



QUARTERLY STATEMENT
AS OF JUNE 30, 2017
OF THE CONDITION AND AFFAIRS OF THE
OHIC Insurance Company

NAIC Group Code	0831	0831	NAIC Company Code	35602	Employer's ID Number	31-0926059
	(current period)	(prior period)				
Organized under the Laws of	Ohio		State of Domicile or Port of Entry	OH		
Country of Domicile	UNITED STATES OF AMERICA					
Incorporated/Organized	02/09/1978		Commenced Business	03/01/1978		
Statutory Home Office	155 E BROAD STREET, 10TH FLOOR		COLUMBUS, OH, 43215-3614			
	(Street and Number)		(City or Town, State, Country and Zip Code)			
Main Administrative Office	185 GREENWOOD ROAD					
	(Street and Number)					
	NAPA, CA, 94558		(707)226-0100			
	(City or Town, State, Country and Zip Code)		(Area Code)(Telephone Number)			
Mail Address	PO BOX 2900		NAPA, CA, 94558			
	(Street and Number or P.O. Box)		(City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	185 GREENWOOD ROAD					
	(Street and Number)					
	NAPA, CA, 94558		(707)226-0100			
	(City or Town, State, Country and Zip Code)		(Area Code)(Telephone Number)			
Internet Website Address	www.thedoctors.com					
Statutory Statement Contact	DOUGLAS CHARLES WILL		(707)226-0100			
	(Name)		(Area Code)(Telephone Number)(Extension)			
	statefilingOHIC@thedoctors.com		(707)226-0180			
	(E-Mail Address)		(Fax Number)			

OFFICERS

Name	Title
RICHARD ELLIOTT ANDERSON MD	PRESIDENT, CHIEF EXECUTIVE OFFICER
DAVID ARMAND MCHALE	SECRETARY
DAVID GERARD PREIMESBERGER	TREASURER, CHIEF FINANCIAL OFFICER

OTHERS

WILLIAM ALLEN FLEMING, CHIEF OPERATING OFFICER #	DARRELL BLAIR RANUM, REGIONAL VICE PRESIDENT
MICHAEL YACOB, SENIOR VICE PRESIDENT	DOUGLAS CHARLES WILL, VICE PRESIDENT
DOUGLAS WILLIAM BOLTZ, ASSISSTANT VICE PRESIDENT	

DIRECTORS OR TRUSTEES

RICHARD ELLIOTT ANDERSON MD	WILLIAM ALLEN FLEMING #
DENNIS BRYAN LAWTON PhD	DAVID ARMAND MCHALE
DAVID GERARD PREIMESBERGER	

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of NAPA ss

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

(Signature)	(Signature)	(Signature)
WILLIAM ALLEN FLEMING	DAVID ARMAND MCHALE	DAVID GERARD PREIMESBERGER
(Printed Name)	(Printed Name)	(Printed Name)
1.	2.	3.
CHIEF OPERATING OFFICER	SECRETARY	TREASURER
(Title)	(Title)	(Title)

Subscribed and sworn to before me this _____ day of _____ 2017, by William Allen Fleming, proved to me on the basis of satisfactory evidence to be the person who appeared before me, and David Armand McHale, proved to me on the basis of satisfactory evidence to be the person who appeared before me, and David Gerard Preimesberger, proved to me on the basis of satisfactory evidence to be the person who appeared before me.

- a. Is this an original filing? Yes[X] No[]
- b. If no:
- 1. State the amendment number 0
 - 2. Date filed
 - 3. Number of pages attached 0

(Notary Public Signature)

ASSETS

		Current Statement Date			4
		1	2	3	
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	85,905,963		85,905,963	82,051,913
2.	Stocks:				
2.1	Preferred stocks				
2.2	Common stocks				
3.	Mortgage loans on real estate:				
3.1	First liens				
3.2	Other than first liens				
4.	Real estate:				
4.1	Properties occupied by the company (less \$.....0 encumbrances)				
4.2	Properties held for the production of income (less \$.....0 encumbrances)				
4.3	Properties held for sale (less \$.....0 encumbrances)				
5.	Cash (\$.....8,755,037), cash equivalents (\$.....0) and short-term investments (\$.....25,001)	8,780,038		8,780,038	6,696,923
6.	Contract loans (including \$.....0 premium notes)				
7.	Derivatives				
8.	Other invested assets				
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets	4,040,880		4,040,880	2,034,843
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	98,726,881		98,726,881	90,783,679
13.	Title plants less \$.....0 charged off (for Title insurers only)				
14.	Investment income due and accrued	659,273		659,273	638,474
15.	Premiums and considerations:				
15.1	Uncollected premiums and agents' balances in the course of collection				
15.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums)				
15.3	Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0)				
16.	Reinsurance:				
16.1	Amounts recoverable from reinsurers	17,943		17,943	201,472
16.2	Funds held by or deposited with reinsured companies				
16.3	Other amounts receivable under reinsurance contracts				
17.	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon				5,321,384
18.2	Net deferred tax asset	432,317	52,598	379,719	402,358
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets (\$.....0)				
22.	Net adjustments in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$.....0) and other amounts receivable				
25.	Aggregate write-ins for other-than-invested assets				
26.	TOTAL assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	99,836,414	52,598	99,783,816	97,347,366
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	TOTAL (Lines 26 and 27)	99,836,414	52,598	99,783,816	97,347,366
DETAILS OF WRITE-INS					
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page				
1199.	TOTALS (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501.					
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)				

LIABILITIES, SURPLUS AND OTHER FUNDS

		1	2
		Current Statement Date	December 31, Prior Year
1.	Losses (current accident year \$.....0)	34,108,912	34,102,903
2.	Reinsurance payable on paid losses and loss adjustment expenses		
3.	Loss adjustment expenses	11,796,230	14,111,760
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)	56,622	76,000
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses))	319,678	
7.2	Net deferred tax liability		
8.	Borrowed money \$.....0 and interest thereon \$.....0		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$.....0 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act)		
10.	Advance premium		
11.	Dividends declared and unpaid:		
11.1	Stockholders		
11.2	Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)	0	0
13.	Funds held by company under reinsurance treaties		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$.....0 certified)		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates	13,566	120,557
20.	Derivatives		
21.	Payable for securities	1,422,929	
22.	Payable for securities lending	4,040,880	2,034,843
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$.....0 and interest thereon \$.....0		
25.	Aggregate write-ins for liabilities		
26.	TOTAL liabilities excluding protected cell liabilities (Lines 1 through 25)	51,758,816	50,446,063
27.	Protected cell liabilities		
28.	TOTAL liabilities (Lines 26 and 27)	51,758,816	50,446,063
29.	Aggregate write-ins for special surplus funds		
30.	Common capital stock	3,591,990	3,591,990
31.	Preferred capital stock		
32.	Aggregate write-ins for other-than-special surplus funds		
33.	Surplus notes		
34.	Gross paid in and contributed surplus	78,000,000	78,000,000
35.	Unassigned funds (surplus)	(33,566,990)	(34,690,687)
36.	Less treasury stock, at cost:		
36.1	0 shares common (value included in Line 30 \$.....0)		
36.2	0 shares preferred (value included in Line 31 \$.....0)		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)	48,025,000	46,901,303
38.	TOTALS (Page 2, Line 28, Col. 3)	99,783,816	97,347,366
DETAILS OF WRITE-INS			
2501.			
2502.			
2503.			
2598.	Summary of remaining write-ins for Line 25 from overflow page		
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)		
2901.			
2902.			
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page		
2999.	TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above)		
3201.			
3202.			
3203.			
3298.	Summary of remaining write-ins for Line 32 from overflow page		
3299.	TOTALS (Lines 3201 through 3203 plus 3298) (Line 32 above)		

