

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

## **QUARTERLY STATEMENT**

AS OF SEPTEMBER 30, 2016 OF THE CONDITION AND AFFAIRS OF THE

Root Insurance Company

NAIC Company Code 10974 Employer's ID Number

	NAIC Group Code	0000		NAIC Company Co	de <u>10974</u>	_ Employer's If	D Number	31-1631404
Organized under the Laws	of	. ,	(Prior) nio		, State of Dor	micile or Port of E	ntry	Ohio
Country of Domicile				United States	of America			
Incorporated/Organized		12/11/1998			Commen	nced Business		04/29/1999
Statutory Home Office _		34 W. Gay St,	Ste. 2A				Columbus , O	
		(Street and N	umber)			(City or	Town, State, C	Country and Zip Code)
Main Administrative Office				34 W. Gay S				
	Columbus , OF	LIS 43215		(Street and	Number)			
(City	or Town, State, Co		Code)			(Ar	ea Code) (Tele	ephone Number)
Mail Address	34 V	I. Gay St, Ste.	2A				Columbus , O	H, US 43215
	(Street an	d Number or P	.O. Box)			(City or	Town, State, C	Country and Zip Code)
Primary Location of Books	and Records			34 W. Gay S	St, Ste. 2A			
	Columbus , OF	110 42215		(Street and	Number)			
(City	or Town, State, Co		Code)			(Ar	ea Code) (Tele	ephone Number)
Internet Website Address				www.joinro	not com			
				•	001.00111			
Statutory Statement Conta	ct	Travis	Ryan Harri: (Name)	son	,			9-944-1195 (Telephone Number)
	travis@trh-	pa.com	(INaille)	,			989-88	· ·
	(E-mail Ad	ldress)					(FAX N	umber)
				OFFICI	FRS			
Presider	nt	Alexander Edw	ard Timm #			ice President		Daniel Craig Manges #
Secretar	yC	hristopher Geo	rge Olsen	#	V	ice President		David Royce Martin #
				ОТНЕ	ER			
				DIRECTORS OF	TDUCTED			
Alexande	r Edward Timm #			Christopher Ge		-		Cynthia Ann Powell #
Lawrence	Allen Hilsheimer #			David Matthew	/ McMullen #	<b>.</b>		
State of	Ohio							
County of	Ohio Franklin		— ss	:				
all of the herein described statement, together with re condition and affairs of the in accordance with the NA rules or regulations requi respectively. Furthermore	assets were the allated exhibits, scherosaid reporting entity IC Annual Statemere differences in return the scope of this a	osolute propert dules and explar as of the report instructions porting not re ttestation by the	y of the sa anations the rting period and Accour lated to ac ne describe	id reporting entity, erein contained, and I stated above, and nting Practices and counting practices d officers also inclu	free and cleanexed or referont of its income Procedures and procedudes the relations.	ar from any liens rred to, is a full ar e and deductions to manual except to dures, according ted corresponding	or claims ther nd true statement therefrom for the the extent that to the best of gelectronic filing	d that on the reporting period stated above eon, except as herein stated, and that thient of all the assets and liabilities and of the period ended, and have been complete at: (1) state law may differ; or, (2) that stat f their information, knowledge and belieng with the NAIC, when required, that is a py various regulators in lieu of or in addition
Alexander Ed Presid				Christopher Ge Secret	-			Daniel Craig Manges Vice President
Subscribed and sworn to b					b. If no, 1. St 2. Da	s an original filing ate the amendme ate filedumber of pages at	nt number	 

## **ASSETS**

			Current Statement Date		4
		1	2	3 Net Admitted Assets	December 31 Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds			0	3,661,673
2.	Stocks:				
	2.1 Preferred stocks			0	
	2.2 Common stocks			0	
3.	Mortgage loans on real estate:				
	3.1 First liens			0	
	3.2 Other than first liens.			0	
1	Real estate:			-	
4.					
	4.1 Properties occupied by the company (less \$				
	encumbrances)			0	
	4.2 Properties held for the production of income (less				
	\$ encumbrances)			0	
	•				
	4.3 Properties held for sale (less \$				
	encumbrances)			0	
5.	Cash (\$2,497,025 ), cash equivalents				
	(\$940,686 ) and short-term				
		0 407 744		0 407 744	000 007
	investments (\$0 )				300,397
6.	Contract loans (including \$ premium notes)			0	
7.	Derivatives			0	
8.	Other invested assets				
9.	Receivables for securities				
•					
10.	Securities lending reinvested collateral assets				
11.	Aggregate write-ins for invested assets			0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	3,437,711	0	3,437,711	3,962,070
13.	Title plants less \$ charged off (for Title insurers				
10.					
	only)				
14.	Investment income due and accrued			0	40,266
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	813		813	
	15.2 Deferred premiums, agents' balances and installments booked but				
	-				
	deferred and not yet due (including \$				
	earned but unbilled premiums)	2,374		2,374	
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$ )			0	
16.	Reinsurance:				
10.					
	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	
	Current federal and foreign income tax recoverable and interest thereon				
	5				
18.2	Net deferred tax asset		81,843		
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				
-	(\$	A2 N21	42,021	n	
00	· ·				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$ ) and other amounts receivable			0	
25.	Aggregate write-ins for other than invested assets	0	0		0
	Total assets excluding Separate Accounts, Segregated Accounts and				
20.	Protected Cell Accounts (Lines 12 to 25)	3.564.762	123,864	3.440.898	4,002,336
27	From Separate Accounts, Segregated Accounts and Protected Cell	,,,,,,,	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
21.	Accounts			0	
28.	Total (Lines 26 and 27)	3,564,762	123,864	3,440,898	4,002,336
20.	·	0,304,702	120,004	0,440,000	7,002,000
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
			0		0
1198.	Summary of remaining write-ins for Line 11 from overflow page			0	
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.					
2502.					
2503.					
		•	^	•	•
2598.	Summary of remaining write-ins for Line 25 from overflow page		0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0	0	0

