



ANNUAL STATEMENT

For the Year Ended December 31, 2016
of the Condition and Affairs of the

GREAT AMERICAN PROTECTION INSURANCE COMPANY

NAIC Group Code.....0084, 0084
(Current Period) (Prior Period)
Organized under the Laws of OH
Incorporated/Organized..... January 8, 1990
Statutory Home Office
Main Administrative Office
Mail Address
Primary Location of Books and Records
Internet Web Site Address
Statutory Statement Contact

NAIC Company Code..... 38580
State of Domicile or Port of Entry OH
Commenced Business..... September 29, 1990
301 E Fourth Street..... Cincinnati OH US 45202
(Street and Number) (City or Town, State, Country and Zip Code)
301 E Fourth Street..... Cincinnati OH US..... 45202
(Street and Number) (City or Town, State, Country and Zip Code)
301 E Fourth Street..... Cincinnati OH US 45202
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)
301 E Fourth Street..... Cincinnati OH US 45202
(Street and Number) (City or Town, State, Country and Zip Code)
www.greatamericaninsurancegroup.com
Robert James Schwartz
(Name)
BSchwartz@gaig.com
(E-Mail Address)

Employer's ID Number..... 31-1288778
Country of Domicile US
513-369-5000
(Area Code) (Telephone Number)
513-369-5000
(Area Code) (Telephone Number)
513-369-5092
(Area Code) (Telephone Number) (Extension)
513-369-3873
(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Donald Dumford Larson	President	2. Eve Cutler Rosen	Senior Vice President, Exec. Counsel & Secretary
3. Robert James Schwartz	Vice President & Controller	4. Lisa Ann Hays	Vice President & Actuary

OTHER

Ronald James Brichler	Executive Vice President	Gary John Gruber	Executive Vice President
Sue Ann Erhart	Senior Vice President & General Counsel	Aaron Beasy Latto	Senior Vice President
David John Witzgall	Senior Vice President, CFO & Treasurer	Annette Denise Gardner	Vice President & Assistant Treasurer
John William Tholen	Vice President	Stephen Charles Beraha	Assistant Vice President & Assistant Secretary
Howard Kim Baird	Assistant Treasurer	Robert Jude Zbacnik	Assistant Treasurer

DIRECTORS OR TRUSTEES

Ronald James Brichler	Gary John Gruber	Donald Dumford Larson	Aaron Beasy Latto
Michael David Pierce	Eve Cutler Rosen	Michael Eugene Sullivan Jr.	David John Witzgall

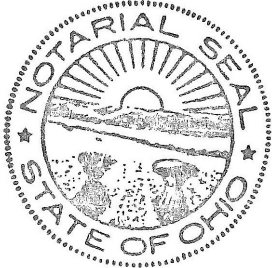
State of..... Ohio
County of..... Hamilton

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

(Signature)	(Signature)	(Signature)
Gary John Gruber	Eve Cutler Rosen	Robert James Schwartz
President [effective 1/1/2017]	Senior Vice President, Exec. Counsel & Secretary	Vice President & Controller
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This 14 day of February 2017

Notary Public, State of Ohio
My commission expires November 8, 2021



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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF ALASKA DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(450)	589	0	(189)	528	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	3,880	0	0	0	184	1,829	0	723	2,256	0	1
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	3,880	0	0	0	(266)	2,418	0	534	2,784	0	1

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(21,611)	772	0	(258)	654	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(422)	4,428	0	(1,434)	623	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(22,033)	5,200	0	(1,692)	1,277	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	(2)	0	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(8,908)	44,704	0	(145)	8,279	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(8,908)	44,704	0	(148)	8,279	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(2,577)	323	0	(592)	158	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(12,786)	0	0	(51,146)	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(15,363)	323	0	(51,737)	158	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	521	922	0	(506)	526	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	2,882	0	0	0	1,572	3,191	0	244	484	(1)	27
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	28,774	65,912	0	2,082	0	(325)	50,961	0	531	11,217	1,144	100
17.2 Other liability-claims-made.....	2,000	169,329	0	33,130	0	35,429	200,292	0	1,358	115,286	484	8
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	2	26	0	28	37	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	30,774	238,122	0	35,212	0	37,199	255,392	0	1,655	127,551	1,628	135

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(66,238)	5,787	0	341	2,877	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(66,238)	5,787	0	341	2,877	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN GRAND TOTAL DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	127
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	155
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	28
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	16
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	(5)	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	296
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	(2,535)	1,484	0	(267)	1,187	0	210
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	20
9. Inland marine.....	0	0	0	0	0	6	6	0	0	0	0	313
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	2,882	0	0	0	1,572	3,191	0	244	484	(1)	47
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	56
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	446
17.1 Other liability-occurrence.....	28,774	71,669	0	2,082	0	(338,576)	117,493	0	(11,197)	33,487	1,144	384
17.2 Other liability-claims-made.....	2,000	169,329	0	33,130	0	(3,501)	548,616	0	(54,033)	168,010	484	159
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	3,880	0	0	0	185	1,855	0	729	2,293	0	116
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	2
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	16
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	102
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	369
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	8
21.2 Commercial auto physical damage.....	0	0	0	0	0	(0)	(0)	0	0	0	0	501
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	3
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	147
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	67
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	162
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	190
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	35
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	16
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	20
35. TOTALS (a).....	30,774	247,759	0	35,212	0	(342,848)	672,645	0	(64,530)	205,461	1,628	4,008

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	20
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	20

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF HAWAII DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(114)	1,112	0	(364)	249	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	0	131	0	(352)	71	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	(21)	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(114)	1,242	0	(737)	320	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF IOWA DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(127)	0	0	(3)	0	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(64)	3,951	0	(4)	484	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(191)	3,951	0	(7)	484	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF IDAHO DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	5,757	0	0	0	1,517	5,341	0	562	1,069	0	1
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	5,757	0	0	0	1,517	5,341	0	562	1,069	0	1

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(415)	1,513	0	(268)	339	0	1
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(415)	1,513	0	(268)	339	0	1

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	47
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	58
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	10
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	6
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	111
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	78
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	7
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	117
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	7
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	21
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	73
17.1 Other liability-occurrence.....	0	0	0	0	0	0	168	0	(113)	66	0	105
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	56
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	43
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	6
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	137
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	3
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	184
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	100
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	46
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	61
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	71
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	13
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	6
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	7
35. TOTALS (a).....	0	0	0	0	0	0	168	0	(113)	66	0	1,373

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	7
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	7

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF KANSAS DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(155)	0	0	(4)	0	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(155)	0	0	(4)	0	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	10
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	12
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	2
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	1
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	(5)	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	23
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	16
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	2
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	24
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	2
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	4
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	15
17.1 Other liability-occurrence.....	0	0	0	0	0	(54)	2	0	(6)	1	0	21
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	12
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	9
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	1
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	15
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	28
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	1
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	39
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	21
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	9
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	12
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	15
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	3
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	1
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	2
35. TOTALS (a).....	0	0	0	0	0	(54)	2	0	(11)	1	0	299

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	2
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	2

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580 BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(5,673)	204	0	(72)	172	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(5,673)	204	0	(72)	172	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580 BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(92)	0	0	(237)	0	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(92)	0	0	(237)	0	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(16,657)	6,888	0	(409)	1,763	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	32	55	0	(6)	11	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(16,625)	6,943	0	(415)	1,774	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(4,912)	254	0	326	194	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(324)	0	0	(1,297)	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(5,236)	254	0	(971)	194	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	3
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	4
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	1
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	8
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	6
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	1
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	9
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	1
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	2
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	255
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	8
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	4
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	3
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	10
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	14
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	7
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	3
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	4
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	5
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	1
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	350

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	1
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	1

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580 BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(17,853)	66	0	(517)	28	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(87)	5,654	0	(4)	733	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(17,939)	5,719	0	(521)	761	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(2,418)	137	0	180	105	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(68)	4,061	0	(4)	467	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(2,487)	4,198	0	176	572	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(143,381)	13,203	0	(2,061)	5,440	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(153)	10,860	0	(7)	1,560	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(143,535)	24,063	0	(2,068)	7,000	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF OHIO DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	9
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	10
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	2
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	1
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	20
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	14
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	1
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	21
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	1
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	4
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	13
17.1 Other liability-occurrence.....	0	0	0	0	0	(3,923)	16,545	0	(5,620)	3,370	0	19
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	10
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	8
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	1
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	25
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	1
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	34
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	18
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	8
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	11
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	13
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	2
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	1
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	1
35. TOTALS (a).....	0	0	0	0	0	(3,923)	16,545	0	(5,620)	3,370	0	250

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	1
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	1

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF OREGON DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(3,182)	399	0	(140)	356	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(3,182)	399	0	(140)	356	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	(1)	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(20,709)	5,624	0	1	1,836	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(5,754)	31,388	0	(38)	5,193	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(26,464)	37,012	0	(38)	7,029	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(52)	271	0	(93)	44	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(52)	271	0	(93)	44	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580 BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(2,166)	1,966	0	(622)	502	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(229)	22,143	0	(3)	4,045	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(2,395)	24,109	0	(625)	4,547	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580 BUSINESS IN THE STATE OF TEXAS DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(12,834)	2,266	0	(1,736)	1,466	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(2,631)	165,188	0	(487)	21,403	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	(0)	(0)	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(15,465)	167,454	0	(2,223)	22,868	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580 BUSINESS IN THE STATE OF UTAH DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(380)	0	0	(9)	0	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(94)	0	0	(375)	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(474)	0	0	(384)	0	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	(3,055)	562	0	239	660	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	6	6	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(3,156)	152	0	(279)	116	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(351)	27,363	0	(13)	4,298	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(6,557)	28,082	0	(53)	5,074	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	58
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	71
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	13
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	7
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	134
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	96
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	9
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	143
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	9
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	25
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	90
17.1 Other liability-occurrence.....	0	0	0	0	0	(10,332)	566	0	630	434	0	130
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	69
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	52
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	2
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	7
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	87
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	168
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	4
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	230
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	2
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	74
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	87
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	16
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	7
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	9
35. TOTALS (a).....	0	0	0	0	0	(10,332)	566	0	630	434	0	1,599

