



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

# ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2016  
OF THE CONDITION AND AFFAIRS OF THE

# Utica National Insurance Company of Ohio

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

Organized under the Laws of \_\_\_\_\_, State of Domicile or Port of Entry \_\_\_\_\_ OH  
Country of Domicile \_\_\_\_\_ United States of America

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

Statutory Home Office \_\_\_\_\_ 2 Easton Oval, Suite 225 \_\_\_\_\_, \_\_\_\_\_ Columbus , OH, US 43219  
(Street and Number) \_\_\_\_\_ (City or Town, State, Country and Zip Code)

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

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

Primary Location of Books and Records \_\_\_\_\_ 180 Genesee Street  
(Street and Number)

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

Internet Website Address \_\_\_\_\_ **www.uticanational.com**

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

## OFFICERS

Chairman #, President & CEO # Richard Patrick Creedon Secretary Louisa Suzanne Ruffine #  
CEO & Treasurer Brian Wade Miller Jr.

**OTHER**

**DIRECTORS OR TRUSTEES**

John Martin Anderson	Jolene Marie Casatelli	Paul Lewis Cohen
Richard Patrick Creedon	Steven Paul Guzski	Kristen Holly Martin
Louisa Suzanne Ruffine #		

State of New York County of Oneida SS:

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

Richard Patrick Creedon  
Chairman, President & CEO

Brian Wade Miller, Jr.  
CFO & Treasurer

Louisa Suzanne Ruffine  
Secretary

Subscribed and sworn to before me this  
\_\_\_\_ day of \_\_\_\_\_

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0201

BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2016

NAIC Company Code 13998

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....												
2.1 Allied lines .....												
2.2 Multiple peril crop .....												
2.3 Federal flood .....												
2.4. Private crop .....												
2.5 Private flood .....												
3. Farmowners multiple peril .....												
4. Homeowners multiple peril .....												
5.1 Commercial multiple peril (non-liability portion) .....												750
5.2 Commercial multiple peril (liability portion) .....												
6. Mortgage guaranty .....												
8. Ocean marine .....												
9. Inland marine .....												
10. Financial guaranty .....												
11. Medical professional liability .....												
12. Earthquake .....												
13. Group accident and health (b) .....												
14. Credit accident and health (group and individual) .....												
15.1 Collectively renewable accident and health (b) .....												
15.2 Non-cancellable accident and health(b) .....												
15.3 Guaranteed renewable accident and health(b) .....												
15.4 Non-renewable for stated reasons only (b) .....												
15.5 Other accident only .....												
15.6 Medicare Title XVIII exempt from state taxes or fees .....												
15.7 All other accident and health (b) .....												
15.8 Federal employees health benefits plan premium (b) .....												
16. Workers' compensation .....												
17.1 Other Liability - occurrence .....												
17.2 Other Liability - claims made .....												
17.3 Excess workers' compensation .....												
18. Products liability .....												
19.1 Private passenger auto no-fault (personal injury protection) .....												
19.2 Other private passenger auto liability .....												
19.3 Commercial auto no-fault (personal injury protection) .....												
19.4 Other commercial auto liability .....												
21.1 Private passenger auto physical damage .....												
21.2 Commercial auto physical damage .....												
22. Aircraft (all perils) .....												
23. Fidelity .....												
24. Surety .....												
26. Burglary and theft .....												
27. Boiler and machinery .....												
28. Credit .....												
30. Warranty .....												
34. Aggregate write-ins for other lines of business .....												750
35. TOTALS (a) .....												
<b>DETAILS OF WRITE-INS</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0201

BUSINESS IN THE STATE OF New York

DURING THE YEAR 2016

NAIC Company Code 13998

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....	20,411	17,934		11,922		26	68		(41)	61	3,759	1,549
2.1 Allied lines .....	19,445	16,811		14,396							3,550	119
2.2 Multiple peril crop .....												
2.3 Federal flood .....												
2.4. Private crop .....												
2.5 Private flood .....												
3. Farmowners multiple peril .....												
4. Homeowners multiple peril .....												
5.1 Commercial multiple peril (non-liability portion) .....	17,211,234	17,588,547		8,950,789	5,856,296	6,241,456	1,819,637	197,632	149,267	284,542	3,260,544	222,872
5.2 Commercial multiple peril (liability portion) .....	18,427,938	18,041,820		9,547,478	2,034,223	7,754,749	13,894,449	1,725,511	4,009,723	6,010,360	3,474,178	229,254
6. Mortgage guaranty .....												
8. Ocean marine .....												
9. Inland marine .....	3,423	22,981		5,659		61	308		67	228	871	778
10. Financial guaranty .....												
11. Medical professional liability .....												
12. Earthquake .....												
13. Group accident and health (b) .....												
14. Credit accident and health (group and individual) .....												
15.1 Collectively renewable accident and health (b) .....												
15.2 Non-cancellable accident and health(b) .....												
15.3 Guaranteed renewable accident and health(b) .....												
15.4 Non-renewable for stated reasons only (b) .....												
15.5 Other accident only .....												
15.6 Medicare Title XVIII exempt from state taxes or fees .....												
15.7 All other accident and health (b) .....												
15.8 Federal employees health benefits plan premium (b) .....												
16. Workers' compensation .....	20,241,670	18,188,993		8,673,084	3,153,187	9,865,885	14,831,547	273,853	948,445	1,553,181	1,566,254	664,691
17.1 Other Liability - occurrence .....	8,491,334	8,951,103		3,869,074		431,498	3,605,724			6,481	22,118	1,151,248
17.2 Other Liability - claims made .....		306										2
17.3 Excess workers' compensation .....												(3)
18. Products liability .....	2,340	1,980		1,416		128	337		(2)	4	471	.79
19.1 Private passenger auto no-fault (personal injury protection) .....												
19.2 Other private passenger auto liability .....												.38
19.3 Commercial auto no-fault (personal injury protection) .....	445,272	.466,643		220,127	110,144	148,411	138,049	3,334	2,083	8,835	.80,960	.10,861
19.4 Other commercial auto liability .....	8,152,645	8,028,106		4,032,965	1,610,061	4,463,421	4,606,598	69,507	410,522	605,232	1,486,791	196,882
21.1 Private passenger auto physical damage .....												
21.2 Commercial auto physical damage .....	2,286,854	2,284,364		1,135,997	1,508,210	1,499,353	28,232	65,872	.84,322	.21,779	420,924	.34,831
22. Aircraft (all perils) .....												
23. Fidelity .....												
24. Surety .....												
26. Burglary and theft .....												
27. Boiler and machinery .....												
28. Credit .....												
30. Warranty .....												
34. Aggregate write-ins for other lines of business .....												
35. TOTALS (a) .....	75,302,566	73,609,588		36,462,907	14,272,121	30,404,988	38,924,949	2,335,709	5,610,867	8,506,340	11,451,166	1,601,661
<b>DETAILS OF WRITE-INS</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code	0201	BUSINESS IN THE STATE OF Ohio		DURING THE YEAR 2016							NAIC Company Code	13998	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....													
2.1 Allied lines .....													
2.2 Multiple peril crop .....													
2.3 Federal flood .....													
2.4. Private crop .....													
2.5 Private flood .....													
3. Farmowners multiple peril .....													
4. Homeowners multiple peril .....													
5.1 Commercial multiple peril (non-liability portion) .....	46,784	43,947			23,119	16,390	13,566	547	419	(565)	67	7,615	34,064
5.2 Commercial multiple peril (liability portion) .....	28,405	26,418			14,597	1,843	4,652	3,798	15	966	1,290	4,733	21,713
6. Mortgage guaranty .....													
8. Ocean marine .....													
9. Inland marine .....													
10. Financial guaranty .....													
11. Medical professional liability .....													
12. Earthquake .....													
13. Group accident and health (b) .....													
14. Credit accident and health (group and individual) .....													
15.1 Collectively renewable accident and health (b) .....													
15.2 Non-cancellable accident and health(b) .....													
15.3 Guaranteed renewable accident and health(b) .....													
15.4 Non-renewable for stated reasons only (b) .....													
15.5 Other accident only .....													
15.6 Medicare Title XVIII exempt from state taxes or fees .....													
15.7 All other accident and health (b) .....													
15.8 Federal employees health benefits plan premium (b) .....													
16. Workers' compensation .....													
17.1 Other Liability - occurrence .....													
17.2 Other Liability - claims made .....													
17.3 Excess workers' compensation .....													
18. Products liability .....													
19.1 Private passenger auto no-fault (personal injury protection) .....													
19.2 Other private passenger auto liability .....													
19.3 Commercial auto no-fault (personal injury protection) .....													
19.4 Other commercial auto liability .....													
21.1 Private passenger auto physical damage .....													
21.2 Commercial auto physical damage .....													
22. Aircraft (all perils) .....													
23. Fidelity .....													
24. Surety .....													
26. Burglary and theft .....													
27. Boiler and machinery .....													
28. Credit .....													
30. Warranty .....													
34. Aggregate write-ins for other lines of business .....													
35. TOTALS (a) .....	75,189	70,365			37,716	18,233	18,218	4,345	434	401	1,357	12,348	55,777
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0201

BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2016

NAIC Company Code 13998

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....												
2.1 Allied lines .....												
2.2 Multiple peril crop .....												
2.3 Federal flood .....												
2.4. Private crop .....												
2.5 Private flood .....												
3. Farmowners multiple peril .....												
4. Homeowners multiple peril .....												
5.1 Commercial multiple peril (non-liability portion) .....	236,334	252,744		124,327	5,517	11,080	7,941	4,982	4,935	2,699	37,377	.11,040
5.2 Commercial multiple peril (liability portion) .....	107,619	112,365		57,320	883	24,234	39,925	15	6,957	12,584	.17,200	4,835
6. Mortgage guaranty .....												
8. Ocean marine .....												
9. Inland marine .....												
10. Financial guaranty .....												
11. Medical professional liability .....												
12. Earthquake .....												
13. Group accident and health (b) .....												
14. Credit accident and health (group and individual) .....												
15.1 Collectively renewable accident and health (b) .....												
15.2 Non-cancellable accident and health(b) .....												
15.3 Guaranteed renewable accident and health(b) .....												
15.4 Non-renewable for stated reasons only (b) .....												
15.5 Other accident only .....												
15.6 Medicare Title XVIII exempt from state taxes or fees .....												
15.7 All other accident and health (b) .....												
15.8 Federal employees health benefits plan premium (b) .....												
16. Workers' compensation .....	523,621	208,843		314,778	9,260	95,902	86,643	.85	9,353	9,268	.48,600	.23,495
17.1 Other Liability - occurrence .....	.61,750	.31,129		.30,621		12,531	12,531			.65	.65	9,263
17.2 Other Liability - claims made .....												
17.3 Excess workers' compensation .....												
18. Products liability .....												
19.1 Private passenger auto no-fault (personal injury protection) .....												
19.2 Other private passenger auto liability .....												
19.3 Commercial auto no-fault (personal injury protection) .....	.167	.459		.92		.4					.30	.19
19.4 Other commercial auto liability .....	23,134	32,923		12,541		3,656	3,938	122	553	470	3,716	1,287
21.1 Private passenger auto physical damage .....												
21.2 Commercial auto physical damage .....	3,017	8,353		1,763		.60	.93	185	313	113	537	122
22. Aircraft (all perils) .....												
23. Fidelity .....												
24. Surety .....												
26. Burglary and theft .....												
27. Boiler and machinery .....												
28. Credit .....												
30. Warranty .....												
34. Aggregate write-ins for other lines of business .....												
35. TOTALS (a) .....	955,642	646,816		541,442	15,660	147,463	151,075	5,389	22,176	25,199	116,723	42,031
<b>DETAILS OF WRITE-INS</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0201

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2016

NAIC Company Code 13998

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....	20,411	17,934		11,922		26	68		(41)	61	3,759	1,549
2.1 Allied lines .....	19,445	16,811		14,396							3,550	119
2.2 Multiple peril crop .....												
2.3 Federal flood .....												
2.4. Private crop .....												
2.5 Private flood .....												
3. Farmowners multiple peril .....												
4. Homeowners multiple peril .....												
5.1 Commercial multiple peril (non-liability portion) .....	17,494,352	17,885,238		9,098,235	5,878,203	6,266,102	1,828,125	203,033	153,637	287,308	3,305,536	268,726
5.2 Commercial multiple peril (liability portion) .....	18,563,962	18,180,603		9,619,395	2,036,949	7,783,635	13,938,172	1,725,541	4,017,646	6,024,234	3,496,111	255,802
6. Mortgage guaranty .....												
8. Ocean marine .....												
9. Inland marine .....	3,423	22,981		5,659		61	308		67	228	871	778
10. Financial guaranty .....												
11. Medical professional liability .....												
12. Earthquake .....												
13. Group accident and health (b) .....												
14. Credit accident and health (group and individual) .....												
15.1 Collectively renewable accident and health (b) .....												
15.2 Non-cancellable accident and health(b) .....												
15.3 Guaranteed renewable accident and health(b) .....												
15.4 Non-renewable for stated reasons only (b) .....												
15.5 Other accident only .....												
15.6 Medicare Title XVIII exempt from state taxes or fees .....												
15.7 All other accident and health (b) .....												
15.8 Federal employees health benefits plan premium (b) .....												
16. Workers' compensation .....	20,765,291	18,397,836		8,987,862	3,162,447	9,961,787	14,918,190	273,938	957,798	1,562,449	1,614,854	688,186
17.1 Other Liability - occurrence .....	8,553,084	8,982,232		3,899,695		444,029	3,618,255			6,546	22,183	1,160,511
17.2 Other Liability - claims made .....		306										2
17.3 Excess workers' compensation .....												(3)
18. Products liability .....	2,340	1,980		1,416		128	337		(2)	4	471	.79
19.1 Private passenger auto no-fault (personal injury protection) .....												
19.2 Other private passenger auto liability .....												.38
19.3 Commercial auto no-fault (personal injury protection) .....	445,439	.467,102		220,219	.110,144	148,411	138,053	3,334	2,083	8,835	80,990	.10,880
19.4 Other commercial auto liability .....	8,175,779	8,061,029		4,045,506	1,610,061	4,467,077	4,610,536	69,629	411,075	605,702	1,490,507	198,169
21.1 Private passenger auto physical damage .....												
21.2 Commercial auto physical damage .....	2,289,871	2,292,717		1,137,760	1,508,210	1,499,413	28,325	66,057	84,635	.21,892	421,461	.34,953
22. Aircraft (all perils) .....												
23. Fidelity .....												
24. Surety .....												
26. Burglary and theft .....												
27. Boiler and machinery .....												
28. Credit .....												
30. Warranty .....												
34. Aggregate write-ins for other lines of business .....												
35. TOTALS (a) .....	76,333,397	74,326,769		37,042,065	14,306,014	30,570,669	39,080,369	2,341,532	5,633,444	8,532,896	11,580,237	1,700,219
<b>DETAILS OF WRITE-INS</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