## LIABILITIES, SURPLUS AND OTHER FUNDS

	LIADILITIES, SOITI LOS AND OTTILITI	1 1	2
		Current	December 31,
		Statement Date	Prior Year
1.	Losses (current accident year \$		15,860
2.	Reinsurance payable on paid losses and loss adjustment expenses		
3.	Loss adjustment expenses	235	
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)	70,312	26,389
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	166	
7.1	Current federal and foreign income taxes (including \$ on realized capital gains (losses))		
7.2	Net deferred tax liability		
8.	Borrowed money \$ and interest thereon \$		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$		
	including warranty reserves of \$ and accrued accident and health experience rating refunds		
	including \$ for medical loss ratio rebate per the Public Health Service Act)	4.220	
10.	Advance premium		
11.	Dividends declared and unpaid:		
''-	11.1 Stockholders		
40	11.2 Policyholders		
	Ceded reinsurance premiums payable (net of ceding commissions)		
13.	Funds held by company under reinsurance treaties		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$ certified)	-	
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates		42,454
20.	Derivatives	0	
21.	Payable for securities		
22.	Payable for securities lending		
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$ and interest thereon \$		
25.	Aggregate write-ins for liabilities	. 0	0
	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		84,703
27.	Protected cell liabilities	70,712	01,100
28.	Total liabilities (Lines 26 and 27)	,	, , , , , , , , , , , , , , , , , , ,
29.	Aggregate write-ins for special surplus funds		0
30.	Common capital stock		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		2,225,379
35.	Unassigned funds (surplus)	120,807	692,253
36.	Less treasury stock, at cost:		
	36.1 shares common (value included in Line 30 \$		
	36.2 shares preferred (value included in Line 31 \$		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)	3,361,186	3,917,632
38.	Totals (Page 2, Line 28, Col. 3)	3,440,898	4,002,335
	DETAILS OF WRITE-INS		
2501.	DETAILS OF WHITE INC		
2502.			
2503.			
2598.	Summary of remaining write-ins for Line 25 from overflow page		0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0
2901.			
2902.			
2903.			
	Summary of remaining write-ins for Line 29 from overflow page	0	0
2998.			0
2998. 2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	
	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)		
2999.			
2999. 3201. 3202.			
2999. 3201.			0

## **STATEMENT OF INCOME**

		1 Current	2 Prior Year	3 Prior Year Ended
	UNDERWRITING INCOME	Year to Date	to Date	December 31
1.	Premiums earned:			
	1.1 Direct (written \$11,573 )			
	1.2 Assumed (written \$ )			
	1.3 Ceded (written \$		011 017	
	1.4 Net (written \$	3,022	311,31/	318,662
2.	Losses incurred (current accident year \$):			
	2.1 Direct	(11,430)	23,328	14,068
	2.2 Assumed			
	2.3 Ceded			
	2.4 Net			
3.	Loss adjustment expenses incurred		213,713	
4. 5.	Other underwriting expenses incurred			0
6.	Total underwriting deductions (Lines 2 through 5)	665.613		330,679
7.	Net income of protected cells			, , , , , ,
8.	Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)		74,276	(12,017)
	INVESTMENT INCOME			
9.	Net investment income earned			
10.	Net realized capital gains (losses) less capital gains tax of \$	34,927	(15,823)	
11.	Net investment gain (loss) (Lines 9 + 10)	42,739	72,193	98,331
40	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered  \$	n		
13.	Finance and service charges not included in premiums	110		
14.	Aggregate write-ins for miscellaneous income		0	60,000
15.	Total other income (Lines 12 through 14)	75,110	0	60,000
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal			
	and foreign income taxes (Lines 8 + 11 + 15)	(544,742)	146,469	146,314
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)	(544 742)	146 469	146,314
19.	Federal and foreign income taxes incurred	(011,712)	28,000	27,000
20.	Net income (Line 18 minus Line 19)(to Line 22)	(544,742)	118,469	119,314
	CAPITAL AND SURPLUS ACCOUNT			
21.	Surplus as regards policyholders, December 31 prior year	3,917,632	8,274,878	8,274,877
22.	Net income (from Line 20)			119,314
23.	Net transfers (to) from Protected Cell accounts			
24.	Change in net unrealized capital gains (losses) less capital gains tax of \$			(187,391)
25.	Change in net unrealized foreign exchange capital gain (loss)			
26. 27.	Change in nonadmitted assets			(15,317)
28.	Change in provision for reinsurance			
29.	Change in surplus notes			
30.	Surplus (contributed to) withdrawn from protected cells			
31.	Cumulative effect of changes in accounting principles			
32.	Capital changes:			
	32.1 Paid in			
00	32.3 Transferred to surplus			
33.	Surplus adjustments: 33.1 Paid in	15 000		185,436
	33.2 Transferred to capital (Stock Dividend)			100,400
	33.3 Transferred from capital			
34.				
35.	Dividends to stockholders		(4,500,000)	(4,500,000)
36.	Change in treasury stock			
37.	Aggregate write-ins for gains and losses in surplus	0	0	0
38.	Change in surplus as regards policyholders (Lines 22 through 37)	(556,446)	(4,404,821)	(4,357,245)
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	3,361,186	3,870,057	3,917,632
0501.	DETAILS OF WRITE-INS			
0501. 0502.		·····-		
0502.				
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0
0599.	Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)	0	0	0
1401.	General Administration Reimbursement	75,000		60,000
1402.				
1403.				
1498.	Summary of remaining write-ins for Line 14 from overflow page			00
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	75,000	0	60,000
3701.				,
3702				
3702. 3703.				
			0	0

## **CASH FLOW**

	9,10	1	2	3 Deien Veen Frederic
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	7,744	91,394	91,942
2.	Net investment income	59,887	184,685	211, 167
3.	Miscellaneous income	75,110		60,000
4.	Total (Lines 1 to 3)	142,741	276,079	363,109
5.	Benefit and loss related payments	2,250	74,358	77,283
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0		
7.	Commissions, expenses paid and aggregate write-ins for deductions	633,810	201,966	309,926
8.	Dividends paid to policyholders	0		
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital			
	gains (losses)	81,843	28,000	27,000
10.	Total (Lines 5 through 9)	717,903	304,324	414,209
11.	Net cash from operations (Line 4 minus Line 10)	(575, 162)	(28,245)	(51,100)
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	4,127,213	5,864,938	6,488,231
	12.2 Stocks	0	826,082	946,742
	12.3 Mortgage loans	0		
	12.4 Real estate	0		
		0		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0		
	12.7 Miscellaneous proceeds	0		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	4,127,213	6,691,020	7,434,973
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	442,422	1,950,954	2,581,498
	13.3 Mortgage loans	0		
	13.4 Real estate	_		
		0		
	13.6 Miscellaneous applications	0		
	13.7 Total investments acquired (Lines 13.1 to 13.6)	442,422	1,950,954	2,581,498
14.	Net increase (or decrease) in contract loans and premium notes	0		
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	3,684,791	4,740,066	4,853,475
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- , , -	, ,	,, -
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0		
	16.2 Capital and paid in surplus, less treasury stock			185,436
	16.3 Borrowed funds			
	16.4 Net deposits on deposit-type contracts and other insurance liabilities			
	16.5 Dividends to stockholders			5,929,601
	16.6 Other cash provided (applied)	12.686	(162,922)	(239, 133)
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	27,686	(6,092,523)	(5,983,298)
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	3, 137, 315	(1.380 702)	(1,180,923)
19.	Cash, cash equivalents and short-term investments (Line 11, plus Lines 13 and 17)	, 107,010		
13.		300,396	1 481 310	1 481 310
	19.2 End of period (Line 18 plus Line 19.1)	3,437,711	100,617	300,396