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	9
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	9

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580 BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(60)	2,382	0	(158)	502	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	(7,092)	28,400	0	(78)	5,559	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(7,152)	30,783	0	(236)	6,061	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	(243)	2	0	(17)	1	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	(243)	2	0	(17)	1	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0084 NAIC Company Code....38580

BUSINESS IN THE STATE OF WYOMING DURING THE YEAR

19

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium.....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

SCHEDULE F - PART 1

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held by or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 + 7							

NONE

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effectuated or (Canceled) during Current Year

1	2	3	4	5	6
ID Number	NAIC Company Code	Name of Company	Date of Contract	Original Premium	Reinsurance Premium

NONE

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 Col. 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 Commissions	15 Cols. 7 through 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers		
Authorized Affiliates-U.S. Intercompany Pooling																		
31-0501234.	16691...	Great American Insurance Company.....	OH.....		31	0	0	0	42	673	182	35	1	933	0	0	933	0
0199999.	Total Authorized Affiliates - U.S. Intercompany Pooling.....				31	0	0	0	42	673	182	35	1	933	0	0	933	0
0899999.	Total Authorized Affiliates.....				31	0	0	0	42	673	182	35	1	933	0	0	933	0
1399999.	Total Authorized.....				31	0	0	0	42	673	182	35	1	933	0	0	933	0
4099999.	Total Authorized, Unauthorized and Certified.....				31	0	0	0	42	673	182	35	1	933	0	0	933	0
9999999.	Totals.....				31	0	0	0	42	673	182	35	1	933	0	0	933	0

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) N/A See Note 26 to Financial Statement.....	0.0	0
(2)	0.0	0
(3)	0.0	0
(4)	0.0	0
(5)	0.0	0

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) Great American Insurance Company.....	933	31	Yes [X]	No []
(2)	0	0	Yes []	No []
(3)	0	0	Yes []	No []
(4)	0	0	Yes []	No []
(5)	0	0	Yes []	No []

SCHEDULE F - PART 4

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							12 Percentage Overdue Col. 10 / Col. 11	13 Percentage More Than 120 Days Overdue Col. 9 / Col. 11
				5 Current	Overdue					11 Total Due Cols. 5 + 10		
					6 1 to 29 Days	7 30 to 90 Days	8 91 to 120 Days	9 Over 120 Days	10 Total Overdue Cols. 6 + 7 + 8 + 9			

NONE

SCHEDULE F - PART 5

Provision for Unauthorized Reinsurance as of December 31, Current Year (000 Omitted)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
ID Number	NAIC Company Code	Name of Reinsurer	Domi- ciliary Juris- diction	Special Code	Reinsurance Recoverable all Items Schedule F, Part 3, Col. 15	Funds Held By Company Under Reinsurance Treaties	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Ceded Balances Payable	Miscellaneous Balances Payable	Trust Funds and Other Allowed Offset Items	Total Collateral and Offsets Allowed (Cols. 7+8+10 + 11 + 12 but not in Excess of Col. 6)	Provision for Unauthorized Reinsurance (Col. 6 minus Col. 13)	Recoverable Paid Losses & LAE Expenses Over 90 Days Past Due not in Dispute	20% of Amount in Col. 15	20% of Amount in Dispute Included in Col. 6	Provision for Overdue Reinsurance (Col. 16 plus Col. 17)	Total Provision for Reinsurance Ceded to Unauthorized Reinsurers (Col. 14 plus Col. 18 but not in Excess of Col. 6)

1.
- Amounts in dispute totaling \$.....0 are included in Column 6.
2.
- Amounts in dispute totaling \$.....0 are excluded from Column 15.

NONE

SCHEDULE F - PART 6 - SECTION 1

Provision for Reinsurance Ceded to Certified Reinsurers as of December 31, Current Year (000 Omitted)

1	2	3	4	5	6	7	8	9	10	11	Collateral Provided						18	19	20	21
											12	13	14	15	16	17				
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% - 100%)	Net Amount Recoverable from Reinsurers (Sch F Part 3 Col. 18)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 8 - Col. 9)	Dollar Amount of Collateral Required (Col. 10 x Col. 7)	Multiple Beneficiary Trust	Funds Held by Company Under Reinsurance Treaties	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Other Allowable Collateral	Total Collateral Provided (Cols. 12 + 13 + 14 + 16)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements (Col. 17 / Col. 10)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 18/Col. 7, not to exceed 100%)	Amount of Credit Allowed for Net Recoverables (Col 9 + (Col. 10 x Col. 19))	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col 8 - Col. 20)

NONE

SCHEDULE F - PART 6 - SECTION 2

Provision for Overdue Reinsurance Ceded to Certified Reinsurers as of December 31, Current Year (000 Omitted)

1	2	3	4	5	6	7	8	9	10	11	Complete if Column 8 is 20% or Greater			15
											12	13	14	
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Recoverable on Paid Loss and LAE More than 90 Days Overdue (a)	Total Reinsurance Recoverable on Paid Losses and LAE (b)	Amounts Received Prior 90 Days	Percent More than 90 Days Overdue	20% of Amounts in Col. 5	20% of Amounts in Dispute Excluded from Col. 5	Amount of Credit Allowed for Net Recoverables (Sch F Part 6 Section 1 Col. 20)	Total Collateral Provided (Sch F Part 6 Section 1 Col. 17) not to Exceed Col. 11	Net Unsecured Recoverable for Which Credit is Allowed (Col. 11 - Col. 12)	20% of Amount in Col. 13	Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of Col. 9 + Col. 10 or Col. 14) not to Exceed Col. 11

(a) From Schedule F-Part 4 Columns 8 + 9, total certified, less \$.....0 in dispute.

(b) From Schedule F-Part 3 Columns 7 + 8, total certified, less \$.....0 in dispute.

NONE

SCHEDULE F - PART 7

Provision for Overdue Authorized Reinsurance as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11
ID Number	NAIC Company Code	Name of Reinsurer	Reinsurance Recoverable on Paid Losses and LAE More Than 90 Days Overdue (a)	Total Reinsurance Recoverable on Paid Losses and Paid LAE (b)	Amounts Received Prior 90 Days	Col. 4 divided by (Cols. 5 + 6)	Amounts in Col. 4 for Companies Reporting less than 20% in Col. 7	Amounts in Dispute Excluded from Col. 4 for Companies Reporting less than 20% in Col. 7	20% of Amount in Col. 9	Amount Reported in Col. 8 x 20% + Col. 10

(a) From Schedule F-Part 4 Columns 8 + 9, total authorized, less \$.0 in dispute.

(b) From Schedule F-Part 3 Columns 7 + 8, total authorized, less \$.0 in dispute.

NONE

SCHEDULE F - PART 8

Provision for Overdue Reinsurance as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11	12
ID Number	NAIC Company Code	Name of Reinsurer	Reinsurance Recoverable All Items	Funds Held by Company Under Reinsurance Treaties	Letters of Credit	Ceded Balances Payable	Other Miscellaneous Balances	Other Allowed Offset Items	Sum of Cols. 5 through 9 but not in Excess of Col. 4	Col. 4 Minus Col. 10	Greater of Col. 11 or Schedule F - Part 4 Cols. 8 + 9

NONE

SCHEDULE F - PART 9

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	21,919,068	0	21,919,068
2. Premiums and considerations (Line 15).....	0	0	0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	0	0	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....	0	0	0
5. Other assets.....	221,176	0	221,176
6. Net amount recoverable from reinsurers.....	0	932,824	932,824
7. Protected cell assets (Line 27).....	0	0	0
8. Totals (Line 28).....	22,140,244	932,824	23,073,068
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	0	896,649	896,649
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	3,465	963	4,428
11. Unearned premiums (Line 9).....	0	35,212	35,212
12. Advance premiums (Line 10).....	0	0	0
13. Dividends declared and unpaid (Line 11.1 and 11.2).....	0	0	0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....	0	0	0
15. Funds held by company under reinsurance treaties (Line 13).....	0	0	0
16. Amounts withheld or retained by company for account of others (Line 14).....	0	0	0
17. Provision for reinsurance (Line 16).....	0	0	0
18. Other liabilities.....	0	0	0
19. Total liabilities excluding protected cell business (Line 26).....	3,465	932,824	936,289
20. Protected cell liabilities (Line 27).....	0	0	0
21. Surplus as regards policyholders (Line 37).....	22,136,779	XXX	22,136,779
22. Totals (Line 38).....	22,140,244	932,824	23,073,068

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:

GREAT AMERICAN PROTECTION INSURANCE COMPANY
SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

		Total		Group Accident and Health		Credit A&H (Group and Individual)		Collectively Renewable		Other Individual Contracts									
										Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
		1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																			
1.	Premiums written.....	0	XXX....	0	XXX...	0	XXX...	0	XXX...	0	XXX...	0	XXX..	0	XXX...	0	XXX...	0	XXX..
2.	Premiums earned.....	0	XXX....	0	XXX...	0	XXX...	0	XXX...	0	XXX...	0	XXX..	0	XXX...	0	XXX...	0	XXX..
3.	Incurred claims.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
4.	Cost containment expenses.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
5.	Incurred claims and cost containment expenses (Lines 3 and 4).....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
6	Increase in contract reserves.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
7	Commissions (a).....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
8	Other general insurance expenses.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
9	Taxes, licenses and fees.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
10	Total other expenses incurred.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
11.	Aggregate write-ins for deductions.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12.	Gain from underwriting before dividends or refunds.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13.	Dividends or refunds.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
14.	Gain from underwriting after dividends or refunds.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
DETAILS OF WRITE-INS																			
1101.		0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1102.		0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1103.		0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1198.	Summary of remaining write-ins for Line 11 from overflow page.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199.	Total (Lines 1101 through 1103 plus 1198) (Line 11 above).	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

(a) Includes \$.....0 reported as 'Contract, membership and other fees retained by agents.'