STATEMENT OF INCOME

		1	2	3
		Current Year to Date	Prior Year to Date	Prior Year Ended December 31
UNDERWRITING INCOME				
1.	Premiums earned			
1.1	Direct (written \$.....0)			
1.2	Assumed (written \$.....0)			
1.3	Ceded (written \$.....0)			
1.4	Net (written \$.....0)			
DEDUCTIONS:				
2.	Losses incurred (current accident year \$.....0)			
2.1	Direct	(5,000)	(150,000)	15,955,000
2.2	Assumed			
2.3	Ceded	(3,697)	(29,655)	12,072,415
2.4	Net	(1,303)	(120,345)	3,882,585
3.	Loss adjustment expenses incurred	(97,368)	21,309	13,999,570
4.	Other underwriting expenses incurred	82,638	515,131	1,061,602
5.	Aggregate write-ins for underwriting deductions			
6.	TOTAL underwriting deductions (Lines 2 through 5)	(16,033)	416,095	18,943,757
7.	Net income of protected cells			
8.	Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	16,033	(416,095)	(18,943,757)
INVESTMENT INCOME				
9.	Net investment income earned	1,303,021	1,375,513	2,585,133
10.	Net realized capital gains (losses) less capital gains tax of \$.....51,436	95,524	503,783	1,236,414
11.	Net investment gain (loss) (Lines 9 + 10)	1,398,545	1,879,296	3,821,547
OTHER INCOME				
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0)			
13.	Finance and service charges not included in premiums			
14.	Aggregate write-ins for miscellaneous income			74
15.	TOTAL other income (Lines 12 through 14)			74
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	1,414,578	1,463,201	(15,122,136)
17.	Dividends to policyholders			
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	1,414,578	1,463,201	(15,122,136)
19.	Federal and foreign income taxes incurred	268,242	91,433	(6,018,255)
20.	Net income (Line 18 minus Line 19) (to Line 22)	1,146,336	1,371,768	(9,103,880)
CAPITAL AND SURPLUS ACCOUNT				
21.	Surplus as regards policyholders, December 31 prior year	46,901,303	55,940,629	55,940,629
22.	Net income (from Line 20)	1,146,336	1,371,768	(9,103,880)
23.	Net transfers (to) from Protected Cell accounts			
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$.....0			
25.	Change in net unrealized foreign exchange capital gain (loss)			
26.	Change in net deferred income tax	(26,084)	(54,799)	73,324
27.	Change in nonadmitted assets	3,445	(22,745)	(14,666)
28.	Change in provision for reinsurance			5,896
29.	Change in surplus notes			
30.	Surplus (contributed to) withdrawn from Protected cells			
31.	Cumulative effect of changes in accounting principles			
32.	Capital changes:			
32.1	Paid in			
32.2	Transferred from surplus (Stock Dividend)			
32.3	Transferred to surplus			
33.	Surplus adjustments:			
33.1	Paid in			
33.2	Transferred to capital (Stock Dividend)			
33.3	Transferred from capital			
34.	Net remittances from or (to) Home Office			
35.	Dividends to stockholders			
36.	Change in treasury stock			
37.	Aggregate write-ins for gains and losses in surplus			
38.	Change in surplus as regards policyholders (Lines 22 through 37)	1,123,697	1,294,224	(9,039,326)
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	48,025,000	57,234,853	46,901,303
DETAILS OF WRITE-INS				
0501.				
0502.				
0503.				
0598.	Summary of remaining write-ins for Line 5 from overflow page			
0599.	TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)			
1401.	Misc Income			74
1402.				
1403.				
1498.	Summary of remaining write-ins for Line 14 from overflow page			
1499.	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)			74
3701.				
3702.				
3703.				
3798.	Summary of remaining write-ins for Line 37 from overflow page			
3799.	TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above)			

CASH FLOW

		1	2	3
		Current	Prior	Prior
		Year	Year	Year Ended
		To Date	To Date	December 31
Cash from Operations				
1.	Premiums collected net of reinsurance		0	75,742
2.	Net investment income	1,446,251	1,852,099	3,370,002
3.	Miscellaneous income			74
4.	TOTAL (Lines 1 to 3)	1,446,251	1,852,099	3,445,818
5.	Benefit and loss related payments	(190,840)	20,620	934,515
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	2,320,178	4,179,187	7,606,227
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses)	(5,321,384)	3,066,696	3,035,586
10.	TOTAL (Lines 5 through 9)	(3,192,047)	7,266,503	11,576,328
11.	Net cash from operations (Line 4 minus Line 10)	4,638,297	(5,414,404)	(8,130,510)
Cash from Investments				
12.	Proceeds from investments sold, matured or repaid:			
12.1	Bonds	18,933,821	28,585,187	59,002,960
12.2	Stocks			
12.3	Mortgage loans			
12.4	Real estate			
12.5	Other invested assets			
12.6	Net gains or (losses) on cash, cash equivalents and short-term investments			1
12.7	Miscellaneous proceeds	1,422,929		150,000
12.8	TOTAL investment proceeds (Lines 12.1 to 12.7)	20,356,750	28,585,187	59,152,961
13.	Cost of investments acquired (long-term only):			
13.1	Bonds	22,804,940	22,718,796	46,996,755
13.2	Stocks			
13.3	Mortgage loans			
13.4	Real estate			
13.5	Other invested assets			
13.6	Miscellaneous applications	2,006,037	4,006,816	2,034,843
13.7	TOTAL investments acquired (Lines 13.1 to 13.6)	24,810,977	26,725,612	49,031,598
14.	Net increase (or decrease) in contract loans and premium notes			
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(4,454,227)	1,859,575	10,121,363
Cash from Financing and Miscellaneous Sources				
16.	Cash provided (applied):			
16.1	Surplus notes, capital notes			
16.2	Capital and paid in surplus, less treasury stock			
16.3	Borrowed funds			
16.4	Net deposits on deposit-type contracts and other insurance liabilities			
16.5	Dividends to stockholders			
16.6	Other cash provided (applied)	1,899,045	2,971,922	1,839,370
17.	Net cash from financing and miscellaneous sources (Line 16.1 through 16.4 minus Line 16.5 plus Line 16.6)	1,899,045	2,971,922	1,839,370
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS				
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	2,083,115	(582,907)	3,830,223
19.	Cash, cash equivalents and short-term investments:			
19.1	Beginning of year	6,696,923	2,866,700	2,866,700
19.2	End of period (Line 18 plus Line 19.1)	8,780,038	2,283,793	6,696,923

Note: Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions:

20.0001				
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Notes to Financial Statement

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of OHIC Insurance Company (OHIC or The Company) have been prepared on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance.

The State of Ohio requires insurance companies domiciled in the State of Ohio to prepare their statutory financial statements in accordance with the National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* (NAIC SAP) subject to any deviations prescribed or permitted by the Ohio Department of Insurance. The Company has no prescribed or permitted practices exceptions.

Description	SSAP	F/S Page	F/S Line	Jun. 30, 2017	Dec. 31, 2016
Net Income					
(1) OHIC state basis (Page 4, Line 20, Columns 1 &2)	-	-	-	1,146,336	(9,103,880)
(2) State prescribed practice that increase/decrease NAIC SAP	-	-	-	-	-
(3) State permitted practice that increase/decrease NAIC SAP	-	-	-	-	-
(4) NAIC SAP (1-2-3=4)				1,146,336	(9,103,880)
Surplus					
(5) OHIC state basis (Page 3, Line 37, Columns 1 &2)				48,025,000	46,901,303
(6) State prescribed practice that increase/decrease NAIC SAP	-	-	-	-	-
(7) State permitted practice that increase/decrease NAIC SAP	-	-	-	-	-
(8) NAIC SAP (5-6-7=8)				48,025,000	46,901,303

C. Accounting Policy

6. Loan-backed securities are stated at either amortized cost or the lower of amortized cost or fair value. The retrospective adjustment method is used to value all securities.

D. Going Concern

After management evaluation, there is no substantial doubt regarding the reporting entity’s ability to continue as a going concern.