Schedule F - Part 1

**N O N E**

Schedule F - Part 2

**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17]	19 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 thru 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			
15-0476880	.25976	Utica Mutual Insurance Company	NY		76,333			28,303	2,163	10,777	6,412	37,042		84,698			84,698		
0199999.	Total Authorized - Affiliates - U.S. Intercompany Pooling				76,333			28,303	2,163	10,777	6,412	37,042		84,698			84,698		
0499999.	Total Authorized - Affiliates - U.S. Non-Pool																		
0799999.	Total Authorized - Affiliates - Other (Non-U.S.)																		
0899999.	Total Authorized - Affiliates				76,333			28,303	2,163	10,777	6,412	37,042		84,698			84,698		
0999998.	Total Authorized - Other U.S. Unaffiliated Insurers (Under \$100,000)																		
0999999.	Total Authorized - Other U.S. Unaffiliated Insurers																		
1299998.	Total Authorized - Other Non-U.S. Insurers (Under \$100,000)																		
1299999.	Total Authorized - Other Non-U.S. Insurers																		
1399999.	Total Authorized				76,333			28,303	2,163	10,777	6,412	37,042		84,698			84,698		
1799999.	Total Unauthorized - Affiliates - U.S. Non-Pool																		
2099999.	Total Unauthorized - Affiliates - Other (Non-U.S.)																		
2199999.	Total Unauthorized - Affiliates																		
2299998.	Total Unauthorized - Other U.S. Unaffiliated Insurers (Under \$100,000)																		
2299999.	Total Unauthorized - Other U.S. Unaffiliated Insurers																		
2599998.	Total Unauthorized - Other Non-U.S. Insurers (Under \$100,000)																		
2599999.	Total Unauthorized - Other Non-U.S. Insurers																		
2699999.	Total Unauthorized																		
3099999.	Total Certified - Affiliates - U.S. Non-Pool																		
3399999.	Total Certified - Affiliates - Other (Non-U.S.)																		
3499999.	Total Certified - Affiliates																		
3599998.	Total Certified - Other U.S. Unaffiliated Insurers (Under \$100,000)																		
3599999.	Total Certified - Other U.S. Unaffiliated Insurers																		
3899998.	Total Certified - Other Non-U.S. Insurers (Under \$100,000)																		
3899999.	Total Certified - Other Non-U.S. Insurers																		
3999999.	Total Certified																		
4099999.	Total Authorized, Unauthorized and Certified				76,333			28,303	2,163	10,777	6,412	37,042		84,698			84,698		
4199999.	Total Protected Cells																		
9999999.	Totals				76,333			28,303	2,163	10,777	6,412	37,042		84,698			84,698		

NOTE: A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties.

The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

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

B. Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on the total recoverables,

Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated
1. Utica Mutual Insurance Company	84,698	76,333	Yes [ X ] No [ ]
2.			Yes [ ] No [ ]
3.			Yes [ ] No [ ]
4.			Yes [ ] No [ ]
5.			Yes [ ] No [ ]

Schedule F - Part 4

**N O N E**

Schedule F - Part 5

**N O N E**

Schedule F - Part 5 - Bank Footnote

**N O N E**

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

**N O N E**

Schedule F - Part 6 - Section 1 - Bank Footnote

**N O N E**

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

**N O N E**

Schedule F - Part 7 - Provision for Overdue Authorized Reinsurance

**N O N E**

Schedule F - Part 8 - Provision for Overdue Reinsurance

**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE F - PART 9**

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	16,053,506		16,053,506
2. Premiums and considerations (Line 15) .....			
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) .....			
4. Funds held by or deposited with reinsured companies (Line 16.2) .....			
5. Other assets .....	2,233,121		2,233,121
6. Net amount recoverable from reinsurers .....		84,697,501	84,697,501
7. Protected cell assets (Line 27) .....			
8. <b>Totals (Line 28)</b> .....	<b>18,286,627</b>	<b>84,697,501</b>	<b>102,984,128</b>
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....		47,655,436	47,655,436
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	3,576,380		3,576,380
11. Unearned premiums (Line 9) .....		37,042,065	37,042,065
12. Advance premiums (Line 10) .....			
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....			
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) .....			
15. Funds held by company under reinsurance treaties (Line 13) .....			
16. Amounts withheld or retained by company for account of others (Line 14) .....	840,634		840,634
17. Provision for reinsurance (Line 16) .....			
18. Other liabilities .....			
19. Total liabilities excluding protected cell business (Line 26) .....	4,417,014	84,697,501	89,114,515
20. Protected cell liabilities (Line 27) .....			
21. Surplus as regards policyholders (Line 37)	13,869,613	XXX	13,869,613
<b>22. Totals (Line 38)</b>	<b>18,286,627</b>	<b>84,697,501</b>	<b>102,984,128</b>

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? \_\_\_\_\_

Yes [  ] No [  ]

If yes, give full explanation: Utica National Insurance Company of Ohio (NAIC 13998) has a reinsurance agreement with its parent company, Utica Mutual Insurance Company (NAIC 25976). Under this agreement, Utica National Insurance Company of Ohio cedes 100% of all insurance to Utica Mutual Insurance Company. \_\_\_\_\_

Schedule H - Part 1

**N O N E**

Schedule H - Part 2 - Reserves and Liabilities

**N O N E**

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

**N O N E**

Schedule H - Part 4 - Reinsurance

**N O N E**

Schedule H - Part 5 - Health Claims

**N O N E**

Schedule P - Part 1A - Homeowners/Farmowners

**N O N E**

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

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO**  
**SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX									XXX	
2. 2007													
3. 2008													
4. 2009													
5. 2010													
6. 2011													
7. 2012													
8. 2013	263	263		178	178	7	7					12	
9. 2014	5,697	5,697		698	698	39	39			4		452	
10. 2015	8,958	8,958		1,422	1,422	54	54			12		709	
11. 2016	8,528	8,528		858	858	26	26	4	4	2		677	
12. Totals	XXX	XXX	XXX	3,157	3,157	127	127	4	4	18		XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.													
2. 2007													
3. 2008													
4. 2009													
5. 2010													
6. 2011													
7. 2012													
8. 2013													
9. 2014	208	208	152	152	14	14	40	40	12	12			2
10. 2015	649	649	475	475	35	35	124	124	37	37			16
11. 2016	1,886	1,886	1,378	1,378	40	40	361	361	112	112			141
12. Totals	2,743	2,743	2,005	2,005	89	89	525	525	161	161			159