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

	1	2	3	4	Other Individual Contracts				
	Total	Group Accident and Health	Credit A&H (Group and Individual)	Collectively Renewable	5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums.....	0	0	0	0	0	0	0	0	0
2. Advance premiums.....	0	0	0	0	0	0	0	0	0
3. Reserve for rate credits.....	0	0	0	0	0	0	0	0	0
4. Total premium reserves, current year.....	0	0	0	0	0	0	0	0	0
5. Total premium reserves, prior year.....	0	0	0	0	0	0	0	0	0
6. Increase in total premium reserves.....	0	0	0	0	0	0	0	0	0
B. Contract Reserves:									
1. Additional reserves (a).....	0	0	0	0	0	0	0	0	0
2. Reserve for future contingent benefits.....	0	0	0	0	0	0	0	0	0
3. Total contract reserves, current year.....	0	0	0	0	0	0	0	0	0
4. Total contract reserves, prior year.....	0	0	0	0	0	0	0	0	0
5. Increase in contract reserves.....	0	0	0	0	0	0	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year.....	0	0	0	0	0	0	0	0	0
2. Total prior year.....	0	0	0	0	0	0	0	0	0
3. Increase.....	0	0	0	0	0	0	0	0	0

PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES

1. Claims Paid During the Year:									
1.1 On claims incurred prior to current year.....	0	0	0	0	0	0	0	0	0
1.2 On claims incurred during current year.....	0	0	0	0	0	0	0	0	0
2. Claim Reserves and Liabilities, December 31, current year:									
2.1 On claims incurred prior to current year.....	0	0	0	0	0	0	0	0	0
2.2 On claims incurred during current year.....	0	0	0	0	0	0	0	0	0
3. Test:									
3.1 Lines 1.1 and 2.1.....	0	0	0	0	0	0	0	0	0
3.2 Claim reserves and liabilities, December 31, prior year.....	0	0	0	0	0	0	0	0	0
3.3 Line 3.1 minus Line 3.2.....	0	0	0	0	0	0	0	0	0

PART 4 - REINSURANCE

A. Reinsurance Assumed:									
1. Premiums written.....	0	0	0	0	0	0	0	0	0
2. Premiums earned.....	0	0	0	0	0	0	0	0	0
3. Incurred claims.....	0	0	0	0	0	0	0	0	0
4. Commissions.....	0	0	0	0	0	0	0	0	0
B. Reinsurance Ceded:									
1. Premiums written.....	0	0	0	0	0	0	0	0	0
2. Premiums earned.....	0	0	0	0	0	0	0	0	0
3. Incurred claims.....	0	0	0	0	0	0	0	0	0
4. Commissions.....	0	0	0	0	0	0	0	0	0

(a) Includes \$.....0 premium deficiency reserve.

GREAT AMERICAN PROTECTION INSURANCE COMPANY
SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred claims.....	0	0	0	0
2. Beginning claim reserves and liabilities.....	0	0	0	0
3. Ending claim reserves and liabilities.....	0	0	0	0
4. Claims paid.....	0	0	0	0
B. Assumed Reinsurance:				
5. Incurred claims.....	0	0	0	0
6. Beginning claim reserves and liabilities.....	0	0	0	0
7. Ending claim reserves and liabilities.....	0	0	0	0
8. Claims paid.....	0	0	0	0
C. Ceded Reinsurance:				
9. Incurred claims.....	0	0	0	0
10. Beginning claim reserves and liabilities.....	0	0	0	0
11. Ending claim reserves and liabilities.....	0	0	0	0
12. Claims paid.....	0	0	0	0
D. Net:				
13. Incurred claims.....	0	0	0	0
14. Beginning claim reserves and liabilities.....	0	0	0	0
15. Ending claim reserves and liabilities.....	0	0	0	0
16. Claims paid.....	0	0	0	0
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses.....	0	0	0	0
18. Beginning reserves and liabilities.....	0	0	0	0
19. Ending reserves and liabilities.....	0	0	0	0
20. Paid claims and cost containment expenses.....	0	0	0	0

NONE

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

(\$000 omitted)

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

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

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2007.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
3. 2008.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
4. 2009.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
5. 2010.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
6. 2011.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
7. 2012.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
8. 2013.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
9. 2014.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
10. 2015.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
11. 2016.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO 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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2010.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2011.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....

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

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0
2. 2007.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
3. 2008.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
4. 2009.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
5. 2010.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
6. 2011.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
7. 2012.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
8. 2013.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
9. 2014.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
10. 2015.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
11. 2016.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2008.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2009.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2010.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2011.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2012.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2013.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....

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

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2007.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
3. 2008.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
4. 2009.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
5. 2010.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
6. 2011.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
7. 2012.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
8. 2013.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
9. 2014.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
10. 2015.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
11. 2016.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2008.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2009.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2010.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2011.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2012.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2013.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....

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

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2007.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
3. 2008.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
4. 2009.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
5. 2010.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
6. 2011.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
7. 2012.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
8. 2013.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
9. 2014.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
10. 2015.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
11. 2016.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2008.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2009.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2010.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2011.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2012.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2013.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....

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

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2007.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
3. 2008.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
4. 2009.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
5. 2010.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
6. 2011.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
7. 2012.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
8. 2013.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
9. 2014.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
10. 2015.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
11. 2016.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

SCHEDULE P - PART 1F - SECTION 1 - MEDICAL PROFESSIONAL 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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2008.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2009.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2010.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2011.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2012.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2013.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....

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

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2007.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
3. 2008.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
4. 2009.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
5. 2010.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
6. 2011.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
7. 2012.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
8. 2013.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
9. 2014.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
10. 2015.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
11. 2016.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

SCHEDULE P - PART 1F - SECTION 2 - MEDICAL PROFESSIONAL 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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2008.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2009.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2010.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2011.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2012.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2013.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....

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

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2007.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
3. 2008.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
4. 2009.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
5. 2010.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
6. 2011.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
7. 2012.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
8. 2013.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
9. 2014.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
10. 2015.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
11. 2016.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

SCHEDULE P - PART 1G - SPECIAL LIABILITY
(OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)
(\$000 omitted)

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

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

NONE

	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.....	0.....	0.....	XXX.....	0.....	0.....
2. 2007.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
3. 2008.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
4. 2009.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
5. 2010.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
6. 2011.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
7. 2012.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
8. 2013.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
9. 2014.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
10. 2015.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
11. 2016.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2008.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2009.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2010.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2011.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2012.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2013.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....

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

NONE

	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.....	0.....	0.....	XXX.....	0.....	0.....
2. 2007.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
3. 2008.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
4. 2009.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
5. 2010.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
6. 2011.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
7. 2012.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
8. 2013.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
9. 2014.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
10. 2015.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
11. 2016.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2008.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2009.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2010.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2011.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2012.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2013.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....

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

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2007.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
3. 2008.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
4. 2009.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
5. 2010.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
6. 2011.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
7. 2012.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
8. 2013.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
9. 2014.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
10. 2015.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
11. 2016.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

**SCHEDULE P - PART 11 - 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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
4. Totals....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....

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

NONE

	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.....	0	0	XXX.....	0	0
2. 2015.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
3. 2016.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
4. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Totals....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....

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

NONE

	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.....	0	0	XXX.....	0	0
2. 2015.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
3. 2016.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
4. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

SCHEDULE P - PART 1K - FIDELITY/SURETY

(\$000 omitted)

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

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

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 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.....	0	0	XXX.....	0	0
2. 2015.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
3. 2016.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
4. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

SCHEDULE P - PART 1L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

(\$000 omitted)

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

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

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 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.....	0	0	XXX.....	0	0
2. 2015.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
3. 2016.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
4. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

SCHEDULE P - PART 1M - INTERNATIONAL

(\$000 omitted)

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

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

NONE

	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.....	0.....	0.....	XXX.....	0.....	0.....
2. 2007.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
3. 2008.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
4. 2009.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
5. 2010.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
6. 2011.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
7. 2012.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
8. 2013.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
9. 2014.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
10. 2015.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
11. 2016.	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.00.....	0.....	0.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

SCHEDULE P - PART 1N - REINSURANCE

NONPROPORTIONAL ASSUMED PROPERTY (\$000 omitted)

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

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

NONE

	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.....	0	0	XXX.....	0	0
2. 2007.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
3. 2008.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
4. 2009.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
5. 2010.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
6. 2011.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
7. 2012.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
8. 2013.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
9. 2014.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
10. 2015.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
11. 2016.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

SCHEDULE P - PART 10 - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY (\$000 omitted)

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

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

NONE

	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.....	0	0	XXX.....	0	0
2. 2007.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
3. 2008.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
4. 2009.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
5. 2010.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
6. 2011.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
7. 2012.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
8. 2013.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
9. 2014.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
10. 2015.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
11. 2016.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

SCHEDULE P - PART 1P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES (\$000 omitted)

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

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

NONE

	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.....	0	0	XXX.....	0	0
2. 2007.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
3. 2008.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
4. 2009.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
5. 2010.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
6. 2011.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
7. 2012.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
8. 2013.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
9. 2014.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
10. 2015.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
11. 2016.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2010.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2011.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....

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

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0
2. 2007.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
3. 2008.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
4. 2009.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
5. 2010.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
6. 2011.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
7. 2012.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
8. 2013.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
9. 2014.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
10. 2015.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
11. 2016.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

SCHEDULE P - PART 1R - SECTION 2 - PRODUCTS 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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2010.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2011.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....