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

## **NOTES TO FINANCIAL STATEMENTS**

#### NOTE 1

#### Summary of Significant Accounting Policies and Going Concern

1.Summary of Significant Accounting Policies and Going Concern A.Accounting Practices

		State of Domicile	2016	2015
NET IN	COME			
(1)	State basis (Page 4, Line 20, Columns 1 & 3)	····· OH	(544,742)	119,314
(2)	State Prescribed Practices that increase/(decrease) NAIC SAP			
(3)	State Permitted Practices that increase/(decrease) NAIC SAP			
(4)	NAIC SAP (1-2-3=4)	OH	(544,742)	119,314
SURPL	US			
(5)	State basis (Page 3, Line 37, Columns 1 & 2)	····· OH	3,361,186	3,917,632
(6)	State Prescribed Practices that increase/(decrease) NAIC SAP			
(7)	State Permitted Practices that increase/(decrease) NAIC SAP			
(8)	NAIC SAP (5-6-7=8)	OH	3 361 186	3 917 632

- 3. Use of Estimates in Preparation of Financial Statements The preparation of 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 Policy Premiums are earned over the terms of the related insurance policies. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business.

Expenses incurred in the connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

Short-term investments are securities with an original maturity greater than 3 months, but less than 1 year, are stated at cost.

Bonds not backed by loans are stated at amortized cost. Premiums and discounts on bonds are amortized or accreted, respectively, over the life of the related debt security as an adjustment to the yield, using the scientific method. Interest income is recognized when it is earned.

Common stocks at market value except for its investment in uncombined subsidiaries and affiliates in which the Company has an interest of 20% or more are carried on the equity basis.

No preferred stocks are held by the Company.

No Mortgage Loans are held by the company

Loan-backed securities at amortized cost provided that the SVO designation is 1 or 2. If the SVO designation is 3 or greater, the Company states the securities at the lower of amortized cost or fair market value. The Company uses the retrospective method to make valuation adjustments when necessary.

No subsidiary controlled or affiliated investments to report.

No investments in joint ventures, partnerships, and limited liability companies to report.

The Company does not have any derivative financial instruments.

The Company does utilize anticipated investment income as a factor in premium deficiency calculations.

Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amounts is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period determined.

D. Going Concern – The Company was previously in runoff mode but has been acquired by IBOD Company Inc. who plans to write personal auto insurance. IBOD Company Inc. plans to invest further capital into the Company as part of its future plan of operations.

#### NOTE 2

#### **Accounting Changes and Corrections of Errors**

The Company did not have any accounting changes during the year

#### NOTE 3

## Business Combinations and Goodwill

#### NOTE 4

#### **Discontinued Operations**

Not Applicable

#### NOTE 5

#### Investments

- A. Mortgage Loans Not Applicable
- B. Trouble Debt Restructuring for Creditors Not Applicable
- C. Reverse Mortgages Not Applicable
- D. Loan Backed Securities Not Applicable
- E. Repurchase Agreements Not Applicable
- F. Write Downs for Impairment of Real Estate Not Applicable
- G. Low Income Housing Tax Credits Not Applicable
- H. Restricted Assets Not Applicable

#### NOTE 6

Joint Ventures, Partnerships and Limited Liability Companies

Not Applicable

NOTE 7

Investment Income

- A. Accrued Investment Income The company does not admit accrued investment income over 90 days past due
- B. Amounts Non-admitted Not Applicable

#### NOTE 8

**Derivative Instruments** 

Not Applicable

NOTE 9

Income Taxes

9 Income Taxes

3.

A.The components of the net deferred tax asset/(liability) at the end of current period are as follows:

	As of E	nd of Current	Period		12/31/2015			Change	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
			(Col. 1 + 2)			(Col. 4 + 5)	(Col. 1 - 4)	(Col. 2 - 5)	(Col. 7 + 8)
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
(a)Gross Deferred Tax Assets	81,843		81,843			0	81,843	0	81,843
(b)Statutory Valuation Allowance Adjustment			0			0	0	0	(
(c)Adjusted Gross Deferred Tax Assets (1a - 1b)	81,843	0	81,843	0	0	0	81,843	0	81,843
d)Deferred Tax Assets Nonadmitted	81,843		81,843			0	81,843	0	81,84
e)Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	0	0	0	0	0	0	0	0	
(f)Deferred Tax Liabilities			0			0	0	0	(
(g)Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)		0							

	As of E	nd of Current	Period		12/31/2015			Change	
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
41	Ordinary	Сарнаі	Total	Ordinary	Сарпаі	Total	Ordinary	Сарітаі	Total
Admission Calculation Components									
SSAP No. 101									
(a)Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks			0			0	0	0	
(b)Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)			0			0	0	0	
Adjusted Gross Deferred Tax     Assets Expected to be     Realized Following the Balance     Sheet Date			0			0	0	0	
Adjusted Gross Deferred Tax     Assets Allowed per Limitation     Threshold	xxx	xxx		xxx	XXX		XXX	XXX	
(c)Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.			0			0	0	0	
(d)Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	0	0	0	0	0	0	0	0	

	2016	2015
a.Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount		
b.Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.		

Change As of End of Current Period 12/31/2015 (3) (6) (Col. 2 - 4) (2) (1) (Col. 1 - 3) Ordinary Ordinary Capital Ordinary Capital Impact of Tax Planning Strategies: (a) 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) .81,84 81,84 Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies 0.000 .0.000 3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e) Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning 0.000 0.000 strategies .