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2007											
3. 2008											
4. 2009											
5. 2010											
6. 2011											
7. 2012											
8. 2013	.185	185		.70.4	70.4						
9. 2014	1,164	1,164		20.4	20.4						
10. 2015	2,798	2,798		31.2	31.2						
11. 2016	4,665	4,665		54.7	54.7						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE P - PART 1D - WORKERS' COMPENSATION**  
**(EXCLUDING EXCESS WORKERS' COMPENSATION)**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX									XXX	
2. 2007													
3. 2008													
4. 2009													
5. 2010													
6. 2011													
7. 2012	382	382		132	132	29	29					6	
8. 2013	3,369	3,369		952	952	95	95					93	
9. 2014	6,931	6,931		1,453	1,453	130	130	0	0		2	199	
10. 2015	13,645	13,645		2,110	2,110	157	157				2	391	
11. 2016	18,398	18,398		1,175	1,175	83	83					424	
12. Totals	XXX	XXX	XXX	5,823	5,823	494	494	0	0	4		XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior																
2. 2007																
3. 2008																
4. 2009																
5. 2010																
6. 2011																
7. 2012	112	112	89	89	5	5	16	16	7	7			2			
8. 2013	550	550	438	438	27	27	77	77	32	32			13			
9. 2014	1,666	1,666	1,327	1,327	40	40	234	234	97	97			19			
10. 2015	2,061	2,061	1,641	1,641	98	98	290	290	120	120			77			
11. 2016	3,917	3,917	3,119	3,119	224	224	551	551	230	230			236			
12. Totals	8,305	8,305	6,613	6,613	394	394	1,168	1,168	485	485			347			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2007											
3. 2008											
4. 2009											
5. 2010											
6. 2011											
7. 2012	389	389		101.9	101.9						
8. 2013	2,171	2,171		64.4	64.4						
9. 2014	4,948	4,948		71.4	71.4						
10. 2015	6,478	6,478		47.5	47.5						
11. 2016	9,298	9,298		50.5	50.5						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO**  
**SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX									XXX	
2. 2007													
3. 2008													
4. 2009													
5. 2010													
6. 2011													
7. 2012													
8. 2013	693	693		293	293	8	8	4	4			16	
9. 2014	20,137	20,137		3,582	3,582	808	808	29	29	105		706	
10. 2015	36,275	36,275		7,015	7,015	1,862	1,862	70	70	693		1,219	
11. 2016	36,066	36,066		4,294	4,294	368	368	17	17	172		881	
12. Totals	XXX	XXX	XXX	15,184	15,184	3,045	3,045	119	119	970		XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.													
2. 2007													
3. 2008													
4. 2009													
5. 2010													
6. 2011													
7. 2012													
8. 2013													
9. 2014	1,581	1,581	1,392	1,392	242	242	875	875	153	153			37
10. 2015	3,146	3,146	2,770	2,770	855	855	1,742	1,742	304	304			106
11. 2016	3,657	3,657	3,221	3,221	571	571	2,026	2,026	354	354			337
12. Totals	8,384	8,384	7,382	7,382	1,668	1,668	4,643	4,643	811	811			480

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2007											
3. 2008											
4. 2009											
5. 2010											
6. 2011											
7. 2012											
8. 2013	304	304		43.9	43.9						
9. 2014	8,662	8,662		43.0	43.0						
10. 2015	17,763	17,763		49.0	49.0						
11. 2016	14,507	14,507		40.2	40.2						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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

**N O N E**

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

**N O N E**

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

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO**  
**SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX									XXX	
2. 2007													
3. 2008													
4. 2009													
5. 2010													
6. 2011													
7. 2012													
8. 2013	456	456										1	
9. 2014	6,474	6,474										1	
10. 2015	9,143	9,143										4	
11. 2016	8,982	8,982										5	
12. Totals	XXX	XXX	XXX									XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.													
2. 2007													
3. 2008													
4. 2009													
5. 2010													
6. 2011													
7. 2012													
8. 2013													1
9. 2014													1
10. 2015													1
11. 2016			3,618	3,618			22	22	86	86			2
12. Totals			3,618	3,618			22	22	86	86			5

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2007											
3. 2008											
4. 2009											
5. 2010											
6. 2011											
7. 2012											
8. 2013											
9. 2014											
10. 2015											
11. 2016	3,726	3,726		41.5	41.5						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2007.....													
3. 2008.....													
4. 2009.....													
5. 2010.....													
6. 2011.....													
7. 2012.....													
8. 2013.....													
9. 2014.....	1.....	1.....											
10. 2015.....	2.....	2.....											
11. 2016.....	0.....	0.....											
12. Totals.....	XXX.....	XXX.....	XXX.....									XXX.....	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2007.....													
3. 2008.....													
4. 2009.....													
5. 2010.....													
6. 2011.....													
7. 2012.....													
8. 2013.....													
9. 2014.....													
10. 2015.....													
11. 2016.....													
12. Totals.....													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2007.....											
3. 2008.....											
4. 2009.....											
5. 2010.....											
6. 2011.....											
7. 2012.....											
8. 2013.....											
9. 2014.....											
10. 2015.....											
11. 2016.....											
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,  
EARTHQUAKE, BURGLARY AND THEFT)**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX									XXX	
2. 2015	88	88		5	5	0	0					XXX	
3. 2016	58	58										XXX	
4. Totals	XXX	XXX	XXX	5	5	0	0					XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior																
2. 2015																
3. 2016			0	0			0	0	0	0						
4. Totals			0	0			0	0	0	0						

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015	5	5		5.9	5.9						
3. 2016	1	1		1.7	1.7						
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO**  
**SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0			XXX	
2. 2015	2,389	2,389		799	799	58	58	0	0	295		467	
3. 2016	2,293	2,293		1,529	1,529	59	59	0	0	306		420	
4. Totals	XXX	XXX	XXX	2,328	2,328	117	117	0	0	601		XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior																
2. 2015													1			
3. 2016	71	71	(42)	(42)	2	2	20	20	20	20			51			
4. Totals	71	71	(42)	(42)	2	2	20	20	20	20			52			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015	858	858		35.9	35.9						
3. 2016	1,659	1,659		72.3	72.3						
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Schedule P - Part 1K - Fidelity/Surety

