



# ANNUAL STATEMENT

For the Year Ended December 31, 2015

of the Condition and Affairs of the

## VICTORIA NATIONAL INSURANCE COMPANY

NAIC Group Code.....0140      0140  
(Current Period) (Prior Period)

NAIC Company Code..... 10778

Employer's ID Number..... 34-1842604

Organized under the Laws of OHIO

State of Domicile or Port of Entry OHIO

Country of Domicile US

Incorporated/Organized..... January 11, 1996

Commenced Business..... November 17, 1997

Statutory Home Office

22901 MILLCREEK BLVD., SUITE 400..... HIGHLAND HILLS .... OH .... US .... 44122-5724  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office

22901 MILLCREEK BLVD., SUITE 400... HIGHLAND HILLS .... OH .... US... 44122-5724....216-896-7866  
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address

ONE WEST NATIONWIDE BLVD., 1-04-701..... COLUMBUS .... OH .... US .... 43215-2220  
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records

ONE WEST NATIONWIDE BLVD., 1-04-701..... COLUMBUS .... OH .... US ... 43215-2220....614-249-1545  
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address

WWW.VICTORIAINSURANCE.COM

Statutory Statement Contact

CHERYL M. DENNIS  
(Name)  
FINRPT@NATIONWIDE.COM  
(E-Mail Address)

614-249-1545

(Area Code) (Telephone Number) (Extension)  
866-315-1430  
(Fax Number)

### OFFICERS

Name	Title
1. JAMES DAVID BENSON #	PRESIDENT
3. ANGELA CATHERINE KLETT #	VP & TREASURER

Name	Title
PAMELA ANN BIESECKER	SR VP-HEAD OF TAXATION

Name	Title
2. ROBERT WILLIAM HORNER III	VP & SECRETARY

### OTHER

JAMES DAVID BENSON #

ALAN PAUL DEMERS #

### DIRECTORS OR TRUSTEES

ALAN CARROLL ZEIGLER #

MICHAEL PATRICK LEACH

MARK ANGELO PIZZI #

State of..... OHIO  
County of.... FRANKLIN

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

(Signature)  
JAMES DAVID BENSON  
1. (Printed Name)  
PRESIDENT  
(Title)

(Signature)  
ROBERT WILLIAM HORNER III  
2. (Printed Name)  
VP & SECRETARY  
(Title)

(Signature)  
ANGELA CATHERINE KLETT  
3. (Printed Name)  
VP & TREASURER  
(Title)

Subscribed and sworn to before me  
This \_\_\_\_\_ day of \_\_\_\_\_ 2016

a. Is this an original filing?  
b. If no      1. State the amendment number  
                  2. Date filed  
                  3. Number of pages attached

Yes [ X ]   No [ ]

\_\_\_\_\_

**ASSETS**

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	3,194,881		3,194,881	3,200,903
2. Stocks (Schedule D):				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....			0	
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$....4,381, Schedule E-Part 1), cash equivalents (\$.....0, Schedule E-Part 2) and short-term investments (\$....325,134, Schedule DA).....	329,515		329,515	332,650
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....			0	
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets (Schedule DL).....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	3,524,396	0	3,524,396	3,533,553
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	6,649		6,649	6,651
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....			0	
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	(98)
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....	13		13	628
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....			0	
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....			0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....	84	84	0	100
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	3,531,142	84	3,531,058	3,540,834
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTALS (Lines 26 and 27).....	3,531,142	84	3,531,058	3,540,834

**DETAILS OF WRITE-INS**

1101. ....			0	
1102. ....			0	
1103. ....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. ....			0	
2502. ....			0	
2503. ....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0	0

**VICTORIA NATIONAL INSURANCE COMPANY**  
**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8).....		
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6).....		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9).....		
4. Commissions payable, contingent commissions and other similar charges.....		
5. Other expenses (excluding taxes, licenses and fees).....		
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....		
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	3,041	17,570
7.2 Net deferred tax liability.....	125	204
8. Borrowed money \$.....0 and interest thereon \$.....0.....		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$.....0 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....		
10. Advance premium.....		
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....		(38)
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19).....		
14. Amounts withheld or retained by company for account of others.....		
15. Remittances and items not allocated.....		
16. Provision for reinsurance (including \$.....0 certified) (Schedule F, Part 8).....		
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....		
19. Payable to parent, subsidiaries and affiliates.....	252	957
20. Derivatives.....		
21. Payable for securities.....		
22. Payable for securities lending.....		
23. Liability for amounts held under uninsured plans.....		
24. Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	3,418	18,693
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	3,418	18,693
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....	1,000,000	1,000,000
31. Preferred capital stock.....		
32. Aggregate write-ins for other than special surplus funds.....	0	0
33. Surplus notes.....		
34. Gross paid in and contributed surplus.....	1,500,000	1,500,000
35. Unassigned funds (surplus).....	1,027,640	1,022,141
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39).....	3,527,640	3,522,141
38. TOTALS (Page 2, Line 28, Col. 3).....	3,531,058	3,540,834

**DETAILS OF WRITE-INS**

2501. ....		
2502. ....		
2503. ....		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0
2901. ....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201. ....		
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

**VICTORIA NATIONAL INSURANCE COMPANY**  
**STATEMENT OF INCOME**

	1 Current Year	2 Prior Year
<b>UNDERWRITING INCOME</b>		
1. Premiums earned (Part 1, Line 35, Column 4).....		
DEDUCTIONS		
2. Losses incurred (Part 2, Line 35, Column 7).....		
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....		
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2).....		
5. Aggregate write-ins for underwriting deductions.....	0	0
6. Total underwriting deductions (Lines 2 through 5).....	0	0
7. Net income of protected cells.....		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7).....	0	0
<b>INVESTMENT INCOME</b>		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	4,314	11,897
10. Net realized capital gains (losses) less capital gains tax of \$.....0 (Exhibit of Capital Gains (Losses)).....		
11. Net investment gain (loss) (Lines 9 + 10).....	4,314	11,897
<b>OTHER INCOME</b>		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0).....	0	
13. Finance and service charges not included in premiums.....		
14. Aggregate write-ins for miscellaneous income.....	0	0
15. Total other income (Lines 12 through 14).....	0	0
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	4,314	11,897
17. Dividends to policyholders.....		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	4,314	11,897
19. Federal and foreign income taxes incurred.....	3,041	17,570
20. Net income (Line 18 minus Line 19) (to Line 22).....	1,273	(5,673)
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	3,522,141	3,485,485
22. Net income (from Line 20).....	1,273	(5,673)
23. Net transfers (to) from Protected Cell accounts.....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$....1,481.....	2,751	27,612
25. Change in net unrealized foreign exchange capital gain (loss).....		
26. Change in net deferred income tax.....	1,559	14,717
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3).....	(84)	
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....		
29. Change in surplus notes.....		
30. Surplus (contributed to) withdrawn from protected cells.....		
31. Cumulative effect of changes in accounting principles.....		
32. Capital changes:		
32.1 Paid in.....		
32.2 Transferred from surplus (Stock Dividend).....		
32.3 Transferred to surplus.....		
33. Surplus adjustments:		
33.1 Paid in.....		
33.2 Transferred to capital (Stock Dividend).....		
33.3. Transferred from capital.....		
34. Net remittances from or (to) Home Office.....		
35. Dividends to stockholders.....		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....		
37. Aggregate write-ins for gains and losses in surplus.....	0	0
38. Change in surplus as regards policyholders for the year (Lines 22 through 37).....	5,499	36,656
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	3,527,640	3,522,141

DETAILS OF WRITE-INS		
0501.....		
0502.....		
0503.....		
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0
1401.....		
1402.....		
1403.....		
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	0	0
3701.....		
3702.....		
3703.....		
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0

# VICTORIA NATIONAL INSURANCE COMPANY

## CASH FLOW

	1 Current Year	2 Prior Year
<b>CASH FROM OPERATIONS</b>		
1. Premiums collected net of reinsurance.....	38	(1,015)
2. Net investment income.....	14,569	26,846
3. Miscellaneous income.....	615	(239)
4. Total (Lines 1 through 3).....	15,222	25,592
5. Benefit and loss related payments.....	98	.....
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	.....	.....
7. Commissions, expenses paid and aggregate write-ins for deductions.....	.....	.....
8. Dividends paid to policyholders.....	.....	.....
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	17,570	6,955
10. Total (Lines 5 through 9).....	17,668	6,955
11. Net cash from operations (Line 4 minus Line 10).....	(2,446)	18,637
<b>CASH FROM INVESTMENTS</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	.....	200,000
12.2 Stocks.....	.....	.....
12.3 Mortgage loans.....	.....	.....
12.4 Real estate.....	.....	.....
12.5 Other invested assets.....	.....	.....
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	.....	.....
12.7 Miscellaneous proceeds.....	.....	.....
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	0	200,000
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	.....	.....
13.2 Stocks.....	.....	.....
13.3 Mortgage loans.....	.....	.....
13.4 Real estate.....	.....	.....
13.5 Other invested assets.....	.....	.....
13.6 Miscellaneous applications.....	.....	.....
13.7 Total investments acquired (Lines 13.1 to 13.6).....	0	0
14. Net increase (decrease) in contract loans and premium notes.....	.....	.....
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	0	200,000
<b>CASH FROM FINANCING AND MISCELLANEOUS SOURCES</b>		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....	.....	.....
16.2 Capital and paid in surplus, less treasury stock.....	.....	.....
16.3 Borrowed funds.....	.....	.....
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	.....	.....
16.5 Dividends to stockholders.....	.....	.....
16.6 Other cash provided (applied).....	(689)	1,253
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	(689)	1,253
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(3,135)	219,890
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	332,650	112,760
19.2 End of year (Line 18 plus Line 19.1).....	329,515	332,650

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

20,0001 .....	.....
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**Ex. of Premiums Earned**  
**NONE**

**Underwriting and Investment Ex. - Pt. 1A - Recapitulation of All Premiums**  
**NONE**

**Ex. Premiums Written**  
**NONE**

## UNDERWRITING AND INVESTMENT EXHIBIT

## PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	8
	1	2	3	4				
	Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1. Fire.....				0			0	0.0
2. Allied lines.....				0			0	0.0
3. Farmowners multiple peril.....				0			0	0.0
4. Homeowners multiple peril.....				0			0	0.0
5. Commercial multiple peril.....				0			0	0.0
6. Mortgage guaranty.....				0			0	0.0
8. Ocean marine.....				0			0	0.0
9. Inland marine.....				0			0	0.0
10. Financial guaranty.....				0			0	0.0
11.1 Medical professional liability - occurrence.....				0			0	0.0
11.2 Medical professional liability - claims-made.....				0			0	0.0
12. Earthquake.....				0			0	0.0
13. Group accident and health.....				0			0	0.0
14. Credit accident and health (group and individual).....				0			0	0.0
15. Other accident and health.....				0			0	0.0
16. Workers' compensation.....				0			0	0.0
17.1 Other liability - occurrence.....				0			0	0.0
17.2 Other liability - claims-made.....				0			0	0.0
17.3 Excess workers' compensation.....				0			0	0.0
18.1 Products liability - occurrence.....				0			0	0.0
18.2 Products liability - claims-made.....				0			0	0.0
19.1, 19.2 Private passenger auto liability.....		(493)		(493)	0		0	0.0
19.3, 19.4 Commercial auto liability.....		(300)		(300)	0		0	0.0
21. Auto physical damage.....				0			0	0.0
22. Aircraft (all perils).....				0			0	0.0
23. Fidelity.....				0			0	0.0
24. Surety.....				0			0	0.0
26. Burglary and theft.....				0			0	0.0
27. Boiler and machinery.....				0			0	0.0
28. Credit.....				0			0	0.0
29. International.....				0			0	0.0
30. Warranty.....				0			0	0.0
31. Reinsurance - nonproportional assumed property.....	XXX.			0			0	0.0
32. Reinsurance - nonproportional assumed liability.....	XXX.			0			0	0.0
33. Reinsurance - nonproportional assumed financial lines.....	XXX.			0			0	0.0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0.0
35. TOTALS.....		(793)	0	(793)	0	0	0	0.0

## DETAILS OF WRITE-INS

**UNDERWRITING AND INVESTMENT EXHIBIT****PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES**

Line of Business	Reported Losses				Incurred But Not Reported			8	9
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excluding Incurred but not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire.....				0				0	
2. Allied lines.....				0				0	
3. Farmowners multiple peril.....				0				0	
4. Homeowners multiple peril.....				0				0	
5. Commercial multiple peril.....				0				0	
6. Mortgage guaranty.....				0				0	
8. Ocean marine.....				0				0	
9. Inland marine.....				0				0	
10. Financial guaranty.....				0				0	
11.1 Medical professional liability - occurrence.....				0				0	
11.2 Medical professional liability - claims-made.....				0				0	
12. Earthquake.....				0				0	
13. Group accident and health.....				0				(a).....0	
14. Credit accident and health (group and individual).....				0				0	
15. Other accident and health.....				0				(a).....0	
16. Workers' compensation.....				0				0	
17.1 Other liability - occurrence.....				0				0	
17.2 Other liability - claims-made.....				0				0	
17.3 Excess workers' compensation.....				0				0	
18.1 Products liability - occurrence.....				0				0	
18.2 Products liability - claims-made.....				0				0	
19.1, 19.2 Private passenger auto liability.....	(30)			(30)	0	(119)		(119)	0
19.3, 19.4 Commercial auto liability.....					0				0
21. Auto physical damage.....		31		31	0	(21)		(21)	0
22. Aircraft (all perils).....					0				0
23. Fidelity.....					0				0
24. Surety.....					0				0
26. Burglary and theft.....					0				0
27. Boiler and machinery.....					0				0
28. Credit.....					0				0
29. International.....					0				0
30. Warranty.....					0				0
31. Reinsurance - nonproportional assumed property.....	XXX				0	XXX.			0
32. Reinsurance - nonproportional assumed liability.....	XXX				0	XXX.			0
33. Reinsurance - nonproportional assumed financial lines.....	XXX				0	XXX.			0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0
35. TOTALS.....	1	0	1	0	(140)	0	(140)	0	0

**DETAILS OF WRITE-INS**

3401. ....					0				0
3402. ....					0				0
3403. ....					0				0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0

(a) Including \$.....0 for present value of life indemnity claims.