2. Accounting Changes and Correction of Errors

None

3. Business Combinations and Goodwill

None

4. Discontinued Operations

None

5. Investments

D. Loan-backed Securities

1. Prepayment assumptions for loan-backed and structured securities were obtained from our investment software vendor through an independent third-party source.
2. The Company has no securities within the scope of SSAP No. 43R with a recognized other-than-temporary impairment.
3. Security with a recognized other-than-temporary impairment, currently held by the reporting entity, as the present value of cash flows expected to be collected is less than the amortized cost basis of the securities:

None

Notes to Financial Statement

4. The Company has the following securities with fair value less than amortized cost for which other-than-temporary impairment has not been recognized in earnings as realized loss.

a. Aggregate amount of unrealized losses:

1. Less than 12 Months \$ 272,791

2. 12 Months or Longer \$ 63,549

b. Aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months \$ 19,366,742

2. 12 Months or Longer \$ 2,268,140

5. All loan-backed and structured securities in an unrealized loss position were reviewed to determine whether other-than-temporary impairments should be recognized. The Company considers various factors when determining other-than-temporary impairment, including: Intent or requirement to sell the security, length of time the security has been in a continuous unrealized loss position, depth of amortized value compared to fair value, and expected redemption percentage. The Company asserts that it has the intent and ability to hold these securities long enough for all the cost basis of the securities to be recovered. It is possible that the Company could recognize other-than-temporary impairments in the future on some of the securities if future events, information and the passage of time causes it to conclude that declines in value are other-than-temporary.
- E. Repurchase Agreements and/or Securities Lending Transactions
3. Collateral Received

b. The fair value of the collateral \$ 4,040,880

None of the collateral was sold or replugged
- I. Working Capital Finance Investments
- None
- J. Offsetting and Netting of Assets and Liabilities
- None
6. **Joint Ventures, Partnerships and Limited Liability Corporations**
- None
7. **Investment Income**
- No significant changes
8. **Derivative Instruments**
- None
9. **Income Taxes**
- No significant changes
10. **Information Concerning Parent, Subsidiaries and Affiliates**
- No significant changes
11. **Debt**
- None
12. **Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans**
- The Company has no employees.
13. **Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations –**
- No significant change
14. **Liabilities, Contingencies and Assessments**
- No significant change
- Q6.1

Notes to Financial Statement

15.	Leases
	None
16.	Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk
	No significant change
17.	Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
	None
	B. Transfers and Servicing of Financial Assets
	2. The Company engages in securities lending activities to further its investment objectives. The terms and conditions of the program are governed by a Master Securities Lending Agreement between the Company or its parent and its administering agent. The agent regularly reviews Company portfolios and makes securities available to the general market. When a transaction is executed, the agent handles all aspects of the transaction. The Company receives daily and monthly reports of earnings, counterparty exposure and collateral position. Collateral positions are required to be 102% of the amount loaned and are invested in short-term securities generally less than 90 days in length, while the maximum maturity of any repurchase agreement shall not exceed 93 days. The Company understands the inherent risks in these transactions and has structured the agreement in order to sufficiently manage or mitigate these risks. The Company maintains effective control of the loaned securities and has the ability to recall any securities on loan. Collateral assets are of high quality and short term, further reducing risk.
	4. Not applicable
	C. Wash Sales
	None
18.	Gain or Loss to the Reporting Entity from Uninsured A & H Plans and the Uninsured Portion of Partially Insured Plans
	None
19.	Direct Premium Written / Produced by Managing General Agents / Third Party Administrators
	None
20.	Fair Value Measurement
	A. Inputs used and Assets and Liabilities Measured and Reported at Fair Value
	The Company has categorized its assets and liabilities that are reported on the balance sheet at fair value into the three-level fair value hierarchy as reflected in the table below. The three-level fair value hierarchy is based on the degree of subjectivity inherent in the valuation method by which fair value was determined. The three levels are defined as follows.
	Level 1 – Quoted prices in active markets for identical assets and liabilities: This category for items measured at fair value on a recurring basis includes exchange-traded stocks. The fair value of these stocks is based on quoted prices in active markets.
	Level 2 – Significant observable inputs: The estimated fair values for some of these items are determined by independent pricing services using observable inputs. Others are based on quotes from markets which are not considered actively traded. The Company had no assets or liabilities measured at fair value on a recurring basis in this category.
	Level 3 – Significant unobservable inputs: The Company had no assets or liabilities measured at fair value on a recurring basis included in this category.
	1. Items Measured and Reported at Fair Value by Level 1, 2, and 3
	None
	At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred between Levels 1 and 2. This policy also applies to transfers into or out of Level 3 as stated in paragraph 3 below. During the current year, no transfers into or out of Level 1 or 2 were required.

Notes to Financial Statement

2. Assets Measured at Fair Value Using Significant Unobservable Inputs (Level 3)

None

3. Policy on Transfers Into and Out of Level 3

At the end of each reporting period, the Company evaluates whether any event has occurred or circumstances have changed that would cause an instrument to be transferred into or out of Level 3. During the current year, no transfers into or out of Level 3 were required.

4. Inputs and Techniques Used for Level 2 and 3 Fair Values

Bonds carried at fair value categorized as Level 2 were valued using a market approach. These valuations were determined to be Level 2 valuations as quoted markets prices for similar instruments in an active market were utilized. This was accomplished by the use of matrix pricing. Matrix pricing takes quoted prices of bonds with similar features and applies analytic methods to determine the fair value of bonds held. Features that are inputs into the analysis include duration, credit quality, tax status and call and sinking fund features.

5. Derivative Fair Values

Not applicable

B. Other Fair Value Disclosures

Not applicable

C. Fair Values for All Financial Instruments by Levels, 1, 2 and 3.

The table below reflects the fair values and admitted values of all admitted assets and liabilities that are financial instruments excluding those accounted for under the equity method (subsidiaries, joint ventures and ventures). The fair values are also categorized into the three-level fair value hierarchy as described above in Note 20A. The Company has no financial instrument liabilities valued at fair value.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Not practicable (Carrying Value)
Financial instruments – assets						
Bonds	\$ 87,412,298	\$85,905,963	-	\$87,412,298	-	-
Cash, cash equivalents and short-term investments	\$ 8,780,038	\$ 8,780,038	\$ 8,780,038	-	-	-

D. Financial Instruments for which it is Not Practicable to Estimate Fair Values

None

21. Other Items

None

22. Events Subsequent

Management of the Company has evaluated all events occurring after June 30, 2017 through August 9, 2017, the date the statutory financial statements were available to be issued.

23. Reinsurance

None

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

None

25. Change in Incurred Losses and Loss Adjustment Expenses

Incurred losses and loss adjustment expenses attributable to insured events of prior years has decreased by \$98,671 from \$783,406,136 as of December 31, 2016 to \$783,307,465 as of June 30, 2017 as a result of re-estimation of unpaid losses and loss adjustment expenses on medical malpractice lines of insurance. This decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

Notes to Financial Statement

26. Intercompany Pooling Arrangements

None

27. Structured Settlements

The Company has no structured settlements where it is contingently liable.

28. Health Care Receivables

None

29. Participating Policies

None

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves

\$ 0
2. Date of the most recent evaluation of this liability

12/31/2016
3. Was anticipated investment income utilized in the calculation

Yes ☐ No ☒

31. High Deductibles

None

32. Discounting of Liabilities for Unpaid Losses and Unpaid Loss Adjustment Expenses

The Company does not discount reserves.

33. Asbestos / Environmental Reserves

None

34. Subscriber Savings Accounts

None

35. Multiple Peril Crop Insurance

None

36. Financial Guarantee Insurance

None

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes[] No[X]
- 1.2 If yes, has the report been filed with the domiciliary state?

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

Yes[] No[X]
- 2.2 If yes, date of change:
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?

Yes[X] No[]
- If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes[] No[X]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes:
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes[] No[X]
- 4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?

If yes, attach an explanation.

Yes[] No[X] N/A[]
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2015
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2015
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

02/24/2017
- 6.4 By what department or departments?

Ohio Department of Insurance
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

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

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

Yes[] No[X]
- 7.2 If yes, give full information
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes[] No[X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?

Yes[] No[X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC
		Yes[] No[X]	Yes[] No[X]	Yes[] No[X]	Yes[] No[X]

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

(c) Compliance with applicable governmental laws, rules and regulations;

(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

(e) Accountability for adherence to the code.

Yes[X] No[]
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended?

Yes[] No[X]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers?

Yes[] No[X]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes[] No[X]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$ 0

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes[] No[X]
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$ 0
13. Amount of real estate and mortgages held in short-term investments:

\$ 0

GENERAL INTERROGATORIES (Continued)

INVESTMENT

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates?

14.2 If yes, please complete the following:

Yes[] No[X]

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds		
14.22 Preferred Stock		
14.23 Common Stock		
14.24 Short-Term Investments		
14.25 Mortgages Loans on Real Estate		
14.26 All Other		
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)		
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above		

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?
If no, attach a description with this statement.

