 Commercial multiple peril (liability portion) | | | | | | | | | | | | |
| 6. Mortgage guaranty | | | | | | | | | | | | |
| 8. Ocean marine | | | | | | | | | | | | |
| 9. Inland marine | 1,700,137 | 829,473 | | 1,077,360 | 169,340 | 547,093 | 385,511 | | 61,735 | 62,454 | 374,545 | 39,271 |
| 10. Financial guaranty | | | | | | | | | | | | |
| 11. Medical professional liability | | | | | | | | | | | | |
| 12. Earthquake | 275,435 | 67,063 | | 208,370 | | | | | | | | |
| 13. Group accident and health (b) | | | | | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | | | | | |
| 15.1 Collectively renewable accident and health (b) | | | | | | | | | | | | |
| 15.2 Non-cancelable accident and health(b) | | | | | | | | | | | | |
| 15.3 Guaranteed renewable accident and health(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 accident and health (b) | | | | | | | | | | | | |
| 15.8 Federal employees health benefits plan premium (b) | | | | | | | | | | | | |
| 16. Workers' compensation | 106,578 | 35,801 | | 70,777 | 960 | 7,500 | 6,540 | | | | 22,594 | 4,813 |
| 17.1 Other Liability - occurrence | 1,864,616 | 849,395 | | 1,207,576 | | 537,510 | 635,335 | | 70,320 | 71,863 | 405,765 | 42,262 |
| 17.2 Other Liability - claims made | | | | | | | | | | | | |
| 17.3 Excess workers' compensation | | | | | | | | | | | | |
| 18. Products liability | | | | | | | | | | | | |
| 19.1 Private passenger auto no-fault (personal injury protection) | 48,091 | 8,039 | | 40,052 | | 922 | 922 | | 665 | 665 | 7,559 | 933 |
| 19.2 Other private passenger auto liability | 1,435,606 | 448,631 | | 1,018,059 | 99,215 | 194,322 | 96,858 | | 37,239 | 37,239 | 239,674 | 24,996 |
| 19.3 Commercial auto no-fault (personal injury protection) | | | | | | | | | | | | |
| 19.4 Other commercial auto liability | | | | | | | | | | | | |
| 21.1 Private passenger auto physical damage | 907,973 | 299,494 | | 629,437 | 202,086 | 246,613 | 45,777 | | 24,858 | 24,858 | 152,638 | 15,192 |
| 21.2 Commercial auto physical damage | | | | | | | | | | | | |
| 22. Aircraft (all perils) | | | | | | | | | | | | |
| 23. Fidelity | | | | | | | | | | | | |
| 24. Surety | | | | | | | | | | | | |
| 26. Burglary and theft | 9,031 | 29,007 | | 1,048 | | 27,150 | 27,050 | | | | | |
| 27. Boiler and machinery | | | | | | | | | | | | |
| 28. Credit | | | | | | | | | | | | |
| 30. Warranty | | | | | | | | | | | | |
| 34. Aggregate write-ins for other lines of business | | | | | | | | | | | | |
| 35. TOTALS (a) | 17,660,222 | 8,832,849 | | 11,281,853 | 5,924,467 | 8,263,084 | 2,912,253 | 402 | 543,305 | 660,468 | 3,802,527 | 460,240 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | | | | | | | | | | | | |

(a) Finance and service charges not included in Lines 1 to 35 \$ 31,972

(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

Schedule F - Part 1

N O N E

Schedule F - Part 2

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

SCHEDULE F - PART 3

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

| 1 ID Number | 2 NAIC Com- pany Code | 3 Name of Reinsurer | 4 Domiciliary Jurisdiction | 5 Reinsurance Contracts Ceding 75% or More of Direct Premiums Written | 6 Reinsurance Premiums Ceded | Reinsurance Recoverable On | | | | | | | | | | 18 Reinsurance Payable | 19 Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17] | 18 Funds Held By Company Under Reinsurance Treaties |
|--|-----------------------------------|-------------------------------------|----------------------------------|--|---------------------------------------|----------------------------|---------------|-------------------------------------|-------------------------------------|-----------------------------|----------------------------|----------------------------|--------------------------------------|--------------------------------------|------------------------------------|------------------------------|--|--|
| | | | | | | 7 Paid Losses | 8 Paid LAE | 9 Known Case Loss Reserves | 10 Known Case LAE Reserves | 11 IBNR Loss Reserves | 12 IBNR LAE Reserves | 13 Unearned Premiums | 14 Contingent Commis- sions | 15 Columns 7 thru 14 Totals | 16 Ceded Balances Payable | | | |
| 31-4177100 | 23787 | Nationwide Mutual Insurance Company | OH | | 17,659 | 3,756 | 1 | 1,141 | 14 | 1,771 | 723 | 11,281 | 323 | 19,010 | 6,510 | | 12,500 | |
| 0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling | | | | | 17,659 | 3,756 | 1 | 1,141 | 14 | 1,771 | 723 | 11,281 | 323 | 19,010 | 6,510 | | 12,500 | |
| 0499999. Total Authorized - Affiliates - U.S. Non-Pool | | | | | | | | | | | | | | | | | | |
| 0799999. Total Authorized - Affiliates - Other (Non-U.S.) | | | | | | | | | | | | | | | | | | |
| 0899999. Total Authorized - Affiliates | | | | | 17,659 | 3,756 | 1 | 1,141 | 14 | 1,771 | 723 | 11,281 | 323 | 19,010 | 6,510 | | 12,500 | |
| 0999998. Total Authorized - Other U.S. Unaffiliated Insurers (Under \$100,000) | | | | | | | | | | | | | | | | | | |
| 0999999. Total Authorized - Other U.S. Unaffiliated Insurers | | | | | | | | | | | | | | | | | | |
| AA-9991500 ..00000 .. ILLINOIS MINE SUBSIDENCE FUND | IL | | | | 1 | | | | | | | | 1 | | 1 | 1 | | |
| 1099999. Total Authorized - Pools - Mandatory Pools | | | | | | 1 | | | | | | | 1 | | 1 | 1 | | |
| 1299998. Total Authorized - Other Non-U.S. Insurers (Under \$100,000) | | | | | | | | | | | | | | | | | | |
| 1299999. Total Authorized - Other Non-U.S. Insurers | | | | | | | | | | | | | | | | | | |
| 1399999. Total Authorized | | | | | 17,660 | 3,756 | 1 | 1,141 | 14 | 1,771 | 723 | 11,282 | 323 | 19,011 | 6,511 | | 12,500 | |
| 1799999. Total Unauthorized - Affiliates - U.S. Non-Pool | | | | | | | | | | | | | | | | | | |
| 2099999. Total Unauthorized - Affiliates - Other (Non-U.S.) | | | | | | | | | | | | | | | | | | |
| 2199999. Total Unauthorized - Affiliates | | | | | | | | | | | | | | | | | | |
| 2299998. Total Unauthorized - Other U.S. Unaffiliated Insurers (Under \$100,000) | | | | | | | | | | | | | | | | | | |
| 2299999. Total Unauthorized - Other U.S. Unaffiliated Insurers | | | | | | | | | | | | | | | | | | |
| 2599998. Total Unauthorized - Other Non-U.S. Insurers (Under \$100,000) | | | | | | | | | | | | | | | | | | |
| 2599999. Total Unauthorized - Other Non-U.S. Insurers | | | | | | | | | | | | | | | | | | |
| 2699999. Total Unauthorized | | | | | | | | | | | | | | | | | | |
| 3099999. Total Certified - Affiliates - U.S. Non-Pool | | | | | | | | | | | | | | | | | | |
| 3399999. Total Certified - Affiliates - Other (Non-U.S.) | | | | | | | | | | | | | | | | | | |
| 3499999. Total Certified - Affiliates | | | | | | | | | | | | | | | | | | |
| 3599998. Total Certified - Other U.S. Unaffiliated Insurers (Under \$100,000) | | | | | | | | | | | | | | | | | | |
| 3599999. Total Certified - Other U.S. Unaffiliated Insurers | | | | | | | | | | | | | | | | | | |
| 3899998. Total Certified - Other Non-U.S. Insurers (Under \$100,000) | | | | | | | | | | | | | | | | | | |
| 3899999. Total Certified - Other Non-U.S. Insurers | | | | | | | | | | | | | | | | | | |
| 3999999. Total Certified | | | | | | | | | | | | | | | | | | |
| 4099999. Total Authorized, Unauthorized and Certified | | | | | 17,660 | 3,756 | 1 | 1,141 | 14 | 1,771 | 723 | 11,282 | 323 | 19,011 | 6,511 | | 12,500 | |
| 4199999. Total Protected Cells | | | | | | | | | | | | | | | | | | |
| 9999999 Totals | | | | | 17,660 | 3,756 | 1 | 1,141 | 14 | 1,771 | 723 | 11,282 | 323 | 19,011 | 6,511 | | 12,500 | |