**VICTORIA NATIONAL INSURANCE COMPANY**  
**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 3 - EXPENSES**

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1. Claim adjustment services:				
1.1 Direct.....	(315)			(315)
1.2 Reinsurance assumed.....				0
1.3 Reinsurance ceded.....	(315)			(315)
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3).....	0	0	0	0
2. Commission and brokerage:				
2.1 Direct, excluding contingent.....				0
2.2 Reinsurance assumed, excluding contingent.....				0
2.3 Reinsurance ceded, excluding contingent.....				0
2.4 Contingent - direct.....				0
2.5 Contingent - reinsurance assumed.....				0
2.6 Contingent - reinsurance ceded.....				0
2.7 Policy and membership fees.....				0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7).....	0	0	0	0
3. Allowances to manager and agents.....				0
4. Advertising.....			0	0
5. Boards, bureaus and associations.....			5	5
6. Surveys and underwriting reports.....				0
7. Audit of assureds' records.....				0
8. Salary and related items:				
8.1 Salaries.....			156	156
8.2 Payroll taxes.....				0
9. Employee relations and welfare.....			39	39
10. Insurance.....			4	4
11. Directors' fees.....			7	7
12. Travel and travel items.....			7	7
13. Rent and rent items.....			2	2
14. Equipment.....			1	1
15. Cost or depreciation of EDP equipment and software.....				0
16. Printing and stationery.....				0
17. Postage, telephone and telegraph, exchange and express.....			23	23
18. Legal and auditing.....			6	6
19. Totals (Lines 3 to 18).....	0	0	250	250
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$.....0.....				0
20.2 Insurance department licenses and fees.....				0
20.3 Gross guaranty association assessments.....				0
20.4 All other (excluding federal and foreign income and real estate).....				0
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4).....	0	0	0	0
21. Real estate expenses.....				0
22. Real estate taxes.....				0
23. Reimbursements by uninsured plans.....				0
24. Aggregate write-ins for miscellaneous expenses.....	0	0	2,714	2,714
25. Total expenses incurred.....	0	0	2,964	(a).....2,964
26. Less unpaid expenses - current year.....				0
27. Add unpaid expenses - prior year.....				0
28. Amounts receivable relating to uninsured plans, prior year.....				0
29. Amounts receivable relating to uninsured plans, current year.....				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29).....	0	(0)	2,964	2,964

**DETAILS OF WRITE-INS**

2401. Other expenses.....			2,714	2,714
2402. .....				0
2403. .....				0
2498. Summary of remaining write-ins for Line 24 from overflow page.....	0	0	0	0
2499. Totals (Lines 2401 thru 2403 plus 2498) (Line 24 above).....	0	0	2,714	2,714

(a) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.

**EXHIBIT OF NET INVESTMENT INCOME**

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds.....	(a).....	7,192
1.1 Bonds exempt from U.S. tax.....	(a).....	
1.2 Other bonds (unaffiliated).....	(a).....	
1.3 Bonds of affiliates.....	(a).....	
2.1 Preferred stocks (unaffiliated).....	(b).....	
2.11 Preferred stocks of affiliates.....	(b).....	
2.2 Common stocks (unaffiliated).....		
2.21 Common stocks of affiliates.....		
3. Mortgage loans.....	(c).....	
4. Real estate.....	(d).....	
5. Contract loans.....		
6. Cash, cash equivalents and short-term investments.....	(e).....	105
7. Derivative instruments.....	(f).....	
8. Other invested assets.....		
9. Aggregate write-ins for investment income.....		0
10. Total gross investment income.....		7,297
11. Investment expenses.....	(g).....	2,964
12. Investment taxes, licenses and fees, excluding federal income taxes.....	(g).....	
13. Interest expense.....	(h).....	
14. Depreciation on real estate and other invested assets.....	(i).....	0
15. Aggregate write-ins for deductions from investment income.....		16
16. Total deductions (Lines 11 through 15).....		2,980
17. Net investment income (Line 10 minus Line 16).....		4,314

**DETAILS OF WRITE-INS**

0901.....		
0902.....		
0903.....		
0998. Summary of remaining write-ins for Line 9 from overflow page.....		0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....		0
1501. Misc. Exp.....		16
1502.....		
1503.....		
1598. Summary of remaining write-ins for Line 15 from overflow page.....		0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above).....		16

(a) Includes \$.....0 accrual of discount less \$.....10,253 amortization of premium and less \$.....0 paid for accrued interest on purchases.  
 (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.  
 (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.  
 (d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.  
 (e) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.  
 (f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.  
 (g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.  
 (h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.  
 (i) Includes \$.....0 depreciation on real estate and \$.....0 depreciation on other invested assets.

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. government bonds.....			0	4,232	
1.1 Bonds exempt from U.S. tax.....			0		
1.2 Other bonds (unaffiliated).....			0		
1.3 Bonds of affiliates.....			0		
2.1 Preferred stocks (unaffiliated).....			0		
2.11 Preferred stocks of affiliates.....			0		
2.2 Common stocks (unaffiliated).....			0		
2.21 Common stocks of affiliates.....			0		
3. Mortgage loans.....			0		
4. Real estate.....			0		
5. Contract loans.....			0		
6. Cash, cash equivalents and short-term investments.....			0		
7. Derivative instruments.....			0		
8. Other invested assets.....			0		
9. Aggregate write-ins for capital gains (losses).....	0	0	0	0	0
10. Total capital gains (losses).....	0	0	0	4,232	0

**DETAILS OF WRITE-INS**

0901.....			0		
0902.....			0		
0903.....			0		
0998. Summary of remaining write-ins for Line 9 from overflow page.....	0	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	0	0	0	0	0

**EXHIBIT OF NONADMITTED ASSETS**

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			0
2.2 Common stocks.....			0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			0
3.2 Other than first liens.....			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			0
4.2 Properties held for the production of income.....			0
4.3 Properties held for sale.....			0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			0
6. Contract loans.....			0
7. Derivatives (Schedule DB).....			0
8. Other invested assets (Schedule BA).....			0
9. Receivables for securities.....			0
10. Securities lending reinvested collateral assets (Schedule DL).....			0
11. Aggregate write-ins for invested assets.....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	0	0	0
13. Title plants (for Title insurers only).....			0
14. Investment income due and accrued.....			0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....			0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			0
15.3 Accrued retrospective premiums and contracts subject to redetermination.....			0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....			0
16.2 Funds held by or deposited with reinsured companies.....			0
16.3 Other amounts receivable under reinsurance contracts.....			0
17. Amounts receivable relating to uninsured plans.....			0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0
18.2 Net deferred tax asset.....			0
19. Guaranty funds receivable or on deposit.....			0
20. Electronic data processing equipment and software.....			0
21. Furniture and equipment, including health care delivery assets.....			0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0
23. Receivables from parent, subsidiaries and affiliates.....	84		(84)
24. Health care and other amounts receivable.....			0
25. Aggregate write-ins for other than invested assets.....	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	84	0	(84)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0
28. TOTALS (Lines 26 and 27).....	84	0	(84)

**DETAILS OF WRITE-INS**

1101. ....			0
1102. ....			0
1103. ....			0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0
2501. ....			0
2502. ....			0
2503. ....			0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0

**NOTES TO THE FINANCIAL STATEMENTS****Note 1 – Summary of Significant Accounting Policies and Going Concern****A. Accounting Practices**

The accompanying statutory financial statements of Victoria National Insurance Company (the Company) have been prepared in conformity with accounting practices prescribed or permitted by the National Association of Insurance Commissioners (NAIC) and the State of Ohio.

The Ohio Department of Insurance recognizes only statutory accounting practices (SAP) prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, as well as, determining its solvency under the Ohio Insurance law. The NAIC's *Accounting Practices and Procedures Manual* (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Ohio. The Company has no statutory accounting practices that differ from NAIC SAP.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Ohio is shown below:

			State of Domicile	2015	2014
<b><u>Net Income</u></b>					
(1) Victoria National Insurance Company state basis (Page 4, Line 20, Columns 1&3)	OH	\$	1,273	\$	(5,673)
(2) State prescribed practices that increase/(decrease) NAIC SAP	OH		-		-
(3) State permitted practices that increase/(decrease) NAIC SAP	OH		-		-
(4) NAIC SAP (1-2-3=4)	OH	\$	<u>1,273</u>	\$	<u>(5,673)</u>
<b><u>Surplus</u></b>					
(5) Victoria National Insurance Company state basis (Page 3, Line 27, Columns 1&2)	OH	\$	3,527,640	\$	3,522,141
(6) State prescribed practices that increase/(decrease) NAIC SAP	OH		-		-
(7) State permitted practices that increase/(decrease) NAIC SAP	OH		-		-
(8) NAIC SAP (5-6-7=8)	OH	\$	<u>3,527,640</u>	\$	<u>3,522,141</u>

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

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

**C. Accounting Policies**

**Federal Income Taxes.** The Company's parent, Nationwide Mutual Insurance (Mutual), files a consolidated federal income tax return, which includes all eligible U.S. subsidiaries and affiliates. In this regard, the included subsidiaries and affiliates pay to Mutual the amount which would have been payable on a separate return basis without regard to the alternative minimum tax. Mutual pays tax due on a consolidated basis.

The Company provides for federal income taxes based on amounts the Company believes it will ultimately owe. Inherent in the provision for federal income taxes are estimates regarding the deductibility of certain items and the realization of certain tax credits. In the event the ultimate deductibility of certain items or the realization of certain tax credits differs from estimates, the Company may be required to change the provision for federal income taxes recorded in the financial statements which could be significant. Management has used best estimates to establish reserves based on current facts and circumstances regarding tax exposure items where the ultimate deductibility is open to interpretation.

In accordance with guidance specified in the NAIC SAP, the Company utilizes the asset and liability method of accounting for income taxes. Under this method, deferred tax assets (DTA), net of any non-admitted portion and statutory valuation allowance, and deferred tax liabilities are recognized for the future tax consequences attributable to differences between the financial statement carrying amounts of existing assets and liabilities and their respective tax basis. DTAs and liabilities are measured using enacted tax rates expected to apply to taxable income in the years in which those temporary differences are expected to be recovered or settled. The change in deferred taxes, excluding the impact of taxes on unrealized capital gains or losses and nonadmitted deferred taxes, is charged directly to surplus.

**Reinsurance Recoverables.** The Company cedes insurance to other companies in order to limit potential losses and diversify its exposure. Such agreements do not relieve the Company of its primary obligation to the policyholder in the event the reinsurer is unable to meet the obligations it has assumed. The Company monitors the financial condition of reinsurers on an ongoing basis and reviews its reinsurance agreements regularly in an attempt to minimize its exposure to significant losses from reinsurer insolvencies. Reinsurance recoverables include amounts billed to reinsurers on losses paid. Estimates of amounts expected to be recovered from reinsurers that have not yet been paid on losses are estimated in a manner consistent with the claim liability associated with the underlying policy. Such reinsurance recoverables and reserved deductions partially offset claim costs in the Company's statutory statements of operations and are included as an offset to losses and loss expense reserves in the accompanying statutory statements of admitted assets, liabilities and surplus. There were no contracts using deposit accounting as of December 31, 2015 and 2014.

Statutory accounting principles require recognition of a minimum liability for certain unsecured or overdue reinsurance recoverables. As of December 31, 2015 and 2014, the Company had no provision related to conditional reinsurance recoverable.

In addition, the Company uses the following accounting policies:

1. Short-term investments consist of investments with maturities of twelve months or less at acquisition and are stated at amortized cost, which approximates fair value.
2. Bonds, excluding loan-backed and structured securities, are stated at amortized cost except those with a NAIC designation of "3" through "6" which are stated at the lower of amortized cost or fair value. Amortization of premiums and discounts is calculated using the effective yield method.
3. Unaffiliated common stocks are stated at fair value.
4. Redeemable preferred stocks are stated at amortized cost except those with an NAIC designation of "3" through "6" which are stated at the lower of amortized cost or fair value. Perpetual preferred stocks are stated at fair value except those with an NAIC designation of "3" through "6" which are stated at the lower of amortized cost or fair value.
5. Mortgage loans are carried at the unpaid principal balance adjusted for premiums, discounts, less a valuation allowance. The valuation allowance for mortgage loans reflects management's best estimate of probable credit losses.
6. Loan-backed and structured securities (collectively, loan-backed securities) are stated at amortized cost or the lower of amortized cost or fair value in accordance with the provisions of Statement of Statutory Accounting Principles (SSAP) No. 43R, Loan-backed and Structured Securities, and the Purposes and Procedures Manual of the NAIC Securities Valuation Office. The retrospective adjustment method is used to value loan-backed securities where the collection of all contractual cash flows is probable. For all other loan-backed securities, the Company uses the prospective adjustment method.

**NOTES TO THE FINANCIAL STATEMENTS**

## 7. Investments in subsidiary and affiliated companies are stated as follows:

Not applicable.

8. Other invested assets consist primarily of investments in partnerships, limited liability companies and joint ventures. Underlying investments primarily include hedge funds, private equity funds, emerging market and private debt funds, real estate funds and tax credit partnerships. Except for investments in tax credit partnerships, interests are reported using the equity method of accounting. Changes in carrying value as a result of the equity method are reflected as net unrealized capital gains and losses as a direct adjustment to surplus. Realized gains and losses are generally recognized through income at the time of disposal or when operating distributions are received. Partnership interests in tax credits are carried at amortized cost with amortization charged to investment income over the period in which the tax benefits, primarily credits, are earned.

## 9. Accounting for derivatives

Not applicable.

10. Insurance premiums are generally earned ratably over the policy term. The liability for unearned premiums represents the portion of premiums written relating to the unexpired terms of coverage. Such reserves are computed by pro rata methods for direct business and are based on reports received from ceding companies for reinsurance assumed. Premiums in course of collection represent agent balances and uncollected premiums from policyholders for current policies in force and policy premiums assumed from others, including amounts placed with affiliates. As of December 31, 2015 and 2014, the Company had no liabilities related to premium deficiency reserves. The Company includes anticipated investment income when calculating its premium deficiency reserves, in accordance with SSAP No. 53, Property-Casualty Contracts – Premiums.