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

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0
2. 2007.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
3. 2008.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
4. 2009.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
5. 2010.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
6. 2011.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
7. 2012.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
8. 2013.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
9. 2014.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
10. 2015.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
11. 2016.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

SCHEDULE P - PART 1S - FINANCIAL GUARANTY/MORTGAGE GUARANTY
(\$000 omitted)

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

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

NONE

	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.....	0	0	XXX.....	0	0
2. 2015.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
3. 2016.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
4. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

SCHEDULE P - PART 1T - WARRANTY
(\$000 omitted)

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

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

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 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.....	0	0	XXX.....	0	0
2. 2015.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
3. 2016.	0	0	0	0.0	0.0	0.0	0	0	0.00	0	0
4. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	XXX.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....
12. Totals										0	0	0

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	XXX.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....
12. Totals										0	0	0

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	XXX.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....
12. Totals										0	0	0

SCHEDULE P - PART 2D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	XXX.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....
12. Totals										0	0	0

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	XXX.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....
12. Totals										0	0	0

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

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals										0	0	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals										0	0	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals										0	0	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals										0	0	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals										0	0	0

SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year
1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
2. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	...XXX.....
3. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	...XXX.....	...XXX.....
4. Totals											0	0

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
2. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	...XXX.....
3. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	...XXX.....	...XXX.....
4. Totals											0	0

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
2. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	...XXX.....
3. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	...XXX.....	...XXX.....
4. Totals											0	0

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
2. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	...XXX.....
3. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	...XXX.....	...XXX.....
4. Totals											0	0

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	...XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
7. 2012.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
8. 2013.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
9. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
10. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	...XXX.....
11. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	...XXX.....	...XXX.....
12. Totals											0	0

SCHEDULE P - PART 2N - REINSURANCE

NONPROPORTIONAL ASSUMED PROPERTY

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	...XXX.....	0	0	0	NONE						0	0
4. 2009.....	...XXX.....	...XXX.....	0	0							0	0
5. 2010.....	...XXX.....	...XXX.....	...XXX.....	0							0	0
6. 2011.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0
8. 2013.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0
9. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
10. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	...XXX.....
11. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	...XXX.....	...XXX.....
12. Totals											0	0

SCHEDULE P - PART 2O - REINSURANCE

NONPROPORTIONAL ASSUMED LIABILITY

1.	Prior	0	0	0	0	0	0	0	0	0	0	0	
2.	2007	0	0	0	0	0	0	0	0	0	0	0	
3.	2008	XXX	0	0	0	0	0	0	0	0	0	0	
4.	2009	XXX	XXX	0	0	0	0	0	0	0	0	0	
5.	2010	XXX	XXX	XXX	0	NONE			0	0	0	0	
6.	2011	XXX	XXX	XXX	XXX				0	0	0	0	0
7.	2012	XXX	XXX	XXX	XXX				XXX	0	0	0	0
8.	2013	XXX	XXX	XXX	XXX				XXX	0	0	0	0
9.	2014	XXX	XXX	XXX	XXX				XXX	XXX	0	0	0
10.	2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX	
11.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX	
12. Totals											0	0	

SCHEDULE P - PART 2P - REINSURANCE

NONPROPORTIONAL ASSUMED FINANCIAL LINES

1.	Prior.....	0	0	0	0	0	0	0	0	0	0	0	
2.	2007.....	0	0	0	0	0	0	0	0	0	0	0	
3.	2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	
4.	2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	
5.	2010.....	XXX.....	XXX.....	XXX.....	0	NONE		0	0	0	0	0	
6.	2011.....	XXX.....	XXX.....	XXX.....	XXX.....			0	0	0	0	0	0
7.	2012.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0	0	0	0	0
8.	2013.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0	0	0	0	0
9.	2014.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....	0	0	0	0
10.	2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	XXX.....	
11.	2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....	
12. Totals											0	0	

SCHEDULE P - PART 2R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	XXX.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....
12. Totals											0	0

SCHEDULE P - PART 2R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	XXX.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....
12. Totals											0	0

SCHEDULE P - PART 2S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	XXX.....
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....
4. Totals											0	0

SCHEDULE P - PART 2T - WARRANTY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	XXX.....
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....
4. Totals											0	0

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	2	3	4	5	6	7	8	9	10		
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016		
1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2008.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2009.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2010.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2008.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2009.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2010.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2008.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2009.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2010.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....

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

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2008.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2009.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2010.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2008.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2009.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2010.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....

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	2	3	4	5	6	7	8	9	10		
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016		
1. Prior.....	000.....	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0

NONE

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

1. Prior.....	000.....	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0

NONE

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

1. Prior.....	000.....	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
2. 2007.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....	XXX.....
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	XXX.....	XXX.....
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	XXX.....	XXX.....
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	XXX.....	XXX.....
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	XXX.....	XXX.....
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	XXX.....	XXX.....
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	XXX.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

NONE

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

1. Prior.....	000.....	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0

NONE

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

1. Prior.....	000.....	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0

NONE

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 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	2	3	4	5	6	7	8	9	10		
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016		
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	0	0	XXX.....	XXX.....
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	XXX.....
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	0	0	0	0
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	0	0	XXX.....	XXX.....
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	XXX.....
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....

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

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	0	0	XXX.....	XXX.....
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	XXX.....
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	000.....	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
2. 2007.....	0	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....	XXX.....
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	XXX.....	XXX.....
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	XXX.....	XXX.....
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	XXX.....	XXX.....
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	XXX.....	XXX.....
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	XXX.....	XXX.....
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	XXX.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....

SCHEDULE P - PART 3N - REINSURANCE

NONPROPORTIONAL ASSUMED PROPERTY

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	2	3	4	5	6	7	8	9	10		
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016		
1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
3. 2008.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
4. 2009.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
5. 2010.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	XXX.....	XXX.....
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	XXX.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	XXX.....	XXX.....

SCHEDULE P - PART 3O - REINSURANCE

NONPROPORTIONAL ASSUMED LIABILITY

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
3. 2008.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
4. 2009.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
5. 2010.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	XXX.....	XXX.....
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	XXX.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	XXX.....	XXX.....

SCHEDULE P - PART 3P - REINSURANCE

NONPROPORTIONAL ASSUMED FINANCIAL LINES

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
2. 2007.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
3. 2008.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
4. 2009.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
5. 2010.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	XXX.....	XXX.....
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	XXX.....
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	XXX.....	XXX.....

SCHEDULE P - PART 3R-SECTION 1 - PRODUCTS 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	2	3	4	5	6	7	8	9	10		
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016		
1. Prior.....	000.....	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0

SCHEDULE P - PART 3R-SECTION 2 - PRODUCTS LIABILITY- CLAIMS-MADE

1. Prior.....	000.....	0	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0

SCHEDULE P - PART 3S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	0	0	XXX.....	XXX.....
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	XXX.....
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	XXX.....	XXX.....

SCHEDULE P - PART 3T - WARRANTY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	0	0	0	0
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0

GREAT AMERICAN PROTECTION INSURANCE COMPANY

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 4D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

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

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 4N - REINSURANCE

NONPROPORTIONAL ASSUMED PROPERTY

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2010.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2011.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

SCHEDULE P - PART 4O - REINSURANCE

NONPROPORTIONAL ASSUMED LIABILITY

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2010.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2011.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

SCHEDULE P - PART 4P - REINSURANCE

NONPROPORTIONAL ASSUMED FINANCIAL LINES

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2010.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2011.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

SCHEDULE P - PART 4R-SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	...XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0
6. 2011.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0
7. 2012.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
8. 2013.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0
9. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0
10. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0
11. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0

NONE

SCHEDULE P - PART 4R-SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	...XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0
6. 2011.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0
7. 2012.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
8. 2013.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0
9. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0
10. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0
11. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0

NONE

SCHEDULE P - PART 4S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0
2. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0
3. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0

NONE

SCHEDULE P - PART 4T - WARRANTY

1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0
2. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0
3. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0

NONE

SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS

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	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO 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	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

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	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

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	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	...XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0
6. 2011.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0
7. 2012.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
8. 2013.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0
9. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0
10. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0
11. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	...XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0
6. 2011.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0
7. 2012.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
8. 2013.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0
9. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0
10. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0
11. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	...XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0	0
6. 2011.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0	0
7. 2012.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0	0
8. 2013.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0	0
9. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0	0
10. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0	0
11. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	0

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	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

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

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

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

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

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

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 5R - PRODUCTS LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

GREAT AMERICAN PROTECTION INSURANCE COMPANY
SCHEDULE P - PART 5T - WARRANTY

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	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
2. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
3. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

SECTION 1

[illegible]

SECTION 2

[illegible]

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

SECTION 1

[illegible]

SECTION 2

[illegible]

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

[illegible]

SECTION 2

[illegible]

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

[illegible]

SECTION 2A

[illegible]

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

SECTION 1B

[illegible]

SECTION 2B

[illegible]

SCHEDULE P - PART 6M - INTERNATIONAL

SECTION 1

[illegible]

SECTION 2

[illegible]

SCHEDULE P - PART 6N - REINSURANCE

NONPROPORTIONAL ASSUMED PROPERTY

SECTION 1

[illegible]

SECTION 2

[illegible]

SCHEDULE P - PART 60 - REINSURANCE

NONPROPORTIONAL ASSUMED LIABILITY

SECTION 1

[illegible]

SECTION 2

[illegible]

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE

SECTION 1A

[illegible]

SECTION 2A

[illegible]

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE

SECTION 1B

[illegible]

SECTION 2B

[illegible]

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 Omitted)

SECTION 1

	1	2	3	4	5	6
	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P - Part 1						
1. Homeowners/farmowners.....	0	0	0.0	0	0	0.0
2. Private passenger auto liability/medical.....	0	0	0.0	0	0	0.0
3. Commercial auto/truck liability/medical.....	0	0	0.0	0	0	0.0
4. Workers' compensation.....	0	0	0.0	0	0	0.0
5. Commercial multiple peril.....	0	0	0.0	0	0	0.0
6. Medical professional liability - occurrence.....	0	0	0.0	0	0	0.0
7. Medical professional liability - claims-made.....	0	0	0.0	0	0	0.0
8. Special liability.....	0	0	0.0	0	0	0.0
9. Other liability - occurrence.....	0	0	0.0	0	0	0.0
10. Other liability - claims-made.....	0	0	0.0	0	0	0.0
11. Special property.....	0	0	0.0	0	0	0.0
12. Auto physical damage.....	0	0	0.0	0	0	0.0
13. Fidelity/surety.....	0	0	0.0	0	0	0.0
14. Other.....	0	0	0.0	0	0	0.0
15. International.....	0	0	0.0	0	0	0.0
16. Reinsurance - nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX
19. Products liability - occurrence.....	0	0	0.0	0	0	0.0
20. Products liability - claims-made.....	0	0	0.0	0	0	0.0
21. Financial guaranty/mortgage guaranty.....	0	0	0.0	0	0	0.0
22. Warranty.....	0	0	0.0	0	0	0.0
23. Totals.....	0	0	0.0	0	0	0.0