NOTE: A. 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 Name of Reinsurer | 2 Commission Rate | 3 Ceded Premium |
|------------------------|----------------------|--------------------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |

B. 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 Name of Reinsurer | 2 Total Recoverables | 3 Ceded Premiums | 4 Affiliated |
|--|-------------------------|---------------------|------------------|
| 1. Nationwide Mutual Insurance Company | 19,010 | 17,659 | Yes [X] No [] |
| 2. Illinois Mine Subsidence Fund | 1 | 1 | Yes [] No [X] |
| 3. | | | Yes [] No [] |
| 4. | | | Yes [] No [] |
| 5. | | | Yes [] No [] |

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

SCHEDULE F - PART 4

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

Schedule F - Part 5

N O N E

Schedule F - Part 5 - Bank Footnote

N O N E

Schedule F - Part 6 - Section 1 - Provision for Reinsurance Ceded to Certified Reinsurers

N O N E

Schedule F - Part 6 - Section 1 - Bank Footnote

N O N E

Schedule F - Part 6 - Section 2 - Provision for Overdue Reinsurance Ceded to Certified Reinsurers

N O N E

Schedule F - Part 7 - Provision for Overdue Authorized Reinsurance

N O N E

Schedule F - Part 8 - Provision for Overdue Reinsurance

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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) |
|---|------------------------------------|---------------------------------|-----------------------------------|
| ASSETS (Page 2, Col. 3) | | | |
| 1. Cash and invested assets (Line 12) | 92,739,475 | | 92,739,475 |
| 2. Premiums and considerations (Line 15) | 4,595,382 | | 4,595,382 |
| 3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) | 3,757,051 | (3,757,051) | |
| 4. Funds held by or deposited with reinsured companies (Line 16.2) | | | |
| 5. Other assets | 4,927,573 | | 4,927,573 |
| 6. Net amount recoverable from reinsurers | | 12,499,713 | 12,499,713 |
| 7. Protected cell assets (Line 27) | | | |
| 8. Totals (Line 28) | 106,019,481 | 8,742,662 | 114,762,143 |
| LIABILITIES (Page 3) | | | |
| 9. Losses and loss adjustment expenses (Lines 1 through 3) | | 3,649,194 | 3,649,194 |
| 10. Taxes, expenses, and other obligations (Lines 4 through 8) | 43,776 | 322,604 | 366,380 |
| 11. Unearned premiums (Line 9) | | 11,281,300 | 11,281,300 |
| 12. Advance premiums (Line 10) | | | |
| 13. Dividends declared and unpaid (Line 11.1 and 11.2) | | | |
| 14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) | 6,511,294 | (6,510,436) | 858 |
| 15. Funds held by company under reinsurance treaties (Line 13) | | | |
| 16. Amounts withheld or retained by company for account of others (Line 14) | | | |
| 17. Provision for reinsurance (Line 16) | | | |
| 18. Other liabilities | 4,397,574 | | 4,397,574 |
| 19. Total liabilities excluding protected cell business (Line 26) | 10,952,644 | 8,742,662 | 19,695,306 |
| 20. Protected cell liabilities (Line 27) | | | |
| 21. Surplus as regards policyholders (Line 37) | 95,066,837 | XXX | 95,066,837 |
| 22. Totals (Line 38) | 106,019,481 | 8,742,662 | 114,762,143 |

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 []

If yes, give full explanation: See Notes to the Financial Statement #26 _____

Schedule H - Part 1

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

Schedule H - Part 3 - Prior Year's Claim Reserves and Liabilities

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

Schedule P - Part 1A - Homeowners/Farmowners

N O N E

Schedule P - Part 1B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 1D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 1E - Commercial Multiple Peril

N O N E

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

Schedule P - Part 1G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

N O N E

Schedule P - Part 1H - Section 1 - Other Liability - Occurrence

N O N E

Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made

N O N E

Schedule P - Part 1I - Special Property (Fire, Allied Lines...)

N O N E

Schedule P - Part 1J - Auto Physical Damage

N O N E

Schedule P - Part 1K - Fidelity/Surety

N O N E

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 1M - International

N O N E

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 1R - Section 1 - Products Liability - Occurrence

N O N E

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 1T - Warranty

N O N E

Schedule P - Part 2A - Homeowners/Farmowners

N O N E

Schedule P - Part 2B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 2E - Commercial Multiple Peril

N O N E

Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 2F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

N O N E

Schedule P - Part 2H - Section 1 - Other Liability - Occurrence

N O N E

Schedule P - Part 2H - Section 2- Other Liability - Claims-Made

N O N E

Schedule P - Part 2I - Special Property

N O N E

Schedule P - Part 2J - Auto Physical Damage

N O N E

Schedule P - Part 2K - Fidelity/Surety

N O N E

Schedule P - Part 2L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 2M - International

N O N E

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

N O N E

Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 2T - Warranty

N O N E

Schedule P - Part 3A - Homeowners/Farmowners

N O N E

Schedule P - Part 3B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 3C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 3D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 3E - Commercial Multiple Peril

N O N E

Schedule P - Part 3F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 3F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

Schedule P - Part 3G - Special Liability

N O N E

Schedule P - Part 3H - Section 1 - Other Liability - Occurrence

N O N E

Schedule P - Part 3H - Section 2 - Other Liability - Claims-Made

N O N E

Schedule P - Part 3I - Special Property

N O N E

Schedule P - Part 3J - Auto Physical Damage

N O N E

Schedule P - Part 3K - Fidelity/Surety

N O N E

Schedule P - Part 3L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 3M - International

N O N E

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence

N O N E

Schedule P - Part 3R - Section 2 - Product Liability - Claims-Made

N O N E

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 3T - Warranty

N O N E

Schedule P - Part 4A - Homeowners/Farmowners

N O N E

Schedule P - Part 4B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 4E - Commercial Multiple Peril

N O N E

Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

Schedule P - Part 4G - Special Liability

N O N E

Schedule P - Part 4H - Section 1 - Other Liability - Occurrence

N O N E

Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made

N O N E

Schedule P - Part 4I - Special Property

N O N E

Schedule P - Part 4J - Auto Physical Damage

N O N E

Schedule P - Part 4K - Fidelity/Surety

N O N E

Schedule P - Part 4L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 4M - International

N O N E

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence

N O N E

Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 4T - Warranty

N O N E

Schedule P - Part 5A - Homeowners/Farmowners - Section 1

N O N E

Schedule P - Part 5A - Homeowners/Farmowners - Section 2

N O N E

Schedule P - Part 5A - Homeowners/Farmowners - Section 3

N O N E

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 1

N O N E

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 2

N O N E

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 3

N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1

N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2

N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3

N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 3

N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 1

N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 2

N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 3

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B

N O N E

Schedule P - Part 5H - Other Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5H - Other Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5H - Other Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5H - Other Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5H - Other Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5H - Other Liability - Claims-Made - Section 3B

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B

N O N E

Schedule P - Part 5T - Warranty - Section 1

N O N E

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1

N O N E

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2

N O N E

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

N O N E

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

N O N E

Schedule P - Part 6E - Commercial Multiple Peril - Section 1

N O N E

Schedule P - Part 6E - Commercial Multiple Peril - Section 2

N O N E

Schedule P - Part 6H - Other Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 6H - Other Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 6M - International - Section 1

N O N E

Schedule P - Part 6M - International - Section 2

N O N E

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1

N O N E

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2

N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1

N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2

N O N E

Schedule P - Part 6R - Products Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 6R - Products Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 7A - Section 1 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 2 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 3 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 1 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 2 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 3 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts

N O N E

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY
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? Yes [] No []
 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:

- 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)? \$

- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No []

- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No []

- 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 [] 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 2005 | | |
| 1.603 2006 | | |
| 1.604 2007 | | |
| 1.605 2008 | | |
| 1.606 2009 | | |
| 1.607 2010 | | |
| 1.608 2011 | | |
| 1.609 2012 | | |
| 1.610 2013..... | | |
| 1.611 2014..... | | |
| 1.612 Totals | | |

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 [] 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? Yes [] 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 []

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)
 5.1 Fidelity
 5.2 Surety

6. Claim count information is reported per claim or per claimant (Indicate which). per 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 []

- 7.2 (An extended statement may be attached.)
 Effective January 1, 2011, the Nationwide Mutual Pooling agreement was amended to include fourteen additional affiliates who received a 0% retrocession from the Pool. The historical results of these affiliates and the effects of any external reinsurance agreements are presented on the Schedule P of the Company's ultimate parent, Nationwide Mutual Insurance Company, and affiliates, Nationwide Mutual Fire Insurance Company, Scottsdale Insurance Company, and Farmland Mutual Insurance Company, based on their respective pooling percentages in the Nationwide Mutual Pooling agreement.