11. The Company establishes losses and loss expense reserves for reported claims and claims incurred but not yet reported (IBNR). Estimating the liability for losses and loss expense reserves involves significant judgment and multiple assumptions. Management considers the Company's experience with similar claims, historical trends, economic factors and judicial, legislative and regulatory changes in establishing reserves. The Company's losses and loss expense reserves are recorded net of reinsurance and amounts expected to be received from salvage (the amount recovered from property after the Company pays for a total loss) and subrogation (the right to recover payments from third parties).

Assumptions and estimates for losses and loss expense reserves are updated as new information becomes available. Due to the inherent uncertainty in estimating losses and loss expense reserves, the actual cost of settling claims may differ materially from recorded amounts. Changes in losses and loss expense reserve estimates are included in results of operations in the period the estimates are revised.

12. The Company has a written capitalization policy for prepaid expenses and purchases of items such as electronic data processing equipment, software, furniture, vehicles, other equipment and leasehold improvements. The Company has not modified its capitalization policy from the prior period.

13. Not applicable as the Company does not write major medical insurance with prescription drug coverage.

## D. Going Concern

Not applicable.

**Note 2 - Accounting Changes and Corrections of Errors**

## A. Accounting Changes and Corrections of Errors

***Adopted Accounting Standards***

In March 2015, the Company adopted SSAP No. 69, Treatment of Non-Cash Items in the Cash-Flow Statements. The adopted revisions clarify that the cash flow statement is limited to transactions involving "cash," which is defined to include cash, cash equivalents and short-term investments, and expand disclosures to include non-cash operating items. The adoption of the guidance resulted in a change in the current year presentation of the Cash-Flow Statement.

On July 1, 2014, the Company adopted revisions to SSAP No. 26, Bonds and SSAP No. 43R, Loan-Backed and Structured Securities. The revisions require expanded disclosures around structured notes to assist financial statement users in assessing risk by CUSIP level. The adoption resulted in increased disclosures only and had no impact on the Company's statutory financial statements. Refer to Note 5 K. for the disclosure requirements in accordance with the adopted guidance.

**Note 3 - Business Combinations and Goodwill**

Not applicable

**Note 4 – Discontinued Operations**

Not applicable.

**Note 5 – Investments**

## A. Mortgage Loans

Not applicable

## B. Troubled Debt Restructuring

Not applicable

## C. Reverse Mortgages

Not applicable.

## D. Loan-Backed Securities

1. Prepayment assumptions are generally obtained using a model provided by a third-party vendor.

2. Not applicable.

3. Not applicable.

4. Not applicable.

**NOTES TO THE FINANCIAL STATEMENTS**

5. The Company reviews all loan-backed and structured securities in which the fair value of the given security is less than the amortized cost to determine if a given security is other-than-temporarily impaired. The Company examines characteristics of the underlying collateral, such as delinquency and default rates, the quality of the underlying borrower, the type of collateral in the pool, the vintage year of the collateral, subordination levels within the structure of the collateral pool, and the quality of any credit guarantors, to determine the cash flows expected to be received for the security.

If the severity and duration of the security's unrealized loss indicates a risk of an other-than-temporary impairment, then the Company will evaluate if the amortized cost basis of the security will be recovered by comparing the present value of the cash flows expected to be received for the given security with the amortized cost basis of the security. If the present value of cash flows is greater than the amortized cost basis of a security then the security is deemed not to be other-than-temporarily impaired.

**E. Repurchase Agreements and Securities Lending Transactions**

1. For repurchase agreements, the Company policy requires that the reporting entity receive collateral having a fair value of at least 95% of the fair value of the securities transferred.

For reverse repurchase agreements, the Company policy requires that the reporting entity receive as collateral transferred securities having a fair value at least equal to 102% of the purchase price paid by the reporting entity for the securities.

The Company does not participate in a securities lending program.

2-7. Not applicable as the Company has no open repurchase agreements or securities lending transactions as of year-end.

**F. Real Estate**

Not applicable.

**G. Low-Income Housing Tax Credits**

Not applicable.

**NOTES TO THE FINANCIAL STATEMENTS****H. Restricted Assets****1. Restricted Assets (Including Pledged)**

Restricted Asset Category (Including pledged)	Gross Restricted						8	Percentage		
	Current Year					6	7	9	10	
	1	2	3	4	5					
Restricted Asset Category (Including pledged)	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
A Subject to contractual obligation for which liability is not shown	-	-	-	-	-	-	-	-	0.00%	0.00%
B Collateral held under security lending agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
C Subject to repurchase agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
D Subject to reverse repurchase agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
E Subject to dollar repurchase agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
F Subject to dollar reverse repurchase agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
G Placed under contracts	-	-	-	-	-	-	-	-	0.00%	0.00%
H Letter stock or securities restricted as to sale-excluding FHLB capital stock	-	-	-	-	-	-	-	-	0.00%	0.00%
I FHLB capital stock	-	-	-	-	-	-	-	-	0.00%	0.00%
J On deposit with states	537,588	-	-	-	537,588	539,183	(1,595)	537,588	15.22%	15.22%
K On deposit with other regulatory bodies	-	-	-	-	-	-	-	-	0.00%	0.00%
L Pledged collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-	-	-	0.00%	0.00%
M Pledged as collateral not captured in other categories	-	-	-	-	-	-	-	-	0.00%	0.00%
N Other restricted assets	-	-	-	-	-	-	-	-	0.00%	0.00%
O Total Restricted assets	537,588	-	-	-	537,588	539,183	(1,595)	537,588	15.22%	15.22%

**2. Detail of Assets Pledged as Collateral Not Captured in Other Categories**

Not applicable.

**3. Detail of Other Restricted Assets**

Not applicable

**I. Working Capital Finance Investments**

Not applicable.

**J. Offsetting and Netting of Assets and Liabilities**

No assets or liabilities are offset and reported net in accordance with a valid right to offset per SSAP No 64, Offsetting and Netting of Assets and Liabilities.

**K. Structured Notes**

CUSIP Identification	Actual Cost	Fair Value	Book/Adjusted Carrying Value	Mortgage- Referenced Security (YES/NO)
912828UX6	\$ 2,555,926	\$ 2,567,268	\$ 2,591,978	NO
<b>Total</b>	<b>\$ 2,555,926</b>	<b>\$ 2,567,268</b>	<b>\$ 2,591,978</b>	

**NOTES TO THE FINANCIAL STATEMENTS****Note 6 - Joint Ventures, Partnerships and Limited Liability Companies**

## A. Detail for Those Greater than 10% of Admitted Assets

Not applicable.

## B. Write-downs for Impairments

Not applicable

**Note 7 - Investment Income**

## A. Accrued Investment Income

The Company nonadmits investment income due and accrued if amounts are over 90 days past due with the exception of mortgage loans in default which are nonadmitted if amounts are over 180 days past due.

## B. Amounts Nonadmitted

The total amount of investment income nonadmitted at December 31, 2015 was \$0.

**Note 8 - Derivative Instruments**

Not applicable.

**Note 9 - Income Taxes**

## A. The components of the deferred tax asset/(liability) at December 31 are as follows:

	December 31, 2015		
	Ordinary	Capital	Total
(1a) Gross deferred tax assets	\$ 29	\$ 19,313	\$ 19,342
(1b) Statutory valuation allowance adjustment	-	-	-
(1c) Adjusted gross deferred tax assets	\$ 29	\$ 19,313	\$ 19,342
(1d) Deferred tax assets nonadmitted	-	-	-
(1e) Subtotal net admitted deferred tax asset	\$ 29	\$ 19,313	\$ 19,342
(1f) Deferred tax liabilities	-	19,467	19,467
(1g) Net admitted deferred tax asset/(net deferred tax liability)	\$ 29	\$ (154)	\$ (125)

	December 31, 2014		
	Ordinary	Capital	Total
(1a) Gross deferred tax assets	\$ -	\$ 18,409	\$ 18,409
(1b) Statutory valuation allowance adjustment	-	-	-
(1c) Adjusted gross deferred tax assets	\$ -	\$ 18,409	\$ 18,409
(1d) Deferred tax assets nonadmitted	-	-	-
(1e) Subtotal net admitted deferred tax asset	\$ -	\$ 18,409	\$ 18,409
(1f) Deferred tax liabilities	-	18,613	18,613
(1g) Net admitted deferred tax asset/(net deferred tax liability)	\$ -	\$ (204)	\$ (204)

	Change		
	Ordinary	Capital	Total
(1a) Gross deferred tax assets	\$ 29	\$ 904	\$ 933
(1b) Statutory valuation allowance adjustment	-	-	-
(1c) Adjusted gross deferred tax assets	\$ 29	\$ 904	\$ 933
(1d) Deferred tax assets nonadmitted	-	-	-
(1e) Subtotal net admitted deferred tax asset	\$ 29	\$ 904	\$ 933
(1f) Deferred tax liabilities	-	854	854
(1g) Net admitted deferred tax asset/(net deferred tax liability)	\$ 29	\$ 50	\$ 79

**NOTES TO THE FINANCIAL STATEMENTS****Admission Calculation Components SSAP No. 101**

	December 31, 2015		
	Ordinary	Capital	Total
(2a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$	- \$	- \$
(2b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from (2a) above) after application of the threshold limitation (the less of (2b)1 and (2b)2 below)	\$	- \$	- \$
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	\$	- \$	- \$
2. Adjusted gross deferred tax assets allowed per limit threshold	XXX	XXX	\$
(2c) Adjusted gross deferred tax assets (excluding the amount of deferred tax asset from 2(a) and 2(b) above) offset by gross deferred tax liabilities	\$	- \$	- \$
(2d) Deferred tax assets admitted as the result of application of SSAP No. 101 Total ((2a) + (2b) + (2c))	\$	- \$	- \$
December 31, 2014			
	Ordinary	Capital	Total
(2a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$	- \$	- \$
(2b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from (2a) above) after application of the threshold limitation (the less of (2b)1 and (2b)2 below)	\$	- \$	- \$
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	\$	- \$	- \$
2. Adjusted gross deferred tax assets allowed per limit threshold	XXX	XXX	\$ 528,321
(2c) Adjusted gross deferred tax assets (excluding the amount of deferred tax asset from 2(a) and 2(b) above) offset by gross deferred tax liabilities	\$	- \$	- \$
(2d) Deferred tax assets admitted as the result of application of SSAP No. 101 Total ((2a) + (2b) + (2c))	\$	- \$	- \$
Change			
	Ordinary	Capital	Total
(2a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$	- \$	- \$
(2b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from (2a) above) after application of the threshold limitation (the less of (2b)1 and (2b)2 below)	\$	- \$	- \$
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	\$	- \$	- \$
2. Adjusted gross deferred tax assets allowed per limit threshold	XXX	XXX	\$ (528,321)
(2c) Adjusted gross deferred tax assets (excluding the amount of deferred tax asset from 2(a) and 2(b) above) offset by gross deferred tax liabilities	\$	- \$	- \$
(2d) Deferred tax assets admitted as the result of application of SSAP No. 101 Total ((2a) + (2b) + (2c))	\$	- \$	- \$
December 31, 2015		December 31, 2014	
(3a) Ratio percentage used to determine recovery period and threshold limitation amount		N/A	110170.190%
(3b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in (2b)2 above		N/A	\$ 3,522,141

**NOTES TO THE FINANCIAL STATEMENTS****Impact of Tax Planning Strategies**

	December 31, 2015		
	Ordinary	Capital	Total
(4a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage			
(1) Adjusted Gross DTAs amount from Note 9A1(c)	\$ 29	\$ 19,313	\$ 19,342
(2) Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies		0.00%	0.00%
(3) Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 29	\$ 19,313	\$ 19,342
(4) Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of planning strategies		0.00%	0.00%
December 31, 2014			
	Ordinary	Capital	Total
(4a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage			
(1) Adjusted Gross DTAs amount from Note 9A1(c)	\$ -	\$ 18,409	\$ 18,409
(2) Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies		0.00%	0.00%
(3) Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ -	\$ 18,409	\$ 18,409
(4) Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of planning strategies		0.00%	0.00%
Change			
	Ordinary	Capital	Total
(4a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage			
(1) Adjusted Gross DTAs amount from Note 9A1(c)	\$ 29	\$ 904	\$ 933
(2) Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies		0.00%	0.00%
(3) Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 29	\$ 904	\$ 933
(4) Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of planning strategies		0.00%	0.00%
(4b) Does this Company's tax-planning strategies include the use of reinsurance?	Yes [ ]	No [ X ]	

B. There are no temporary differences for which deferred tax liabilities are not recognized.

C. Current income taxes incurred consist of the following major components:

	December 31, 2015		December 31, 2014		Change
	Ordinary	Capital	Ordinary	Capital	
<b>1. Current Income Tax</b>					
(a) Federal	\$ 3,041	\$ 17,570			(\$ 14,529)
(b) Foreign	-	-			-
(c) Subtotal	\$ 3,041	\$ 17,570			(\$ 14,529)
(d) Federal income tax on net capital gains	-	-			-
(e) Utilization of capital loss carry-forwards	-	-			-
(f) Other	-	-			-
(g) Federal and foreign income taxes incurred	<u>\$ 3,041</u>	<u>\$ 17,570</u>			<u>(\$ 14,529)</u>