**N O N E**

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

**N O N E**

Schedule P - Part 1M - International

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO**  
**SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2007.....													
3. 2008.....													
4. 2009.....													
5. 2010.....													
6. 2011.....													
7. 2012.....													
8. 2013.....	0.....	0.....											
9. 2014.....	2.....	2.....											
10. 2015.....	2.....	2.....											
11. 2016.....	2.....	2.....											
12. Totals.....	XXX.....	XXX.....	XXX.....									XXX.....	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2007.....													
3. 2008.....													
4. 2009.....													
5. 2010.....													
6. 2011.....													
7. 2012.....													
8. 2013.....													
9. 2014.....													
10. 2015.....													
11. 2016.....			0.....	0.....			0.....	0.....	0.....	0.....			
12. Totals.....			0.....	0.....			0.....	0.....	0.....	0.....			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2007.....											
3. 2008.....											
4. 2009.....											
5. 2010.....											
6. 2011.....											
7. 2012.....											
8. 2013.....											
9. 2014.....											
10. 2015.....											
11. 2016.....	0.....	0.....		17.3.....	17.3.....						
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		

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

**N O N E**

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

**N O N E**

Schedule P - Part 1T - Warranty

**N O N E**

Schedule P - Part 2A - Homeowners/Farmowners

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 2E - Commercial Multiple Peril

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 2I - Special Property

**N O N E**

Schedule P - Part 2J - Auto Physical Damage

**N O N E**

Schedule P - Part 2K - Fidelity/Surety

**N O N E**

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

**N O N E**

Schedule P - Part 2M - International

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 2T - Warranty

**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	X								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX							
10. 2015	XXX	XXX	XXX	XXX	XXX							
11. 2016	XXX	XXX	XXX	XXX	XXX							

**NONE****SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	X	XX							
8. 2013	XXX	XXX	XXX	X	XX	XX						
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	X					
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					

**NONE****SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX	XXX	XXX						10	2
9. 2014	XXX	XXX	XXX	XXX	XXX						216	234
10. 2015	XXX	XXX	XXX	XXX	XXX						296	397
11. 2016	XXX	XXX	XXX	XXX	XXX						195	341

**SCHEDULE P - PART 3D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX	XXX							4
8. 2013	XXX	XXX	XXX	XXX	XXX						70	10
9. 2014	XXX	XXX	XXX	XXX	XXX						143	37
10. 2015	XXX	XXX	XXX	XXX	XXX						242	72
11. 2016	XXX	XXX	XXX	XXX	XXX						120	68

**SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL**

1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX	XXX	XXX							5
9. 2014	XXX	XXX	XXX	XXX	XXX						284	385
10. 2015	XXX	XXX	XXX	XXX	XXX						465	648
11. 2016	XXX	XXX	XXX	XXX	XXX						218	326

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XX	XX							
8. 2013	XXX	XXX	XXX	XX	XX	XX						
9. 2014	XXX	XXX	XXX	XXX	XXX	XX	XX					
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

1. Prior	.000										XXX	XXX
2. 2007											XXX	XXX
3. 2008	XXX										XXX	XXX
4. 2009	XXX	XXX									XXX	XXX
5. 2010	XXX	XXX	XXX								XXX	XXX
6. 2011	XXX	XXX	XXX	XXX							XXX	XXX
7. 2012	XXX	XXX	XXX	XX	XX						XXX	XXX
8. 2013	XXX	XXX	XXX	XX	XX	XX					XXX	XXX
9. 2014	XXX	XXX	XXX	XXX	XXX	XX	XX				XXX	XXX
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XX	XX							
8. 2013	XXX	XXX	XXX	XX	XX	XX						
9. 2014	XXX	XXX	XXX	XXX	XXX	XX	XX					
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			3	
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		3	

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

1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XX	XX							
8. 2013	XXX	XXX	XXX	XX	XX	XX						
9. 2014	XXX	XXX	XXX	XXX	XXX	XX	XX					
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,  
EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE**

1. Prior	XXX	.000										
2. 2015	XXX		225		241							
3. 2016	XXX	XXX	164		205							

**SCHEDULE P - PART 3K - FIDELITY/SURETY**

1. Prior	XXX				XXX	XXX						
2. 2015	XXX			XXX	XXX							
3. 2016	XXX		XXX	XXX								

**SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**

1. Prior	XXX	.000			XXX	XXX						
2. 2015	XXX			XXX	XXX							
3. 2016	XXX	XXX		XXX	XXX							

**SCHEDULE P - PART 3M - INTERNATIONAL**

1. Prior	.000										XXX	XXX
2. 2007											XXX	XXX
3. 2008	XXX										XXX	XXX
4. 2009	XXX	XXX									XXX	XXX
5. 2010	XXX	XXX	XXX								XXX	XXX
6. 2011	XXX	XXX	XXX	XXX							XXX	XXX
7. 2012	XXX	XXX	XXX	XXX	XX						XXX	XXX
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 3T - Warranty

**N O N E**

Schedule P - Part 4A - Homeowners/Farmowners

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 4E - Commercial Multiple Peril

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 4G - Special Liability

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 4I - Special Property

**N O N E**

Schedule P - Part 4J - Auto Physical Damage

**N O N E**

Schedule P - Part 4K - Fidelity/Surety

**N O N E**

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

**N O N E**

Schedule P - Part 4M - International

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 4T - Warranty

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL  
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX					
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX		6	9	10
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	133	206	216
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	234	296
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	195

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX					
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX		4	1	
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	112	9	2
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	103	16
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	141

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX					
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX		12	12	12
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	413	447	452
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	677	709
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	677

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE P - PART 5D - WORKERS' COMPENSATION**

(EXCLUDING EXCESS WORKERS' COMPENSATION)

**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX			.3	4	4
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX		.52	66	70
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.39	114	143
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	93	242
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	120

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX			.3	2	2
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX		.28	16	13
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.117	41	19
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	206	77
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	236

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX			.6	6	6
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX		.89	92	93
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.172	189	199
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	350	391
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	424

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL**  
**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX					
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX		5	5	5
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	125	260	284
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	297	465
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	218

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX					
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	270	86	37
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	368	106
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	337

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX					
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX		16	16	16
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	592	698	706
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,106	1,219
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	881

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE**  
**SECTION 1A**

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX					
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2A**

Years in Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX					
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX				1
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			1
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2

**SECTION 3A**

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX					
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX				1
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			1
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		4
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 5T - Warranty - Section 1

**N O N E**

Schedule P - Part 5T - Warranty - Section 2

**N O N E**

Schedule P - Part 5T - Warranty - Section 3

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**  
**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX	XXX								
6. 2011.....	XXX	XXX	XXX	XXX							
7. 2012.....	XXX	XXX	XXX	XXX	XXX						
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	263	1,255	1,248	1,248	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,705	8,750	8,744	(6)
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,920	9,052	4,132
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,402	4,402
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,528
13. Earned Premiums (Sch P-Pt. 1)							263	5,697	8,958	8,528	XXX

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX	XXX								
6. 2011.....	XXX	XXX	XXX	XXX							
7. 2012.....	XXX	XXX	XXX	XXX	XXX						
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	263	1,255	1,248	1,248	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,705	8,750	8,744	(6)
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,920	9,052	4,132
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,402	4,402
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,528
13. Earned Premiums (Sch P-Pt. 1)							263	5,697	8,958	8,528	XXX