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

Allocated by States and Territories

| States, Etc. | Direct Business Only | | | | | |
|------------------------------------|--|---|--|---|--------------------------------|-------------|
| | 1 Life (Group and Individual) | 2 Annuities (Group and Individual) | 3 Disability Income (Group and Individual) | 4 Long-Term Care (Group and Individual) | 5 Deposit-Type Contracts | 6 Totals |
| 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 | | | | | |
| 59. Total | | | | | | |

NONE

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|------------|------------|-------------------|------------|--------------|---------|--|--|----------------------|----------------------------------|--|--|--|--|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | * |
| ..0140 | Nationwide | | 31-1486309 | 4590018 | | | 10 W. Nationwide, LLC | .OH | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | | | | 1000 Yard Street, LLC | .OH | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4594954 | | | 101 N. Twentieth St., LLC | .OH | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | | | | 1050 Yard Street, LLC | .OH | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | | | | 1125 Rail Street, LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1733036 | 4594963 | | | 120 Acre Partners, LLC | .DE | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .95.000 | Nationwide Mutual Insurance Company | .1 |
| ..0140 | Nationwide | | 26-2451988 | 4288132 | | | 1492 Capital, LLC | .OH | .NIA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | | | | 155 Rivulon Boulevard, LLC | .OH | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-1347603 | 4594806 | | | 180 E. Broad Partners, LLC | .OH | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .33.330 | Nationwide Mutual Insurance Company | .1 |
| ..0140 | Nationwide | | 31-1486309 | | | | 275 Rivulon Boulevard, LLC | .OH | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4590835 | | | 400 West Nationwide Boulevard, LLC | .OH | .NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4591140 | | | 425 West Nationwide Boulevard, LLC | .OH | .NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4595009 | | | 44 Chestnut, LLC | .OH | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | 4590497 | | | 775 Yard Street Restaurant, LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | 4590750 | | | 775 Yard Street, LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | | | | 780 Yard Street, LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | 4671583 | | | 795 Rail Street, LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | 4590602 | | | 800 Bobcat Avenue, LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | 4671499 | | | 800 Goodale Boulevard, LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | 4671789 | | | 800 Yard Street, LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | 4590778 | | | 805 Bobcat Avenue, LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | 4590611 | | | 845 Yard Street, LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | 4590787 | | | 850 Goodale Blvd., LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | 4590714 | | | 895 W. Third Ave., LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | | | | 925 Burrell Avenue Acquisitions, LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | | | | 975 Rail Street, LLC | .OH | .NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1680808 | 4594833 | | | AD Investments, LLC | .OH | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .60.000 | Nationwide Mutual Insurance Company | .1 |
| ..0140 | Nationwide | | 31-1580283 | 4590992 | | | ADTV, LLC | .OH | .NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 52-2227314 | 42877247 | | | AGMC Reinsurance, Ltd. | .TCA | .IA | Nationwide Advantage Mortgage Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 42-1011300 | 4287229 | | | ALLIED General Agency Company | .IA | .IA | AMCO Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 42-0958655 | 1677548 | | | ALLIED Group, Inc. | .IA | .IA | Allied Holdings (Delaware), Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-4628790 | 4613462 | | | Allied Holdings (Delaware), Inc. | .DE | .IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 10127 | 27-0114983 | 4288169 | | ALLIED Insurance Company of America | .OH | .IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 45279 | 42-1201931 | 4287144 | | ALLIED Property and Casualty Insurance Company | .IA | .IA | ALLIED Group, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 42-1527863 | | 4287238 | | ALLIED Texas Agency, Inc. | .TX | .IA | AMCO Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 19100 | 42-6054595 | 4287153 | | AMCO Insurance Company | .IA | .IA | ALLIED Group, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 59-1031596 | | 4288011 | | American Marine Underwriters, Inc. | .FL | .IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4595036 | | | Anderson Meadows, LLC | .OH | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4591177 | | | Arena District CA 1, LLC | .OH | .NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 90-0280710 | | | | Arena District Owners Association | .OH | .OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | | 31-1580283 | 4591010 | | | Arena Theatres, LLC | .OH | .NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | | | | Artesa at Quarry Village, LLC | .TX | .OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | | 20-3624379 | | 4595371 | | BCCS Investment Fund LLC | .DE | .NIA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1184438 | | 4594842 | | Berkshire Crossing Development, LLC | .DE | .NIA | NorthStar Commercial Development, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1555487 | | 4593658 | | Boulevard Inn Limited Liability Company | .OH | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .94.800 | Nationwide Mutual Insurance Company | .1 |
| ..0140 | Nationwide | | 20-3624379 | | 4595531 | | Broad Street Retail, LLC | .DE | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .60.000 | Nationwide Mutual Insurance Company | .1 |
| ..0140 | Nationwide | | 26-0899413 | | 3730540 | | Brooke School Investment Fund, LLC | .DE | .OTH | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-1618232 | | 4595241 | | CHP New Markets Investment Fund, LLC | .OH | .OTH | Nationwide Mutual Insurance Company | Limited partner /no control | .50.000 | other non-Nationwide | .1 |
| ..0140 | Nationwide | | 20-1618232 | | 4595045 | | CNRI-Cannonsport Condominium, LLC | .OH | .NIA | CNRI-Cannonsport, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | | | | CNRI-Cannonsport, LLC | .OH | .NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|------------|------------|-------------------|------------|--------------|---------|--|--|----------------------|----------------------------------|--|--|--|--|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | * |
| ..0140 | Nationwide | | 31-1579973 | | | | Co-Investment Fund, LLC | DE | OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | 29262 | 74-1061659 | 4288057 | | | COLHOC Limited Partnership | OH | NIA | NRI Arena, LLC | Ownership | .30.760 | Other non-Nationwide | 1 |
| ..0140 | Nationwide | | 45-4901238 | | | | Colonial County Mutual Insurance Company | TX | OTH | Other non-Nationwide | contract | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | | | | | | Columbus Arena Management, LLC | OH | OTH | Other non-Nationwide | | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | | 04-3750770 | 4595951 | | | Continental/North Shore I, L.P. | OH | NIA | Continental/NRI North Shore Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-0366090 | 3327212 | | | Continental/North Shore II, L.P. | OH | NIA | Continental/NRI North Shore Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-0142724 | 4588177 | | | Continental/NRI North Shore Investments, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .50.500 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 26-4177534 | 4595670 | | | Cotton Mill Partners, LLC | VA | NIA | Nationwide Mutual Insurance Company | Ownership | .50.000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 18961 | 68-0066866 | 4288178 | | Cotton Mill Partners, LLC | VA | NIA | Nationwide Property and Casualty | Ownership | | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4590255 | | | Crestbrook Insurance Company | OH | RE | Nationwide Mutual Insurance Company | Ownership | | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 42587 | 42-1207150 | 4287162 | | Crewville, Ltd. | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | 46-4104813 | | | Depositors Insurance Company | IA | IA | ALLIED Group, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | 33-0096671 | 4287694 | | Discover Affordable Housing Investment Fund I, LLC | OH | OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | | 20-1945276 | 4590590 | | | DVM Insurance Agency | CA | NIA | Veterinary Pet Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-1945276 | 4590590 | | | East of Madison, LLC | DE | NIA | 120 Acre Partners, Ltd. | Ownership | .24.910 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 20-5268940 | 4595689 | | | East of Madison, LLC | DE | NIA | ND La Quinta Partners, LLC | Ownership | .76.090 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 13838 | 42-0618271 | 4569372 | | ELH Investment LLC | DE | OTH | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | | | | | Farmland Mutual Insurance Company | IA | OTH | Other non-Nationwide | debt | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | | 22209 | 75-6013587 | 4287676 | | Freedom Specialty Insurance Company (fka Atlantic Insurance Company) | OH | IA | Scottsdale Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | 46-4736379 | | | GPN-1 Property Owners Association, Inc. | OH | OTH | Other non-Nationwide | n/a | | other non-Nationwide | 2 |
| ..0140 | Nationwide | | | 20-4939866 | 4590808 | | Grandview Yard Hotel Holdings, LLC | OH | NIA | NRI Equity Land Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | 20-4939866 | 4590826 | | Grandview Yard Hotel, LLC | OH | NIA | Grandview Yard Hotel Holdings, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 51-0241172 | 3582909 | | | Harleysville Group, Inc. | DE | NIA | Allied Holdings (Delaware), Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 23582 | 41-0417250 | 4442260 | | Harleysville Insurance Company | PA | IA | Harleysville Group, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 33235 | 16-1075588 | 4442158 | | Harleysville Insurance Company of New Jersey | NJ | IA | Harleysville Group, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 10674 | 23-2864924 | 4442242 | | Harleysville Insurance Company of New York | PA | IA | Harleysville Group, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | | | | Harleysville Lake States Insurance Company | PA | IA | Harleysville Group, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 14516 | 38-3198542 | 4442251 | | | MI | IA | Harleysville Group, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 64327 | 23-1580983 | 4440659 | | Harleysville Life Insurance Company | PA | IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | 23-2612951 | 4442149 | | Harleysville Pennland Insurance Company | PA | IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 35896 | 23-2384978 | 4442288 | | Harleysville Preferred Insurance Company | PA | IA | Harleysville Group, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 26182 | 04-1989660 | 4442372 | | Harleysville Worcester Insurance Company | PA | IA | Harleysville Group, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | 32-0051216 | 4596903 | | Hideaway Properties Corp. | CA | OTH | Nationwide Realty Investors, Ltd. | Ownership | .50.000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | | 31-0871532 | 4288020 | | Insurance Intermediaries, Inc. | OH | IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | 31-1486309 | 4097802 | | Jerome Village Company, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | | | | Jerome Village Master Property Owners Association | OH | OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | | | 46-2956640 | | | Jerome Village Residential Property Owners Association, Inc. | OH | NIA | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | | | 31-1486309 | 4590312 | | JV Developers, LLC | OH | OTH | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | | 20-2137188 | 4595698 | | Leaguers Investment Fund, LLC | DE | OTH | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | | 56-3789187 | 4286969 | | Life REO Holdings, LLC | OH | NIA | Nationwide Life Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | 74-1395229 | 4288039 | | Lone Star General Agency, Inc. | TX | IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|------------|------------|-------------------|------------|--------------|---------|--|---|----------------------|----------------------------------|--|--|--|--|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | * |
| ..0140 | Nationwide | | 20-3624379 | 4595700 | | | Match School Investment Fund, LLC | DE | OTH | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 11991 | 38-0865250 | 4288187 | | National Casualty Company | WI | IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| | | | | | | | National Casualty Company of America, Ltd. | | | | | | | |
| ..0140 | Nationwide | | 42-1154244 | 4614900 | | | | GBR | IA | National Casualty Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 42-1154244 | 2889795 | | | Nationwide Advantage Mortgage Company | IA | NIA | AMCO Insurance Company | Ownership | .87.300 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 42-1154244 | 2889795 | | | Nationwide Advantage Mortgage Company | IA | NIA | ALLIED Property & Casualty Insurance Company | Ownership | .8.470 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 42-1154244 | 2889795 | | | Nationwide Advantage Mortgage Company | IA | NIA | Depositors Insurance Company | Ownership | .4.230 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 26093 | 48-0470690 | 4288196 | | Nationwide Affinity Insurance Company of America | OH | IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 28223 | 42-1015537 | 4288208 | | Nationwide Agribusiness Insurance Company | IA | IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-5976272 | 4595910 | | | Nationwide Alternative Investments, LLC | OH | NIA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1578869 | 4288075 | | | Nationwide Arena, LLC | OH | NIA | NRI Arena, LLC | Ownership | .90.000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 20-8670712 | 4288114 | | | Nationwide Asset Management, LLC | OH | NIA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 10723 | 95-0639970 | 4288217 | | Nationwide Assurance Company | WI | IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1592130 | 2729677 | | | Nationwide Bank | OTH | | Nationwide Financial Services, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 31-1036287 | 4288123 | | | Nationwide Cash Management Company | OH | NIA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-4416546 | 3828081 | | | Nationwide Corporation | OH | NIA | Nationwide Mutual Insurance Company | Ownership | .95.200 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-4416546 | 3828081 | | | Nationwide Corporation | OH | NIA | Nationwide Mutual Fire Insurance Company | Ownership | | | |
| ..0140 | Nationwide | | 04-3679407 | 4286839 | | | Nationwide Emerging Managers, LLC | DE | NIA | NWD Investment Management, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 05-0630007 | 4288048 | | | Nationwide Exclusive Agent Risk Purchasing Group, LLC | OH | NIA | Insurance Intermediaries, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1667326 | 4286932 | | | Nationwide Financial Assignment Company | OH | NIA | Nationwide Life Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 23-2412039 | 4287087 | | | Nationwide Financial General Agency, Inc. | PA | NIA | NFS Distributors, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1316276 | 4287069 | | | Nationwide Financial Institution | DE | NIA | NFS Distributors, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-6554353 | 4286978 | | | Distributors Agency, Inc. | DE | NIA | NFS Distributors, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486870 | 3828063 | | | Nationwide Financial Services Capital Trust | DE | NIA | Nationwide Financial Services, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-6022301 | | | | Nationwide Financial Services, Inc. | DE | NIA | Nationwide Corporation | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 52-6969857 | 4286996 | | | Nationwide Foundation | OH | OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | | 31-1748721 | 42877050 | | | Nationwide Fund Advisors | DE | NIA | Nationwide Financial Services, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-0900518 | 4287041 | | | Nationwide Fund Distributors LLC | DE | NIA | NFS Distributors, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 23760 | 31-4425763 | 4287957 | | Nationwide Fund Management LLC | DE | IA | NFS Distributors, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1570938 | 4286398 | | | Nationwide General Insurance Company | OH | NIA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 04-3732385 | 4286857 | | | Nationwide Global Holdings, Inc. | OH | NIA | Nationwide Global Holdings, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1399201 | 2839398 | | | Nationwide Global Ventures, Inc. | DE | NIA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 25453 | 95-2130882 | 4287180 | | Nationwide Indemnity Company | OH | IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 10948 | 31-1613686 | 4287966 | | Nationwide Insurance Company of America | WI | IA | ALLIED Group, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 41-2206199 | 4286950 | | | Nationwide Insurance Company of Florida | OH | IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 73-0988442 | 4286923 | | | Nationwide Investment Advisors, LLC | OH | NIA | Nationwide Life Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 92657 | 31-1000740 | 2995098 | | Nationwide Investment Services Corporation | OK | NIA | Nationwide Life Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 66869 | 31-4156830 | 2819288 | | Nationwide Life and Annuity Insurance Company | OH | IA | Nationwide Life Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 13-4212969 | 4596127 | | | Nationwide Life Insurance Company | OH | IA | Nationwide Financial Services, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 01-0749754 | 4595960 | | | Nationwide Life Tax Credit Partners 2002-A, LLC | OH | NIA | Nationwide Life Insurance Company | Other | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | | | | | Nationwide Life Tax Credit Partners 2002-B, LLC | OH | NIA | Nationwide Life Insurance Company | Other | .010 | Nationwide Mutual Insurance Company | 2 |