SECTION 2

Years in Which Policies Were Issued	Incurred Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2010.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2011.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3

Years in Which Policies Were Issued	Bulk and Incurred But Not Reported Reserves for Losses and Defense and Cost Containment Expenses at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2010.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2011.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (continued)

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 5

Years in Which Policies Were Issued	Net Reserve for Premium Adjustments and Accrued Retrospective Premiums at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS

(\$000 Omitted)

SECTION 1

	1	2	3	4	5	6
	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P - Part 1						
1. Homeowners/farmowners.....	0	0	0.0	0	0	0.0
2. Private passenger auto liability/medical.....	0	0	0.0	0	0	0.0
3. Commercial auto/truck liability/medical.....	0	0	0.0	0	0	0.0
4. Workers' compensation.....	0	0	0.0	0	0	0.0
5. Commercial multiple peril.....	0	0	0.0	0	0	0.0
6. Medical professional liability - occurrence.....	0	0	0.0	0	0	0.0
7. Medical professional liability - claims-made.....	0	0	0.0	0	0	0.0
8. Special liability.....	0	0	0.0	0	0	0.0
9. Other liability - occurrence.....	0	0	0.0	0	0	0.0
10. Other liability - claims-made.....	0	0	0.0	0	0	0.0
11. Special property.....	0	0	0.0	0	0	0.0
12. Auto physical damage.....	0	0	0.0	0	0	0.0
13. Fidelity/surety.....	0	0	0.0	0	0	0.0
14. Other.....	0	0	0.0	0	0	0.0
15. International.....	0	0	0.0	0	0	0.0
16. Reinsurance - nonproportional assumed property.....	0	0	0.0	0	0	0.0
17. Reinsurance - nonproportional assumed liability.....	0	0	0.0	0	0	0.0
18. Reinsurance - nonproportional assumed financial lines.....	0	0	0.0	0	0	0.0
19. Products liability - occurrence.....	0	0	0.0	0	0	0.0
20. Products liability - claims-made.....	0	0	0.0	0	0	0.0
21. Financial guaranty/mortgage guaranty.....	0	0	0.0	0	0	0.0
22. Warranty.....	0	0	0.0	0	0	0.0
23. Totals	0	0	0.0	0	0	0.0

SECTION 2

Years in Which Policies Were Issued	Incurred Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2010.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2011.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3

Years in Which Policies Were Issued	Bulk and Incurred But Not Reported Reserves for Losses and Defense and Cost Containment Expenses at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2010.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2011.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

Annual Statement for the year 2016 of the

GREAT AMERICAN PROTECTION INSURANCE COMPANY

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (continued)

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums Reported At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 5

Years in Which Policies Were Issued	Net Reserve For Premium Adjustments And Accrued Retrospective Premiums At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 6

Years in Which Policies Were Issued	Incurred Adjustable Commissions Reported At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

SECTION 7

Years in Which Policies Were Issued	Reserves For Commission Adjustments At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2007.....	0	0	0	0	0	0	0	0	0	0
3. 2008.....	XXX.....	0	0	0	0	0	0	0	0	0
4. 2009.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
5. 2010.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
7. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
8. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
9. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0
10. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0
11. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0

GREAT AMERICAN PROTECTION INSURANCE COMPANY
SCHEDULE P INTERROGATORIES

1.

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

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

Yes [] No [X]
- 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)?

\$.....0
- 1.3

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

Yes [] No [X]
- 1.4

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

Yes [] No [X]
- 1.5

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

Yes [] No [] N/A[X]
- 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	2
		Section 1: Occurrence	Section 2: Claims-Made
1.601	Prior.....	0	0
1.602	2007.....	0	0
1.603	2008.....	0	0
1.604	2009.....	0	0
1.605	2010.....	0	0
1.606	2011.....	0	0
1.607	2012.....	0	0
1.608	2013.....	0	0
1.609	2014.....	0	0
1.610	2015.....	0	0
1.611	2016.....	0	0
1.612	Totals.....	0	0

2.

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

Yes [X] No []
3.

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

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

\$.....0
\$.....0
6.

Claim count information is reported per claim or per claimant. (Indicate which).
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 [X] No []
- 7.2

An extended statement may be attached.
This Company participates in a pooling agreement. (See Note 26).

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

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

NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
Members															
0.....		0.....	31-1544320	0	0000944707	NYSE.....	American Financial Group, Inc.....	OH.....	UIP.....		Ownership.....	0.000		N.....	0.....
0.....		0.....	31-6549738	0	0		American Financial Capital Trust II.....	DE.....	NIA.....	American Financial Group, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	16-6543606	0	0		American Financial Capital Trust III.....	DE.....	NIA.....	American Financial Group, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	16-6543609	0	0		American Financial Capital Trust IV.....	DE.....	NIA.....	American Financial Group, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	31-0996797	0	0		American Financial Enterprises, Inc.....	CT.....	NIA.....	American Financial Group, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	31-0828578	0	0		American Money Management Corporation.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	27-1577326	0	0		American Real Estate Capital Company, LLC.....	OH.....	NIA.....	American Money Management Corporation.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	27-2829629	0	0		Mid-Market Capital Partners, LLC.....	DE.....	NIA.....	American Money Management Corporation.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	41-2112001	0	0		APU Holding Company.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	23-6000765	0	0		American Premier Underwriters, Inc.....	PA.....	NIA.....	APU Holding Company.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	23-6297584	0	0		The Associates of the Jersey Company.....	NJ.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	37-1094159	0	0		Cal Coal, Inc.....	IL.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	95-2802826	0	0		Great Southwest Corporation.....	DE.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	35-6001691	0	0		The Indianapolis Union Railway Company.....	IN.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	13-6400464	0	0		Lehigh Valley Railroad Company.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	46-1665396	0	0		Pennsylvania Lehigh Oil & Gas Holdings LLC.....	PA.....	NIA.....	Lehigh Valley Railroad Company.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	20-1548213	0	0		Magnolia Alabama Holdings, Inc.....	DE.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	20-1574094	0	0		Magnolia Alabama Holdings LLC.....	AL.....	NIA.....	Magnolia Alabama Holdings, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	46-1852532	0	0		Michigan Oil & Gas Holdings, LLC.....	MI.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	46-1480078	0	0		Ohio Oil & Gas Holdings, LLC.....	OH.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	13-6021353	0	0		The Owasco River Railway, Inc.....	NY.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	31-1236926	0	0		PCC Real Estate, Inc.....	NY.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	76-0080537	0	0		PCC Technical Industries, Inc.....	DE.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	31-1388401	0	0		PCC Maryland Realty Corp.....	MD.....	NIA.....	PCC Technical Industries, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	06-1209709	0	0		Penn Central Energy Management Company.....	DE.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	23-1537928	0	0		Penn Towers, Inc.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	46-3246684	0	0		Pennsylvania Oil & Gas Holdings, LLC.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	23-6000766	0	0		Pennsylvania-Reading Seashore Lines.....	NJ.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	66.670	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	23-6207599	0	0		Pittsburgh and Cross Creek Railroad Company.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	83.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	23-1707450	0	0		Terminal Realty Penn Co.....	DC.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	23-1675796	0	0		Waynesburg Southern Railroad Company.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	98-1073776	0	0		GAI Insurance Company, Ltd.....	BMU.....	IA.....	APU Holding Company.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....		0	0		Great American Specialty & Affinity Limited.....	GBR.....	NIA.....	APU Holding Company.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	31-1446308	0	0		Hangar Acquisition Corp.....	OH.....	NIA.....	APU Holding Company.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	91-1242743	0	0		Premier Lease & Loan Services Insurance Agency, Inc.....	WA.....	NIA.....	APU Holding Company.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	91-1508644	0	0		Premier Lease & Loan Services of Canada, Inc.....	WA.....	NIA.....	APU Holding Company.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	31-1262960	0	0		Risiko Management Corporation.....	DE.....	NIA.....	APU Holding Company.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	31-0823725	0	0		Dixie Terminal Corporation.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....	98-0606803	0	0		GAI Holding Bermuda Ltd.....	BMU.....	NIA.....	American Financial Group, Inc.....	Ownership.....	69.990	American Financial Group, Inc.....	N.....	2.....
0.....		0.....	98-0606803	0	0		GAI Holding Bermuda Ltd.....	BMU.....	NIA.....	GAI Australia Pty Ltd.....	Ownership.....	30.010	American Financial Group, Inc.....	N.....	2.....
0.....		0.....	98-0556144	0	0		GAI Indemnity, Ltd.....	GBR.....	IA.....	GAI Holding Bermuda Ltd.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....		0	0		Neon Capital Limited.....	GBR.....	NIA.....	GAI Holding Bermuda Ltd.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....
0.....		0.....		0	0		Neon Holdings (U.K.) Limited.....	GBR.....	NIA.....	Neon Capital Limited.....	Ownership.....	100.000	American Financial Group, Inc.....	N.....	0.....