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)**  
**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX	XXX								
6. 2011.....	XXX	XXX	XXX	XXX							
7. 2012.....	XXX	XXX	XXX	XXX	XXX	382	1,563	1,590	1,587	1,587	
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	2,189	4,749	4,620	4,620	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,343	8,783	8,794	11
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,337	16,622	7,285
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,102	11,102
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,398
13. Earned Premiums (Sch P-Pt. 1)						382	3,369	6,931	13,645	18,398	XXX

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX	XXX								
6. 2011.....	XXX	XXX	XXX	XXX							
7. 2012.....	XXX	XXX	XXX	XXX	XXX	382	1,563	1,590	1,587	1,587	
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	2,189	4,749	4,620	4,620	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,343	8,783	8,794	11
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,337	16,622	7,285
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,102	11,102
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,398
13. Earned Premiums (Sch P-Pt. 1)						382	3,369	6,931	13,645	18,398	XXX

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL**  
**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX	XXX								
6. 2011.....	XXX	XXX	XXX	XXX							
7. 2012.....	XXX	XXX	XXX	XXX	XXX						
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	693	2,764	2,760	2,760	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,067	34,780	34,739	(41)
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19,564	38,178	18,613	
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,493	17,493	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36,066
13. Earned Premiums (Sch P-Pt. 1)							693	20,137	36,275	36,066	XXX

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX	XXX								
6. 2011.....	XXX	XXX	XXX	XXX							
7. 2012.....	XXX	XXX	XXX	XXX	XXX						
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	693	2,764	2,760	2,760	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,067	34,780	34,739	(41)
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19,564	38,178	18,613	
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,493	17,493	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36,066
13. Earned Premiums (Sch P-Pt. 1)							693	20,137	36,275	36,066	XXX

**SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE**  
**SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX	XXX								
6. 2011.....	XXX	XXX	XXX	XXX							
7. 2012.....	XXX	XXX	XXX	XXX	XXX						
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	456	2,179	2,179	2,179	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,751	8,895	8,895	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,999	9,292	4,293
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,689	4,689
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,982
13. Earned Premiums (Sch P-Pt. 1)							456	6,474	9,143	8,982	XXX

**SECTION 2A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX	XXX								
6. 2011.....	XXX	XXX	XXX	XXX							
7. 2012.....	XXX	XXX	XXX	XXX	XXX						
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	456	2,179	2,179	2,179	
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,751	8,895	8,895	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,999	9,292	4,293
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,689	4,689
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,982
13. Earned Premiums (Sch P-Pt. 1)							456	6,474	9,143	8,982	XXX

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE**  
**SECTION 1B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX	XXX								
6. 2011.....	XXX	XXX	XXX	XXX							
7. 2012.....	XXX	XXX	XXX	XXX	XXX						
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	0
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)									1	2	0
											XXX

**SECTION 2B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX	XXX								
6. 2011.....	XXX	XXX	XXX	XXX							
7. 2012.....	XXX	XXX	XXX	XXX	XXX						
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	0
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)									1	2	0
											XXX

**SCHEDULE P - PART 6M - INTERNATIONAL**  
**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX									
6. 2011.....	XXX	XXX									
7. 2012.....	XXX	XXX									
8. 2013.....	XXX	XXX									
9. 2014.....	XXX	XXX									
10. 2015.....	XXX	XXX									
11. 2016.....	XXX	XXX									
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX									
6. 2011.....	XXX	XXX									
7. 2012.....	XXX	XXX									
8. 2013.....	XXX	XXX									
9. 2014.....	XXX	XXX									
10. 2015.....	XXX	XXX									
11. 2016.....	XXX	XXX									
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE**  
**SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX	XXX								
6. 2011.....	XXX	XXX	XXX	XXX							
7. 2012.....	XXX	XXX	XXX	XXX	XXX						
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	2	2	2	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	2	2	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	2	1
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2
13. Earned Premiums (Sch P-Pt. 1)							0	2	2	2	XXX

**SECTION 2A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX	XXX								
6. 2011.....	XXX	XXX	XXX	XXX							
7. 2012.....	XXX	XXX	XXX	XXX	XXX						
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	2	2	2	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	2	2	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	2	1
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2
13. Earned Premiums (Sch P-Pt. 1)							0	2	2	2	XXX

**SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE**  
**SECTION 1B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX									
6. 2011.....	XXX	XXX									
7. 2012.....	XXX	XXX									
8. 2013.....	XXX	XXX									
9. 2014.....	XXX	XXX									
10. 2015.....	XXX	XXX									
11. 2016.....	XXX	XXX									
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

**SECTION 2B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	
1. Prior.....											
2. 2007.....											
3. 2008.....	XXX										
4. 2009.....	XXX	XXX									
5. 2010.....	XXX	XXX									
6. 2011.....	XXX	XXX									
7. 2012.....	XXX	XXX									
8. 2013.....	XXX	XXX									
9. 2014.....	XXX	XXX									
10. 2015.....	XXX	XXX									
11. 2016.....	XXX	XXX									
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE P INTERROGATORIES**

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

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

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

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

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

1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? ..... Yes [ ] No [ ] N/A [ ]

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

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior .....		
1.602 2007 .....		
1.603 2008 .....		
1.604 2009 .....		
1.605 2010 .....		
1.606 2011 .....		
1.607 2012 .....		
1.608 2013 .....		
1.609 2014 .....		
1.610 2015 .....		
1.611 2016 .....		
1.612 Totals .....		

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? ..... Yes [ X ] No [ ]

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? ..... Yes [ X ] No [ ]

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? ..... Yes [ ] No [ X ]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

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

5. What were the net premiums in force at the end of the year for:

(in thousands of dollars)

5.1 Fidelity .....  
5.2 Surety .....

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

7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? ..... Yes [ ] No [ X ]

7.2 (An extended statement may be attached.)

#3 Adjusting & Other Expenses - The ADO payments in this statement, are actual accident year claim payments. The ADO reserves are a combination of actual accident year data and BULK estimates determined by actuarial data. ....

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

Allocated by States and Territories

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## SCHEDULE Y

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

Asterisk	Explanation
1	Owned 6% by Graphic Arts Mutual Insurance Company.
2	A Texas Lloyd's association of twelve underwriters under the sponsorship of the Utica Mutual Insurance Company.
3	Shares common management with the group.