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|------------|------------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | * |
| ..0140 | Nationwide | | 03-0498148 | 3262573 | | | Nationwide Life Tax Credit Partners 2002-C, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 54-2113175 | 4596127 | | | Nationwide Life Tax Credit Partners 2003-A, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 58-2672725 | 4596163 | | | Nationwide Life Tax Credit Partners 2003-B, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-0357951 | 3811001 | | | Nationwide Life Tax Credit Partners 2003-C, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-0382144 | 4596707 | | | Nationwide Life Tax Credit Partners 2004-A, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-0745944 | 4596211 | | | Nationwide Life Tax Credit Partners 2004-B, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-0745965 | 4596239 | | | Nationwide Life Tax Credit Partners 2004-C, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-1128408 | 4596332 | | | Nationwide Life Tax Credit Partners 2004-D, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-1128472 | 4596350 | | | Nationwide Life Tax Credit Partners 2004-E, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-1918935 | 3318117 | | | Nationwide Life Tax Credit Partners 2004-F, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-2303694 | 4596369 | | | Nationwide Life Tax Credit Partners 2005-A, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-2303602 | 4596378 | | | Nationwide Life Tax Credit Partners 2005-B, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-2450960 | 4596387 | | | Nationwide Life Tax Credit Partners 2005-C, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-2451052 | 4596396 | | | Nationwide Life Tax Credit Partners 2005-D, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 20-2774223 | 4596408 | | | Nationwide Life Tax Credit Partners 2005-E, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 21-1288836 | 4596426 | | | Nationwide Life Tax Credit Partners 2007-A, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 26-3427373 | 4596435 | | | Nationwide Life Tax Credit Partners 2009-A, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 26-3427435 | 4596444 | | | Nationwide Life Tax Credit Partners 2009-B, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 26-3427479 | 4596499 | | | Nationwide Life Tax Credit Partners 2009-C, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 26-3427525 | 4596510 | | | Nationwide Life Tax Credit Partners 2009-D, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 26-4737055 | 4596529 | | | Nationwide Life Tax Credit Partners 2009-E, LLC | OH | NIA | Nationwide Life Insurance Company | Ownership..... | .100.000 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 26-4737157 | 4596547 | | | Nationwide Life Tax Credit Partners 2009-F, LLC | OH | NIA | Nationwide Life Insurance Company | Ownership..... | .100.000 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 27-1362364 | 4596622 | | | Nationwide Life Tax Credit Partners 2009-I, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 45-0469525 | 3779811 | | | Nationwide Life Tax Credit Partners No. 1, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 46-1952215 | 4596556 | | | Nationwide Life Tax Credit Partners 2013-A, LLC | OH | NIA | Nationwide Life Insurance Company | Other..... | .010 | Nationwide Mutual Insurance Company | 2 |