**NOTES TO THE FINANCIAL STATEMENTS**

		December 31, 2015	December 31, 2014	Change
<b>2. Deferred Tax Assets</b>				
(a) Ordinary:				
(1) Discounting of unpaid losses	\$	-	\$ -	\$ -
(2) Unearned premium reserve		-	-	-
(3) Policyholder reserves		-	-	-
(4) Investments		-	-	-
(5) Deferred acquisition costs		-	-	-
(6) Policyholder dividends accrual		-	-	-
(7) Fixed Assets		-	-	-
(8) Compensation benefits accrual		-	-	-
(9) Pension accrual		-	-	-
(10) Receivables - nonadmitted		29	-	29
(11) Net operating loss carry-forward		-	-	-
(12) Tax credit carry-forward		-	-	-
(13) Other (including items <5% of total ordinary tax assets)		-	-	-
(14) Nonadmitted miscellaneous		-	-	-
(15) Intangibles		-	-	-
(16) Capitalized R&E		-	-	-
(17) Nonadmitted premiums and agent bal		-	-	-
(18) Premium deficiency reserve		-	-	-
(99) Subtotal	\$	29	\$ -	\$ 29
(b) Statutory valuation allowance adjustment	\$	-	\$ -	\$ -
(c) Nonadmitted		-	-	-
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$	29	\$ -	\$ 29
(e) Capital:				
(1) Investments	\$	19,313	\$ 18,409	\$ 904
(2) Net capital loss carry-forward		-	-	-
(3) Real estate		-	-	-
(4) Other (including items <5% of total capital tax assets)		-	-	-
(99) Subtotal	\$	19,313	\$ 18,409	\$ 904
(f) Statutory valuation allowance adjustment	\$	-	\$ -	\$ -
(g) Nonadmitted		-	-	-
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$	19,313	\$ 18,409	\$ 904
(i) Admitted deferred tax assets (2d + 2h)	\$	19,342	\$ 18,409	\$ 933
<b>3. Deferred Tax Liabilities</b>				
(a) Ordinary:				
(1) Investments	\$	-	\$ -	\$ -
(2) Fixed assets		-	-	-
(3) Deferred and uncollected premium		-	-	-
(4) Policyholder reserves		-	-	-
(5) Other (including items <5% of total ordinary tax liabilities)		-	-	-
(6) Compensation and benefit accrual		-	-	-
(7) Guaranty assessments		-	-	-
(8) Agent acquisitions		-	-	-
(9) Surplus note interest accrual		-	-	-
(10) Pension accrual		-	-	-
(11) Other liabilities		-	-	-
(12) Unrealized miscellaneous		-	-	-
(99) Subtotal	\$	-	\$ -	\$ -
(b) Capital:				
(1) Investments	\$	19,467	\$ 18,613	\$ 854
(2) Real estate		-	-	-
(3) Other (including items <5% of total capital tax liabilities)		-	-	-
(99) Subtotal	\$	19,467	\$ 18,613	\$ 854
(c) Deferred tax liabilities (3a99 + 3b99)	\$	19,467	\$ 18,613	\$ 854
<b>4. Net deferred tax asset/(liability) (2i - 3c)</b>	\$	(125)	\$ (204)	\$ 79

**NOTES TO THE FINANCIAL STATEMENTS**

5. The change in deferred income taxes is comprised of the following (this analysis is exclusive of the nonadmitted assets as the Change in Nonadmitted Assets are reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):

	December 31, 2015	December 31, 2014	Change
(a) Adjusted gross deferred tax assets	\$ 19,342	\$ 18,409	\$ 933
(b) Deferred tax liabilities	<u>19,467</u>	<u>18,613</u>	<u>854</u>
(c) Net deferred tax assets (liabilities)	\$ (125)	\$ (204)	\$ 79
(d) Tax effect of unrealized gains (losses)			(1,481)
(e) Tax effect of unrealized postretirement benefits			-
(f) Change in deferred income tax			<u>1,560</u>

D. The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory Federal income tax rate to pre-tax income. The significant book to tax adjustments causing this difference are as follows:

	December 31, 2015	December 31, 2014
(a) Current income taxes incurred	\$ 3,041	\$ 17,570
(b) Change in deferred income tax	<u>(1,560)</u>	<u>(14,717)</u>
(c) Total income tax reported	\$ 1,481	\$ 2,853
(d) Income before taxes	\$ 4,314	\$ 11,897
(e) Federal statutory tax rate	35%	35%
(f) Expected income tax expense (benefit) at 35% statutory rate	\$ 1,510	\$ 4,164
(1) Tax-exempt income	\$ -	\$ (1,311)
(2) Dividends received deduction	\$ -	\$ -
(3) Nondeductible expenses	\$ -	\$ -
(4) Deferred tax benefit on nonadmitted assets	\$ -	\$ -
(5) Change in tax reserves	\$ -	\$ -
(6) Tax credits	\$ -	\$ -
(7) Other	\$ (29)	\$ -
(8) Extraordinary distribution	\$ -	\$ -
(9) COLI - change in CSV	\$ -	\$ -
(10) Dividends - Return of Capital	\$ -	\$ -
(g) Total	<u>\$ 1,481</u>	<u>\$ 2,853</u>

## E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits

1. As of December 31, operating loss or tax credit carryforwards are available as follows:

	Amount	Origination	Expiration
Operating loss carryforwards	\$ -	2002-2011	2017-2027
Operating loss carryforwards	\$ -	2011	2031
Operating loss carryforwards	\$ -	2012	2032
Operating loss carryforwards	\$ -	2013	2033
Operating loss carryforwards	\$ -	2014	2034
Amount of AMT tax credits	\$ -	2008	N/A
Amount of AMT tax credits	\$ -	2009	N/A
Amount of AMT tax credits	\$ -	2010	N/A
Amount of AMT tax credits	\$ -	2011	N/A
Amount of AMT tax credits	\$ -	2012	N/A
Amount of AMT tax credits	\$ -	2013	N/A
Amount of AMT tax credits	\$ -	2014	N/A
Business credits	\$ -	2009	2029
Business credits	\$ -	2010	2030
Business credits	\$ -	2011	2031
Business credits	\$ -	2012	2032
Business credits	\$ -	2013	2033
Business credits	\$ -	2014	2034

2. The amount of Federal income taxes incurred that are available for recoupment in the event of future net losses are:

2015	\$ -
2014	\$ -

3. The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.

**NOTES TO THE FINANCIAL STATEMENTS****F. Consolidated Federal Income Tax Return**

1. The company's federal income tax return is consolidated with the following entities:

Nationwide Mutual Insurance Company	Nationwide Global Ventures, Inc.
AGMC Reinsurance, Ltd	Nationwide Indemnity Company
Allied General Agency Company	Nationwide Insurance Company of America
Allied Group, Inc.	Nationwide Insurance Company of Florida
Allied Holding (Delaware), Inc.	Nationwide Investment Services Corporation
Allied Insurance Company of America	Nationwide Life & Annuity Insurance Co.
Allied Property & Casualty Insurance Company	Nationwide Life Insurance Company
Allied Texas Agency, Inc.	Nationwide Lloyds
AMCO Insurance Company	Nationwide Member Solutions Agency, Inc.
American Marine Underwriters	Nationwide Property & Casualty Insurance Company
Crestbrook Insurance Company	Nationwide Retirement Solutions Ins. Agency, Inc.
Depositors Insurance Company	Nationwide Retirement Solutions, Inc.
DVM Insurance Agency, Inc.	Nationwide Retirement Solutions, Inc. of AZ
Eagle Captive Reinsurance LLC	Nationwide Retirement Solutions, Inc. of OH
Freedom Specialty Insurance Company	Nationwide Retirement Solutions, Inc. of TX
Harleysville Group Inc.	NFS Distributors, Inc.
Harleysville Insurance Co. of New York	NWD Asset Management Holdings, Inc.
Harleysville Insurance Company	NWD Investment Management, Inc.
Harleysville Insurance Company of New Jersey	On Your Side Nationwide Insurance Agency, Inc.
Harleysville Lake States Insurance Company	Premier Agency, Inc.
Harleysville Preferred Insurance Company	Registered Investment Advisors Services, Inc.
Harleysville Worcester Insurance Company	Riverview International Group, Inc.
Insurance Intermediaries, Inc.	Scottsdale Indemnity Company
Lone Star General Agency, Inc.	Scottsdale Insurance Company
National Casualty Company	Scottsdale Surplus Lines Insurance Company
Nationwide Advantage Mortgage Company	THI Holdings (Delaware), Inc.
Nationwide Affinity Insurance Company of America	Titan Auto Insurance of New Mexico, Inc.
Nationwide Agribusiness Insurance Company	Titan Indemnity Company
Nationwide Assurance Company	Titan Insurance Company
Nationwide Bank	Titan Insurance Services, Inc.
Nationwide Cash Management Company	Veterinary Pet Insurance Company
Nationwide Corporation	Victoria Automobile Insurance Company
Nationwide Fin. Institution Distrib. Agency, Inc.	Victoria Fire & Casualty Company
Nationwide Financial Assignment Company	Victoria National Insurance Company
Nationwide Financial General Agency, Inc.	Victoria Select Insurance Company
Nationwide Financial Services, Inc.	Victoria Specialty Insurance Company
Nationwide General Insurance Company	VPI Services, Inc.
Nationwide Global Holdings, Inc.	Western Heritage Insurance Company

Effective January 1, 2015, the consolidated federal income tax filing group of which the Company is a member expanded to include Mutual's eligible life insurance subsidiaries and non-insurance subsidiaries of the life insurance companies.

2. Effective January 1, 2015, the Company became a party to a revised tax sharing agreement which was approved by the Board of Directors. The revised tax sharing agreement reflects Mutual's new consolidated federal return group which includes its eligible life and non-life subsidiaries. The method of allocation among the companies is based upon separate return calculations with current benefit for tax losses and credits utilized in the consolidated return.

**G. Federal or Foreign Federal Income Tax Loss Contingencies**

The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

**Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties****A. Nature of Relationships**

The Company is a wholly owned subsidiary of Victoria Fire & Casualty Company, which is in turn owned by THI Holdings (Delaware), Inc. (THI). THI is owned by Mutual, which, as a mutual entity, is not directly or indirectly owned or controlled by any other company, corporation, and group of companies, partnership or individual. Mutual is operated by and solely in the interests of its policyholders.

Bonds and stocks, if any, owned, acquired or disposed of in any year by the Company in any subsidiary or affiliate are set forth in Schedule D of either this statement or those of prior years. Intercompany relationships and specific holdings are detailed in the Nationwide Corporate Organizational Chart, which appears as Schedule Y of this statement.

The Company is a party to various reinsurance agreements including a pooling agreement with several affiliated companies. See Note 26.

The Company and various affiliates have entered into agreements with Nationwide Cash Management Company (NCMC), a subsidiary of Mutual, under which NCMC acts as a common agent in handling the purchases and sales of short-term investments for the respective accounts of the participants. Amounts on deposit with NCMC were \$325 thousand and \$91 thousand as of December 31, 2015 and 2014, respectively.

**B. Detail of Transactions Greater than 1/2 % of Admitted Assets**

Not applicable.

**C. Change in Terms of Intercompany Arrangements**

Not applicable.

## **NOTES TO THE FINANCIAL STATEMENTS**

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

Affiliate receivables and payables are the result of cost sharing and intercompany service agreements between the Company and its affiliates in which settlement has not yet occurred. Affiliate receivables are presented gross of affiliate payables when the Company has the right to offset. The Company reported gross amounts of \$0 and \$100 due from parent and affiliates and \$252 and \$957 due to parent and affiliates at December 31, 2015 and 2014, respectively. These arrangements are subject to written agreements which require that intercompany balances be settled within 30 days.

### **E. Guarantees or Undertakings for Related Parties**

The Company has no guarantees or contingent commitments to affiliates.

### **F. Management, Service Contracts, Cost Sharing Arrangements**

The Company and various affiliates share a home office, other facilities, equipment, common management and administrative services. Pursuant to a cost sharing agreement between the companies, the amounts associated with these services are subject to allocation based on standard allocation techniques and procedures acceptable under general cost accounting techniques and procedures in conformity with the NAIC SAP. Measures used to determine the allocation among companies includes individual employee estimates of time spent, special cost studies, claims counts, policies in force, direct written premiums, paid losses, pro rata share of employees or their salaries and other methods agreed to by the participating companies. The Company does not believe amounts recognized under the intercompany agreement are materially different than what would have been recognized had the Company operated on a stand-alone basis.

### **G. Nature of Relationships that Could Affect Operations**

Not applicable.

### **H. Amount Deducted for Investment in Upstream Company**

Not applicable.

### **I. Detail of Investment in Affiliates Greater than 10% of Admitted Assets**

The Company does not hold any investments in affiliates.

### **J. Write-down for Impairments of Investments in Subsidiary, Controlled or Affiliated Companies**

Not applicable.

### **K. Investment in a foreign insurance subsidiary**

Not applicable.

### **L. Downstream Holding Company**

The Company does not hold any investments in affiliates.

### **M. Investments in non-insurance SCA entities**

Not applicable.

### **N. Investments in insurance SCA entities**

Not applicable.

### **Note 11 - Debt**

#### **A. All Other Debt**

Not applicable.

#### **B. Funding Agreements with Federal Home Loan Bank (FHLB)**

Not applicable.

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

#### **A. Defined Benefit Plans**

Not applicable.

#### **B. Description of Investment Policies**

Not applicable.

#### **C. Fair Value of Plan Assets**

Not applicable.

#### **D. Rate of Return Assumptions**

Not applicable.

#### **E. Defined Contribution Plans**

Not applicable.

#### **F. Multiemployer Plans**

Not applicable.

**NOTES TO THE FINANCIAL STATEMENTS****G. Consolidated/Holding Company Plans**

Not applicable.

**H. Postemployment Benefits and Compensated Absences**

Not applicable.

**I. Impact of Medicare Modernization Act on Postretirement Benefits**

Not applicable.

**Note 13 - Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations****A. Outstanding Shares**

The Company has 1,000 shares of \$1,000 par value common stock authorized, issued and outstanding.

**B. Dividend Rate of Preferred Stock**

Not applicable.

**C. Dividend Restrictions**

The payment of dividends by the Company is limited by state insurance laws. For example, Ohio Insurance Code requires Ohio-domiciled insurance companies to seek prior regulatory approval to pay a dividend or distribution of cash or other property if the fair market value thereof, together with that of other dividends or distributions made in the preceding twelve months, exceeds the greater of (i) 10% of the insurer's surplus as regards policyholders as of the thirty-first day of December next preceding or (ii) the net income of the insurer for the twelve month period ending the thirty-first day of December next preceding. Additionally, the Ohio Insurance Code requires insurers to seek prior regulatory approval for any dividend paid from surplus that is other than earned. Subject to applicable regulatory approval(s), dividends are paid as determined by the Company's board of directors.

**D. Dividends Paid**

No dividends were paid by the Company during 2015 and 2014.

**E. Profits Available for Ordinary Dividends**

Within the limitations of (C) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to shareholders.

**F. Restrictions on Surplus**

There is no restriction on the use of the Company's unassigned surplus and such surplus is held for the benefit of the shareholder.

**G. Advances to Surplus Not Repaid**

Not applicable.

**H. Stock Held by Company for Special Purposes**

Not applicable.

**I. Changes in Special Surplus Funds**

Not applicable.