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
25976	15-047680	Utica Mutual Insurance Company					17,908,230	27,366,408	*		45,274,639	(899,260,717)
25984	13-5274760	Graphic Arts Mutual Insurance Company							*			226,805,798
12475	31-4290270	Republic-Franklin Insurance Company							*			289,991,944
10687	16-1486064	Utica National Assurance Company							*			112,114,367
43478	75-1771221	Utica National Insurance Company of Texas										128,861,158
13998	27-2764004	Utica National Insurance Company of Ohio					(16,506,037)	(28,277,320)			(44,783,357)	84,697,502
43451	75-1783406	Utica Specialty Risk Insurance Company						1,712,701			1,712,701	1,579,720
10990	75-2833000	Utica Lloyd's of Texas					(1,402,193)	(801,789)			(2,203,983)	15,753,251
14249	36-2748795	Founders Insurance Company					.83,038		*		.83,038	39,456,977
18180	38-2613776	Founders Insurance Company of Michigan					(.83,038)				(.83,038)	
9999999 Control Totals									XXX			

# ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

Responses

MARCH FILING		Responses
1.	Will an actuarial opinion be filed by March 1?	YES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES
APRIL FILING		
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6.	Will Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
MAY FILING		
8.	Will this company be included in a combined annual statement which is filed with the NAIC by May 1?	YES
JUNE FILING		
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
AUGUST FILING		
11.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES
The following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of <b>NO</b> to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplemental is required of your company but is not being filed for whatever reason enter <b>SEE EXPLANATION</b> and provide an explanation following the interrogatory questions.		
MARCH FILING		
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	YES
25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
27.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
28.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?	NO
APRIL FILING		
29.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
30.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
31.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
32.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
33.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
34.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	YES
35.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO
Explanations:		
12.	Bar Codes:	
12.	SIS Stockholder Information Supplement [Document Identifier 420]	 1 3 9 9 8 2 0 1 6 4 2 0 0 0 0 0 0
13.	Financial Guaranty Insurance Exhibit [Document Identifier 240]	 1 3 9 9 8 2 0 1 6 2 4 0 0 0 0 0 0
14.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	 1 3 9 9 8 2 0 1 6 3 6 0 0 0 0 0 0
15.	Supplement A to Schedule T [Document Identifier 455]	 1 3 9 9 8 2 0 1 6 4 5 5 0 0 0 0 0
16.	Trusted Surplus Statement [Document Identifier 490]	 1 3 9 9 8 2 0 1 6 4 9 0 0 0 0 0 0
17.	Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]	 1 3 9 9 8 2 0 1 6 3 8 5 0 0 0 0 0
18.	Reinsurance Summary Supplemental Filing [Document Identifier 401]	 1 3 9 9 8 2 0 1 6 4 0 1 0 0 0 0 0
19.	Medicare Part D Coverage Supplement [Document Identifier 365]	 1 3 9 9 8 2 0 1 6 3 6 5 0 0 0 0 0
22.	Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]	 1 3 9 9 8 2 0 1 6 4 0 0 0 0 0 0 0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

23. Bail Bond Supplement [Document Identifier 500]



25. Relief from the five-year rotation requirement for lead audit partner  
[Document Identifier 224]



26. Relief from the one-year cooling off period for independent CPA  
[Document Identifier 225]



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



28. Reinsurance Counterparty Reporting Exception – Asbestos and Pollution  
Contracts [Document Identifier 555]



29. Credit Insurance Experience Exhibit [Document Identifier 230]



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



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



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



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



35. Management's Report of Internal Control Over Financial Reporting  
[Document Identifier 223]



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**OVERFLOW PAGE FOR WRITE-INS**



SUPPLEMENT FOR THE YEAR 2016 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## **DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT**

For The Year Ended December 31, 2016  
(To Be Filed by March 1)

NAIC Group Code 0201

NAIC Company Code 13998

Company Name UTICA NATIONAL INSURANCE COMPANY OF OHIO .....

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

## 1. Monoline Policies

Direct Premiums		Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Written	2 Earned	3 Paid	4 Incurred	5 Paid	6 Incurred	7 Claims Made	8 Occurrence
\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	% .....	% .....

## 2. Commercial Multiple Peril (CMP) Packaged Policies

2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy? ..... Yes [  ] No [  ]

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

2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&O liability coverage in CMP packaged policies

2.31 Amount quantified: ..... \$ 179,270

2.32 Amount estimated using reasonable assumptions: \_\_\_\_\_ \$ \_\_\_\_\_

2.4 If the answer to question 2.1 is yes, please provide the following:

Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Paid	2 Paid + Change in Case Reserves	3 Paid	4 Paid + Change in Case Reserves	5 Claims Made	6 Occurrence
\$ .....	\$ .....	\$ .....	\$ .....	%	%

## ALPHABETICAL INDEX

### ANNUAL STATEMENT BLANK

Assets .....	2
Cash Flow .....	5
Exhibit of Capital Gains (Losses) .....	12
Exhibit of Net Investment Income .....	12
Exhibit of Nonadmitted Assets .....	13
Exhibit of Premiums and Losses (State Page) .....	19
Five-Year Historical Data .....	17
General Interrogatories .....	15
Jurat Page .....	1
Liabilities, Surplus and Other Funds .....	3
Notes To Financial Statements .....	14
Overflow Page For Write-ins .....	100
Schedule A - Part 1 .....	E01
Schedule A - Part 2 .....	E02
Schedule A - Part 3 .....	E03
Schedule A - Verification Between Years .....	SI02
Schedule B - Part 1 .....	E04
Schedule B - Part 2 .....	E05
Schedule B - Part 3 .....	E06
Schedule B - Verification Between Years .....	SI02
Schedule BA - Part 1 .....	E07
Schedule BA - Part 2 .....	E08
Schedule BA - Part 3 .....	E09
Schedule BA - Verification Between Years .....	SI03
Schedule D - Part 1 .....	E10
Schedule D - Part 1A - Section 1 .....	SI05
Schedule D - Part 1A - Section 2 .....	SI08
Schedule D - Part 2 - Section 1 .....	E11
Schedule D - Part 2 - Section 2 .....	E12
Schedule D - Part 3 .....	E13
Schedule D - Part 4 .....	E14
Schedule D - Part 5 .....	E15
Schedule D - Part 6 - Section 1 .....	E16
Schedule D - Part 6 - Section 2 .....	E16
Schedule D - Summary By Country .....	SI04
Schedule D - Verification Between Years .....	SI03
Schedule DA - Part 1 .....	E17
Schedule DA - Verification Between Years .....	SI10
Schedule DB - Part A - Section 1 .....	E18
Schedule DB - Part A - Section 2 .....	E19
Schedule DB - Part A - Verification Between Years .....	SI11
Schedule DB - Part B - Section 1 .....	E20
Schedule DB - Part B - Section 2 .....	E21
Schedule DB - Part B - Verification Between Years .....	SI11
Schedule DB - Part C - Section 1 .....	E12
Schedule DB - Part C - Section 2 .....	E13
Schedule DB - Part D - Section 1 .....	E22
Schedule DB - Part D - Section 2 .....	E23
Schedule DB - Verification .....	SI14
Schedule DL - Part 1 .....	E24
Schedule DL - Part 2 .....	E25
Schedule E - Part 1 - Cash .....	E26
Schedule E - Part 2 - Cash Equivalents .....	E27
Schedule E - Part 3 - Special Deposits .....	E28
Schedule E - Verification Between Years .....	SI15
Schedule F - Part 1 .....	20
Schedule F - Part 2 .....	21
Schedule F - Part 3 .....	22
Schedule F - Part 4 .....	23
Schedule F - Part 5 .....	24
Schedule F - Part 6 - Section 1 .....	25
Schedule F - Part 6 - Section 2 .....	26
Schedule F - Part 7 .....	27
Schedule F - Part 8 .....	28
Schedule F - Part 9 .....	29