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PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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| ..0140 | Nationwide | | 46-1971926 | 4596592 | | | Nationwide Life Tax Credit Partners 2013-B, LLC | OH | NIA | Nationwide Life Insurance Company | Other | 0.010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | 42110 | 75-1780981 | 4287984 | | | Nationwide Lloyds | TX | IA | n/a | contract | | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 42-1373380 | 4287210 | | | Nationwide Member Solutions Agency, Inc. | IA | NIA | ALLIED Group, Inc. | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | 4597094 | | | Nationwide Mutual Capital I, LLC | DE | NIA | Nationwide Mutual Capital, LLC | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | 75-3191025 | 4595269 | | Nationwide Mutual Capital, LLC | OH | NIA | Nationwide Mutual Insurance Company | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 23779 | 82-0549218 | 3828090 | | Nationwide Mutual Fire Insurance Company | OH | OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | | 23787 | 31-4177100 | 3828072 | | Nationwide Mutual Insurance Company | OH | UDP | Other non-Nationwide | n/a | | Other non-Nationwide | |
| ..0140 | Nationwide | | | 34-2012765 | 4288084 | | Nationwide Private Equity Fund, LLC | OH | NIA | Nationwide Mutual Insurance Company | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| | | | | | | | Nationwide Property and Casualty Insurance Company | OH | IA | Nationwide Mutual Insurance Company | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | 37877 | 31-0970750 | 4287993 | | | Nationwide Realty Investors, Ltd. | OH | NIA | Nationwide Mutual Insurance Company | Ownership | .96,800 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4288105 | | | Nationwide Realty Investors, Ltd. | OH | NIA | Nationwide Indemnity Company | Ownership | .3,200 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4590264 | | | Nationwide Realty Management, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | 4288066 | | | Nationwide Realty Services, Ltd. | OH | NIA | Nationwide Mutual Insurance Company | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 06-0987812 | 4287117 | | | Nationwide Retirement Solutions Insurance Agency, Inc. | MA | IA | Nationwide Retirement Solutions, Inc. | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 73-0948330 | 4287096 | | | Nationwide Retirement Solutions, Inc. | DE | NIA | NFS Distributors, Inc. | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 86-0924069 | 4287108 | | | Nationwide Retirement Solutions, Inc. of Arizona | AZ | NIA | Nationwide Retirement Solutions, Inc. | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1331479 | 4287126 | | | Nationwide Retirement Solutions, Inc. of Ohio | OH | NIA | Nationwide Retirement Solutions, Inc. | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 74-2200854 | 4287135 | | | Nationwide Retirement Solutions, Inc. of Texas | TX | NIA | Nationwide Retirement Solutions, Inc. | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 36-2434406 | 4287078 | | | Nationwide Securities, LLC | OH | NIA | NFS Distributors, Inc. | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-4177100 | 4288093 | | | Nationwide Services Company, LLC | OH | NIA | Nationwide Mutual Insurance Company | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 27-0743545 | 4564041 | | | Nationwide Tax Credit Partners 2009-G, LLC | OH | NIA | Nationwide Mutual Insurance Company | Other | 0.010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 27-0768791 | 4596891 | | | Nationwide Tax Credit Partners 2009-H, LLC | OH | NIA | Nationwide Mutual Insurance Company | Ownership | .100,000 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 27-1362364 | 4596622 | | | Nationwide Tax Credit Partners 2009-I, LLC | OH | NIA | Nationwide Life Insurance Company | Other | 0.010 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 46-1952215 | 4596566 | | | Nationwide Tax Credit Partners 2013-A, LLC | OH | NIA | Nationwide Life Insurance Company | Ownership | 0.010 | Nationwide Mutual Insurance Company | 2 |
| | | | | | | | Nationwide Tax Credit Partners 2013-B, LLC | OH | NIA | Nationwide Life Insurance Company | Ownership | 0.010 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-1971926 | | | | | | | Nationwide Life Insurance Company | Ownership | 0.010 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 11-3651828 | 4588168 | | | ND La Quinta Partners, LLC | DE | NIA | Nationwide Realty Investors, Ltd. | Ownership | .95,000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | | 4286866 | | | Newhouse Capital Partners II, LLC | DE | NIA | Nationwide Global Ventures, Inc. | Ownership | .80,000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | | 4286866 | | | Newhouse Capital Partners II, LLC | DE | NIA | Nationwide Global Ventures, Inc. | Ownership | .99,000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | | 4286679 | | | Newhouse Capital Partners, LLC | DE | NIA | NWD Investment Management, Inc. | Ownership | .19,000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | | 4286679 | | | Newhouse Capital Partners, LLC | DE | NIA | Nationwide Mutual Insurance Company | Ownership | .70,000 | Nationwide Mutual Insurance Company | 1 |
| | | | | | | | | | | Nationwide Mutual Fire Insurance Company | | | | |
| ..0140 | Nationwide | | | 4286679 | | | Newhouse Capital Partners, LLC | DE | NIA | Nationwide Mutual Insurance Company | Ownership | .10,000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 31-1630871 | 4287032 | | | NFS Distributors, Inc. | DE | NIA | Nationwide Financial Services, Inc. | Ownership | .100,000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 14-1892640 | 4596677 | | | NHT XII Tax Credit Fund, LLC | DC | NIA | Nationwide Life Insurance Company | Ownership | .49,990 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 14-1892640 | 4596677 | | | NHT XII Tax Credit Fund, LLC | DC | NIA | Nationwide Assurance Company | Ownership | .25,000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 14-1892640 | 4596677 | | | NHT XII Tax Credit Fund, LLC | DC | NIA | Nationwide Mutual Insurance Company | Ownership | .25,000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 46-3762545 | 4750442 | | | NNOW8, LLC | OH | NIA | Nationwide Mutual Insurance Company | Ownership | .100,000 | Nationwide Mutual Insurance Company | |
| | | | | | | | North Bank Condominium Home Owners Association | OH | OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | | 26-0351004 | | | | North of Third, LLC | OH | NIA | NRI Equity Land Investments, LLC | Ownership | .100,000 | Nationwide Mutual Insurance Company | |

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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

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|------------|------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | * |
| ..0140 | Nationwide | | 26-4083207 | 4590385 | | | Northstar Commercial Development, LLC Northstar Master Property Owners Association, Inc. | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .50.000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 26-4083354 | 4594909 | | | | OH | OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | | 31-1486309 | 4593630 | | | Northstar Residential Development, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .50.000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 31-1486309 | 4594936 | | | NRI 12325 Copper Way, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4594794 | | | NRI 220 Schrock, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4594815 | | | NRI Arena, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4595027 | | | NRI Brookside, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4594851 | | | NRI Builders, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4590246 | | | NRI Communities/Charlotte, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4590282 | | | NRI Communities/Harris Blvd., LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 20-4939866 | 4590460 | | | NRI Cramer Creek, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 26-0212217 | 4590394 | | | NRI Equity Land Investments, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .80.000 | Nationwide Mutual Insurance Company | 1 |
| ..0140 | Nationwide | | 31-1486309 | 4590376 | | | NRI Equity Tampa, LLC | OH | OTH | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 30-4939866 | 4590406 | | | NRI Maxtown, LLC | OH | OTH | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | 2 |
| ..0140 | Nationwide | | 31-1486309 | 4590349 | | | NRI Office Ventures, Ltd. | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4596912 | | | NRI Rivulon, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 45-3123274 | 4595438 | | | NRI Telecom, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 90-0729552 | 4596695 | | | | | | Nationwide Property and Casualty Company | | | | |
| ..0140 | Nationwide | | 90-0729552 | 4596695 | | | NTCIF-2011 Georgia State Investor, LLC | OH | NIA | | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 90-0729552 | 4596695 | | | NTCIF-2011, LLC | OH | NIA | Nationwide Life Insurance Company | Ownership | .50.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 90-0729552 | 4596695 | | | | | | Nationwide Mutual Fire Insurance Company | | | | |
| ..0140 | Nationwide | | 27-4700627 | 4596716 | | | NTCIF-2011, LLC | OH | NIA | | Ownership | .50.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-0741029 | 4464703 | | | NTCP 2011-A, LLC | OH | NIA | Nationwide Life Insurance Company | Other | .010.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-3309896 | 4586164 | | | NTCP 2012-A, LLC | OH | NIA | Nationwide Life Insurance Company | Other | .010.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-4111078 | 4596743 | | | NTCP 2013-C, LLC | OH | NIA | Nationwide Life Insurance Company | Other | .010.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 47-1404116 | | | | NTCP 2014-A, LLC | OH | NIA | Nationwide Life Insurance Company | Other | .010.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 47-1413242 | | | | NTCP 2014-B, LLC | OH | NIA | Nationwide Life Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 26-1903919 | 4591421 | | | NTCP 2014-C, LLC | OH | NIA | Nationwide Life Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-3654078 | 4593621 | | | NW-REI, LLC | DE | NIA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-2943666 | 4594860 | | | NW-Amesbury, LLC | OH | NIA | NE-REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 45-5159092 | 4595063 | | | NW-Bandera, LLC | OH | NIA | NW RE1, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-2451156 | 4594879 | | | NW-Bayshore, LLC | OH | NIA | NW RE1, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-3707480 | 4593612 | | | NW-Bee Cave, LLC | OH | NIA | NW RE1, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-3968244 | 4591757 | | | NW-Brooklyn, LLC | OH | NIA | NW RE1, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 45-2724980 | 4591690 | | | NW-Camelback, LLC | OH | NIA | NW RE1, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-3674167 | 4590090 | | | NW-Cameron, LLC | OH | NIA | NW RE1, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-3994437 | 4591663 | | | NW-Cedar Springs, LLC | OH | NIA | NW RE1, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 26-0901660 | 4505456 | | | NW-Central Station, LLC | OH | NIA | NE-REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 32-0359208 | 4595157 | | | NW-CNC Coppell, LLC | DE | NIA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4591038 | | | NW-Corvallis, LLC | OH | NIA | NW RE1, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4591261 | | | NW-205 Vine, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4591056 | | | NW 225 Nationwide, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4590545 | | | NW 230 West, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4590273 | | | NW 240 Nationwide, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4590554 | | | NW 250 Brodbelt, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4590518 | | | NW 265 Neil, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4590563 | | | NW 275 Marconi, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4590509 | | | NW 295 McConnell, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4590572 | | | NW 300 Neil, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4590599 | | | NW 300 Spring, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4590572 | | | | | | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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