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
0....		0.....	98-0412245	0	0		Lavenham Underwriting Limited.....	GBR.....	IA.....	Neon Holdings (U.K.) Limited.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....		0	0		Marketform Hong Kong Limited.....	HKG.....	NIA.....	Neon Holdings (U.K.) Limited.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....		0	0		Neon Management Services Limited.....	GBR.....	NIA.....	Neon Holdings (U.K.) Limited.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....		0	0		Neon Service Company (U.K.) Limited.....	GBR.....	NIA.....	Neon Holdings (U.K.) Limited.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....		0	0		Marketform Australia Pty Limited.....	AUS.....	NIA.....	Neon Service Company (U.K.) Limited.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....		0	0		Studio Marketform SRL.....	ITA.....	NIA.....	Neon Service Company (U.K.) Limited.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....		0	0		Neon Underwriting Bermuda Limited.....	BMU.....	NIA.....	Neon Holdings (U.K.) Limited.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....		0	0		Neon Underwriting Limited.....	GBR.....	NIA.....	Neon Holdings (U.K.) Limited.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	98-0431601	0	0		Sampford Underwriting Limited.....	GBR.....	IA.....	Neon Holdings (U.K.) Limited.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....		0	0		Spectrum Agency Limited.....	GBR.....	NIA.....	Neon Holdings (U.K.) Limited.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	06-1356481	0	0		Great American Financial Resources, Inc.....	DE.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	1...
0....		0.....	31-1422717	0	0		AAG Insurance Agency, Inc.....	KY.....	NIA.....	Great American Financial Resources, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	34-1017531	0	0		Ceres Group, Inc.....	DE.....	NIA.....	Great American Financial Resources, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	47-0717079	0	0		Continental General Corporation.....	NE.....	NIA.....	Ceres Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	34-1947042	0	0		QQAgency of Texas, Inc.....	TX.....	NIA.....	Ceres Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	31-1395344	0	0		Great American Advisors, Inc.....	OH.....	NIA.....	Great American Financial Resources, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0084	American Financial Group, Inc.	63312...	13-1935920	0	0		Great American Life Insurance Company.....	OH.....	IA.....	Great American Financial Resources, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0084	American Financial Group, Inc.	93661...	31-1021738	0	0		Annuity Investors Life Insurance Company.....	OH.....	IA.....	Great American Life Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	27-4078277	0	0		Bay Bridge Marina Hemingway's Restaurant, LLC.....	MD.....	NIA.....	Great American Life Insurance Company.....	Ownership.....	...85.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	27-0513333	0	0		Bay Bridge Marina Management, LLC.....	MD.....	NIA.....	Great American Life Insurance Company.....	Ownership.....	...85.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	20-1246122	0	0		Brothers Management, LLC.....	FL.....	NIA.....	Great American Life Insurance Company.....	Ownership.....	...99.000	American Financial Group, Inc.Y.....	N.....	0...
0....		0.....	81-3737639	0	0		Charleston Harbor Fishing, LLC.....	SC.....	NIA.....	Great American Life Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	47-5618395	0	0		GA Key Lime, LLC.....	OH.....	NIA.....	Great American Life Insurance Company.....	Ownership.....	...50.000	American Financial Group, Inc.N.....	N.....	2...
0....		0.....	47-5618395	0	0		GA Key Lime, LLC.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...50.000	American Financial Group, Inc.N.....	N.....	2...
0....		0.....	20-4604276	0	0		GALIC - Bay Bridge Marina, LLC.....	MD.....	NIA.....	Great American Life Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	45-5565693	0	0		GALIC - Sorrento, LLC.....	FL.....	NIA.....	Great American Life Insurance Company.....	Ownership.....	...65.000	American Financial Group, Inc.N.....	N.....	2...
0....		0.....	45-5565693	0	0		GALIC - Sorrento, LLC.....	FL.....	NIA.....	Great American Insurance Company.....	Ownership.....	...35.000	American Financial Group, Inc.N.....	N.....	2...
0....		0.....	31-1391777	0	0		GALIC Brothers, Inc.....	OH.....	NIA.....	Great American Life Insurance Company.....	Ownership.....	...80.000	American Financial Group, Inc.Y.....	N.....	0...
0....		0.....	45-1144095	0	0		GALIC Pointe, LLC.....	FL.....	NIA.....	Great American Life Insurance Company.....	Ownership.....	...65.000	American Financial Group, Inc.N.....	N.....	2...
0....		0.....	45-1144095	0	0		GALIC Pointe, LLC.....	FL.....	NIA.....	Great American Insurance Company.....	Ownership.....	...35.000	American Financial Group, Inc.N.....	N.....	2...
0....		0.....	26-3260520	0	0		Manhattan National Holding Corporation.....	OH.....	NIA.....	Great American Life Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.Y.....	N.....	0...
0084	American Financial Group, Inc.	67083...	45-0252531	0	0		Manhattan National Life Insurance Company.....	OH.....	IA.....	Manhattan National Holding Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	52-2179330	0	0		Skipjack Marina Corp.....	MD.....	NIA.....	Great American Life Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	42-1575938	0	0		Great American Holding, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	27-3062314	0	0		Agricultural Services, LLC.....	OH.....	NIA.....	Great American Holding, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0084	American Financial Group, Inc.	35351...	31-0912199	0	0		American Empire Surplus Lines Insurance Company.....	DE.....	IA.....	Great American Holding, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0084	American Financial Group, Inc.	37990...	31-0973761	0	0		American Empire Insurance Company.....	OH.....	IA.....	American Empire Surplus Lines Insurance Company....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	59-1671722	0	0		American Empire Underwriters, Inc.....	TX.....	NIA.....	American Empire Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.Y.....	N.....	0...
0....		0.....		0	0		GAI Australia Pty Ltd.....	AUS.....	NIA.....	Great American Holding, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0....		0.....	AA-1784136	0	0		Great American International Insurance Designated Activity Company	IRL.....	IA.....	Great American Holding, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0084	American Financial Group, Inc.	23418...	73-0556513	0	0		Mid-Continent Casualty Company.....	OH.....	IA.....	Great American Holding, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0084	American Financial Group, Inc.	15380...	73-1406844	0	0		Mid-Continent Assurance Company.....	OH.....	IA.....	Mid-Continent Casualty Company.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...
0084	American Financial Group, Inc.	13794...	38-3803661	0	0		Mid-Continent Excess and Surplus Insurance Company.....	DE.....	IA.....	Mid-Continent Casualty Company.....	Ownership.....	...100.000	American Financial Group, Inc.N.....	N.....	0...

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
0.....		0.....	30-0571535	0	0		Mid-Continent Specialty Insurance Services, Inc.....	OK.....	NIA.....	Mid-Continent Casualty Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0084	American Financial Group, Inc.	23426...	73-0773259	0	0		Oklahoma Surety Company.....	OH.....	IA.....	Mid-Continent Casualty Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0084	American Financial Group, Inc.	22179...	95-2801326	0	0		Republic Indemnity Company of America.....	CA.....	IA.....	Great American Holding, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0084	American Financial Group, Inc.	43753...	31-1054123	0	0		Republic Indemnity Company of California.....	CA.....	IA.....	Republic Indemnity Company of America.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0.....		0.....	59-1683711	0	0		Summit Consulting, LLC.....	FL.....	NIA.....	Great American Holding, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0.....		0.....	59-3385208	0	0		Heritage Summit Healthcare, LLC.....	FL.....	NIA.....	Summit Consulting, LLC.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0.....		0.....	59-3409855	0	0		Summit Holding Southeast, Inc.....	FL.....	NIA.....	Great American Holding, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0084	American Financial Group, Inc.	10701...	59-1835212	0	0		Bridgefield Employers Insurance Company.....	FL.....	IA.....	Summit Holding Southeast, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0084	American Financial Group, Inc.	10335...	59-3269531	0	0		Bridgefield Casualty Insurance Company.....	FL.....	IA.....	Bridgefield Employers Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0084	American Financial Group, Inc.	16691...	31-0501234	0	0		Great American Insurance Company.....	OH.....	UDP.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0.....		0.....	31-1463075	0	0		American Signature Underwriters, Inc.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0.....		0.....	59-2840291	0	0		Brothers Property Corporation.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...80.000	American Financial Group, Inc.....	Y.....	0...
0.....		0.....	25-1754638	0	0		Brothers Pennsylvanian Corporation.....	PA.....	NIA.....	Brothers Property Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0.....		0.....	59-2840294	0	0		Brothers Property Management Corporation.....	OH.....	NIA.....	Brothers Property Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0.....		0.....	20-4498054	0	0		Crescent Centre Apartments.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	1...
0.....		0.....	31-1277904	0	0		Crop Managers Insurance Agency, Inc.....	KS.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0.....		0.....	31-0589001	0	0		Dempsey & Siders Agency, Inc.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0.....		0.....	31-1341668	0	0		Eden Park Insurance Brokers, Inc.....	CA.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0.....		0.....		0	0		El Aguila, Compañía de Seguros, S.A. de C.V.....	MEX.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0.....		0.....		0	0		Financiadora de Primas Condor, S.A. de C.V.....	MEX.....	NIA.....	El Aguila, Compañía de Seguros, S.A. de C.V.....	Ownership.....	...99.000	American Financial Group, Inc.....	N.....	0...
0.....		0.....	39-1404033	0	0		Farmers Crop Insurance Alliance, Inc.....	KS.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0.....		0.....	13-3628555	0	0		FCIA Management Company, Inc.....	NY.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0.....		0.....		0	0		Foreign Credit Insurance Association.....	NY.....	OTH.....	Great American Insurance Company.....	Management.....	...0.000	American Financial Group, Inc.....	N.....	3...
0.....		0.....	81-0814136	0	0		GAI Mexico Holdings, LLC.....	DE.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0.....		0.....	31-1753938	0	0		GAI Warranty Company.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0.....		0.....	31-1765544	0	0		GAI Warranty Company of Florida.....	FL.....	NIA.....	GAI Warranty Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0.....		0.....		0	0		GAI Warranty Company of Canada Inc.....	CAN.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0.....		0.....	61-1329718	0	0		Global Premier Finance Company.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0.....		0.....	74-2693636	0	0		Great American Agency of Texas, Inc.....	TX.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0084	American Financial Group, Inc.	26832...	95-1542353	0	0		Great American Alliance Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0084	American Financial Group, Inc.	26344...	15-6020948	0	0		Great American Assurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0084	American Financial Group, Inc.	39896...	61-0983091	0	0		Great American Casualty Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0084	American Financial Group, Inc.	10646...	36-4079497	0	0		Great American Contemporary Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0084	American Financial Group, Inc.	37532...	31-0954439	0	0		Great American E & S Insurance Company.....	DE.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0084	American Financial Group, Inc.	41858...	31-1036473	0	0		Great American Fidelity Insurance Company.....	DE.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0.....		0.....	31-1652643	0	0		Great American Insurance Agency, Inc.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0084	American Financial Group, Inc.	22136...	13-5539046	0	0		Great American Insurance Company of New York.....	NY.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0084	American Financial Group, Inc.	38024...	31-0974853	0	0		Great American Lloyd's Insurance Company.....	TX.....	IA.....	Great American Insurance Company.....	Other.....	...0.000	American Financial Group, Inc.....	N.....	4...
0.....		0.....	31-1073664	0	0		Great American Lloyd's, Inc.....	TX.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0.....		0.....	31-0856644	0	0		Great American Management Services, Inc.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0084	American Financial Group, Inc.	38580...	31-1288778	0	0		Great American Protection Insurance Company.....	OH.....	RE.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...
0.....		0.....	31-0918893	0	0		Great American Re Inc.....	DE.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	Y.....	0...
0084	American Financial Group, Inc.	31135...	31-1209419	0	0		Great American Security Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	N.....	0...