Current income taxes incurred consist of the following major components:	(1)	(2)	(3)
	As of End of Current		(Col. 1 - 2)
. Current Income Tax	Period	12/31/2015	Change
(a) Federal	-		
(b)Foreign			
(c)Subtotal			
(d)Federal income tax on net capital gains			
(e)Utilization of capital loss carry-forwards			
(f)Other			
(g)Federal and foreign income taxes incurred			
Deferred Tax Assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	5		
(2) Unearned premium reserve			
(3) Policyholder reserves			
(4) Investments			
(5) Deferred acquisition costs			
(6) Policyholder dividends accrual			
(7) Fixed Assets			
• •			
(8) Compensation and benefits accrual			
(9) Pension accrual			
(10) Receivables - nonadmitted			
(11) Net operating loss carry-forward			
(12) Tax credit carry-forward			
(13) Other (including items <5% of total ordinary tax assets)			
(99) Subtotal			
(b)Statutory valuation allowance adjustment			
(c)Nonadmitted			
(d)Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	0	0	
(e)Capital:			
(1) Investments			
(2) Net capital loss carry-forward			
(3) Real estate			
(4) Other (including items <5% of total ordinary tax assets)			
(99) Subtotal	0		
(f)Statutory valuation allowance adjustment			
(g)Nonadmitted			
(h)Admitted capital deferred tax assets (2e99 - 2f - 2g)		o	
(i)Admitted deferred tax assets (2d + 2h)	0	0	
Deferred Tax Liabilities:			
(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)			
(99) Subtotal			
(b)Capital:			
(1) Investments			
(2) Real estate			
(3) Other (including items <5% of total capital tax liabilities)			
(99) Subtotal	nl	Ω	
(99) Subtotal	0	0	

#### NOTE 10

Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

4. Net deferred tax assets/liabilities (2i - 3c) .

#### A. Nature of Relationships

On June 17, 2016 all of the outstanding shares of Club Insurance Company were acquired by IBOD Company Inc. from Club Holding Corporation. The Company's articles of organization were amended to change the Company's name to Root Insurance Company.

- B. Detail of Transactions Greater than ½ of Admitted Assets Not Applicable
- C. Changes in Terms of Intercompany Arrangements Not Applicable
- D. Amounts Due to or from Related Parties Not Applicable
- E. Guarantees or Contingencies for Related Parties Not Applicable
- F. Management, Service Contracts, Cost Sharing Arrangements Not Applicable
- G. Nature of Relationship's that Could Affect Operations Not Applicable
   H. Amount Deducted for Investment in Upstream Company Not Applicable
- I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets Not Applicable
- J. Write Down for Impairments of Investments in Affiliates Not Applicable
- K. Foreign Insurance Subsidiary Valued Using CARVM Not Applicable
- L. Downstream Holding Company Valued Using Look Through Method Not Applicable

## NOTE 11

Debt

No Significant Change

#### NOTE 12

Retirement Plans, Deferred Compensation, Postretirement Benefits and Compensated Absences and Other Postretirement

Not Applicable

#### NOTE 13

Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

- Outstanding Shares Not Applicable
- Dividend Rate of Preferred Stock Not Applicable
- C. **Dividend Restrictions - Not Applicable**
- Dates and Amounts of Dividends Paid Not Applicable
- Amount of Ordinary Dividends that May be Paid Not Applicable E.
- Restrictions on Unassigned Funds Not Applicable
- G. Mutual Surplus Advances - Not Applicable
- Company Stock Held for Special Purposes Not Applicable
- Changes in Special Surplus Funds Not Applicable
- Changes in Unassigned Funds Not Applicable
- K. Surplus Notes - Not Applicable
- Impact of Quasi-Reorganization Not Applicable
- Date of Quasi-Reorganizations Not Applicable

#### NOTE 14

#### Contingencies

- Contingent Commitments Not Applicable
- Guaranty Fund and Other Assessments Not Applicable
- Gain Contingencies Not Applicable
- Extra Contractual Obligations and Bad Faith Losses Not Applicable
- Product Warranties Not Applicable
- Other Contingencies Not Applicable

A.

В.

TE 15 ses		
	Operating Lease: January 1, 2016, the minimum aggregate rental commitments are as follows:	
1.	2017	24.00
	2018	
	2019	
4.	2020	
4. 5.	2020       2021	
5. 6.	2021 Total	·
5. 6. Lessor (1)c.Fu	2021  Total  Leases ture minimum lease payment receivables under noncancelable leasing arrangements as of the end of current period an	re as follows:
5. 6. Lessor (1)c.Fu 1.	Total  Leases ture minimum lease payment receivables under noncancelable leasing arrangements as of the end of current period at 2017	re as follows:
5. 6. Lessor (1)c.Fu 1. 2.	Total  Leases ture minimum lease payment receivables under noncancelable leasing arrangements as of the end of current period at 2017	re as follows:
5. 6. Lessor (1)c.Fu 1. 2. 3.	Total  Leases ture minimum lease payment receivables under noncancelable leasing arrangements as of the end of current period at 2017	re as follows:
5. 6. Lessor (1)c.Fu 1. 2. 3.	Total  Leases ture minimum lease payment receivables under noncancelable leasing arrangements as of the end of current period at 2017  2018  2019  2020	re as follows:
5. 6. Lessor (1)c.Fu 1. 2. 3.	Total  Leases ture minimum lease payment receivables under noncancelable leasing arrangements as of the end of current period at 2017	re as follows:

The Company's investment in leveraged leases relates to equipment used primarily in the transportation industries. The component of net income from leveraged leases at December 31, 2016 and December 31, 2015 were as shown below:

	2016	2015
1.Income from leveraged leases before income tax including investment tax credit		
2.Less current income tax		
3.Net income from leverage leases	0	0

c. The components of the investment in leveraged leases at December 31, 2016 and December

31, 2015 were as snown below:		
	2016	2015
1.Lease contracts receivable (net of principal and interest on non-recourse financing)		
2.Estimated residual value of leased assets		
3.Unearned and deferred income		
4.Investment in leveraged leases		
5.Deferred income taxes related to leveraged leases		
6.Net investment in leveraged leases	0	0

Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations

#### NOTE 17

Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

- A. Transfer of Receivables Reported as Sales Not Applicable
- B. Transfers and Servicing of Financial Assets Not Applicable
- 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

Not Applicable

#### NOTE 19

Direct Premium Written/Produced By Managing General Agents/Third Party Administrators

Not Applicable

#### NOTE 20

Fair Value Measurement

- A. Inputs Used for Assets & Liabilities Measured at Fair Value Not Applicable
- B. Other Fair Value Disclosures Not Applicable
- C. Fair Values for All Financial Instruments by Level 1,2 and 3 Not Applicable
- D. Financial Instruments for which Not Practicable to Determine Fair Values Not Applicable

#### NOTE 21

#### Other Items

- A. Extraordinary 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
- F. Subprime Mortgage Related Risk Exposure Not Applicable

#### NOTE 22

#### Subsequent Events

Not Applicable

#### NOTE 23

#### Reinsurance

C. Reinsurance Assumed and Ceded			0 1 15			
	Assumed F	Reinsurance	Ceded Re	einsurance	N	let
	(1)	(2)	(3)	(4)	(5)	(6)
	Premium	Commission	Premium	Commission	Premium	Commission
	Reserve	Equity	Reserve	Equity	Reserve	Equity
a.Affiliates					0	0
b.All Other			4,219	458	(4,219)	(458)
c.Total	0	0	4,219	458	(4,219)	(458)
d.Direct Unearned Premium Reserv	e					7,297

#### NOTE 29

### Participating Policies

Not Applicable

#### NOTE 30

#### Premium Deficiency Reserves

No Significant Change

#### NOTE 31

High Deductibles

Not Applicable

#### NOTE 32

Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

Not Applicable

#### NOTE 33

#### Asbestos/Environmental Reserves

Not Applicable

#### NOTE 34

**Subscriber Savings Accounts** 

Not Applicable

## NOTE 35

#### Multiple Peril Crop Insurance

NOTE 36 Financial Guaranty Insurance

## **GENERAL INTERROGATORIES**

## PART 1 - COMMON INTERROGATORIES

### **GENERAL**

1.1	Did the reporting entity experience any material transactions requiring the filling Domicile, as required by the Model Act?	ng of Disclosure of Material Trans	actions with the	State of		Yes [	] No [ X	Κ]
1.2	If yes, has the report been filed with the domiciliary state?					Yes [	] No [	]
2.1	Has any change been made during the year of this statement in the charter, reporting entity?					Yes [ X	] No [	]
2.2	If yes, date of change:					06/	07/2016	
3.1	Is the reporting entity a member of an Insurance Holding Company System of is an insurer?					Yes [ X	] No [	]
3.2	Have there been any substantial changes in the organizational chart since th	ne prior quarter end?				Yes [	] No [ )	Κ]
3.3	If the response to 3.2 is yes, provide a brief description of those changes.							
4.1	Has the reporting entity been a party to a merger or consolidation during the	e period covered by this statemen	?			Yes [	] No [ )	ζ]
4.2	If yes, provide the name of the entity, NAIC Company Code, and state of dor ceased to exist as a result of the merger or consolidation.	micile (use two letter state abbrev	ation) for any e	ntity that has				
	1 Name of Entity	2 NAIC Company Code	3 State of Dom	icile				
5.	If the reporting entity is subject to a management agreement, including third-in-fact, or similar agreement, have there been any significant changes regal fyes, attach an explanation.	party administrator(s), managing rding the terms of the agreement	general agent(s or principals inv	), attorney- olved?	Yes [	] No [	X ] N/A	[
6.1	State as of what date the latest financial examination of the reporting entity v	was made or is being made				12/	31/2014	
6.2	State the as of date that the latest financial examination report became avail date should be the date of the examined balance sheet and not the date the					12/	31/2009	
6.3	State as of what date the latest financial examination report became available the reporting entity. This is the release date or completion date of the examinate).	nination report and not the date of	the examination	n (balance sh	eet	07/	13/2010	
6.4 6.5	By what department or departments? Ohio Department of Insurance Have all financial statement adjustments within the latest financial examination statement filed with Departments?				Yes [	] No [	] N/A	[ X
6.6	Have all of the recommendations within the latest financial examination repo	ort been complied with?			Yes [	] No [	] N/A	[ X
7.1	Has this reporting entity had any Certificates of Authority, licenses or registra revoked by any governmental entity during the reporting period?					Yes [	] No [ )	ζ]
7.2	If yes, give full information:							
8.1	Is the company a subsidiary of a bank holding company regulated by the Fed	deral Reserve Board?				Yes [	] No [ )	( )
8.2	If response to 8.1 is yes, please identify the name of the bank holding compa	any.						
8.3	Is the company affiliated with one or more banks, thrifts or securities firms?					Yes [	] No [ )	( ]
8.4	If response to 8.3 is yes, please provide below the names and location (city a regulatory services agency [i.e. the Federal Reserve Board (FRB), the Offic Insurance Corporation (FDIC) and the Securities Exchange Commission (S	ce of the Comptroller of the Currer	ncy (OCC), the	ederal Depo				
	1 Affiliate Name	2 Location (City, State)	3 FF		5 FDIC	6 SEC		

## **GENERAL INTERROGATORIES**

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	sonal and professional	Yes [ X ] No [ ]
9.11	If the response to 9.1 is No, please explain:		
9.2 9.21	Has the code of ethics for senior managers been amended?		Yes [ ] No [ X ]
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers?		Yes [ ] No [ X ]
	FINANCIAL		
10.1 10.2	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement If yes, indicate any amounts receivable from parent included in the Page 2 amount:		
	INVESTMENT		
11.1 11.2	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or other use by another person? (Exclude securities under securities lending agreements.)		Yes [ ] No [ X ]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:	\$	
13.	Amount of real estate and mortgages held in short-term investments:	\$\$	
14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?		Yes [ ] No [ X ]
14.2	If yes, please complete the following:		
		1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
	Bonds		\$
	Preferred Stock		\$
	Common Stock Short-Term Investments		\$
	Mortgage Loans on Real Estate		\$ \$
	All Other		\$
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)		\$0
	Total Investment in Parent included in Lines 14.21 to 14.26 above		\$
15.1 15.2	Has the reporting entity entered into any hedging transactions reported on Schedule DB?		Yes [ ] No [ X ] Yes [ ] No [ X ]