Yes[] No[X]
Yes[] No[] N/A[X]

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

16.3 Total payable for securities lending reported on the liability page

\$ 4,040,880
\$ 4,040,880
\$ 4,040,880

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

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

Yes[X] No[]

1 Name of Custodian(s)	2 Custodian Address
MUFG Union Bank NA	350 California Street, San Francisco, CA 94104
BNY Mellon	225 Liberty St, New York, NY 10286

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

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

Yes[] No[X]

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

17.5 Investment management - Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. [" that have access to the investment accounts"; " handle securities"]

1 Name of Firm or Individual	2 Affiliation
Deutsche Investment Management Americas, Inc.	U
Richard E. Anderson, MD	I
David Preimesberger	I
Michael Yacob	I
David Charles, MD	I
Steven Bensinger	I
Eugene M. Bullis	I
Charles Kossman, MD	I
Robert Pike	I
Mary Ann Thode, JD	I

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets?

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets?

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

Yes[X] No[]
Yes[X] No[]

GENERAL INTERROGATORIES (Continued)

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
104518	Deutsche Investment Management Americas, Inc.		SEC	 NO

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?

Yes[X] No[]

18.2 If no, list exceptions:

N/A

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?
If yes, attach an explanation.

Yes[] No[] N/A[X]

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?
If yes, attach an explanation.

Yes[] No[X]

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled?
3.2 If yes, give full and complete information thereto

Yes[] No[X]

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see annual statement instructions pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero?
4.2 If yes, complete the following schedule:

Yes[] No[X]

1 Line of Business	2 Maximum Interest	3 Discount Rate	TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 TOTAL	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 TOTAL
04.2999 Total										

5. Operating Percentages:
5.1 A&H loss percent
5.2 A&H cost containment percent
5.3 A&H expense percent excluding cost containment expenses

.....0.000%
.....0.000%
.....0.000%

6.1 Do you act as a custodian for health savings accounts?
6.2 If yes, please provide the amount of custodial funds held as of the reporting date.
6.3 Do you act as an administrator for health savings accounts?
6.4 If yes, please provide the balance of the funds administered as of the reporting date.

Yes[] No[X]
\$.....0
Yes[] No[X]
\$.....0

SCHEDULE F - CEDED REINSURANCE
Showing all new reinsurers - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
U.S. insurers						
22039	13-2673100	GENERAL REINS CORP	DE	Authorized		
All other insurers						
00000	AA-3191315	XL Bermuda Ltd	BMU	Unauthorized ...		

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN
Current Year to Date - Allocated by States and Territories

		1	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
			2	3	4	5	6	7
States, etc.		Active Status	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date
1.	Alabama (AL)	N						
2.	Alaska (AK)	L						
3.	Arizona (AZ)	L						
4.	Arkansas (AR)	L						
5.	California (CA)	N						
6.	Colorado (CO)	L						
7.	Connecticut (CT)	N						
8.	Delaware (DE)	N						
9.	District of Columbia (DC)	N						
10.	Florida (FL)	N						
11.	Georgia (GA)	L						
12.	Hawaii (HI)	N						
13.	Idaho (ID)	L						
14.	Illinois (IL)	L						
15.	Indiana (IN)	L						
16.	Iowa (IA)	L						
17.	Kansas (KS)	L						
18.	Kentucky (KY)	L					3,075,198	3,071,178
19.	Louisiana (LA)	N						
20.	Maine (ME)	N						
21.	Maryland (MD)	L					37,678,927	25,904,366
22.	Massachusetts (MA)	N						
23.	Michigan (MI)	L						
24.	Minnesota (MN)	L						
25.	Mississippi (MS)	N						
26.	Missouri (MO)	L						
27.	Montana (MT)	L						
28.	Nebraska (NE)	L						
29.	Nevada (NV)	L						
30.	New Hampshire (NH)	N						
31.	New Jersey (NJ)	E						
32.	New Mexico (NM)	L						
33.	New York (NY)	L						
34.	North Carolina (NC)	N						
35.	North Dakota (ND)	L						
36.	Ohio (OH)	L					5,479,934	7,908,516
37.	Oklahoma (OK)	L						
38.	Oregon (OR)	L						
39.	Pennsylvania (PA)	L						
40.	Rhode Island (RI)	N						
41.	South Carolina (SC)	N						
42.	South Dakota (SD)	L						
43.	Tennessee (TN)	L						
44.	Texas (TX)	L						
45.	Utah (UT)	L						
46.	Vermont (VT)	N						
47.	Virginia (VA)	N						
48.	Washington (WA)	L						
49.	West Virginia (WV)	L						
50.	Wisconsin (WI)	L						
51.	Wyoming (WY)	L						
52.	American Samoa (AS)	N						
53.	Guam (GU)	N						
54.	Puerto Rico (PR)	N						
55.	U.S. Virgin Islands (VI)	N						
56.	Northern Mariana Islands (MP)	N						
57.	Canada (CAN)	N						
58.	Aggregate other alien (OT)	X X X						
59.	Totals	(a). 33					46,234,059	36,884,060
DETAILS OF WRITE-INS								
58001.....	X X X							
58002.....	X X X							
58003.....	X X X							
58998Summary of remaining write-ins for Line 58 from overflow page	X X X							
58999TOTALS (Lines 58001 through 58003 plus 58998) (Line 58 above)	X X X							

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile - see DSLI); (D) DSLI - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write Surplus Lines in the state of domicile; (N) None of the above - Not allowed to write business in the state.

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

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

	FEIN	STATE	NAIC #	OWNERSHIP
The Doctors Company, An Interinsurance Exchange (TDC)	95-3014772	CA	34495	
Insurance Subsidiaries and their Affiliates				
American Healthcare Indemnity Company (AHI)	59-2048400	OK	39152	100%
TDC National Assurance Company (TDCNA)	95-4234708	OR	41050	100%
TDC Specialty Insurance Company (TDCSI)	95-4241120	DC	34487	100%
TDC Specialty Underwriters, Inc. (TDCSU)	81-1383341	CT		100%
OHIC Insurance Company (OHIC)	31-0926059	OH	35602	100%
The Doctors Company Risk Retention Group, A Reciprocal Exchange (TDCRRG)	80-0787558	DC	14347	0%
TDC Special Risks Insurance Company (TDCSR)	30-0638006	DC		100%
First Professionals Insurance Company, Inc. (FPIC)	59-6614702	FL	33383	100%
American Physicians Assurance Corporation (APA)	38-2102867	MI	33006	100%
Chandler Office Park, LLC	38-3511421	MI		50%
Michigan Medical Advantage, Inc., dba Medical Advantage Group (MAG)	38-3316792	MI		100%
Consortium of Independent Physician Associations, Inc. (CIPA)	20-3476926	MI		100%
CIPA ACO, Inc.	81-2714184	MI		100%
Sales and Administration Subsidiaries				
The Doctors Management Company (TDMC)	95-2958888	CA		100%
The Doctors Company Insurance Services, LLC (TDCIS)	30-0597630	CA		100%
Real Estate Investment				
Hotel Yountville Holdings, LLC	81-4941249	CA		100%
Hotel Yountville, LLC	68-0398485	CA		50%
Napa Kohl’s Holdings, LLC	47-3861060	CA		100%
Napa Parkway Plaza, LLC	47-3854901	CA		58%
Napa Town Center Partners, LLC	68-0512177	CA		100%
Napa Center Preferred, LLC	46-3923579	CA		12%
Rancho Caymus Holdings, LLC	47-3385455	CA		100%
Rancho Caymus, LLC	47-3582915	CA		50%
Wake Forest Investments, LLC	81-3199862	CA		100%
Market of Wake Forest, LLC	81-3107313	NC		70%
Pier 88 Investment Partners, LLC	46-3506954	DE		29.51%