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
0084	American Financial Group, Inc.	33723...	31-1237970	0	0		Great American Spirit Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0.....		0.....	AA-1120817	0	0		Insurance (GB) Limited.....	GBR.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.	Y.....	0...
0.....		0.....	59-1263251	0	0		Key Largo Group, Inc.....	FL.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.	Y.....	0...
0.....		0.....	34-1607394	0	0		National Interstate Corporation.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.	Y.....	0...
0.....		0.....	34-1899058	0	0		American Highways Insurance Agency, Inc.....	OH.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0.....		0.....	31-1548235	0	0		Explorer RV Insurance Agency, Inc.....	OH.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0.....		0.....	98-0191335	0	0		Hudson Indemnity, Ltd.....	CYM.....	IA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0.....		0.....	66-0660039	0	0		Hudson Management Group, Ltd.....	VIR.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0.....		0.....	34-1607396	0	0		National Interstate Insurance Agency, Inc.....	OH.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0.....		0.....	36-4670968	0	0		Commercial For Hire Transportation Purchasing Group.....	SC.....	NIA.....	National Interstate Insurance Agency, Inc.....	Management.....	0.000	American Financial Group, Inc.	N.....	5...
0084	American Financial Group, Inc.	32620...	34-1607395	0	0		National Interstate Insurance Company.....	OH.....	IA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0084	American Financial Group, Inc.	11051...	99-0345306	0	0		National Interstate Insurance Company of Hawaii, Inc.....	OH.....	IA.....	National Interstate Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0.....		0.....	43-1254631	0	0		TransProtection Service Company.....	MO.....	NIA.....	National Interstate Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.	Y.....	0...
0084	American Financial Group, Inc.	41106...	95-3623282	0	0		Triumphe Casualty Company.....	OH.....	IA.....	National Interstate Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0084	American Financial Group, Inc.	21172...	86-0114294	0	0		Vanliner Insurance Company.....	MO.....	IA.....	National Interstate Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.	Y.....	0...
0.....		0.....	20-5546054	0	0		Safety Claims & Litigation Services, LLC.....	MT.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0.....		0.....	46-4570914	0	0		Safety, Claims and Litigation Services, LLC.....	OH.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0.....		0.....	871850814	0	0		PLLS Canada Insurance Brokers Inc.....	CAN.....	NIA.....	Great American Insurance Company.....	Ownership.....	...49.000	American Financial Group, Inc.	Y.....	0...
0.....		0.....	31-1293064	0	0		Professional Risk Brokers, Inc.....	IL.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.	Y.....	0...
0.....		0.....	31-0686194	0	0		One East Fourth, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0.....		0.....	31-0883227	0	0		Pioneer Carpet Mills, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0.....		0.....	31-1119320	0	0		TEJ Holdings, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...
0.....		0.....	31-0728327	0	0		Three East Fourth, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.	N.....	0...

97.3

Aster	Explanation
1	Another affiliated company owns 1% or less of the shares.
2	The entity is owned by more than one company within the AFG Group.
3	Great American Insurance Company is the majority member of the Association
4	Beneficial interest and indirect control is established by trust agreements between Great American Insurance Company and each of the underwriters of the Company.
5	Company is affiliated but not owned.

GREAT AMERICAN PROTECTION INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000.....	31-1544320.....	American Financial Group, Inc.....	230,000,000	(300,000,000)	0	0	343,724,984	0		0	273,724,984	0
00000.....	98-1073776.....	GAI Insurance Company, Ltd.....	0	0	0	0	0	0		0	0	(6,384,000)
00000.....		Lloyd's Syndicate 2468.....	0	0	0	0	0	0		0	0	627,000
00000.....	06-1356481.....	Great American Financial Resources, Inc.....	140,000,000	(31,435,633)	0	0	0	0		0	108,564,367	0
63312.....	13-1935920.....	Great American Life Insurance Company.....	(140,000,000)	36,509,268	0	0	(178,794,178)	0		0	(282,284,910)	0
00000.....	47-5618395.....	GA Key Lime, LLC.....	0	1,211,990	0	0	0	0		0	1,211,990	0
00000.....	45-5565693.....	GALIC - Sorrento, LLC.....	0	(1,135,830)	0	0	0	0		0	(1,135,830)	0
00000.....	45-1144095.....	GALIC Pointe, LLC.....	0	(6,784,295)	0	0	0	0		0	(6,784,295)	0
00000.....	42-1575938.....	Great American Holding, Inc.....	145,000,000	(30,000,000)	0	0	0	0		0	115,000,000	0
35351.....	31-0912199.....	American Empire Surplus Lines Insurance Company.....	0	30,000,000	0	0	0	0	*	0	30,000,000	29,483,000
00000.....		Great American International Insurance Designated Activity Company.....	0	0	0	0	0	0		0	0	17,818,000
23418.....	73-0556513.....	Mid-Continent Casualty Company.....	(20,000,000)	0	0	0	0	0	*	0	(20,000,000)	(1,777,000)
22179.....	95-2801326.....	Republic Indemnity Company of America.....	(125,000,000)	0	0	0	0	0	*	0	(125,000,000)	(57,572,000)
00000.....	59-3409855.....	Summit Holding Southeast, Inc.....	10,000,000	0	0	0	0	0		0	10,000,000	0
10701.....	59-1835212.....	Bridgefield Employers Insurance Company.....	(5,000,000)	0	0	0	0	0	*	0	(5,000,000)	0
10335.....	59-3269531.....	Bridgefield Casualty Insurance Company.....	(5,000,000)	0	0	0	0	0	*	0	(5,000,000)	(702,000)
16691.....	31-0501234.....	Great American Insurance Company.....	(198,425,930)	268,332,009	0	0	(164,930,806)	0	*	0	(95,024,727)	16,939,000
00000.....	59-2840291.....	Brothers Property Corporation.....	(8,000,000)	0	0	0	0	0		0	(8,000,000)	0
00000.....	31-0589001.....	Dempsey & Siders Agency, Inc.....	0	350,000	0	0	0	0		0	350,000	0
00000.....		El Aguila, Compania de Seguros, S.A. de C.V.....	0	502,491	0	0	0	0		0	502,491	0
00000.....	39-1404033.....	Farmers Crop Insurance Alliance, Inc.....	(90,000)	0	0	0	0	0		0	(90,000)	0
00000.....	13-3628555.....	FCIA Management Company, Inc.....	(500,070)	0	0	0	0	0		0	(500,070)	0
00000.....	31-1765544.....	GAI Warranty Company of Florida.....	0	0	0	0	0	0		0	0	2,820,000
00000.....	61-1329718.....	Global Premier Finance Company.....	(1,000,000)	0	0	0	0	0		0	(1,000,000)	0
39896.....	61-0983091.....	Great American Casualty Insurance Company.....	(1,100,000)	0	0	0	0	0	*	0	(1,100,000)	0
00000.....	31-1652643.....	Great American Insurance Agency, Inc.....	(500,000)	0	0	0	0	0		0	(500,000)	0
22136.....	13-5539046.....	Great American Insurance Company of New York.....	(1,200,000)	0	0	0	0	0	*	0	(1,200,000)	0
38024.....	31-0974853.....	Great American Lloyd's Insurance Company.....	0	0	0	0	0	0		0	0	3,432,000
38580.....	31-1288778.....	Great American Protection Insurance Company.....	(2,400,000)	0	0	0	0	0	*	0	(2,400,000)	0
31135.....	31-1209419.....	Great American Security Insurance Company.....	(1,600,000)	0	0	0	0	0	*	0	(1,600,000)	0
33723.....	31-1237970.....	Great American Spirit Insurance Company.....	(1,800,000)	0	0	0	0	0	*	0	(1,800,000)	0
00000.....		Insurance (GB) Limited.....	0	450,000	0	0	0	0		0	450,000	0
00000.....	34-1607394.....	National Interstate Corporation.....	(9,384,000)	32,000,000	0	0	0	0		0	22,616,000	0
00000.....	98-0191335.....	Hudson Indemnity, Ltd.....	0	0	0	0	0	0		0	0	(301,081,000)
32620.....	34-1607395.....	National Interstate Insurance Company.....	1,100,000	0	0	0	0	0	*	0	1,100,000	242,254,000
11051.....	99-0345306.....	National Interstate Insurance Company of Hawaii, Inc.....	0	0	0	0	0	0	*	0	0	16,695,000
00000.....	43-1254631.....	TransProtection Service Company.....	(1,100,000)	0	0	0	0	0		0	(1,100,000)	0
41106.....	95-3623282.....	Triumphe Casualty Company.....	0	0	0	0	0	0	*	0	0	15,959,000
21172.....	86-0114294.....	Vanliner Insurance Company.....	0	0	0	0	0	0	*	0	0	26,194,000
00000.....	31-1293064.....	Professional Risk Brokers, Inc.....	(4,000,000)	0	0	0	0	0		0	(4,000,000)	0
9999999.....	Control Totals.....		0	0	0	0	0	0	XXX	0	0	4,705,000

GREAT AMERICAN PROTECTION INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)