## **GENERAL INTERROGATORIES**

16.	For the reporting entity's security lending	program, state the amount of the	following as of	f the current sta	atement date:		
	16.1 Total fair value of r	einvested collateral assets reporte	ed on Schedule	DL, Parts 1 ar	nd 2	\$	0
	16.2 Total book adjuste	d/carrving value of reinvested colla	ateral assets re	ported on Sch	edule DL, Parts 1 and 2	\$	0
		<b>.</b>	7. 0				
17.	Excluding items in Schedule E - Part 3 - offices, vaults or safety deposit boxes, custodial agreement with a qualified ba Outsourcing of Critical Functions, Customer Schedule 1 - Customer Schedule 1 - Customer Schedule 2	were all stocks, bonds and other s ink or trust company in accordance odial or Safekeeping Agreements	ecurities, ownerse with Section of the NAIC Fir	ed throughout th 1, III - General nancial Condition	he current year held pursuant to a Examination Considerations, F. on Examiners Handbook?	Yes [ X ]	No [ ]
17.1	For all agreements that comply with the	requirements of the NAIC Financia	al Condition Ex	aminers Handb	book, complete the following:		
	1				2		
	Name of Cust				ustodian Address		
	Silicon Valley Bank		3003 Tasman D				
			Santa Clara,	CA 95054			
17.2	For all agreements that do not comply w location and a complete explanation:	ith the requirements of the NAIC F	Financial Condi	tion Examiners	Handbook, provide the name,		
	1	2		0.	3		
	Name(s)	Location(s)		C	omplete Explanation(s)		
17.3 17.4	Have there been any changes, including If yes, give full information relating theret		s) identified in 1	17.1 during the	current quarter?	Yes [ ]	No [ X ]
	1	2		3	4		
	Old Custodian	New Custodian	Date o	of Change	Reason		
17.5	Identify all investment advisors, brokers/ handle securities and have authority to				ve access to the investment accounts,		
	1	2			3		
	Central Registration Depository	Name(s)			Address		
18.1	Have all the filing requirements of the Pu	urposes and Procedures Manual o	f the NAIC Inve	estment Analys	is Office been followed?	Yes [ X ]	No [ ]

18.2 If no, list exceptions:

## **GENERAL INTERROGATORIES**

## PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.	If the reporting If yes, attach ar		per of a pooling	arrangement, di	id the agreemen	t or the reportir	ng entity's partic	cipation change?	Yes	[ ] No [	]	N/A [ X	]
2.		loss that may o						om liability, in wh		Yes [ ]	No [	Х ]	
3.1	Have any of the	e reporting entity	's primary reins	urance contract	s been canceled	d?				Yes [ ]	No [	Х ]	
3.2	If yes, give full a	and complete in	formation theret	to.									
4.1	(see Ánnual S	statement Instruc	ctions pertaining	to disclosure o	f discounting for	definition of "t	abular reserves	sation tabular res	t a rate of	Yes [ ]	No [	Х ]	
4.2	If yes, complete	e the following s	chedule:										
					TOTAL DIS	SCOUNT			OUNT TAKEN	DURING PE	RIOD		
	1	2	3	4	5	6	7	8	9	10		11	
Line	of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR		TOTAL	
			TOTAL	0	0	0	0	0	0	0			0
5.	Operating Perc	entages:											
	5.1 A&H loss p	ercent											. 9
	5.2 A&H cost co	ontainment perc	cent										. 9
	5.3 A&H expen	se percent exclu	uding cost conta	inment expense	es								. 9
6.1	Do you act as a	a custodian for h	nealth savings a	ccounts?						Yes [ ]	No [	Х ]	
6.2	If yes, please p	rovide the amou	unt of custodial f	unds held as of	the reporting da	ıte			\$				
6.3	Do you act as a	an administrator	for health savin	gs accounts?						Yes [ ]	No [	Х ]	
64	If ves nlease n	rovide the balan	nce of the funds	administered as	s of the reporting	ı date			\$				

## SCHEDULE F - CEDED REINSURANCE Showing All New Reinsurers - Current Year to Date

		Showing All New F	Reinsurers - (	Current Year to Date		
1 NAIC	2	3	4	Current Year to Date 5	6 Certified	7 Effective Date of
NAIC Company Code 1054 23680 10227	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	Certified Reinsurer Rating (1 through 6)	Date of Certified Reinsurer Rating
11054	43–1898350 47–0698507 13–4924125	Maiden Re	NJ CT NJ	Authorized		
23680	47-0698507	Odyssey Re	CT	Authorized		
10227	13-4924125	Munich Re	NJ	Author i zed		
				-		
ļ	<b> </b>					
				-		
				1		

## **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

Current Year to Date - Allocated by States and Territories

		1	Direct Premiu 2	3	Direct Losses Paid (	5	Direct Loss 6	7
	0	Active	Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year
	States, etc.	Status	To Date	To Date	To Date	To Date	To Date	To Date
1.		N						
	AlaskaAK	NNN						
3.	ArizonaAZ	N						
4.	ArkansasAR	NN.						
5.	CaliforniaCA	N						
6.	ColoradoCO ConnecticutCT	N						
7.	DelawareDE	NN.						
8. 9.	District of ColumbiaDC	N.						
	FloridaFL	N.						
10.	GeorgiaGA							
11. 12.	HawaiiHI	NI .						
13.	IdahoID	NNNNNN						
14.	IllinoisIL	N						
15.	Indiana IN	N.I.						
	lowaIA							
16.	Kansas KS	NNN						
17.		N						
18.	KentuckyKY							
19.	LouisianaLA	NNNNN						
20.	MaineME							
	MarylandMD	N						
22.	MassachusettsMA	NNNNN						
23.	MichiganMI							
24.	MinnesotaMN	N						
25.	MississippiMS	N						
26.	MissouriMO	N						
27.	MontanaMT	N						
28.	NebraskaNE	N						
29.	NevadaNV	N						
30.	New HampshireNH	N						
31.	New JerseyNJ	N						
	New MexicoNM	N						
33.	New YorkNY	N						
34.	North CarolinaNC	N						
35.	North DakotaND	N						
36.	OhioOH	L	11,573	6, 168	2,250	63,805	500	31,285
37.	OklahomaOK	N						
38.	OregonOR	N						
39.	PennsylvaniaPA	N						
40.	Rhode IslandRI	N						
41.	South CarolinaSC	N						
42.	South DakotaSD	N						
43.	TennesseeTN	N						
44.	TexasTX	N						
45.	UtahUT	N						
46.	VermontVT	N						
47.	VirginiaVA	N						
48.	WashingtonWA	N						
49.	West VirginiaWV	N						
50.	WisconsinWI	N						
51.	WyomingWY	N						
52.	American SamoaAS	N						
53.	GuamGU	N						
54.	Puerto RicoPR	N						
55.	U.S. Virgin IslandsVI	N						
56.	Northern Mariana							
	IslandsMP	N						
57.	CanadaCAN	N						
58.	Aggregate Other Alien OT	XXX	0	0	0	0	0	0
59.	Totals	(a) 1	11,573	6,168	2,250	63,805	500	31,285
	DETAILS OF WRITE-INS							
58001.		XXX						
		XXX						
		XXX						
	Summary of remaining							
J0330.	write-ins for Line 58 from							
	overflow page	XXX	0	0	0	0	0	0
	Totals (Lines 58001 through							
58999.								
58999.	58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0