**J. Changes in Unassigned Funds**

The portion of unassigned funds (surplus) represented by cumulative unrealized capital gains is \$57 thousand less applicable deferred taxes of \$20 thousand for a net unrealized capital gain of \$37 thousand.

**K. Surplus Notes**

Not applicable.

**L. and M. Quasi Reorganizations**

Not applicable

**Note 14 – Contingencies****A. Contingent Commitments**

The Company has no commitments or contingent commitment to affiliates or other entities. As indicated in Note 10 E, the Company has made no guarantees on behalf of affiliates.

**B. Guaranty Fund and Other Assessments**

The Company is subject to guaranty fund and other assessments by the states in which it writes business. Guaranty fund assessments should be accrued at the time of insolvencies. Other assessments should be accrued either at the time of assessments or in the case of premium based assessments, at the time the premiums were written. In the case of loss-based assessments, the assessments should be accrued at the time the losses are incurred.

As outlined in Note 26, the Company participated in a 100% pooling reinsurance agreement with Mutual. Therefore, the accrued liability for guaranty fund and other assessments and the related premium tax benefit have been ceded to Mutual.

**C. Gain Contingencies**

Not applicable.

**D. Claims Related Extra Contractual Obligations and Bad Faith Losses Stemming From Lawsuits**

Not applicable.

**NOTES TO THE FINANCIAL STATEMENTS**

## E. Product Warranties

Not applicable.

## F. Joint and Several Liabilities

Not applicable.

## G. All Other Contingencies

Various lawsuits arise against the Company in the normal course of the Company's business. Contingent liabilities arising from litigation and other matters are not considered material in relation to the financial position of the Company.

**Note 15 – Leases**

## A. Lessee Leasing Arrangements

Not applicable.

## B. Lessor Leasing Arrangements

Not applicable.

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

## A. Financial Instruments with Off-Balance Sheet Risk

Not applicable.

## B. Financial Instruments with Concentrations of Credit Risk

Not applicable.

## C. Exposure to Credit-Related Losses

Not applicable.

## D. Collateral Policy

Not applicable.

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

## A. Transfers of Receivables Reported as Sales

Not applicable.

## B. Transfers and Servicing of Financial Assets

1. There were no securities lending activities during the current period.
2. No servicing assets or liabilities were recognized during the period.
3. No servicing assets or liabilities were recognized during the period.
4. There were no assets securitized during the period.
5. There were no transfers of financial assets accounted for as a secured borrowing.
6. There were no transfers of receivables with recourse.
7. There were no repurchase, reverse purchase, dollar repurchase, or reverse dollar repurchase agreements during the period.

## C. Wash Sales

Not Applicable.

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

## A. Administrative Services Only (ASO) Plans

Not applicable.

## B. Administrative Services Contract (ASC) Plans

Not applicable.

## C. Medicare or Other Similarly Structured Cost Based Reimbursement Contracts

Not applicable.

**Note 19 - Direct Premiums Written/Produced by Managing General Agents/Third Party Administrators**

Not applicable.

**Note 20 – Fair Value Measurements**

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Fair value measurements are based upon observable and unobservable inputs. Observable inputs reflect market data obtained from independent sources while unobservable inputs reflect the Company's view of market assumptions in the absence of observable market information. The Company utilizes valuation techniques that maximize the use of observable inputs and minimize the use of unobservable inputs. In determining fair value, the Company uses various methods including market, income and cost approaches.

## **NOTES TO THE FINANCIAL STATEMENTS**

The Company categorizes its financial assets and liabilities into a three-level hierarchy based on the priority of the inputs to the valuation technique. The fair value hierarchy gives the highest priority to quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). If the inputs used to measure fair value fall within different levels of the hierarchy, the category level is based on the lowest priority level input that is significant to the fair value measurement of the instrument in its entirety.

The Company categorizes financial assets and liabilities as follows:

*Level 1.* Unadjusted quoted prices accessible in active markets for identical assets or liabilities at the measurement date and mutual funds where the value per share (unit) is determined and published daily and is the basis for current transactions.

*Level 2.* Unadjusted quoted prices for similar assets or liabilities in active markets or inputs (other than quoted prices) that are observable or that are derived principally from or corroborated by observable market data through correlation or other means. Primary inputs to this valuation technique may include comparative trades, bid/asks, interest rate movements, U.S. Treasury rates, U.S. LIBOR, prime rates, cash flows, maturity dates, callability, estimated prepayments and/or underlying collateral values.

*Level 3.* Prices or valuation techniques that require inputs that are both unobservable and significant to the overall fair value measurement. Inputs reflect management's best estimate about the assumptions market participants would use at the measurement date in pricing the asset or liability. Consideration is given to the risk inherent in both the method of valuation and the valuation inputs. Primary inputs to this valuation technique include broker quotes and comparative trades.

The Company reviews its fair value hierarchy classifications for financial assets and liabilities quarterly. Changes in observability of significant valuation inputs identified during these reviews may trigger reclassifications. Reclassifications are reported as transfers at the beginning of the period in which the change occurs.

To determine the fair value of bonds and stocks for which market quotations are available, independent pricing services are most often utilized. For these bonds and stocks, the Company obtains the pricing services' methodologies, inputs and assumptions and classifies the investments accordingly in the fair value hierarchy.

A corporate pricing matrix is used in valuing certain corporate bonds. The corporate pricing matrix was developed using publicly available spreads for privately placed corporate securities with varying weighted average lives and credit quality ratings. The weighted average life and credit quality rating of a particular bond to be priced using the corporate pricing matrix are important inputs into the model and are used to determine a corresponding spread that is added to the appropriate U.S. Treasury yield to create an estimated market yield for that bond. The estimated market yield and other relevant factors are then used to estimate the fair value of the particular bond.

Non-binding broker quotes are also utilized to determine the fair value of certain bonds when quotes are not available from independent pricing services or a corporate pricing matrix. These bonds are classified accordingly in the fair value hierarchy as only one broker quote is ordinarily obtained, the investment is not traded on an exchange, the pricing is not available to other entities and/or the transaction volume in the same or similar investments has decreased. Inputs used in the development of prices are not provided to the Company by the brokers as the brokers often do not provide the necessary transparency into their quotes and methodologies. Broker quotes are subject to validation of price movements that require approval from the Company's management. Management uses its knowledge of the investment and current market conditions to determine if the price is indicative of the investment's fair value.

No financial assets or liabilities were carried at fair value as of December 31, 2015.

The following table summarizes aggregate carrying value and fair value, by level, for all financial assets and liabilities, excluding assets and liabilities reported at fair value, as of December 31, 2015:

	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Not Practicable (Carrying Value)
<b>Assets</b>						
Bonds	\$3,179,925	\$3,194,881	\$3,179,925	\$-	\$-	\$-
Stocks	-	-	-	-	-	-
Mortgage loans	-	-	-	-	-	-
Short-term investments	325,134	325,134	-	325,134	-	-
Derivative assets	-	-	-	-	-	-
Policy loans	-	-	-	-	-	-
Securities lending collateral assets <sup>1</sup>	-	-	-	-	-	-
<b>Total Assets</b>	<b>\$3,505,059</b>	<b>\$3,520,015</b>	<b>\$3,179,925</b>	<b>\$325,134</b>	<b>\$-</b>	<b>\$-</b>
<b>Liabilities</b>						
Derivatives Liabilities	\$-	\$-	\$-	\$-	\$-	\$-
<b>Total Liabilities</b>	<b>\$-</b>	<b>\$-</b>	<b>\$-</b>	<b>\$-</b>	<b>\$-</b>	<b>\$-</b>

1 Includes nonadmitted assets

### **Note 21 - Other Items**

A. Unusual or Infrequent Items

Not applicable.

B. Troubled Debt Restructuring for Debtors

Not applicable.

C. Other Disclosures

Not applicable.

D. Business Interruption Insurance Recoveries

Not applicable.

E. State Transferable and Non-Transferable Tax Credits

Not applicable.

## **NOTES TO THE FINANCIAL STATEMENTS**

### F. Subprime Mortgage Related Risk Exposure

1. The Company evaluates many characteristics when classifying collateral as subprime, including the credit quality of the borrower as defined by Fair Isaac Credit Organization (FICO) scores, as well as other factors, such as loan-to-value ratios and type of real estate.
2. The company has no direct exposure through investments in subprime mortgage loans.
3. The company had no subprime exposure through other investments or affiliates.
4. The company has no exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage.

### G. Insurance-Linked Securities

Not applicable.

#### **Note 22 - Events Subsequent**

##### Type I – Recognized Subsequent Events:

Subsequent events have been considered through February 15, 2016 for the statutory statement issued on February 16, 2016.

There were no material Type I events occurring subsequent to the end of the year that merited recognition or disclosure in these statements that have not already been reflected as required.

##### Type II – Nonrecognized Subsequent Events:

Subsequent events have been considered through February 15, 2016 for the statutory statement issued on February 16, 2016.

There were no material Type II events occurring subsequent to the end of the year that merited disclosure in these statements that have not already been reflected as required.

#### **Note 23 – Reinsurance**

Not Applicable

#### **Note 24 - Retrospectively Rated Contracts and Contracts Subject to Redetermination**

Not applicable.

#### **Note 25 - Changes in Incurred Losses and Loss Adjustment Expenses**

The Company is a participant in a 100% pooling reinsurance agreement with Mutual (as disclosed in Note 26), and as such has zero net incurred losses and loss adjustment expenses.

#### **Note 26 - Intercompany Pooling Arrangements**

Mutual is the lead company in the Nationwide Pool. Each pool member company contributes 100% of its underwriting results to the Nationwide Pool through the reinsurance pooling agreement.

As of December 31, 2015 and 2014, the companies in the Nationwide Pool assuming a proportionate share of the pool are:

	NAIC #	2015 Pool	2014 Pool
Nationwide Mutual Insurance Company	23787	83.0%	83.0%
Nationwide Mutual Fire Insurance Company	23779	12.0%	12.0%
Scottsdale Insurance Company	41297	4.0%	4.0%
Farmland Mutual Insurance Company	13838	1.0%	1.0%

All of the other companies in the Nationwide Pool have a 0% retrocession. The zero percent participants in the Nationwide Pool are: Nationwide General Insurance Company (NAIC # 23760), Nationwide Property and Casualty Insurance Company (NAIC # 37877), Nationwide Affinity Insurance Company of America (NAIC # 26093), Crestbrook Insurance Company (NAIC # 18961), Allied Insurance Company of America (NAIC # 10127), AMCO Insurance Company (NAIC # 19100), Allied Property and Casualty Insurance Company (NAIC # 42579), Depositors Insurance Company (NAIC # 42587), Nationwide Agribusiness Insurance Company (NAIC # 28223), Victoria Fire & Casualty Company (NAIC # 42889), Victoria Automobile Insurance Company (NAIC # 10644), Victoria Specialty Insurance Company (NAIC # 10777), Victoria Select Insurance Company (NAIC # 10105), Victoria National Insurance Company (NAIC # 10778), Harleysville Preferred Insurance Company (NAIC #35696), Harleysville Insurance Company of New Jersey (NAIC #42900), Harleysville Worcester Insurance Company (NAIC #26182), Harleysville Insurance Company of New York (NAIC #10674), Harleysville Lake States Insurance Company (NAIC #14516) and Harleysville Insurance Company (NAIC #23582).

All lines of business are subject to the pooling agreements.

There are no discrepancies related to the pooled business between the assumed and ceded reinsurance schedules of the pool participants.

**NOTES TO THE FINANCIAL STATEMENTS**

Amounts due to/from the lead entity and pool participants as of December 31, 2015:

Name of Insurer	Amounts Receivable	Amounts Payable
Nationwide Mutual Insurance Company (Lead Insurer)	\$ 96,973,573	\$ 189,438,423
Nationwide Mutual Fire Insurance Company	\$ 14,713,975	\$ 4,662,247
Scottsdale Insurance Company	\$ 15,386,868	\$ 16,963
Farmland Mutual Insurance Company	\$ 65,288,536	\$ 54,997,455
Nationwide General Insurance Company	\$ 9,138,878	\$ 342,175
Nationwide Property & Casualty Insurance Company	\$ 63,256	\$ 11,606,857
Nationwide Affinity Insurance Company of America	\$ 5,595	\$ 13,078,255
Crestbrook Insurance Company	\$ 608,255	\$ 616,026
Allied Insurance Company of America	\$ 4,095,307	\$ 3,726,031
AMCO Insurance Company	\$ 166,228,179	\$ 82,604,757
Allied Property & Casualty Insurance Company	\$ 24,668,336	\$ 24,830,631
Depositors Insurance Company	\$ 8,424,224	\$ 7,135,556
Nationwide Agribusiness Insurance Company	\$ 27,940,190	\$ 18,154,223
Victoria Fire & Casualty Company	\$ 113,216	\$ 24,309,908
Victoria Automobile Insurance Company	\$ 2,946,084	\$ 3,632,160
Victoria Specialty Insurance Company	\$ 2,526,227	\$ 3,152,503
Victoria Select Insurance Company	\$ 2,385,258	\$ 3,558,361
Victoria National Insurance Company	\$ -	\$ 251
Harleysville Worcester Insurance Company	\$ 1,971,018	\$ 50,430
Harleysville Insurance Company of New Jersey	\$ 307,908	\$ 6,025
Harleysville Preferred Insurance Company	\$ 672	\$ 1,274,966
Harleysville Lake States Insurance Company	\$ 1,074,749	\$ 46,115
Harleysville Insurance Company	\$ 7,955,777	\$ 60,707
Harleysville Insurance Company of New York	\$ 1,066,083	\$ 3,001

**Note 27 - Structured Settlements**

A. Reserves Released due to Purchases of Annuities  
Not applicable.

B. Annuity Insurers with Balances due Greater than 1% of Policyholders' Surplus  
Not applicable.

**Note 28 - Health Care Receivables**

A. Pharmaceutical Rebate Receivables  
Not applicable.

B. Risk Sharing Receivables  
Not applicable.

**Note 29 – Participating Policies**

Not applicable.

**Note 30 - Premium Deficiency Reserves**

The Company's liability for premium deficiency reserves as of December 31, 2015 is as follows:

1. Liability carried for premium deficiency reserves \$0.00
2. Date of the most recent evaluation of this liability January 15, 2016
3. Was anticipated investment income utilized in the calculation? Yes

**Note 31 – High Deductibles**

Not applicable.