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

Q12

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Comp- any Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domic- iliary Loca- tion	Rela- tion- ship to Report- ing 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)	*
0831	The Doctors Group	34495	95-3014772				The Doctors Company, An Interinsurance Exchange	CA	UDP	The Doctors Management Company	Ownership, Board of Directors, Attorney-In-Fact		The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	39152	59-2048400				American Healthcare Indemnity, Inc.	OK	IA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	39152	59-2048400				American Healthcare Indemnity, Inc.	OK	IA	The Doctors Management Company	Board of Directors, Management		The Doctors Management Company	N	
0831	The Doctors Group	33006	38-2102867				American Physicians Assurance Corporation	MI	IA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	33006	38-2102867				American Physicians Assurance Corporation	MI	IA	The Doctors Management Company	Board of Directors, Management		The Doctors Management Company	N	
0831	The Doctors Group	00000	38-3511421				Chandler Office Park, LLC	MI	NIA	American Physicians Assurance Corporation	Influence	50.0	The Doctors Company, An Interinsurance Exchange, Chandler Farms, LLC	N	
0831	The Doctors Group	00000	81-2714184				CIPA ACO, Inc.	MI	NIA	Michigan Medical Advantage, DBA Medical Advantage Group	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	00000	20-3476926				Consortium of Independent Physician Associations, Inc.	MI	NIA	Michigan Medical Advantage, DBA Medical Advantage Group	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	33383	59-6614702				First Professionals Insurance Company, Inc.	FL	IA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	33383	59-6614702				First Professionals Insurance Company, Inc.	FL	IA	The Doctors Management Company	Board of Directors, Management		The Doctors Management Company	N	
0831	The Doctors Group	00000	68-0398485				Hotel Yountville, LLC	CA	NIA	The Doctors Company, An Interinsurance Exchange	Influence	50.0	The Doctors Company, An Interinsurance Exchange, Altamura Family, LLC	N	
0831	The Doctors Group	00000	81-4941249				Hotel Yountville Holdings, LLC	CA	NIA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	00000	81-3107313				Market of Wake Forest	NC	NIA	The Doctors Company, An Interinsurance Exchange	Ownership	70.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	00000	38-3316792				Michigan Medical Advantage, DBA Medical Advantage Group	MI	NIA	American Physicians Assurance Corporation	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	00000	38-3316792				Michigan Medical Advantage, DBA Medical Advantage Group	MI	NIA	American Physicians Assurance Corporation	Board of Directors, Management		The Doctors Management Company	N	
0831	The Doctors Group	00000	46-3923579				Napa Center Preferred, LLC	CA	NIA	The Doctors Company, An Interinsurance Exchange	Influence	12.0	The Doctors Company, An Interinsurance Exchange, Napa Center Holdings, LLC	N	
0831	The Doctors Group	00000	47-3681060				Napa Kohl's Holdings, LLC	CA	NIA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	00000	47-3854901				Napa Parkway Plaza, LLC	CA	NIA	The Doctors Company, An Interinsurance Exchange	Ownership	58.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	00000	68-0512177				Napa Town Center Partners, LLC	CA	NIA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	35602	31-0926059				OHIC Insurance Company	OH	RE	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	35602	31-0926059				OHIC Insurance Company	OH	RE	The Doctors Management Company	Board of Directors, Management		The Doctors Management Company	N	
0831	The Doctors Group	00000	46-3506954				Pier 88 Investment Partners, LLC	DE	NIA	The Doctors Company, An Interinsurance Exchange	Ownership	29.5	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	00000	47-3385455				Rancho Caymus Holdings, LLC	CA	NIA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	

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

Q12.1

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Comp-any Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domic-iliary Loca-tion	Rela-tion-ship to Report-ing 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)	*
0831	The Doctors Group	00000	47-3582915				Rancho Caymus, LLC	CA	NIA	Rancho Caymus Holdings, LLC	Ownership	50.0	The Doctors Company, An Interinsurance Exchange, George Altmura Jr, LLC	N	
0831	The Doctors Group	00000	38-2036899				SCW Agency Group, Inc.	MI	NIA	The Doctors Company Insurance Services, LLC	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	00000	30-0638006				TDC Special Risks Insurance Company	DC	IA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	00000	30-0638006				TDC Special Risks Insurance Company	DC	IA	The Doctors Management Company	Board of Directors, Management		The Doctors Management Company	N	
0831	The Doctors Group	34487	95-4241120				TDC Specialty Insurance Company	DC	IA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	34487	95-4241120				TDC Specialty Insurance Company	DC	IA	The Doctors Management Company	Board of Directors, Management		The Doctors Management Company	N	
0831	The Doctors Group	00000	81-1383341				TDC Specialty Underwriters, Inc.	CT	NIA	TDC Specialty Insurance Company	Ownership	100.0	TDC Specialty Insurance Company	N	
0831	The Doctors Group	00000	30-0597630				The Doctors Company Insurance Services, LLC	CA	NIA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	00000	30-0597630				The Doctors Company Insurance Services, LLC	CA	NIA	The Doctors Management Company	Board of Directors, Management		The Doctors Management Company	N	
0831	The Doctors Group	14347	80-0787558				The Doctors Company Risk Retention Group	DC	IA	The Doctors Management Company	Board of Directors, Management		The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	00000	95-2958888				The Doctors Management Company	CA	NIA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	41050	95-4234708				TDC National Assurance Company	OR	IA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	
0831	The Doctors Group	41050	95-4234708				TDC National Assurance Company	OR	IA	The Doctors Management Company	Board of Directors, Management		The Doctors Management Company	N	
0831	The Doctors Group	41050	81-3199862				Wake Forest Investments, LLC	DE	NIA	The Doctors Company, An Interinsurance Exchange	Ownership	100.0	The Doctors Company, An Interinsurance Exchange	N	

Asterisk	Explanation
0000001	

STATEMENT AS OF **June 30, 2017** OF THE **OHIC Insurance Company**

PART 1 - LOSS EXPERIENCE

Line of Business		Current Year to Date			4 Prior Year to Date Direct Loss Percentage
		1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1.	Fire				
2.	Allied lines				
3.	Farmowners multiple peril				
4.	Homeowners multiple peril				
5.	Commercial multiple peril				
6.	Mortgage guaranty				
8.	Ocean marine				
9.	Inland marine				
10.	Financial guaranty				
11.1	Medical professional liability - occurrence				
11.2	Medical professional liability - claims made		(5,000)		
12.	Earthquake				
13.	Group accident and health				
14.	Credit accident and health				
15.	Other accident and health				
16.	Workers' compensation				
17.1	Other liability - occurrence				
17.2	Other liability - claims made				
17.3	Excess Workers' Compensation				
18.1	Products liability - occurrence				
18.2	Products liability - claims made				
19.1	19.2 Private passenger auto liability				
19.3	19.4 Commercial auto liability				
21.	Auto physical damage				
22.	Aircraft (all perils)				
23.	Fidelity				
24.	Surety				
26.	Burglary and theft				
27.	Boiler and machinery				
28.	Credit				
29.	International				
30.	Warranty				
31.	Reinsurance-Nonproportional Assumed Property	X X X	X X X	X X X	X X X
32.	Reinsurance-Nonproportional Assumed Liability	X X X	X X X	X X X	X X X
33.	Reinsurance-Nonproportional Assumed Financial Lines	X X X	X X X	X X X	X X X
34.	Aggregate write-ins for other lines of business				
35.	TOTALS		(5,000)		
DETAILS OF WRITE-INS					
3401.					
3402.					
3403.					
3498.	Summary of remaining write-ins for Line 34 from overflow page				
3499.	TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above)				

PART 2 - DIRECT PREMIUMS WRITTEN

Line of Business		1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire			
2.	Allied lines			
3.	Farmowners multiple peril			
4.	Homeowners multiple peril			
5.	Commercial multiple peril			
6.	Mortgage guaranty			
8.	Ocean marine			
9.	Inland marine			
10.	Financial guaranty			
11.1	Medical professional liability - occurrence			
11.2	Medical professional liability - claims made			
12.	Earthquake			
13.	Group accident and health			
14.	Credit accident and health			
15.	Other accident and health			
16.	Workers' compensation			
17.1	Other liability - occurrence			
17.2	Other liability - claims made			
17.3	Excess Workers' Compensation			
18.1	Products liability - occurrence			
18.2	Products liability - claims made			
19.1	19.2 Private passenger auto liability			
19.3	19.4 Commercial auto liability			
21.	Auto physical damage			
22.	Aircraft (all perils)			
23.	Fidelity			
24.	Surety			
26.	Burglary and theft			
27.	Boiler and machinery			
28.	Credit			
29.	International			
30.	Warranty			
31.	Reinsurance-Nonproportional Assumed Property	X X X	X X X	X X X
32.	Reinsurance-Nonproportional Assumed Liability	X X X	X X X	X X X
33.	Reinsurance-Nonproportional Assumed Financial Lines	X X X	X X X	X X X
34.	Aggregate write-ins for other lines of business			
35.	TOTALS			
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498.	Summary of remaining write-ins for Line 34 from overflow page			
3499.	TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above)			