<sup>(</sup>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.

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

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

## IBOD Company Inc.

Federal Tax ID #47-3049829 NAIC Company Code – None

Parent Company

## Root Insurance Company

Federal Tax ID #31-1631404 NAIC Company Code – 10974

100% Owned

## **SCHEDULE Y**

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
											Type	lf		
											of Control	Control		
											(Ownership,	is		
						Name of Securities			Relation-		Board,	Owner-		
						Exchange		Domi-	ship		Management,	ship		
_		NAIC				if Publicly Traded	Names of	ciliary	_ to		Attorney-in-Fact,	Provide		
Group		Company	, ID	Federal	0117	(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	*
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	*
			47-3049829				IBOD Company Inc	DE	UDP	Drive Capital LLC	Board of Directors		Drive Capital LLC	
		10974	31-1631404 .				Root Insurance Company	H	I A	IBOD Company Inc	Ownership	100.000	Drive Capital LLC	
									<del>-</del>					
		·												
<del>-</del>														
								\						

Asterisk					Expl. 18	at n	
		<b>X</b>		 			
			4	7			

## PART 1 - LOSS EXPERIENCE

			Current Year to Date		4
	Line of Business	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	Prior Year to Date Direct Loss Percentage
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		(13,610)		7.5
14.	Credit accident and health			0.0	
15.	Other accident and health			0.0	
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				
	Private passenger auto liability	2 102		51.0	
10.1,10.2	Commercial auto liability				
21.	Auto physical damage			0.0 51.0	
22.	Aircraft (all perils)				
23.				0.0	
23. 24.	Fidelity			0.0	
	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
32. 33.	Reinsurance - Nonproportional Assumed Liability				XXXXXX
33. 34.	Aggregate write-ins for other lines of business	0	0	0.0	
35.	Totals	4.275	(11.430)	(267.4)	0.0
00.		4,2/5	(11,450)	(201.4)	
3401. 3402.	DETAILS OF WRITE-INS				
3403.	Cummon of romaining units in far Line 24 from quarti			^ ^	
3498.	Summary of remaining write-ins for Line 34 from overflow page			0.0	
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0.0	

	Line of Dunings	1	2 Current Year to Date	3 Prior Year Year to Date
1.	Line of Business Fire	Current Quarter 0	rear to Date	rear to Date
2.	Allied Lines	0		
3.	Farmowners multiple peril	0		
4.	Homeowners multiple peril			
5.	Commercial multiple peril			
6.	Mortgage guaranty			
8.	Ocean marine			
9.	Inland marine			
10.	Financial guaranty			
11.1	Medical professional liability - occurrence			
11.2	Medical professional liability - claims-made			
12.	Earthquake			
13.	Group accident and health			6.162
14.	Credit accident and health			, 102
15.	Other accident and health			
16.	Workers' compensation			
17.1	Other liability - occurrence			
17.2	Other liability - claims-made			
17.3	Excess workers' compensation			
18.1	Products liability - occurrence	0		
18.2	Products liability - claims-made			
	Private passenger auto liability		8,533	
,	Commercial auto liability			
21.	Auto physical damage		2 040	
22.	Aircraft (all perils)			
23.	Fidelity			
24.	Surety			
26.	Burglary and theft			
27.	Boiler and machinery			
28.	Credit			
29.	International			
30.	Warranty			
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability	xxx	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX		XXX
34.	Aggregate write-ins for other lines of business		0	0
35.	Totals	7,820	11,573	6,162
3401. 3402.	DETAILS OF WRITE-INS			
3403. 3498.	Summary of remaining write-ins for Line 34 from overflow page			^
3498. 3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)		0	

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

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year- End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1+2)	2016 Loss and LAE Payments on Claims Reported as of Prior Year-End	2016 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2016 Loss and LAE Payments (Cols. 4+5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	LAE Reserves on Claims Reported	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7+8+9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12)
1. 2013 + Prior			0			0				0	0	0	0
2. 2014		2	2			0				0	0	(2)	(2)
3. Subtotals 2014 + Prior	0	2	2	0	0	0	0	0	0	0	0	(2)	(2)
4. 2015	8	6	14	2		2				0	(6)	(6)	(12)
5. Subtotals 2015 + Prior	8	8	16	2	0	2	0	0	0	0	(6)	(8)	(14)
6. 2016	xxx	XXX	XXX	XXX		0	XXX	0	1	1	XXX	XXX	XXX
7. Totals	8	8	16	2	0	2	0	0	1	1	(6)	(8)	(14)
Prior Year-End Surplus     As Regards     Policyholders	3,918										Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
											1. (75.0)	2. (100.0)	3. (87.5)

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	_	Response
1.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
	Explanations:	
1.		
2.		
3.		
4.		
	Bar Codes:	
1.	Trusteed Surplus Statement [Document Identifier 490]	
2.	Supplement A to Schedule T [Document Identifier 455]	
3.	Medicare Part D Coverage Supplement [Document Identifier 365]	
4.	Director and Officer Supplement [Document Identifier 505]	