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

A. Tabular Discounts  
Not applicable.

B. Non-Tabular Discounts  
Not applicable.

C. Changes in Discount Assumptions  
Not applicable.

**Note 33 - Asbestos/Environmental Reserves**

Not applicable.

**Note 34 – Subscriber Savings Accounts**

Not applicable.

## **NOTES TO THE FINANCIAL STATEMENTS**

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

Not applicable.

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

Not applicable.

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

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?  Yes [ X ]  No [ ]  
If yes, complete Schedule Y, Parts 1, 1A and 2.

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?  Yes [ X ]  No [ ]  N/A [ ]

1.3 State regulating? OH

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

2.2 If yes, date of change:

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2011

3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2011

3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 03/19/2013

3.4 By what department or departments? OH

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

3.6 Have all of the recommendations within the latest financial examination report been complied with?  Yes [ ]  No [ ]  N/A [ X ]

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.11 sales of new business?  Yes [ ]  No [ X ]

4.12 renewals?  Yes [ ]  No [ X ]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums of:

4.21 sales of new business?  Yes [ ]  No [ X ]

4.22 renewals?  Yes [ ]  No [ X ]

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

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

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

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

6.2 If yes, give full information: N/A

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?  Yes [ ]  No [ X ]

7.2 If yes,

7.21 State the percentage of foreign control %

7.22 State the nationality(ies) of the foreign person(s) or entity(ies); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(ies) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

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

8.2 If response to 8.1 is yes, please identify the name of the bank holding company. N/A

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

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

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
Nationwide Bank	Columbus, OH	NO	YES	NO	NO
Nationwide Mutual Insurance Company	Columbus, OH	YES	NO	NO	NO
Nationwide Mutual Fire Insurance Company	Columbus, OH	YES	NO	NO	NO
Nationwide Corporation	Columbus, OH	YES	NO	NO	NO
Nationwide Financial Services, Inc.	Columbus, OH	YES	NO	NO	NO
Nationwide Investment Services Corp	Columbus, OH	NO	NO	NO	YES
Nationwide Investment Advisors, LLC	Columbus, OH	NO	NO	NO	YES
Nationwide Securities, LLC	Dublin, OH	NO	NO	NO	YES
Nationwide Fund Advisors	King of Prussia, PA	NO	NO	NO	YES
Nationwide Fund Distributors, LLC	King of Prussia, PA	NO	NO	NO	YES
Nationwide Asset Management, LLC	Columbus, OH	NO	NO	NO	YES

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
KPMG LLP, 191 W. Nationwide Blvd., Suite 500, Columbus, OH 43215

# VICTORIA NATIONAL INSURANCE COMPANY

## GENERAL INTERROGATORIES

### PART 1 - COMMON INTERROGATORIES

10.1	Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?		Yes [ ]	No [ X ]
10.2	If the response to 10.1 is yes, provide information related to this exemption: <u>N/A</u>			
10.3	Has the insurer been granted any exemptions related to other requirements of the Annual Financial Reporting Model Regulation as allowed in Section 18A of the Model Regulation, or substantially similar state law or regulation?		Yes [ ]	
10.4	If the response to 10.3 is yes, provide information related to this exemption: <u>N/A</u>		No [ X ]	
10.5	Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?		Yes [ X ]	
10.6	If the response to 10.5 is no or n/a, please explain: <u>N/A</u>		No [ ]	
11.	What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? <u>G.Chris Nyce, FCAS, MAAA, KPMG LLP, Three Radnor Corporate Center Suite 105, 100 Matsonford Road, Radnor, PA 19087-4568</u>			
12.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?		Yes [ ]	
12.11	12.11 Name of real estate holding company <u>N/A</u>			
12.12	12.12 Number of parcels involved		<u>N/A</u>	
12.13	12.13 Total book/adjusted carrying value		<u>\$</u>	<u>N/A</u>
12.2	If yes, provide explanation <u>N/A</u>			
13.	<b>FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:</b>			
13.1	What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?			
13.2	13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?		Yes [ ]	
13.3	13.3 Have there been any changes made to any of the trust indentures during the year?		Yes [ ]	
13.4	13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?		Yes [ ]	
14.1	14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?		No [ ]	
	(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;		Yes [ X ]	
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;			
	(c) Compliance with applicable governmental laws, rules and regulations;			
	(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and			
	(e) Accountability for adherence to the code.			
14.11	14.11 If the response to 14.1 is no, please explain:			
14.2	14.2 Has the code of ethics for senior managers been amended?		Yes [ ]	
14.21	14.21 If the response to 14.2 is yes, provide information related to amendment(s).		No [ X ]	
14.3	14.3 Have any provisions of the code of ethics been waived for any of the specified officers?		Yes [ ]	
14.31	14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).		No [ X ]	
15.1	15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?		Yes [ ]	
15.2	15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.		No [ X ]	
	<u>1</u> American Bankers Association (ABA) Routing Number	<u>2</u> Issuing or Confirming Bank Name	<u>3</u> Circumstances That Can Trigger the Letter of Credit	<u>4</u> Amount

### BOARD OF DIRECTORS

16.	16. Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinator committee thereof?		Yes [ X ]	No [ ]
17.	17. Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinator committees thereof?		Yes [ X ]	No [ ]
18.	18. Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?		Yes [ X ]	No [ ]

### FINANCIAL

19.	19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?		Yes [ ]	No [ X ]
20.1	20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):			
20.11	20.11 To directors or other officers		<u>\$</u>	<u>N/A</u>
20.12	20.12 To stockholders not officers		<u>\$</u>	<u>N/A</u>
20.13	20.13 Trustees, supreme or grand (Fraternal only)		<u>\$</u>	<u>N/A</u>
20.2	20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):			
20.21	20.21 To directors or other officers		<u>\$</u>	<u>N/A</u>
20.22	20.22 To stockholders not officers		<u>\$</u>	<u>N/A</u>
20.23	20.23 Trustees, supreme or grand (Fraternal only)		<u>\$</u>	<u>N/A</u>
21.1	21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?		Yes [ ]	
21.2	21.2 If yes, state the amount thereof at December 31 of the current year:		No [ X ]	
21.21	21.21 Rented from others		<u>\$</u>	<u>N/A</u>
21.22	21.22 Borrowed from others		<u>\$</u>	<u>N/A</u>
21.23	21.23 Leased from others		<u>\$</u>	<u>N/A</u>
21.24	21.24 Other		<u>\$</u>	<u>N/A</u>

# VICTORIA NATIONAL INSURANCE COMPANY

## GENERAL INTERROGATORIES

### PART 1 - COMMON INTERROGATORIES

22.1 Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments? Yes [ ] No [X]

22.2 If answer is yes:

22.21	Amount paid as losses or risk adjustment	\$	N/A
22.22	Amount paid as expenses	\$	N/A
22.23	Other amounts paid	\$	N/A

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [ ] No [X]

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 0

### INVESTMENT

24.01 Were all of the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)? Yes [X] No [ ]

24.02 If no, give full and complete information, relating thereto: N/A

24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off balance sheet (an alternative is to reference Note 17 where this information is also provided). N/A

24.04 Does the company's security lending program meet the requirements for a conforming program as outlined in the *Risk-Based Capital Instructions*? Yes [ ] No [ ] N/A [X]

24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. \$ 0

24.06 If answer to 24.04 is no, report amount of collateral for other programs \$ 0

24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [ ] No [ ] N/A [X]

24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [ ] No [ ] N/A [X]

24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes [ ] No [ ] N/A [X]

24.10 For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:

24.101	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:	\$	N/A
24.102	Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:	\$	N/A
24.103	Total payable for securities lending reported on the liability page:	\$	N/A

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is current in force? (Exclude securities subject to Interrogatory 21.1 and 24.03.) Yes [X] No [ ]

25.2 If yes, state the amount thereof at December of the current year:

25.21	Subject to repurchase agreements	\$	0
25.22	Subject to reverse repurchase agreements	\$	0
25.23	Subject to dollar repurchase agreements	\$	0
25.24	Subject to reverse dollar repurchase agreements	\$	0
25.25	Placed under option agreements	\$	0
25.26	Letter stock or securities restricted as sale – excluding FHLB Capital Stock	\$	0
25.27	FHLB Capital Stock	\$	0
25.28	On deposit with states	\$	537,588
25.29	On deposit with other regulatory bodies	\$	0
25.30	Pledged as collateral – excluding collateral pledged to an FHLB	\$	0
25.31	Pledged as collateral to FHLB – including assets backing funding agreements	\$	0
25.32	Other	\$	0

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
		\$

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [ ] No [X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [ ] N/A [X]

If no, attach a description with this statement.

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [ ] No [X]

27.2 If yes, state the amount thereof at December of the current year: \$ N/A

28. Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*? Yes [X] No [ ]

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

1 Name of Custodian(s)	2 Custodian Address
The Bank of New York Mellon	1 Wall Street, New York, NY 10286

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

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

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? Yes [ ] No [X]

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

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

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

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

1 Central Registration Depository	2 Name(s)	3 Address
N/A	Members of the investment staff designated by the Chief Investment Officer as detailed in the Corporate Resolution	One Nationwide Plaza, Columbus, Ohio 43215

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])? Yes [ ] No [ X ]

29.2 If yes, complete the following schedule:

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

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

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

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1	Bonds	3,194,881	3,179,925
30.2	Preferred Stocks	0	0
30.3	Totals	3,194,881	3,179,925

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

For fixed maturity and marketable equity securities for which market quotations generally are available, Nationwide generally uses independent pricing services to assist in determining the fair value measurement. For certain fixed maturity securities not priced by independent services (generally private placement securities without quoted market prices), an internally developed pricing model or "corporate pricing matrix" is most often used. The corporate pricing matrix is developed by obtaining private spreads versus the U.S. Treasury yield for corporate securities with varying weighted average lives and bond ratings. The weighted average life and bond rating of a particular fixed maturity security to be priced using the corporate matrix are important inputs into the model and are used to determine a corresponding spread that is added to the U.S. Treasury yield to create an estimated market yield for that bond. The estimated market yield and other relevant factors are then used to estimate the fair value of the particular fixed maturity security. Nationwide also utilized broker quotes to assist in pricing securities or to validate modeled prices.

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [ X ] No [ ]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [ ] No [ X ]

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

Nationwide relies on broker valuations only when an approved third party vendor evaluation is not available. Any exceptions are approved by Risk Management and the Middle Office and reviewed by the Investments Pricing Committee. The brokers used to value securities are deemed to be main market makers for each individual security and therefore have in depth knowledge of the particular issue.

32.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? Yes [ X ] No [ ]

32.2 If no, list exceptions:

**OTHER**

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ 0

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

1 Name	2 Amount Paid
All payments are made by Nationwide Mutual Insurance Company and are reported in its Annual Statement	\$

34.1 Amount of payments for legal expenses, if any? \$ 0

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

1 Name	2 Amount Paid
All payments are made by Nationwide Mutual Insurance Company and are reported in its Annual Statement	\$

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ 0

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

1 Name	2 Amount Paid
All payments are made by Nationwide Mutual Insurance Company and are reported in its Annual Statement	\$

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

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?	Yes [ ]	No [ X ]
1.2	If yes, indicate premium earned on U.S. business only.	\$	0
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$	N/A
1.31	Reason for excluding:		
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.	\$	N/A
1.5	Indicate total incurred claims on all Medicare Supplement insurance.	\$	0
1.6	Individual policies:		
	Most current three years:		
1.61	Total premium earned	\$	0
1.62	Total incurred claims	\$	0
1.63	Number of covered lives		0
	All years prior to most current three years:		
1.64	Total premium earned	\$	0
1.65	Total incurred claims	\$	0
1.66	Number of covered lives		0
1.7	Group policies:		
	Most current three years:		
1.71	Total premium earned	\$	0
1.72	Total incurred claims	\$	0
1.73	Number of covered lives		0
	All years prior to most current three years:		
1.74	Total premium earned	\$	0
1.75	Total incurred claims	\$	0
1.76	Number of covered lives		0
2.	Health Test:		
		1 Current Year	2 Prior Year
2.1	Premium Numerator	\$ 0	\$ 0
2.2	Premium Denominator	\$ 0	\$ 0
2.3	Premium Ratio (2.1/2.2)		
2.4	Reserve Numerator	\$ 0	\$ 0
2.5	Reserve Denominator	\$ 0	\$ 0
2.6	Reserve Ratio (2.4/2.5)		
3.1	Does the reporting entity issue both participating and non-participating policies?	Yes [ ]	No [ X ]
3.2	If yes, state the amount of calendar year premiums written on:		
3.21	Participating policies	\$	N/A
3.22	Non-participating policies	\$	N/A
4.	FOR MUTUAL REPORTING ENTITIES AND RECIPROCAL EXCHANGES ONLY:		
4.1	Does the reporting entity issue assessable policies?	Yes [ ]	No [ ]
4.2	Does the reporting entity issue non-assessable policies?	Yes [ ]	No [ ]
4.3	If assessable policies are issued, what is the extent of the contingent liability of the policyholders?		%
4.4	Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.	\$	0
5.	FOR RECIPROCAL EXCHANGES ONLY:		
5.1	Does the exchange appoint local agents?	Yes [ ]	No [ ]
5.2	If yes, is the commission paid:		
5.21	Out of Attorney's-in-fact compensation	Yes [ ]	No [ ]
5.22	As a direct expense of the exchange	Yes [ ]	No [ ]
5.3	What expenses of the exchange are not paid out of the compensation of the Attorney-in-fact?		
5.4	Has any Attorney-in-fact compensation, contingent on fulfillments of certain conditions, been deferred?	Yes [ ]	No [ ]
5.5	If yes, give full information:		
6.1	What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss? <u>The company's net exposure if any ultimately is 100% ceded to the Nationwide Mutual Insurance Company Pool under a quota share reinsurance agreement. No retained exposure.</u>		
6.2	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process: <u>The company's net exposure if any ultimately is 100% ceded to the Nationwide Mutual Insurance Company Pool under a quota share reinsurance agreement. The company's property exposures are aggregated with the other Nationwide companies and modeled using Applied Insurance Research (AIR) software.</u>		
6.3	What provision has this reporting entity made (such as catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss? <u>The company's net property-catastrophe exposures, if any, are mitigated through managed coastal growth, purchase of excess of loss reinsurance, policy provisions such as higher deductibles, and enforcement of underwriting guidelines related to building construction, etc.</u>		
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	Yes [ X ]	No [ ]
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss: <u>N/A</u>		