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

		1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred		Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2017 Loss and LAE Payments on Claims Reported as of Prior Year-End	2017 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2017 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year-End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year-End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols. 7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 11 + 12)
1.	2014 + Prior	59,517	(11,303)	48,214	2,211		2,211	26,399		19,506	45,905	(30,907)	30,809	(98)
2.	2015													
3.	Subtotals 2015 + Prior	59,517	(11,303)	48,214	2,211		2,211	26,399		19,506	45,905	(30,907)	30,809	(98)
4.	2016													
5.	Subtotals 2016 + Prior	59,517	(11,303)	48,214	2,211		2,211	26,399		19,506	45,905	(30,907)	30,809	(98)
6.	2017	X X X	X X X	X X X	X X X			X X X				X X X	X X X	X X X
7.	Totals	59,517	(11,303)	48,214	2,211		2,211	26,399		19,506	45,905	(30,907)	30,809	(98)
8.	Prior Year-End Surplus As Regards Policyholders	46,901										Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
												1..... (51.930)	2..... (272.574)	3..... (0.203)
														Col. 13, Line 7 Line 8
														4..... (0.209)

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	RESPONSES
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	No
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	Yes
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	No
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	No

Explanations:

Bar Codes:

Trusteed Surplus Statement



Medicare Part D Coverage Supplement



Director and Officer Supplement



OVERFLOW PAGE FOR WRITE-INS

STATEMENT AS OF **June 30, 2017** OF THE **OHIC Insurance Company**

SCHEDULE A - VERIFICATION

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

SCHEDULE B - VERIFICATION

Mortgage Loans

Mortgage Loans		1	2
		Year To Date	Prior Year Ended December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
2.1	Actual cost at time of acquisition		
2.2	Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage interest points		
9.	Total foreign exchange change in book value/recorded investment		
10.	Deduct current year's other-than-temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

Bonds and Stocks		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	82,051,913	92,657,561
2.	Cost of bonds and stocks acquired	22,804,940	46,996,755
3.	Accrual of discount	8,705	10,077
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals	146,960	1,978,436
6.	Deduct consideration for bonds and stocks disposed of	18,933,821	59,002,960
7.	Deduct amortization of premium	172,734	511,695
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other-than-temporary impairment recognized		76,261
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)	85,905,963	82,051,913
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	85,905,963	82,051,913

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SCHEDULE D - PART 1B
Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	74,385,813	11,830,333	13,586,277	(83,321)	74,385,813	72,546,548		70,599,130
2. NAIC 2 (a)	11,321,787	2,844,788	778,247	(3,912)	11,321,787	13,384,416		11,477,784
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	85,707,600	14,675,121	14,364,524	(87,233)	85,707,600	85,930,964		82,076,914
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds & Preferred Stock	85,707,600	14,675,121	14,364,524	(87,233)	85,707,600	85,930,964		82,076,914

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$.....25,001; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0

SCHEDULE DA - PART 1

Short - Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999. Totals	25,001	X X X	25,001		

SCHEDULE DA - Verification

Short-Term Investments

		1 Year To Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	25,001	829,176
2.	Cost of short-term investments acquired		
3.	Accrual of discount		5,825
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		810,000
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other-than-temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)	25,001	25,001
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	25,001	25,001

SI04 Schedule DB - Part A Verification NONE

SI04 Schedule DB - Part B Verification NONE

SI05 Schedule DB Part C Section 1 NONE

SI06 Schedule DB Part C Section 2 NONE

SI07 Schedule DB - Verification NONE

SI08 Schedule E - Verification (Cash Equivalents) NONE

E01 Schedule A Part 2 NONE

E01 Schedule A Part 3 NONE

E02 Schedule B Part 2 NONE

E02 Schedule B Part 3 NONE

E03 Schedule BA Part 2 NONE

E03 Schedule BA Part 3 NONE

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
Bonds - U.S. Governments									
912810RV2 ..	UNITED STATES TREAS BDS		.. 06/06/2017 ..	VARIOUS	.. X X X	 4,123,063	 4,000,000	 32,486	1
912828WN6 ..	UNITED STATES TREAS NTS		.. 04/13/2017 ..	NOMURA SECS	.. X X X	 1,519,810	 1,500,000	 11,539	1
0599999	Subtotal - Bonds - U.S. Governments				.. X X X	 5,642,873	 5,500,000	 44,025	 X X X
Bonds - U.S. Political Subdivisions of States, Territories and Possessions									
213489DZ7 ..	COOK CNTY ILL SCH DIST NO 036		.. 04/17/2017 ..	Exchange	.. X X X	 995,980	 995,000		1FE
213489EH6 ..	COOK CNTY ILL SCH DIST NO 036		.. 04/17/2017 ..	Exchange	.. X X X	 5,005	 5,000		1FE
2499999	Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions				.. X X X	 1,000,985	 1,000,000		 X X X
Bonds - U.S. Special Revenue, Special Assessment									
3137BX7G1 ..	FHLMC REMIC SERIES 4679		.. 04/01/2017 ..	RBC CAPITAL MARKETS	.. X X X	 1,046,250	 1,000,000	 3,000	1
3137BXS78 ..	FHLMC REMIC SERIES 4685		.. 05/04/2017 ..	CITIGROUP GBL MKTS INC, NEW YORK	.. X X X	 1,050,312	 1,000,000	 3,222	1
3199999	Subtotal - Bonds - U.S. Special Revenue, Special Assessment				.. X X X	 2,096,562	 2,000,000	 6,222	 X X X
Bonds - Industrial and Miscellaneous (Unaffiliated)									
00912XAW4 ..	AIR LEASE CORP		.. 06/05/2017 ..	JP MORGAN SECS LLC	.. X X X	 676,960	 680,000		2FE
053332AV4 ..	AUTOZONE INC		.. 04/06/2017 ..	JP MORGAN SECS LLC	.. X X X	 499,975	 500,000		2FE
36254AAD6 ..	GM FINL CON AUTO REC TR 2017-144A		.. 04/03/2017 ..	JP MORGAN SECS LLC	.. X X X	 259,962	 260,000		1FE
46849LSW2 ..	JACKSON NATL LIFE GBL FDG 144A		.. 06/20/2017 ..	MERRILL LYNCH PIERCE FENNER, CHARLO	.. X X X	 274,167	 275,000		1FE
46647PAE6 ..	JP MORGAN CHASE BANK NA		.. 06/06/2017 ..	GOLDMAN SACHS	.. X X X	 1,004,980	 1,000,000	 3,393	1FE
72650RBH4 ..	PLAINS ALL AMERN PIPELINE L P		.. 06/28/2017 ..	JP MORGAN SECS LLC	.. X X X	 234,775	 250,000	 4,696	2FE
824348AV8 ..	SHERWIN WILLIAMS CO		.. 05/02/2017 ..	CITIGROUP GBL MKTS INC, NEW YORK	.. X X X	 249,620	 250,000		2FE
929089AD2 ..	VOYA FINL INC		.. 06/26/2017 ..	CITIGROUP GBL MKTS INC, NEW YORK	.. X X X	 682,938	 685,000		2FE
29250NAR6 ..	ENBRIDGE INC	C	.. 06/28/2017 ..	JP MORGAN SECS LLC	.. X X X	 500,520	 500,000		2FE
22546QAP2 ..	CREDIT SUISSE NEW YORK BRANCH	C	.. 05/18/2017 ..	CREDIT SUISSE, NEW YORK (CSUS)	.. X X X	 1,550,805	 1,500,000	 11,177	1FE
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)				.. X X X	 5,934,702	 5,900,000	 19,266	 X X X
8399997	Subtotal - Bonds - Part 3				.. X X X	 14,675,122	 14,400,000	 69,513	 X X X
8399998	Summary Item from Part 5 for Bonds (N/A to Quarterly)				.. X X X	 X X X	 X X X	 X X X	 X X X
8399999	Subtotal - Bonds				.. X X X	 14,675,122	 14,400,000	 69,513	 X X X
8999998	Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly)				.. X X X	 X X X	 X X X	 X X X	 X X X
9799998	Summary Item from Part 5 for Common Stocks (N/A to Quarterly)				.. X X X	 X X X	 X X X	 X X X	 X X X
9899999	Subtotal - Preferred and Common Stocks				.. X X X	 X X X	 X X X		 X X X
9999999	Total - Bonds, Preferred and Common Stocks				.. X X X	 14,675,122	 X X X	 69,513	 X X X

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0.