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|------------|------------|-------------------|------------|--------------|-----|--|--|----------------------|----------------------------------|--|--|--|--|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | * |
| ..0140 | Nationwide | | 31-1580283 | 4590527 | | | NWD 355 McConnell, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4590581 | | | NWD 425 Nationwide, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4590536 | | | NWD 500 Nationwide, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4591298 | | | NWD Arena Crossing, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4591083 | | | NWD Arena District I, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4591300 | | | NWD Arena District II, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4591113 | | | NWD Arena District MM, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4591319 | | | NWD Arena District PW, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4591131 | | | NWD Arena District V, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 04-3679396 | 4266848 | | | NWD Asset Management Holdings, Inc. | DE | NIA | NWD Investment Management, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4591328 | | | NWD Athletic Club, LLC | OH | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | | | | NWD Franklinton, LLC | DE | NIA | NWD Investments, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1636299 | 4286594 | | | NWD Investment Management, Inc. | DE | NIA | Nationwide Corporation | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1580283 | 4587965 | | | NWD Investments, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .80.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 90-0732898 | 4591430 | | | NW-Dulles, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-3267884 | 4595465 | | | NW-Franklin Mills, LLC | OH | NIA | Life Reo Holdings, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-2997049 | 4591775 | | | NW-Howell Mill, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-4330384 | 4750443 | | | NW-Hudnall, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 47-2482818 | | | | NW-Jasper WAG, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 47-1497429 | | | | NW-Jefferson, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 45-5408178 | 4591458 | | | NW-Kentwood Towne Center, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-4857522 | | | | NW-Lawrence, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 45-5314007 | 4593461 | | | NW-Lovers Lane, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-2457568 | 4591467 | | | NW-Monrose, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 45-4630497 | 4593470 | | | NW-Mueller II, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 27-4749848 | 4591476 | | | NW-Northridge, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-1089165 | 4593555 | | | NW-Oakley Station, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-3888719 | 4593603 | | | NW-Park 288, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 45-5388656 | 4591485 | | | NW-Park Memorial, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 47-1740812 | | | | NW-Peachtree, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-2469044 | 4591494 | | | NW-Portales, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 47-2449044 | | | | NW-Promenade at Madison, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 45-5159117 | 4593573 | | | NW-South Park, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 27-4749587 | 4593582 | | | NW-Taylor Farmer Jack, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-1100378 | 4591524 | | | NW-Triangle, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-5764783 | | | | NW-Tysons, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-1077615 | 4593591 | | | NW-West Ave., LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 46-4992444 | | | | NW-Windcross, LLC | OH | NIA | NW REI, LLC | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-0947092 | 4590479 | | | OCH Company, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-0947092 | 4590442 | | | Ohio Center Hotel Company, Ltd. | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .56.250 | Nationwide Mutual Insurance Company | .1 |
| ..0140 | Nationwide | | 26-0263012 | | | | Old Track Street Owners Association | OH | OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| ..0140 | Nationwide | 13999 | 27-1712056 | 4286914 | | | Olentangy Reinsurance, LLC | VT | IA | Nationwide Life and Annuity Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 47-1923444 | | | | On Your Side Nationwide Insurance Agency, Inc. | OH | OTH | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | .2 |
| ..0140 | Nationwide | | | 4596462 | | | OYS Fund, LLC | DE | OTH | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | .2 |
| ..0140 | Nationwide | | 31-1486309 | 4596480 | | | Park 288 Industrial, LLC | TX | NIA | Nationwide Mutual Insurance Company | Investor member / no control | .95.000 | other non-Nationwide | |
| ..0140 | Nationwide | | 31-1677602 | 4590488 | | | Perimeter A, Ltd. | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 31-1486309 | 4590291 | | | Pizzuti Properties, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .65.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | 39-1907217 | 4287201 | | | Polaris A, Ltd. | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| ..0140 | Nationwide | | | | | | Premier Agency, Inc. | IA | NIA | ALLIED Group, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|------------|------------|-------------------|------------|--------------|------------|--|---|----------------------|----------------------------------|--|--|--|--|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | * |
| 4664 | Pure | 12873 | 20-8287105 | 4288253 | | | Privilege Underwriters Reciprocal Exchange | FL | IA | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| 4664 | Pure | | | 4288150 | | | Privilege Underwriters, Inc. | DE | IA | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| 4664 | Pure | 13204 | 26-3109178 | 4288226 | | | Pure Insurance Company | FL | IA | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| 4664 | Pure | | | 4288235 | | | Pure Risk Management, LLC | FL | IA | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| | | | | | | | Registered Investment Advisors Services, Inc. | TX | NIA | Nationwide Financial Services, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| | | | 75-2938844 | 4287005 | | | | | | Nationwide Mutual Fire Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | 82-0549218 | 4288244 | | | Retention Alternatives, Ltd. | BMU | IA | | | | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | | 4595278 | | | Riverview Diversified Opportunities Fund, LLC | DE | OTH | Nationwide Mutual Insurance Company | Ownership | | Nationwide Mutual Insurance Company | .1 |
| .0140 | Nationwide | | | 4595278 | | | Riverview Diversified Opportunities Fund, LLC | DE | OTH | Nationwide Mutual Fire Insurance Company | Ownership | | Nationwide Mutual Insurance Company | .1 |
| .0140 | Nationwide | | | 4595278 | | | Riverview Diversified Opportunities Fund, LLC | DE | OTH | | | | Nationwide Mutual Insurance Company | .1 |
| .0140 | Nationwide | | | 4595278 | | | Riverview International Group, Inc. | DE | NIA | Nationwide Life Insurance Company | Ownership | | Nationwide Mutual Insurance Company | .1 |
| .0140 | Nationwide | | 22-3655264 | 4286530 | | | Riverview Multi Series Fund, LL - Class Event | DE | OTH | NWD Investment Management, Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | | 4595287 | | | Riverview Multi Series Fund, LL - Class N | DE | OTH | | | | Nationwide Mutual Insurance Company | 2 |
| .0140 | Nationwide | | | 4595335 | | | Riverview Polyphony Fund, LLC | DE | OTH | | | | Nationwide Mutual Insurance Company | 2 |
| .0140 | Nationwide | | 15580 | 31-1117969 | 4288002 | | Scottsdale Indemnity Company | OH | IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | 41297 | 31-1024978 | 3091988 | | Scottsdale Insurance Company | OH | IA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| | | | | | | | Scottsdale Surplus Lines Insurance Company | | | | | | | |
| .0140 | Nationwide | | 10672 | 86-0835870 | 4287649 | | | AZ | IA | Scottsdale Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | | 31-1486309 | 4590303 | | Streets of Toringdon, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | | 91-2158214 | | | The Hideaway Club | CA | OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| .0140 | Nationwide | | | 86-1094799 | | | The Hideaway Owners Association | CA | OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| .0140 | Nationwide | | | 20-3541511 | | | The Madison Club | CA | OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| .0140 | Nationwide | | | 20-3541507 | | | The Madison Club Owners Association | CA | OTH | Other non-Nationwide | n/a | | Other non-Nationwide | 2 |
| .0140 | Nationwide | | | 31-1610040 | 2989882 | | The Waterfront Partners, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .50.000 | Nationwide Mutual Insurance Company | .1 |
| .0140 | Nationwide | | | 52-2031677 | 4287751 | | THI Holdings (Delaware), Inc. | DE | NIA | Nationwide Mutual Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | | 74-2825853 | 4287863 | | Titan Auto Insurance of New Mexico, Inc. | NM | IA | THI Holdings (Delaware), Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | 13242 | 74-2286759 | 4287797 | | Titan Indemnity Company | TX | IA | THI Holdings (Delaware), Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | 36269 | 86-0619597 | 4287845 | | Titan Insurance Company | MI | IA | Titan Indemnity Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | | 75-1284530 | 4287890 | | Titan Insurance Services, Inc. | TX | NIA | THI Holdings (Delaware), Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | | 33-0160222 | 4653196 | | V.P.I. Services, Inc. | CA | NIA | Veterinary Pet Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | 42285 | 95-3750113 | 4287685 | | Veterinary Pet Insurance Company | CA | IA | Scottsdale Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| | | | | | | | Victoria Automobile Insurance Company | OH | IA | Victoria Fire & Casualty Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | 10644 | 34-1785903 | 4287911 | | Victoria Fire & Casualty Company | OH | IA | THI Holdings (Delaware), Inc. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | 42889 | 34-1394913 | 4287827 | | | | | Victoria Fire & Casualty Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | | 10778 | 34-1842604 | 4287920 | | | | Victoria National Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | | 10105 | 34-1777972 | 4287939 | | | | Victoria Select Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | | 10777 | 34-1842602 | 4287948 | | | | Victoria Specialty Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | 37150 | 86-0561941 | 4287667 | | Western Heritage Insurance Company | AZ | IA | Scottsdale Insurance Company | Ownership | .100.000 | Nationwide Mutual Insurance Company | |
| .0140 | Nationwide | | | | 4613341 | | Westport Capital Partners II | CT | OTH | Nationwide Defined Benefit Master Trust | Investor member / no control | .71.000 | other non-Nationwide | 2 |
| .0140 | Nationwide | | | | 31-1486309 | 4590321 | Wilson Road Developers, LLC | OH | NIA | Nationwide Realty Investors, Ltd. | Ownership | .100.000 | Nationwide Mutual Insurance Company | |