**ANNUAL STATEMENT BLANK (Continued)**

Schedule H - Accident and Health Exhibit - Part 1 .....	30
Schedule H - Part 2, Part 3 and 4 .....	31
Schedule H - Part 5 - Health Claims .....	32
Schedule P - Part 1 - Summary .....	33
Schedule P - Part 1A - Homeowners/Farmowners .....	35
Schedule P - Part 1B - Private Passenger Auto Liability/Medical .....	36
Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical .....	37
Schedule P - Part 1D - Workers' Compensation (Excluding Excess Workers' Compensation) .....	38
Schedule P - Part 1E - Commercial Multiple Peril .....	39
Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence .....	40
Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made .....	41
Schedule P - Part 1G - Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler and Machinery) .....	42
Schedule P - Part 1H - Section 1 - Other Liability-Occurrence .....	43
Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made .....	44
Schedule P - Part 1I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) .....	45
Schedule P - Part 1J - Auto Physical Damage .....	46
Schedule P - Part 1K - Fidelity/Surety .....	47
Schedule P - Part 1L - Other (Including Credit, Accident and Health) .....	48
Schedule P - Part 1M - International .....	49
Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property .....	50
Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability .....	51
Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines .....	52
Schedule P - Part 1R - Section 1 - Products Liability - Occurrence .....	53
Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made .....	54
Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty .....	55
Schedule P - Part 1T - Warranty .....	56
Schedule P - Part 2, Part 3 and Part 4 - Summary .....	34
Schedule P - Part 2A - Homeowners/Farmowners .....	57
Schedule P - Part 2B - Private Passenger Auto Liability/Medical .....	57
Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical .....	57
Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation) .....	57
Schedule P - Part 2E - Commercial Multiple Peril .....	57
Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence .....	58
Schedule P - Part 2F - Section 2 - Medical Professional Liability - Claims-Made .....	58
Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery) .....	58
Schedule P - Part 2H - Section 1 - Other Liability - Occurrence .....	58
Schedule P - Part 2H - Section 2 - Other Liability - Claims-Made .....	58
Schedule P - Part 2I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, and Theft) .....	59
Schedule P - Part 2J - Auto Physical Damage .....	59
Schedule P - Part 2K - Fidelity, Surety .....	59
Schedule P - Part 2L - Other (Including Credit, Accident and Health) .....	59
Schedule P - Part 2M - International .....	59
Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property .....	60
Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability .....	60
Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines .....	60
Schedule P - Part 2R - Section 1 - Products Liability - Occurrence .....	61
Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made .....	61
Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty .....	61
Schedule P - Part 2T - Warranty .....	61
Schedule P - Part 3A - Homeowners/Farmowners .....	62
Schedule P - Part 3B - Private Passenger Auto Liability/Medical .....	62
Schedule P - Part 3C - Commercial Auto/Truck Liability/Medical .....	62
Schedule P - Part 3D - Workers' Compensation (Excluding Excess Workers' Compensation) .....	62
Schedule P - Part 3E - Commercial Multiple Peril .....	62
Schedule P - Part 3F - Section 1 - Medical Professional Liability - Occurrence .....	63
Schedule P - Part 3F - Section 2 - Medical Professional Liability - Claims-Made .....	63
Schedule P - Part 3G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery) .....	63
Schedule P - Part 3H - Section 1 - Other Liability - Occurrence .....	63
Schedule P - Part 3H - Section 2 - Other Liability - Claims-Made .....	63
Schedule P - Part 3I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, and Theft) .....	64
Schedule P - Part 3J - Auto Physical Damage .....	64
Schedule P - Part 3K - Fidelity/Surety .....	64
Schedule P - Part 3L - Other (Including Credit, Accident and Health) .....	64
Schedule P - Part 3M - International .....	64
Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property .....	65
Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability .....	65
Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines .....	65
Schedule P - Part 3R - Section 1 - Products Liability - Occurrence .....	66
Schedule P - Part 3R - Section 2 - Products Liability - Claims-Made .....	66
Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty .....	66
Schedule P - Part 3T - Warranty .....	66

## **ANNUAL STATEMENT BLANK (Continued)**

Schedule P - Part 4A - Homeowners/Farmowners	67
Schedule P - Part 4B - Private Passenger Auto Liability/Medical	67
Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical	67
Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)	67
Schedule P - Part 4E - Commercial Multiple Peril	67
Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence	68
Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made	68
Schedule P - Part 4G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	68
Schedule P - Part 4H - Section 1 - Other Liability - Occurrence	68
Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made	68
Schedule P - Part 4I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary and Theft)	69
Schedule P - Part 4J - Auto Physical Damage	69
Schedule P - Part 4K - Fidelity/Surety	69
Schedule P - Part 4L - Other (Including Credit, Accident and Health)	69
Schedule P - Part 4M - International	69
Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property	70
Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability	70
Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines	70
Schedule P - Part 4R - Section 1 - Products Liability - Occurrence	71
Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made	71
Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty	71
Schedule P - Part 4T - Warranty	71
Schedule P - Part 5A - Homeowners/Farmowners	72
Schedule P - Part 5B - Private Passenger Auto Liability/Medical	73
Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical	74
Schedule P - Part 5D - Workers' Compensation (Excluding Excess Workers' Compensation)	75
Schedule P - Part 5E - Commercial Multiple Peril	76
Schedule P - Part 5F - Medical Professional Liability - Claims-Made	78
Schedule P - Part 5F - Medical Professional Liability - Occurrence	77
Schedule P - Part 5H - Other Liability - Claims-Made	80
Schedule P - Part 5H - Other Liability - Occurrence	79
Schedule P - Part 5R - Products Liability - Claims-Made	82
Schedule P - Part 5R - Products Liability - Occurrence	81
Schedule P - Part 5T - Warranty	83
Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical	84
Schedule P - Part 6D - Workers' Compensation (Excluding Excess Workers' Compensation)	84
Schedule P - Part 6E - Commercial Multiple Peril	85
Schedule P - Part 6H - Other Liability - Claims-Made	86
Schedule P - Part 6H - Other Liability - Occurrence	85
Schedule P - Part 6M - International	86
Schedule P - Part 6N - Reinsurance - Nonproportional Assumed Property	87
Schedule P - Part 6O - Reinsurance - Nonproportional Assumed Liability	87
Schedule P - Part 6R - Products Liability - Claims-Made	88
Schedule P - Part 6R - Products Liability - Occurrence	88
Schedule P - Part 7A - Primary Loss Sensitive Contracts	89
Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts	91
Schedule P Interrogatories	93
Schedule T - Exhibit of Premiums Written	94
Schedule T - Part 2 - Interstate Compact	95
Schedule Y - Information Concerning Activities of Insurer Members of a Holding Company Group	96
Schedule Y - Part 1A - Detail of Insurance Holding Company System	97
Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates	98
Statement of Income	4
Summary Investment Schedule	SI01
Supplemental Exhibits and Schedules Interrogatories	99
Underwriting and Investment Exhibit Part 1	6
Underwriting and Investment Exhibit Part 1A	7
Underwriting and Investment Exhibit Part 1B	8
Underwriting and Investment Exhibit Part 2	9
Underwriting and Investment Exhibit Part 2A	10
Underwriting and Investment Exhibit Part 3	11