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SCHEDULE D - PART 4

Show All Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed of
During the Current Quarter

CUSIP Identification	Description	3 F o r e i g n	4 Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consideration	8 Par Value	9 Actual Cost	10 Prior Year Book/ Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					16 Book/ Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest/ Stock Dividends Received During Year	21 Stated Contractual Maturity Date	22 NAIC Designation or Market Indicator (a)
										11 Unrealized Valuation Increase/ (Decrease)	12 Current Year's (Amortization)/ Accretion	13 Current Year's Other Than Temporary Impairment Recognized	14 Total Change in B./A.C.V. (11 + 12 - 13)	15 Total Foreign Exchange Change in B./A.C.V.							
Bonds - U.S. Governments																					
36296KMW9	GNMA #693473		06/15/2017	PRINCIPAL RECEIPT	X X X	1,549	1,549	1,558	1,564		(14)		(14)	1,549					29	06/15/2038	1
3622A2AD4	GNMA PASS-THRU M PLATINUM 30YR		06/20/2017	PRINCIPAL RECEIPT	X X X	40,262	40,262	42,498	42,699		(2,437)		(2,437)	40,262					480	06/20/2042	1
36207JZR7	GNMA PASS-THRU X SINGLE FAMILY		06/15/2017	PRINCIPAL RECEIPT	X X X	315	315	319	315					315					7	05/15/2028	1
36208WCM3	GNMA PASS-THRU X SINGLE FAMILY		06/15/2017	PRINCIPAL RECEIPT	X X X	456	456	455	455		1		1	456					10	07/15/2028	1
36209NCP5	GNMA PASS-THRU X SINGLE FAMILY		06/15/2017	PRINCIPAL RECEIPT	X X X	119	120	121	120					120					3	05/15/2028	1
36295QVU1	GNMA PASS-THRU X SINGLE FAMILY		06/15/2017	PRINCIPAL RECEIPT	X X X	2,986	2,986	3,010	3,033		(47)		(47)	2,986					61	11/15/2037	1
36295XZZ1	GNMA PASS-THRU X SINGLE FAMILY		06/15/2017	PRINCIPAL RECEIPT	X X X	5,637	5,637	5,694	5,805		(168)		(168)	5,637					86	02/15/2038	1
36296GRY9	GNMA PASS-THRU X SINGLE FAMILY		06/15/2017	PRINCIPAL RECEIPT	X X X	182	182	185	190		(8)		(8)	182					4	06/15/2038	1
912810RV2	UNITED STATES TREAS BDS		06/07/2017	CITIGROUP GBL MKTS INC, NEW YO	X X X	4,139,828	4,000,000	4,123,063			(37)		(37)	4,123,026		16,801	16,801		37,458	02/15/2047	1
912828U24	UNITED STATES TREAS NTS		06/06/2017	BNY/BARCLAYS CAP SEC LTD	X X X	3,359,877	3,400,000	3,260,029			4,312		4,312	3,264,341		95,536	95,536		38,250	11/15/2026	1
0599999 Subtotal - Bonds - U.S. Governments					X X X	7,551,211	7,451,507	7,436,932	54,181		1,602		1,602	7,438,874		112,337	112,337		76,388	X X X	X X X
Bonds - U.S. Political Subdivisions of States, Territories and Possessions																					
213489CN5	COOK CNTY IL SCH DIST NO 036		04/17/2017	Exchange	X X X	1,000,985	1,000,000	1,065,330	1,003,317		(2,332)		(2,332)	1,000,985						12/01/2018	1FE
213489DZ7	COOK CNTY ILL SCH DIST NO 036		06/09/2017	CALLED @ 100.0000000	X X X	995,000	995,000	995,980			(980)		(980)	995,000					24,875	12/01/2018	1FE
213489EH6	COOK CNTY ILL SCH DIST NO 036		06/01/2017	CALLED @ 100.0000000	X X X	5,000	5,000	5,005			(5)		(5)	5,000					125	12/01/2018	1FE
586145SR6	MEMPHIS TN		04/01/2017	MATURITY	X X X	1,000,000	1,000,000	1,077,140	1,002,375		(2,375)		(2,375)	1,000,000					25,000	04/01/2017	1FE
984674FX4	YAMHILL CNTY OR SCH DIST NO 040		06/15/2017	CALLED @ 100.0000000	X X X	1,000,000	1,000,000	1,047,980	1,002,677		(2,677)		(2,677)	1,000,000					25,000	06/15/2019	1FE
2499999 Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions					X X X	4,000,985	4,000,000	4,191,435	3,008,369		(8,369)		(8,369)	4,000,985					75,000	X X X	X X X
Bonds - U.S. Special Revenue, Special Assessment																					
3137ARXS0	FHLMC REMIC SERIES 4073		06/15/2017	PRINCIPAL RECEIPT	X X X	25,867	25,867	28,567	27,860		(1,993)		(1,993)	25,867					353	07/15/2041	1
3137ASBP8	FHLMC REMIC SERIES 4077		06/15/2017	PRINCIPAL RECEIPT	X X X	37,427	37,427	40,392	39,485		(2,058)		(2,058)	37,427					465	11/15/2041	1
3137B1RP9	FHLMC REMIC SERIES 4189		06/15/2017	PRINCIPAL RECEIPT	X X X	12,953	12,953	14,106	13,933		(980)		(980)	12,953					153	11/15/2042	1
3137BH8Z9	FHLMC REMIC SERIES 4451		06/15/2017	PRINCIPAL RECEIPT	X X X	36,048	36,048	38,047	37,899		(1,851)		(1,851)	36,048					440	11/15/2041	1
3137BMQC3	FHLMC REMIC SERIES 4544		06/15/2017	PRINCIPAL RECEIPT	X X X	48,922	48,922	51,521	51,303		(2,381)		(2,381)	48,922					559	06/15/2042	1
3137BMXB7	FHLMC REMIC SERIES 4551		06/15/2017	PRINCIPAL RECEIPT	X X X	22,046	22,046	23,407	23,236		(1,190)		(1,190)	22,046					258	04/15/2042	1
3137BMV45	FHLMC REMIC SERIES 4552		06/15/2017	PRINCIPAL RECEIPT	X X X	85,539	85,539	89,616	89,515		(3,976)		(3,976)	85,539					980	01/15/2043	1
3137BSZU0	FHLMC REMIC SERIES 4631		06/15/2017	PRINCIPAL RECEIPT	X X X	34,645	34,645	35,270	35,266		(622)		(622)	34,645					353	05/15/2045	1
3137BX7G1	FHLMC REMIC SERIES 4679		06/15/2017	PRINCIPAL RECEIPT	X X X	15,633	15,633	16,356			(723)		(723)	15,633					30	06/15/2044	1
3137BX578	FHLMC REMIC SERIES 4685		06/15/2017	PRINCIPAL RECEIPT	X X X	9,111	9,111	9,569			(458)		(458)	9,111						08/15/2044	1
31384VV33	FNMA #535334		06/26/2017	PRINCIPAL RECEIPT	X X X	7,460	7,460	7,707	7,617		(156)		(156)	7,460					174	06/01/2030	1
31391SM64	FNMA #675481		06/26/2017	PRINCIPAL RECEIPT	X X X	43	43	45	44		(1)		(1)	43					1	02/01/2033	1
31400WSW1	FNMA #699933		06/26/2017	PRINCIPAL RECEIPT	X X X	27,757	27,757	27,956	28,028		(271)		(271)	27,757					482	04/01/2033	1
31406UK31	FNMA #820314		06/26/2017	PRINCIPAL RECEIPT	X X X	786	786	774	777		10		10	786					13	08/01/2035	1
31411W4N4	FNMA #917129		06/26/2017	PRINCIPAL RECEIPT	X X X	3,318	3,318	3,268	3,280		38		38	3,318					81	06/01/2037	1
31414SYU1	FNMA #975123		06/26/2017	PRINCIPAL RECEIPT	X X X	806	806	804	804		2		2	806					13	05/01/2038	1
31371KZA2	FNMA PASS-THRU LNG 30 YEAR		06/26/2017	PRINCIPAL RECEIPT	X X X	7,598	7,598	8,183	8,336		(739)		(739)	7,598					142	02/01/2033	1
3138ARG99	FNMA PASS-THRU LNG 30 YEAR		06/26/2017	PRINCIPAL RECEIPT	X X X	25,283	25,283	27,535	27,697		(2,414)		(2,414)	25,283					461	09/01/2041	1
3138WGV3W2	FNMA PASS-THRU LNG 30 YEAR		06/26/2017	PRINCIPAL RECEIPT	X X X	25,846	25,846	27,340	27,326		(1,480)		(1,480)	25,846					332	05/01/2046	1
3138WGVY8	FNMA PASS-THRU LNG 30 YEAR		06/26/2017	PRINCIPAL RECEIPT	X X X	20,788	20,788	21,984	22,000		(1,212)		(1,212)	20,788					255	04/01/2046	1
3138X5JQ1	FNMA PASS-THRU LNG 30 YEAR		06/26/2017	PRINCIPAL RECEIPT	X X X	3,005	3,005	3,178	3,147		(142)		(142)	3,005					54	09/01/2043	1
31394AP26	FNMA REMIC TRUST 2004-76		06/26/2017	PRINCIPAL RECEIPT	X X X	11,173	11,173	11,885	11,333		(160)		(160)	11,173					160	10/25/2019	1
3136A9N61	FNMA REMIC TRUST 2012-120		06/26/2017	PRINCIPAL RECEIPT	X X X	21,133	21,133	22,665	22,677		(1,544)		(1,544)	21,133					271	10/25/2042	1
3136ADLC1	FNMA REMIC TRUST 2013-29		06/26/2017	PRINCIPAL RECEIPT	X X X	48,437	48,437	52,036	51,407		(2,970)		(2,970)	48,437					585	01/25/2043	1
3136ARDJ4	FNMA REMIC TRUST 2016-02		06/26/2017	PRINCIPAL RECEIPT	X X X	30,065	30,065	31,780	31,489		(1,424)		(1,424)	30,065					386	05/25/2041	1
3136ARPP7	FNMA REMIC TRUST 2016-11		06/26/2017	PRINCIPAL RECEIPT	X X X	65,018	65,018	68,970	68,373		(3,355)		(3,355)	65,018					705	05/25/2042	1
3136AUGS3	FNMA REMIC TRUST 2016-97		06/26/2017	PRINCIPAL RECEIPT	X X X	15,284	15,284	15,658			(374)		(374)	15,284					155	12/25/2044	1
3199999 Subtotal - Bonds - U.S. Special Revenue, Special Assessment					X X X	641,991	641,991	678,619	632,832		(32,424)		(32,424)	641,991					7,861	X X X	X X X
Bonds - Industrial and Miscellaneous (Unaffiliated)																					
14149YAU2	CARDINAL HEALTH INC		06/15/2017	MATURITY	X X X	340,000	340,000	339,425	339,946		54		54	340,000					3,230	06/15/2017	2FE
61748HAR2	MORGAN STANLEY CAP 2004-5AR		06/26/2017	PRINCIPAL RECEIPT	X X X	4,953	4,953	4,972	5,003		(50)		(50)	4,953					51	07/25/2034	1FM
00507UAT8	ACTAVIS FUNDING SCS	C	06/15/2017	CREDIT SUISSE, NEW YORK (CSUS)	X X X	465,956	440,000	438,108	438,218		29		29	438,247		27,708	27,708		15,293	03/15/2035	2FE
22546QAV9	CREDIT SUISSE NEW YORK BRANCH	C	05/18/2017	CREDIT SUISSE, NEW YORK (CSUS)	X X X	1,500,420	1,500,000	1,498,350	1,499,264		210		210	1,499,474		946	946		14,592	04/27/2018	1FE
3899999 Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					X X X	2,311,329	2,284,953	2,280,855	2,282,431		243		243	2,282,674		28,654	28,654		33,166	X X X	X X X