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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

| 1 Group Code | 2 Group Name | 3 NAIC Company Code | 4 ID Number | 5 Federal RSSD | 6 CIK | 7 Name of Securities Exchange if Publicly Traded (U.S. or International) | 8 Names of Parent, Subsidiaries Or Affiliates | 9 Domi- niliary Loca- tion | 10 Relation- ship to Reporting Entity | 11 Directly Controlled by (Name of Entity/Person) | 12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13 If Control is Owner- ship Provide Percen- tage | 14 Ultimate Controlling Entity(ies)/Person(s) | 15 * |
|--------------------|-----------------|------------------------------|-------------------|----------------------|----------|---|--|--|--|---|---|---|---|---------|
| ...0140 | Nationwide | | 4613323 | | | Zais Zephyr A-4, LLC | | DE | OTH | Nationwide Life Insurance Company | Limited member / no control | .60.000 | other non-Nationwide | 2 |

| Asterisk | Explanation |
|----------|--|
| 1 | For the purposes of this schedule, Nationwide presumed control of these entities because they are owned by at least 10% and are not wholly-owned by a Nationwide entity. |
| 2 | Other ownership indicates a non-ownership circumstance by a Nationwide entity. |

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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

| 1 NAIC Company Code | 2 ID Number | 3 Names of Insurers and Parent, Subsidiaries or Affiliates | 4 Shareholder Dividends | 5 Capital Contributions | 6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments | 7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s) | 8 Management Agreements and Service Contracts | 9 Income/ (Disbursements) Incurred Under Reinsurance Agreements | 10 * | 11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business | 12 | 13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability) |
|------------------------------|-------------------|--|-------------------------------|-------------------------------|--|--|--|--|---------|--|---------------|---|
| 00000 | 26-2451988 | 1492 Capital, LLC | (56,850,968) | 50,473,522 | | | | | | | (6,377,446) | |
| 00000 | 42-0958655 | Allied Group, Inc | 10,000,000 | 1,600,000,000 | | | | | | | 1,610,000,000 | |
| 10127 | 27-0114983 | Allied Holding (Delaware) Inc. | 611,000,000 | 1,286,344,682 | | | | | | | 1,897,344,682 | |
| 42579 | 42-1201931 | Allied Insurance Company Of America | | 6,000,000 | | | | | | | 6,000,000 | |
| 19100 | 42-6054959 | Allied Prop & Cas Ins Co | | (847,000) | | | | | | | (847,000) | 965,789,021 |
| | | Amco Insurance Company | (172,000,000) | (8,730,000) | | | | | | | (369,741,812) | 1,643,344,072 |
| | | BCCS Investment Fund LLC | | 511,676 | | | | | | | 511,676 | |
| | | CHP New Markets Investment Fund, LLC | | 4,200 | | | | | | | 4,200 | |
| 29262 | 74-1061659 | Colonial County Mutual Insurance Co | | | | | | | | | | 238,045,596 |
| | 26-4177534 | Cotton Mill Partners LLC | (1,000) | 323 | | | | | | | (677) | |
| 18961 | 68-0066866 | Crestbrook Insurance Company | (9,000,000) | 1,500,000 | | | | | | | (7,500,000) | 18,687,546 |
| 42587 | 42-1207150 | Depositors Insurance Company | | (423,000) | | | | | | | (423,000) | 720,341,662 |
| 13838 | 42-0618271 | Farmland Mutual Insurance Company | | | | | | | | | | 35,374,000 |
| 22209 | 75-6013587 | Freedom Specialty Insurance Company | | | | | | | | | | 148,819,526 |
| 23582 | 41-0417250 | Harleysville Insurance Company | (11,000,000) | | | | | | | | (11,000,000) | 331,230,123 |
| 10674 | 23-2864924 | Harleysville Insurance Company Of New York | (6,000,000) | | | | | | | | (6,000,000) | 361,082,655 |
| 00000 | 51-0241172 | Harleysville Group Inc. | (27,000,000) | | | | | | | | (27,000,000) | |
| 42900 | 23-2253669 | Harleysville Insurance Company Of New Jersey | (159,000,000) | | | | | | | | (159,000,000) | 292,083,443 |
| 14516 | 38-3198542 | Harleysville Lake States Insurance Company | (48,000,000) | | | | | | | | (48,000,000) | 167,706,102 |
| 40983 | 23-2612951 | Harleysville Pennland Insurance Company | | 366,451,294 | | | | | | | 366,451,294 | |
| 35696 | 23-2384978 | Harleysville Preferred Insurance Company | (164,000,000) | | | | | | | | (164,000,000) | 476,626,553 |
| 26182 | 04-1989660 | Harleysville Worcester Insurance Company | (196,000,000) | | | | | | | | (196,000,000) | 583,276,375 |
| | 31-0871532 | Insurance Intermediaries Inc | (10,000,000) | 932,400 | | | | | | | (10,000,000) | |
| | | Leaguers Investment Fund LLC | | (24,311) | | | | | | | 932,400 | |
| | 20-5976272 | Nationwide Alternative Investments, LLC | | | | | | | | | (24,311) | |
| 11991 | 38-0865250 | National Casualty Company | | | | | | | | | | 1,291,161,288 |
| 00000 | 42-1154244 | Nationwide Advantage Mortgage Company | | 10,000,000 | | | | | | | 10,000,000 | |
| 26093 | 48-0470690 | Nationwide Affinity Insurance Company Of America | | | | | | | | | | 836,185,556 |
| 28223 | 42-1015537 | Nationwide Agribusiness Insurance Company | | | | | | | | | | 1,143,918,919 |
| 10723 | 95-0639970 | Nationwide Assurance Company | | | | | | | | | | 23,471,277 |
| 00000 | 31-4416546 | Nationwide Corporation | (1,083,269) | | | | | | | | (1,083,269) | |
| 00000 | 31-1486870 | Nationwide Financial Services, Inc. | | 53,700,000 | | | | | | | (341,300,000) | |
| 23760 | 31-4425763 | Nationwide General Insurance Company | (50,000,000) | | | | | | | | | 486,444,371 |
| 10070 | 31-1399201 | Nationwide Indemnity Company | | | | | | | | | (50,000,000) | (450,843,753) |
| 25453 | 95-2130882 | Nationwide Insurance Company Of America | | | | | | | | | | 877,274,105 |
| 10948 | 31-1613686 | Nationwide Insurance Company Of Florida | | | | | | | | | | 162,092 |
| 92657 | 31-1000740 | Nationwide Life And Annuity Insurance Company | | 290,000,000 | | | | | | | 290,000,000 | 1,394,858,287 |
| 66869 | 31-4156830 | Nationwide Life Insurance Company | | (343,700,000) | | | | | | | 395,000,000 | 51,300,000 |
| | | | | | | | | | | | | (152,768,788) |