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

7.1	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?	Yes [ ] No [ X ]
7.2	If yes, indicate the number of reinsurance contracts containing such provisions.	N/A
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes [ ] No [ ]
8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes [ ] No [ X ]
8.2	If yes, give full information	
	<u>N/A</u>	
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:	
	(a) A contract term longer than two years and the contract is noncancelable by the reporting entity during the contract term;	
	(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;	
	(c) Aggregate stop loss reinsurance coverage;	
	(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;	
	(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or	
	(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity?	
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:	Yes [ ] No [ X ]
	(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or	
	(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.	Yes [ ] No [ X ]
9.3	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:	
	(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;	
	(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and	
	(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.	
9.4	Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:	
	(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or	
	(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	Yes [ ] No [ X ]
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.	
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:	
	(a) The entity does not utilize reinsurance; or,	Yes [ ] No [ X ]
	(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or	Yes [ ] No [ X ]
	(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.	Yes [ X ] No [ ]
10.	If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?	Yes [ ] No [ ] N/A [ X ]
11.1	Has the reporting entity guaranteed policies issued by any other entity and now in force?	Yes [ ] No [ X ]
11.2	If yes, give full information	<u>N/A</u>
12.1	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the assets schedule, Page 2, state the amount of corresponding liabilities recorded for:	
12.11	Unpaid losses	\$ _____ 0
12.12	Unpaid underwriting expenses (including loss adjustment expenses)	\$ _____ 0
12.2	Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?	\$ _____ 0
12.3	If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?	Yes [ ] No [ X ] N/A [ ]
12.4	If yes, provide the range of interest rates charged under such notes during the period covered by this statement:	
12.41	From	% _____
12.42	To	% _____
12.5	Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies?	Yes [ ] No [ X ]
12.6	If yes, state the amount thereof at December 31 of current year:	
12.61	Letters of Credit	\$ _____ N/A
12.62	Collateral and other funds	\$ _____ N/A
13.1	Largest net aggregate amount insured in any one risk (excluding workers' compensation):	\$ _____ 0

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

13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes [ ] No [X]

13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. 1

14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes [X] No [ ]

14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:  
Companies that are not part of the Nationwide Mutual Insurance Company Pooling and Quota Share Arrangements receive a fair and equitable allocation of ceded premium and loss.  
The terms of the Nationwide Pooling and Quota Share Agreements govern the allocation and recording of ceded premium and loss for the participating companies.

14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes [ ] No [X]

14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [ ] No [X]

14.5 If the answer to 14.4 is no, please explain:  
Written agreements are in place for all multi-cedent reinsurance treaties that cover any company that does not participate in the Nationwide Mutual Insurance Company Pooling and Quota Share Arrangements.

15.1 Has the reporting entity guaranteed any financed premium accounts? Yes [ ] No [X]

15.2 If yes, give full information  
N/A

16.1 Does the reporting entity write any warranty business? Yes [ ] No [X]

If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home	\$ 0 \$	0 \$	0 \$	0 \$	0
16.12 Products	\$ 0 \$	0 \$	0 \$	0 \$	0
16.13 Automobile	\$ 0 \$	0 \$	0 \$	0 \$	0
16.14 Other*	\$ 0 \$	0 \$	0 \$	0 \$	0

\* Disclose type of coverage:

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F – Part 3 that it excludes from Schedule F – Part 5. Yes [ ] No [X]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F – Part 5. Provide the following information for this exemption:

17.11 Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5	\$ 0
17.12 Unfunded portion of Interrogatory 17.11	\$ 0
17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$ 0
17.14 Case reserves portion of Interrogatory 17.11	\$ 0
17.15 Incurred but not reported portion of Interrogatory 17.11	\$ 0
17.16 Unearned premium portion of Interrogatory 17.11	\$ 0
17.17 Contingent commission portion of Interrogatory 17.11	\$ 0

Provide the following information for all other amounts included in Schedule F – Part 3 and excluded from Schedule F – Part 5, not included above.

17.18 Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5	\$ 0
17.19 Unfunded portion of Interrogatory 17.18	\$ 0
17.20 Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$ 0
17.21 Case reserves portion of Interrogatory 17.18	\$ 0
17.22 Incurred but not reported portion of Interrogatory 17.18	\$ 0
17.23 Unearned premium portion of Interrogatory 17.18	\$ 0
17.24 Contingent commission portion of Interrogatory 17.18	\$ 0

18.1 Do you act as a custodian for health savings accounts? Yes [ ] No [X]

18.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$ N/A

18.3 Do you act as an administrator for health savings accounts? Yes [ ] No [X]

18.4 If yes, please provide the balance of the funds administered as of the reporting date. \$ N/A

**FIVE-YEAR HISTORICAL DATA**

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

	1 2015	2 2014	3 2013	4 2012	5 2011
<b>Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 &amp; 3)</b>					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)		1,017	14,195	20,645	26,964
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)		147	3,219	4,420	5,060
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)	0	1,164	17,414	25,065	32,024
<b>Net Premiums Written (Page 8, Part 1B, Col. 6)</b>					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12. Total (Line 35)	0	0	0	0	0
<b>Statement of Income (Page 4)</b>					
13. Net underwriting gain (loss) (Line 8)					
14. Net investment gain (loss) (Line 11)	4,314	11,897	16,264	19,094	27,031
15. Total other income (Line 15)					
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	3,041	17,570	6,954	4,099	4,825
18. Net income (Line 20)	1,273	(5,673)	9,310	14,995	22,206
<b>Balance Sheet Lines (Pages 2 and 3)</b>					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	3,531,058	3,540,834	3,497,294	3,482,317	3,465,945
20. Premiums and considerations (Page 2, Col. 3):					
20.1 In course of collection (Line 15.1)			397	1,043	.900
20.2 Deferred and not yet due (Line 15.2)			2,878	5,904	6,185
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	3,418	18,693	11,809	16,794	15,414
22. Losses (Page 3, Line 1)					
23. Loss adjustment expenses (Page 3, Line 3)					
24. Unearned premiums (Page 3, Line 9)					
25. Capital paid up (Page 3, Lines 30 & 31)	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
26. Surplus as regards policyholders (Page 3, Line 37)	3,527,640	3,522,141	3,485,485	3,465,523	3,450,531
<b>Cash Flow (Page 5)</b>					
27. Net cash from operations (Line 11)	(2,446)	18,637	24,788	17,337	40,032
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital	3,527,640	3,522,141	3,485,485	3,465,523	3,450,531
29. Authorized control level risk-based capital	3,183	3,197	3,634	7,457	7,715
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b> (Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1)	90.7	90.6	96.8	23.5	27.3
31. Stocks (Lines 2.1 & 2.2)					
32. Mortgage loans on real estate (Lines 3.1 & 3.2)					
33. Real estate (Lines 4.1, 4.2 & 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)	9.3	9.4	.3.2	.76.5	.72.7
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)					
38. Receivable for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
42. Affiliated bonds (Sch. D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1)					
45. Affiliated short-term investments (subtotals included in Schedule DA, Verification, Column 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above lines 42 to 47	0	0	0	0	0
49. Total investment in parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)	0.0				

**VICTORIA NATIONAL INSURANCE COMPANY**  
**FIVE-YEAR HISTORICAL DATA**  
(Continued)

	1 2015	2 2014	3 2013	4 2012	5 2011
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24).....	2,751	27,612	6,956	.....	.....
52. Dividends to stockholders (Line 35).....	.....	.....	.....	.....	.....
53. Change in surplus as regards policyholders for the year (Line 38).....	5,499	36,656	19,962	14,992	21,983
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	(493)	4,048	1,079	12,982	27,739
55. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	(300)	(1,200)	(82)	(197)	2,386
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	.....	.....	.....	.....	.....
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	.....	.....	.....	.....	.....
58. Nonproportional reinsurance lines (Lines 31, 32 & 33).....	.....	.....	.....	.....	.....
59. Total (Line 35).....	(793)	2,848	997	12,785	30,125
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	.....	.....	.....	.....	.....
61. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	.....	.....	.....	.....	.....
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	.....	.....	.....	.....	.....
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	.....	.....	.....	.....	.....
64. Nonproportional reinsurance lines (Lines 31, 32 & 33).....	.....	.....	.....	.....	.....
65. Total (Line 35).....	0	0	0	0	0
<b>Operating Percentages</b> (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1).....	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2).....	.....	.....	.....	.....	.....
68. Loss expenses incurred (Line 3).....	.....	.....	.....	.....	.....
69. Other underwriting expenses incurred (Line 4).....	.....	.....	.....	.....	.....
70. Net underwriting gain (loss) (Line 8).....	.....	.....	.....	.....	.....
<b>Other Percentages</b>					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0).....	.....	.....	.....	.....	.....
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0).....	.....	.....	.....	.....	.....
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35, divided by Page 3, Line 37, Col. 1 x 100.0).....	.....	.....	.....	.....	.....
<b>One Year Loss Development (000 omitted)</b>					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11).....	.....	.....	.....	.....	.....
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100).....	.....	.....	.....	.....	.....
<b>Two Year Loss Development (000 omitted)</b>					
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12).....	.....	.....	.....	.....	.....
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0).....	.....	.....	.....	.....	.....

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

Yes  No

If no, please explain:

**Sch. P - Pt. 1**  
**NONE**

**Sch. P - Pt. 2**  
**NONE**

**Sch. P - Pt. 3**  
**NONE**

**Sch. P - Pt. 4**  
**NONE**

**VICTORIA NATIONAL INSURANCE COMPANY**  
**SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

## Allocated by States and Territories

States, Etc.	1 Active Status	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Incl. in Col. 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama.....	AL	N							
2. Alaska.....	AK	N							
3. Arizona.....	AZ	N							
4. Arkansas.....	AR	N							
5. California.....	CA	N							
6. Colorado.....	CO	N							
7. Connecticut.....	CT	N							
8. Delaware.....	DE	N							
9. District of Columbia.....	DC	N							
10. Florida.....	FL	N							
11. Georgia.....	GA	L							
12. Hawaii.....	HI	N							
13. Idaho.....	ID	N							
14. Illinois.....	IL	N							
15. Indiana.....	IN	N							
16. Iowa.....	IA	N							
17. Kansas.....	KS	N							
18. Kentucky.....	KY	N							
19. Louisiana.....	LA	N							
20. Maine.....	ME	N							
21. Maryland.....	MD	N							
22. Massachusetts.....	MA	N							
23. Michigan.....	MI	N							
24. Minnesota.....	MN	N							
25. Mississippi.....	MS	N							
26. Missouri.....	MO	N							
27. Montana.....	MT	N							
28. Nebraska.....	NE	N							
29. Nevada.....	NV	N							
30. New Hampshire.....	NH	N							
31. New Jersey.....	NJ	N							
32. New Mexico.....	NM	N							
33. New York.....	NY	L							
34. North Carolina.....	NC	N							
35. North Dakota.....	ND	N							
36. Ohio.....	OH	L		280		(793)	(1,362)	(139)	
37. Oklahoma.....	OK	N							
38. Oregon.....	OR	N							
39. Pennsylvania.....	PA	N							
40. Rhode Island.....	RI	N							
41. South Carolina.....	SC	N							
42. South Dakota.....	SD	N							
43. Tennessee.....	TN	N							
44. Texas.....	TX	N							
45. Utah.....	UT	N							
46. Vermont.....	VT	N							
47. Virginia.....	VA	N							
48. Washington.....	WA	N							
49. West Virginia.....	WV	N							
50. Wisconsin.....	WI	N							
51. Wyoming.....	WY	N							
52. American Samoa.....	AS	N							
53. Guam.....	GU	N							
54. Puerto Rico.....	PR	N							
55. US Virgin Islands.....	VI	N							
56. Northern Mariana Islands.....	MP	N							
57. Canada.....	CAN	N							
58. Aggregate Other Alien.....	OT	XXX	0	0	0	0	0	0	0
59. Totals.....		(a) 3	0	280	0	(793)	(1,362)	(139)	0

## DETAILS OF WRITE-INS

58001.....	XXX								
58002.....	XXX								
58003.....	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0

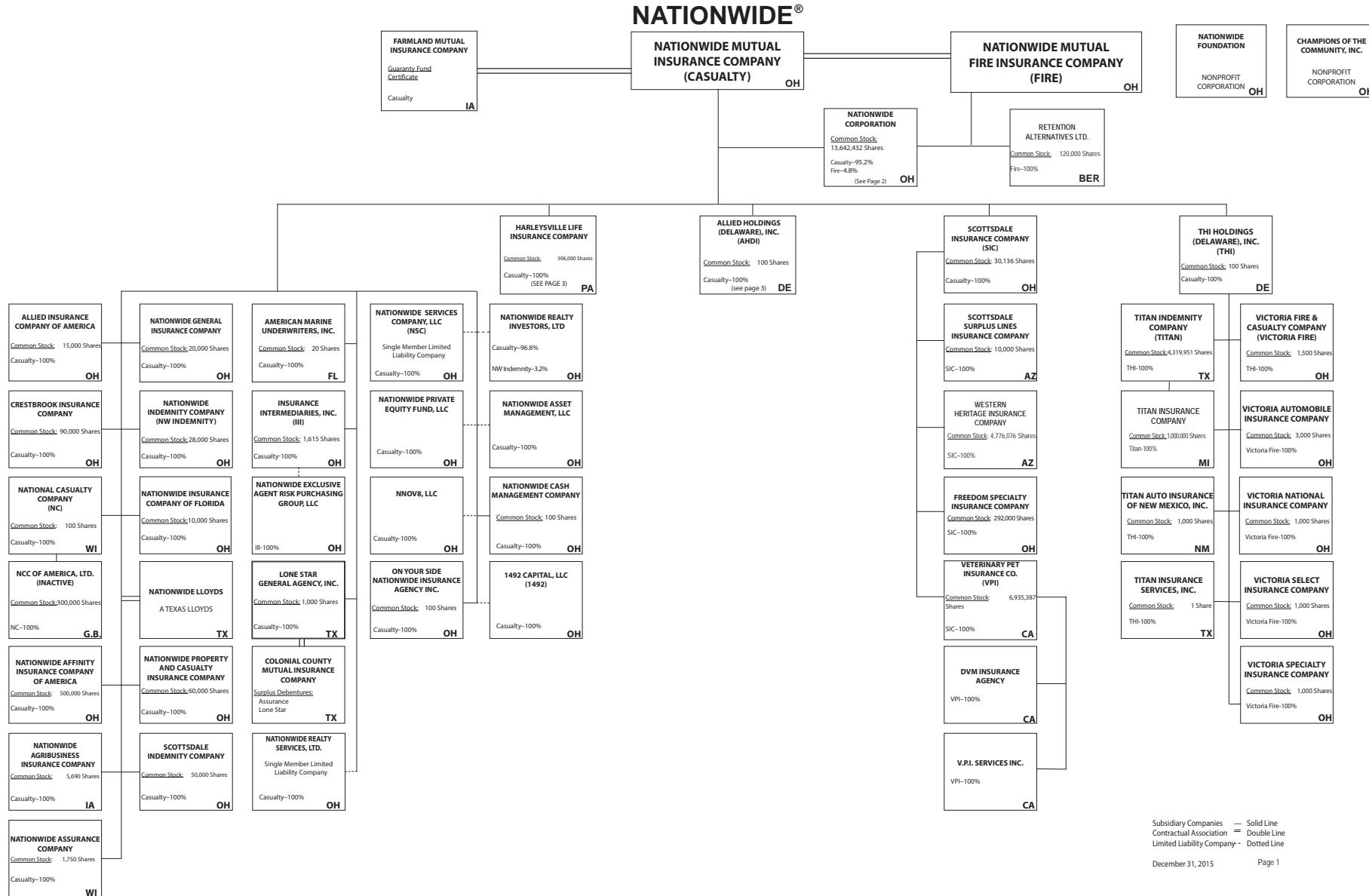
(a) Insert the number of "L" responses except for Canada and Other Alien.