Pooling Information

NAIC Code	Name of Insurer	Pooling %	NAIC Code	Name of Insurer	Pooling %
35351	American Empire Surplus Lines Insurance Company	90.00%	16691	Great American Insurance Company	100.00%
37990	American Empire Insurance Company	10.00%	26832	Great American Alliance Insurance Company	0.00%
			26344	Great American Assurance Company	0.00%
23418	Mid-Continent Casualty Company	100.00%	39896	Great American Casualty Insurance Company	0.00%
15380	Mid-Continent Assurance Company	0.00%	10646	Great American Contemporary Insurance Company	0.00%
23426	Oklahoma Surety Company	0.00%	37532	Great American E & S Insurance Company	0.00%
13794	Mid-Continent Excess and Surplus Insurance Company	0.00%	41858	Great American Fidelity Insurance Company	0.00%
			22136	Great American Insurance Company of New York	0.00%
22179	Republic Indemnity Company of America	100.00%	38580	Great American Protection Insurance Company	0.00%
43753	Republic Indemnity Company of California	0.00%	31135	Great American Security Insurance Company	0.00%
10701	Bridgefield Employers Insurance Company	0.00%	33723	Great American Spirit Insurance Company	0.00%
10335	Bridgefield Casualty Insurance Company	0.00%			
32620	National Interstate Insurance Company	70.00%			
21172	Vanliner Insurance Company	26.00%			
11051	National Interstate Insurance Company of Hawaii, Inc.	2.00%			
41106	Triumphe Casualty Company	2.00%			

GREAT AMERICAN PROTECTION INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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 the Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
MAY FILING		
8.	Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	YES
JUNE FILING		
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
AUGUST FILING		
11.	Will 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 statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING		
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	YES
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	NO
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?	NO
25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partners 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 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?	NO
AUGUST FILING		
35.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO

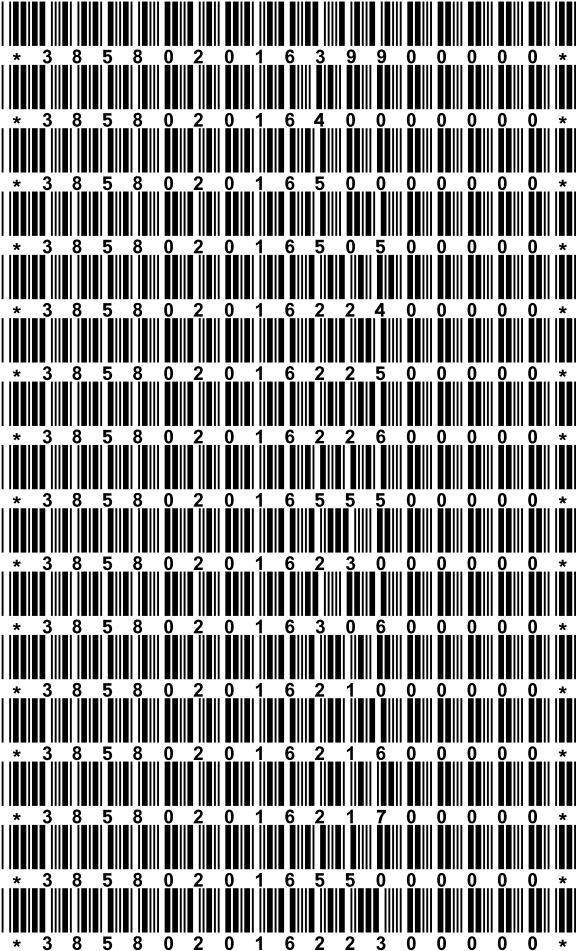
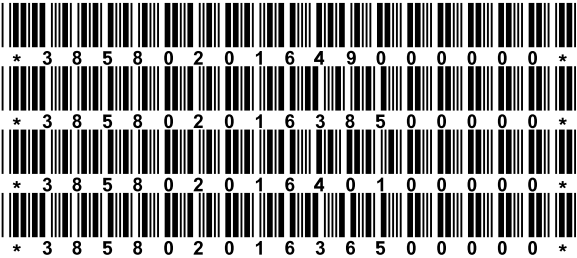
GREAT AMERICAN PROTECTION INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

EXPLANATIONS:

BAR CODE:

1.
2.
3.
4.
5.
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7.
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9.
10.
11.
12. The data for this supplement is not required to be filed.
13. The data for this supplement is not required to be filed.
14. The data for this supplement is not required to be filed.
15.
16. The data for this supplement is not required to be filed.
17. The data for this supplement is not required to be filed.
18. The data for this supplement is not required to be filed.
19. The data for this supplement is not required to be filed.
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21. The data for this supplement is not required to be filed.
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26. The data for this supplement is not required to be filed.
27. The data for this supplement is not required to be filed.
28. The data for this supplement is not required to be filed.
29. The data for this supplement is not required to be filed.
30. The data for this supplement is not required to be filed.
31. The data for this supplement is not required to be filed.
32. The data for this supplement is not required to be filed.
33. The data for this supplement is not required to be filed.
34. The data for this supplement is not required to be filed.
35. The data for this supplement is not required to be filed.



GREAT AMERICAN PROTECTION INSURANCE COMPANY
Overflow Page for Write-Ins

NONE

100L

NONE



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

SUPPLEMENT "A" TO SCHEDULE T

EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN

ALLOCATED BY STATES AND TERRITORIES

Physicians - Including Surgeons and Osteopaths

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

DETAILS OF WRITE-INS

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



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

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

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



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

SUPPLEMENT "A" TO SCHEDULE T

EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN

ALLOCATED BY STATES AND TERRITORIES

Other Health Care Professionals, Including Dentists

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

NONE

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



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

SUPPLEMENT "A" TO SCHEDULE T

EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN

ALLOCATED BY STATES AND TERRITORIES

Other Health Care Facilities

		1	2	Direct Losses Paid		5	Direct Losses Unpaid		8
				3	4		6	7	
States, Etc.		Direct Premiums Written	Direct Premiums Earned	Amount	Number of Claims	Direct Losses Incurred	Amount Reported	Number of Claims	Direct Losses Incurred But Not Reported
1.	Alabama.....AL	0	0	0	0	0	0	0	0
2.	Alaska.....AK	0	0	0	0	0	0	0	0
3.	Arizona.....AZ	0	0	0	0	0	0	0	0
4.	Arkansas.....AR	0	0	0	0	0	0	0	0
5.	California.....CA	0	0	0	0	0	0	0	0
6.	Colorado.....CO	0	0	0	0	0	0	0	0
7.	Connecticut.....CT	0	0	0	0	0	0	0	0
8.	Delaware.....DE	0	2,882	0	0	1,572	0	0	3,191
9.	District of Columbia.....DC	0	0	0	0	0	0	0	0
10.	Florida.....FL	0	0	0	0	0	0	0	0
11.	Georgia.....GA	0	0	0	0	0	0	0	0
12.	Hawaii.....HI	0	0	0	0	0	0	0	0
13.	Idaho.....ID	0	0	0	0	0	0	0	0
14.	Illinois.....IL	0	0	0	0	0	0	0	0
15.	Indiana.....IN	0	0	0	0	0	0	0	0
16.	Iowa.....IA	0	0	0	0	0	0	0	0
17.	Kansas.....KS	0	0	0	0	0	0	0	0
18.	Kentucky.....KY	0	0	0	0	0	0	0	0
19.	Louisiana.....LA	0	0	0	0	0	0	0	0
20.	Maine.....ME	0	0	0	0	0	0	0	0
21.	Maryland.....MD	0	0	0	0	0	0	0	0
22.	Massachusetts.....MA	0	0	0	0	0	0	0	0
23.	Michigan.....MI	0	0	0	0	0	0	0	0
24.	Minnesota.....MN	0	0	0	0	0	0	0	0
25.	Mississippi.....MS	0	0	0	0	0	0	0	0
26.	Missouri.....MO	0	0	0	0	0	0	0	0
27.	Montana.....MT	0	0	0	0	0	0	0	0
28.	Nebraska.....NE	0	0	0	0	0	0	0	0
29.	Nevada.....NV	0	0	0	0	0	0	0	0
30.	New Hampshire.....NH	0	0	0	0	0	0	0	0
31.	New Jersey.....NJ	0	0	0	0	0	0	0	0
32.	New Mexico.....NM	0	0	0	0	0	0	0	0
33.	New York.....NY	0	0	0	0	0	0	0	0
34.	North Carolina.....NC	0	0	0	0	0	0	0	0
35.	North Dakota.....ND	0	0	0	0	0	0	0	0
36.	Ohio.....OH	0	0	0	0	0	0	0	0
37.	Oklahoma.....OK	0	0	0	0	0	0	0	0
38.	Oregon.....OR	0	0	0	0	0	0	0	0
39.	Pennsylvania.....PA	0	0	0	0	0	0	0	0
40.	Rhode Island.....RI	0	0	0	0	0	0	0	0
41.	South Carolina.....SC	0	0	0	0	0	0	0	0
42.	South Dakota.....SD	0	0	0	0	0	0	0	0
43.	Tennessee.....TN	0	0	0	0	0	0	0	0
44.	Texas.....TX	0	0	0	0	0	0	0	0
45.	Utah.....UT	0	0	0	0	0	0	0	0
46.	Vermont.....VT	0	0	0	0	0	0	0	0
47.	Virginia.....VA	0	0	0	0	0	0	0	0
48.	Washington.....WA	0	0	0	0	0	0	0	0
49.	West Virginia.....WV	0	0	0	0	0	0	0	0
50.	Wisconsin.....WI	0	0	0	0	0	0	0	0
51.	Wyoming.....WY	0	0	0	0	0	0	0	0
52.	American Samoa.....AS	0	0	0	0	0	0	0	0
53.	Guam.....GU	0	0	0	0	0	0	0	0
54.	Puerto Rico.....PR	0	0	0	0	0	0	0	0
55.	US Virgin Islands.....VI	0	0	0	0	0	0	0	0
56.	Northern Mariana Islands.....MP	0	0	0	0	0	0	0	0
57.	Canada.....CAN	0	0	0	0	0	0	0	0
58.	Aggregate Other Alien.....OT	0	0	0	0	0	0	0	0
59.	Totals.....	0	2,882	0	0	1,572	0	0	3,191

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

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