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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

| 1 NAIC Company Code | 2 ID Number | 3 Names of Insurers and Parent, Subsidiaries or Affiliates | 4 Shareholder Dividends | 5 Capital Contributions | 6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments | 7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s) | 8 Management Agreements and Service Contracts | 9 Income/ (Disbursements) Incurred Under Reinsurance Agreements | 10 * | 11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business | 12 | 13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability) |
|------------------------------|-------------------|--|-------------------------------|-------------------------------|--|--|--|--|---------|--|----|---|
| 42110 | 75-1780981 | Nationwide Lloyds | | | | | | | | | | 44,358,549 |
| | | Nationwide Mutual Capital, LLC | (2,264,090) | | | | | | | | | (2,264,090) |
| 23779 | 31-4177110 | Nationwide Mutual Fire Ins Company | 43,137,052 | (5,959,253) | | | | | | * | | 37,177,799 |
| 23787 | 31-4177100 | Nationwide Mutual Ins Company | 390,835,308 | (3,551,376,419) | | | | | | * | | (626,906,109) |
| | 34-2012765 | Nationwide Private Equity Fund, LLC | (60,575,582) | 10,806,479 | | | | | | | | (2,654,198,198) |
| | 37877 | Nationwide Property And Casualty Ins Company | | | | | | | | | | (13,732,522,419) |
| | | | | | | | | | | | | (49,769,103) |
| | 00000 | Nationwide Realty Investors, Ltd | | 46,750,000 | | | | | | | | 1,423,555,793 |
| | 31-4177100 | Nationwide Services Co, LLC | (482,000) | | | | | | | | | (482,000) |
| | 47-1413242 | Nationwide Tax Credit Partners 2014 - C LLC | | | 3,482,198 | | | | | | | 3,482,198 |
| | 31-1630871 | NFS Distributors, Inc. | | | (46,000,000) | | | | | | | (46,000,000) |
| | 14-1892640 | NHT Xii Tax Credit Fund, LLC | | | 4,016 | | | | | | | 4,016 |
| | 31-1486309 | NTCIF-2011 Georgia State Investor, LLC | (448,058) | | | | | | | | | (448,058) |
| | 90-0729552 | NTCIF-2011, LLC | (28,085,478) | | 5,959,253 | | | | | | | (22,126,225) |
| | 26-1903919 | NW-Rei, LLC | (14,477,866) | | 82,138,940 | | | | | | | 67,661,074 |
| | 13999 | Olentangy Reinsurance,LLC | | | | | | | | | | (1,242,089,499) |
| | 47-1923444 | On Your Side Nationwide Insurance Agency Inc | | | 56,001,000 | | | | | | | 56,001,000 |
| | | Oys Fund, LLC | (23,000,000) | | 56,000,000 | | | | | | | 33,000,000 |
| | 82-0549218 | Retention Alternatives, Inc | (15,000,000) | | | | | | | | | (15,000,000) |
| | | Riverview Multi Series Fund, LI - Class Event | | | (704,049) | | | | | | | (704,049) |
| | 15580 | Scottsdale Indemnity Company | | | | | | | | | | 462,331,570 |
| | 41297 | Scottsdale Insurance Company | | | | | | | | * | | 1,376,514,367 |
| | 10672 | Scottsdale Surplus Lines Insurance Company | | | 30,000,000 | | | | | | | 16,823,662 |
| | 13242 | Titan Indemnity Insurance Company | | | | | | | | | | 152,552,078 |
| | 36269 | Titan Insurance Company | | | | | | | | | | 24,965,445 |
| | 10778 | Victoria National Insurance Company | | | | | | | | * | | 1,204 |
| | 10644 | Victoria Auto Insurance Company | | | | | | | | * | | 38,543,924 |
| | 42889 | Victoria Fire & Casualty Insurance Company | | | | | | | | | | 183,107,731 |
| | 10108 | Victoria Select Insurance Company | | | | | | | | * | | 68,179,111 |
| | 10777 | Victoria Specialty Insurance Company | | | | | | | | * | | 41,768,968 |
| | 42285 | Veterinary Pet Ins Co | (3,200,000) | | 3,200,000 | | | | | | | (1,196,540) |
| | | V.P.I Services, Inc. | | | | | | | | | | 3,200,000 |
| | 37150 | Western Heritage Insurance Company | | | | | | | | | | 337,742,137 |
| | | 999999 Control Totals | | | | | | | | XXX | | |

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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.

| | Responses | |
|---|---|---|
| | MARCH FILING | |
| 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 Risk Interrogatories be filed by April 1? | YES | |
| | MAY FILING | |
| 8. Will this company be included in a combined annual statement which is filed with the NAIC by May 1? | YES | |
| | JUNE FILING | |
| 9. Will an audited financial report be filed by June 1? | YES | |
| 10. Will Accountant's 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 annual 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 supplemental 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? | NO | |
| 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? | NO | |
| 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? | YES | |
| 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? | NO | |
| 26. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? | NO | |
| 27. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? | NO | |
| | 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 Expense 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? | YES | |
| Explanations: | | |
| 12. | | |
| 13. | | |
| 14. | | |
| 16. | | |
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| 29. | | |
| 30. | | |
| 31. | | |
| 32. | | |
| Bar Codes: | | |
| 12. | SIS Stockholder Information Supplement [Document Identifier 420] |  1 8 9 6 1 2 0 1 4 4 2 0 0 0 0 0 0 |
| 13. | Financial Guaranty Insurance Exhibit [Document Identifier 240] |  1 8 9 6 1 2 0 1 4 2 4 0 0 0 0 0 0 |
| 14. | Medicare Supplement Insurance Experience Exhibit [Document Identifier 360] |  1 8 9 6 1 2 0 1 4 3 6 0 0 0 0 0 0 |
| 16. | Trusted Surplus Statement [Document Identifier 490] |  1 8 9 6 1 2 0 1 4 4 9 0 0 0 0 0 0 |
| 17. | Premiums Attributed to Protected Cells [Document Identifier 385] |  1 8 9 6 1 2 0 1 4 3 8 5 0 0 0 0 0 |
| 18. | Reinsurance Summary Supplemental Filing [Document Identifier 401] |  1 8 9 6 1 2 0 1 4 4 0 1 0 0 0 0 0 |
| 19. | Medicare Part D Coverage Supplement [Document Identifier 365] |  1 8 9 6 1 2 0 1 4 4 5 0 0 0 0 0 0 |
| 23. | Bail Bond Supplement [Document Identifier 500] |  1 8 9 6 1 2 0 1 4 5 0 0 0 0 0 0 0 |
| 24. | Director and Officer Insurance Coverage Supplement [Document Identifier 505] |  1 8 9 6 1 2 0 1 4 5 0 0 0 0 0 0 0 |
| 25. | Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224] |  1 8 9 6 1 2 0 1 4 2 2 4 0 0 0 0 0 |
| 26. | Relief from the one-year cooling off period for independent CPA [Document Identifier 225] |  1 8 9 6 1 2 0 1 4 2 2 5 0 0 0 0 0 |

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

27. Relief from the Requirements for Audit Committees [Document Identifier 226]



28. Credit Insurance Experience Exhibit [Document Identifier 230]



29. Long-Term Care Experience Reporting Forms [Document Identifier 306]



30. Accident and Health Policy Experience Exhibit [Document Identifier 210]



31. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]



32. Supplemental Health Care Exhibit's Expense Allocation Report
[Document Identifier 217]



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY
OVERFLOW PAGE FOR WRITE-INS

NONE



SUPPLEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

Designate the type of health care providers reported on this page:
Physicians, including surgeons and osteopaths

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

NONE



SUPPLEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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 | | | | | | | |
| 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 | | | | | | | |
| 59. Total | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | |
| 58001. | | | | | | | | |
| 58002. | | | | | | | | |
| 58003. | | | | | | | | |
| 58998. Summary of remaining write-ins for Line 58 from overflow page | | | | | | | | |
| 58999. Totals (Lines 58001 thru 58003 plus 58998)(Line 58 above) | | | | | | | | |

NONE



SUPPLEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

Designate the type of health care providers reported on this page:
Other health care professionals, including dentists, chiropractors, and podiatrists

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 | | | | | | | |
| 59. Total | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | |
| 58001. | | | | | | | | |
| 58002. | | | | | | | | |
| 58003. | | | | | | | | |
| 58998. Summary of remaining write-ins for Line 58 from overflow page | | | | | | | | |
| 58999. Totals (Lines 58001 thru 58003 plus 58998)(Line 58 above) | | | | | | | | |

NONE



SUPPLEMENT FOR THE YEAR 2014 OF THE CRESTBROOK INSURANCE COMPANY

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 | | | | | | | |
| 59. Total | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | |
| 58001. | | | | | | | | |
| 58002. | | | | | | | | |
| 58003. | | | | | | | | |
| 58998. Summary of remaining write-ins for Line 58 from overflow page | | | | | | | | |
| 58999. Totals (Lines 58001 thru 58003 plus 58998)(Line 58 above) | | | | | | | | |

NONE

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