(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;

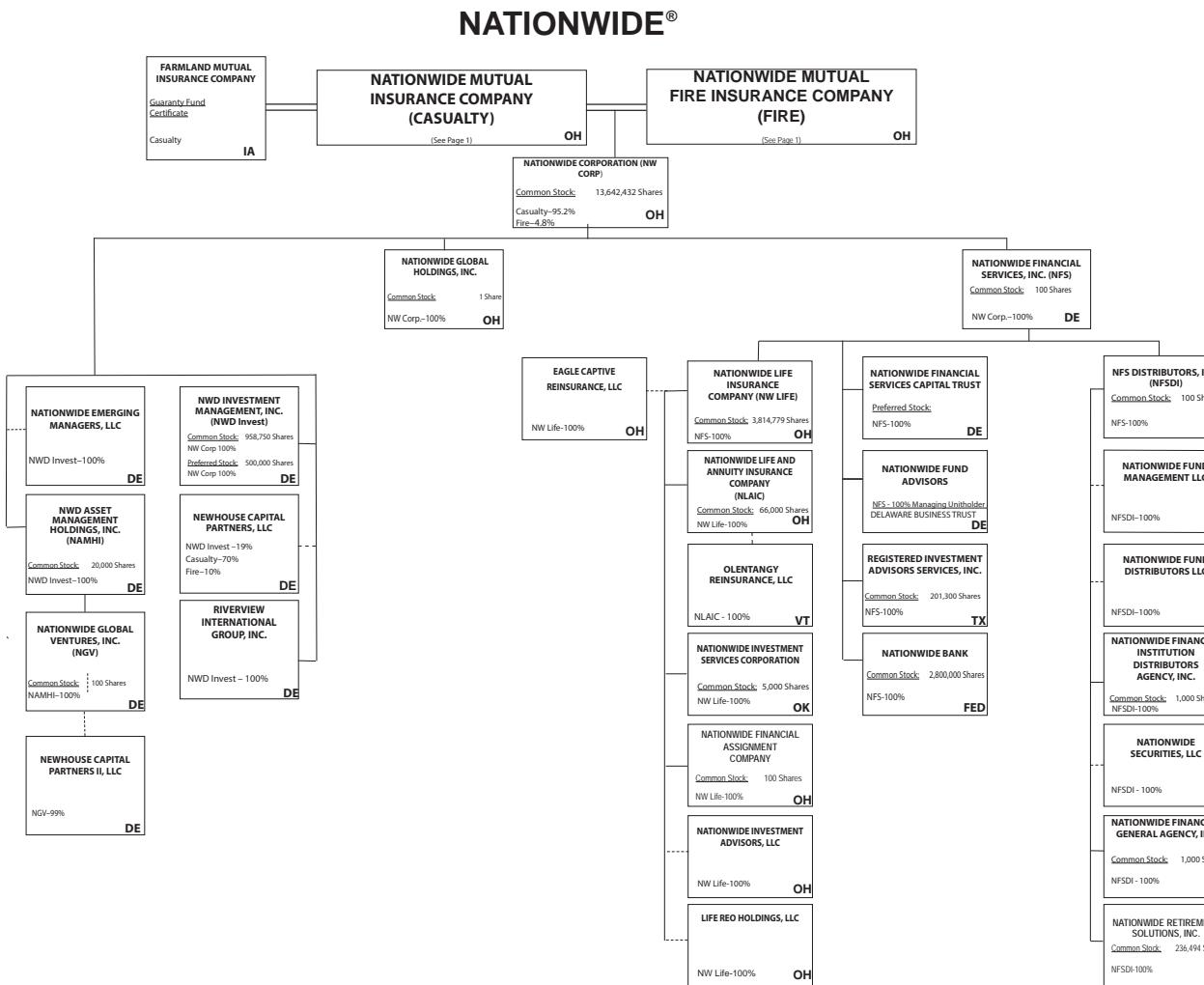
(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.

Explanation of Basis of Allocation of Premiums by States, etc.

Premiums are allocated to those states where the insured risks are located: principle garage for automobile, physical address for homeowners, commercial multiple peril and other liability and main place of work for workers' compensation. Allocation of premiums for individual and group health insurance is based on the situs of the contract.



(Casualty/Fire subsidiaries)

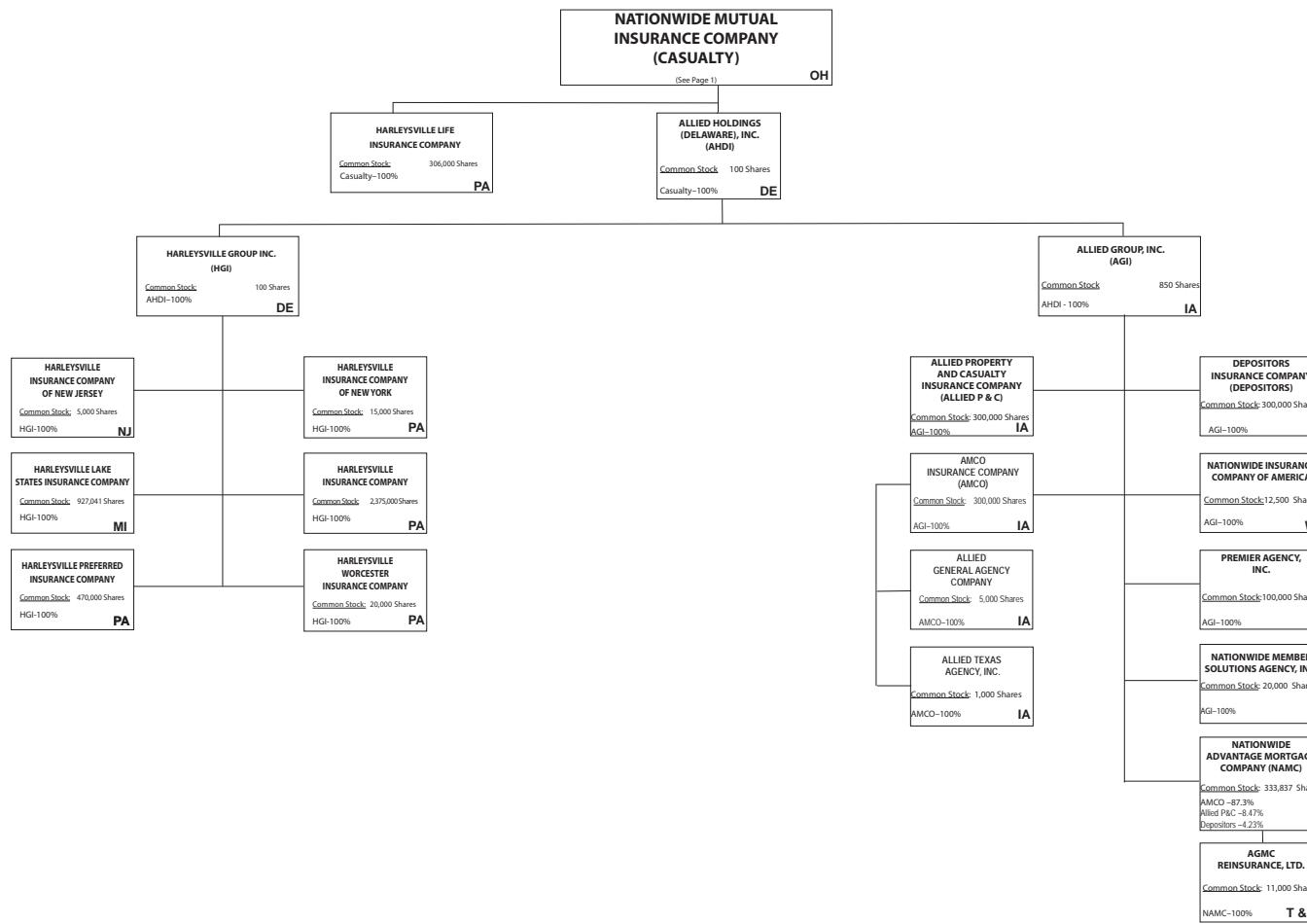


(Nationwide Corp. subsidiaries)

Subsidiary Companies: — Solid Line  
Contractual Association: = Double Line  
Limited Liability Company: - - Dotted Line

December 31, 2015 Page 2

**NATIONWIDE®**



(ALLIED/Harleysville subsidiaries)

Subsidiary Companies  
 Contractual Association  
 Limited Liability Company

December 31, 2015

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## NATIONWIDE INSURANCE COMPANIES

NAIC Group Code	Group Name	NAIC Company Code	State of Domicile	Federal ID Number	Name of Company
0140	Nationwide	10127	OH	27-0114983	Allied Insurance Company of America
0140	Nationwide	42579	IA	42-1201931	Allied Property and Casualty Insurance Company
0140	Nationwide	19100	IA	42-6054959	AMCO Insurance Company
0140	Nationwide	29262	TX	74-1061659	Colonial County Mutual Insurance Company
0140	Nationwide	18961	OH	68-0066866	Crestbrook Insurance Company
0140	Nationwide	42587	IA	42-1207150	Depositors Insurance Company
0140	Nationwide	15821	OH	42-4523959	Eagle Captive Reinsurance, LLC
0140	Nationwide	13838	IA	42-0618271	Farmland Mutual Insurance Company
0140	Nationwide	22209	OH	75-6013587	Freedom Specialty Insurance Company
0140	Nationwide	23582	PA	41-0417250	Harleysville Insurance Company
0140	Nationwide	42900	NJ	23-2253669	Harleysville Insurance Company of New Jersey
0140	Nationwide	10674	PA	23-2864924	Harleysville Insurance Company of New York
0140	Nationwide	14516	MI	38-3198542	Harleysville Lake States Insurance Company
0140	Nationwide	64327	PA	23-1580983	Harleysville Life Insurance Company
0140	Nationwide	35696	PA	23-2384978	Harleysville Preferred Insurance Company
0140	Nationwide	26182	PA	04-1989660	Harleysville Worcester Insurance Company
0140	Nationwide	11991	WI	38-0865250	National Casualty Company
0140	Nationwide	26093	OH	48-0470690	Nationwide Affinity Insurance Company of America
0140	Nationwide	28223	IA	42-1015537	Nationwide Agribusiness Insurance Company
0140	Nationwide	10723	WI	95-0639970	Nationwide Assurance Company
0140	Nationwide	23760	OH	31-4425763	Nationwide General Insurance Company
0140	Nationwide	10070	OH	31-1399201	Nationwide Indemnity Company
0140	Nationwide	25453	WI	95-2130882	Nationwide Insurance Company of America
0140	Nationwide	10948	OH	31-1613686	Nationwide Insurance Company of Florida
0140	Nationwide	92657	OH	31-1000740	Nationwide Life and Annuity Insurance Company
0140	Nationwide	66869	OH	31-4156830	Nationwide Life Insurance Company
0140	Nationwide	42110	TX	75-1780981	Nationwide Lloyds
0140	Nationwide	23779	OH	31-4177110	Nationwide Mutual Fire Insurance Company
0140	Nationwide	23787	OH	31-4177100	Nationwide Mutual Insurance Company
0140	Nationwide	37877	OH	31-0970750	Nationwide Property & Casualty Insurance Company
0140	Nationwide	13999	VT	27-1712056	Olentangy Reinsurance, LLC
0140	Nationwide	15580	OH	31-1117969	Scottsdale Indemnity Company
0140	Nationwide	41297	OH	31-1024978	Scottsdale Insurance Company
0140	Nationwide	10672	AZ	86-0835870	Scottsdale Surplus Lines Insurance Company
0140	Nationwide	13242	TX	74-2286759	Titan Indemnity Company
0140	Nationwide	36269	MI	86-0619597	Titan Insurance Company
0140	Nationwide	42285	CA	95-3750113	Veterinary Pet Insurance Company
0140	Nationwide	10644	OH	34-1785903	Victoria Automobile Insurance Company
0140	Nationwide	42889	OH	34-1394913	Victoria Fire & Casualty Company
0140	Nationwide	10778	OH	34-1842604	Victoria National Insurance Company
0140	Nationwide	10105	OH	34-1777972	Victoria Select Insurance Company
0140	Nationwide	10777	OH	34-1842602	Victoria Specialty Insurance Company
0140	Nationwide	37150	AZ	86-0561941	Western Heritage Insurance Company
4664	PURE	12873	FL	20-8287105	Privilege Underwriters Reciprocal Exchange
4664	PURE	13204	FL	26-3109178	PURE Insurance Company

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