# STATEMENT AS OF SEPTEMBER 30, 2016 OF THE Root Insurance Company OVERFLOW PAGE FOR WRITE-INS

# NONE

## **SCHEDULE A - VERIFICATION**

Real Estate

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

## **SCHEDULE B - VERIFICATION**

Mortgage Loans

	Mortgage Loans	T .	1 -
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	-	
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage in a rest wint and commitment less	-	
9.	Total foreign exchange change in book value/recorded in the herboxical foreign exchange change in book value/recorded in the herboxical foreign exchange change in book value/recorded in the herboxical foreign exchange change in book value/recorded in the herboxical foreign exchange change in book value/recorded in the herboxical foreign exchange change in book value/recorded in the herboxical foreign exchange in book value from the herboxical foreign exchange in the		
10.	Deduct current year's other than temporary impail nent recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

## **SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

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

## **SCHEDULE D - VERIFICATION**

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	3,661,673	8,772,476
2.	Cost of bonds and stocks acquired		2,581,498
3.	Accrual of discount		4,335
4.	Unrealized valuation increase (decrease)		(187,388)
5.	Total gain (loss) on disposals	34,927	(14,522)
6.	Deduct consideration for bonds and stocks disposed of	4, 127, 213	7,434,973
7.	Deduct amortization of premium		59,753
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	3,661,673
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	0	3,661,673

## **SCHEDULE D - PART 1B**

Showing the Acquisitions, Dispositions and Non-Trading Activity

	During the Current Quarter for	or all Bonds and Prefe	erred Stock by NAIC	Designation				
NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	0				3,161,583	0	0	3,128,393
2. NAIC 2 (a)					530,771	0	0	533,280
3. NAIC 3 (a)	0				0	0	0	
4. NAIC 4 (a)	0				0	0	0	
5. NAIC 5 (a)	0				0	0	0	
6. NAIC 6 (a)	0				0	0	0	
7. Total Bonds	0	0	0	0	3,692,354	0	0	3,661,673
PREFERRED STOCK								
8. NAIC 1					0	0	0	0
9. NAIC 2					0	0	0	0
10. NAIC 3					0	0	0	0
11. NAIC 4		1			0	U	0	
12. NAIC 5					0	0	0	
13. NAIC 6		0	0	0	0	0	0	0
14. Total Preferred Stock						•	<u> </u>	0 661 670
15. Total Bonds and Preferred Stock	0	0	0	0	3,692,354	0	0	3,661,673

NAIC 4 \$ ......; NAIC 5 \$......; NAIC 6 \$......

## **SCHEDULE DA - PART 1**

Short-Term Investments

1 2 3 4 5
Paid for
Accrued Interest Collected
Carring Value Palue

9199999 Totals

Short-Term Investments

1 2 3 4 5
Paid for
Accrued Interest Year-to-Date

Year-to-Date

## **SCHEDULE DA - VERIFICATION**

Short-Term Investments

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	76,080	1,344,743
2.	Cost of short-term investments acquired	4,025,221	4,331,869
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	4,101,301	5,600,532
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	76,080
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	0	76,080

# Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards NONE

# Schedule DB - Part B - Verification - Futures Contracts $N\ O\ N\ E$

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open NONE

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open  $N\ O\ N\ E$ 

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

NONE

## **SCHEDULE E - VERIFICATION**

(Cash Equivalents)

	(Odon Equivalente)	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	
2.	Cost of cash equivalents acquired	940,686	
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	940,686	0
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	940,686	0

# Schedule A - Part 2 - Real Estate Acquired and Additions Made NONE

# Schedule A - Part 3 - Real Estate Disposed NONE

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made NONE

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid NONE

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired  $\overline{NONE}$ 

Schedule D - Part 4 - Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed Of NONE

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made NONE

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To  $\stackrel{\textstyle N}{}$  O  $\stackrel{\textstyle N}{}$  E

# Schedule DL - Part 1 - Reinvested Collateral Assets Owned $\overline{N}$ $\overline{O}$ $\overline{N}$ $\overline{E}$

Schedule DL - Part 2 - Reinvested Collateral Assets Owned  $\overline{N}$   $\overline{O}$   $\overline{N}$   $\overline{E}$ 

## **SCHEDULE E - PART 1 - CASH**

Month	Fnd	Depository	Ralances
IVIOLILI	LIIU		Dalalices

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter				
			Amount of Interest Received	Amount of	6	7	8		
		Rate of		at Current					
Depository	Code	Interest		Statement Date	First Month	Second Month	Third Month	*	
Silicon Valley Bank - Checking									
					999,260	999,749	997,025	XXX.	
Silicon Valley Bank - State									
Deposit					1,500,000	1,500,000	1,500,000	XXX	
0199998. Deposits in depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX						XXX	
0199999. Totals - Open Depositories	XXX	XXX	0	0	2,499,260	2,499,749	2,497,025	XXX	
0299998. Deposits in depositories that do not exceed the allowable limit in any one depository (See					2,100,200	2,100,710	2,107,020		
instructions) - Suspended Depositories	XXX	XXX						XXX	
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX	
0399999. Total Cash on Deposit	XXX	XXX	0	0	2,499,260	2,499,749	2,497,025	XXX	
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX	
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0599999. Total - Cash	XXX	XXX	0	0	2,499,260	2,499,749	2,497,025	XXX	

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

Show Investments Owned End of Current Quarter

1	2	3	1	5	6	7	Ω
'	_	3	7	3	Book/Adjusted	Amount of Interest	Amount Received
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
0599999. Total - U.S. Government Bonds					0	0	<u> </u>
1099999. Total - All Other Government Bonds					0	0	0
1799999. Total - U.S. States, Territories and Possessions Bonds					0	0	0
2499999. Total - U.S. Political Subdivisions Bonds					0	0	0
3199999. Total - U.S. Special Revenues Bonds					0	0	
3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds					0	0	0
4899999. Total - Hybrid Securities					0	0	0
559999. Total - Parent, Subsidiaries and Affiliates Bonds					0	0	(
7799999. Total - Issuer Obligations					0	0	(
7899999. Total - Residential Mortgage-Backed Securities					0	0	(
799999. Total - Commercial Mortgage-Backed Securities					0	0	0
8099999. Total - Other Loan-Backed and Structured Securities					0	0	(
8399999. Total Bonds					0	0	(
Silicon Valley Bank - Sweep					925,686		
8499999. Subtotal - Sweep Accounts					925,686	0	0
Crawford & Co Claims Imprest					15,000		
8599999. Subtotal - Other Cash Equivalents			T		15,000	0	C
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0000000 Total Cook Favirulants							
8699999 - Total Cash Equivalents					940,686	0	