SCHEDULE D - PART 4
Show All Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed of
During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	F o r e i g n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11 + 12 - 13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)
8399997 Subtotal - Bonds - Part 4		X X X			X	14,505,516	14,378,451	14,587,841	5,977,813		(38,948)		(38,948)		14,364,524		140,991	140,991	192,415	X X X	X X X
8399998 Summary Item from Part 5 for Bonds (N/A to Quarterly)		X X X			X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X
8399999 Subtotal - Bonds		X X X			X	14,505,516	14,378,451	14,587,841	5,977,813		(38,948)		(38,948)		14,364,524		140,991	140,991	192,415	X X X	X X X
8999998 Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly)		X X X			X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X
9799998 Summary Item from Part 5 for Common Stocks (N/A to Quarterly)		X X X			X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X
9899999 Subtotal - Preferred and Common Stocks		X X X			X X X		X X X													X X X	X X X
9999999 Total - Bonds, Preferred and Common Stocks		X X X			X	14,505,516	X X X	14,587,841	5,977,813		(38,948)		(38,948)		14,364,524		140,991	140,991	192,415	X X X	X X X

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0.

E06 Schedule DB Part A Section 1 NONE

E07 Schedule DB Part B Section 1 NONE

E08 Schedule DB Part D Section 1 NONE

E09 Schedule DB Part D Section 2 - Collateral Pledged By Reporting Entity NONE

E09 Schedule DB Part D Section 2 - Collateral Pledged To Reporting Entity NONE

SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date						
1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation / Market Indicator	Fair Value	Book/Adjusted Carrying Value	Maturity Dates
7699999	Total Preferred and Common Stocks					 X X X ...
Short-Term Invested Assets (Schedule DA type)						
608919718	FEDERATED GOVT OBLIG PREMIER			377	377	
8999999	Subtotal - Short-Term Invested Assets (Schedule DA type)			377	377	 X X X ...
Cash Equivalents (Schedule E Part 2 type)						
.....	NOMURA SECURITIES INTL			285,957	285,957	. 09/29/2017
.....	SOCIETE GENERALE PARIS			285,957	285,957	. 09/01/2017
.....	PERSHING LLC			285,957	285,957	. 08/11/2017
.....	CANTOR FITZGERALD & CO			37,110	37,110	. 07/03/2017
.....	SOCIETE GENERALE PARIS			114,383	114,383	. 08/02/2017
.....	JP MORGAN CLEARING CORP			571,913	571,913	. 09/28/2017
.....	Morgan Stanley & Co. LLC			228,765	228,765	. 09/29/2017
.....	SOCIETE GENERALE PARIS			343,148	343,148	
.....	PERSHING LLC			171,574	171,574	
.....	MERRILL PIERCE FENNER SM			571,913	571,913	. 08/07/2017
.....	DEUTSCHE BANK SECURITIES			571,913	571,913	. 09/21/2017
.....	MERRILL PIERCE FENNER SM			571,913	571,913	. 09/21/2017
9199999	Subtotal - Cash Equivalents (Schedule E Part 2 type)			4,040,503	4,040,503	 X X X ...
9999999	Grand Totals			4,040,880	4,040,880	 X X X ...

General Interrogatories:

1. Total activity for the year to date Fair Value \$.....2,006,037 Book/Adjusted Carrying Value \$.....2,006,037
2. Average balance for the year to date Fair Value \$.....5,141,521 Book/Adjusted Carrying Value \$.....5,141,521
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation: NAIC 1 \$.....2,917,135, NAIC 2 \$.....800,678; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0

SCHEDULE DL - PART 2
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date						
1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation / Market Indicator	Fair Value	Book/Adjusted Carrying Value	Maturity Dates
NONE						
						... X X X ...
9999999 Grand Totals						

General Interrogatories:
1. Total activity for the year to date Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0
2. Average balance for the year to date Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1			2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6	7	8	
Depository			Code	Rate of Interest			First Month	Second Month	Third Month	*
open depositories										
Wells Fargo Bank, N.A.	San Francisco, CA				4,642		2,694,851	2,343,536	2,182,372	X X X
BNY Mellon	New York, NY				1,663		1,468,625	603,852	6,572,665	X X X
0199998 Deposits in0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - open depositories ..			X X X	X X X ..						X X X
0199999 Totals - Open Depositories			X X X	X X X ..	6,305		4,163,476	2,947,388	8,755,037	X X X
0299998 Deposits in0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - suspended depositories										
			X X X	X X X ..						X X X
0299999 Totals - Suspended Depositories			X X X	X X X ..						X X X
0399999 Total Cash On Deposit			X X X	X X X ..	6,305		4,163,476	2,947,388	8,755,037	X X X
0499999 Cash in Company's Office			X X X	X X X ..	X X X	X X X ..				X X X
0599999 Total Cash			X X X	X X X ..	6,305		4,163,476	2,947,388	8,755,037	X X X

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
NONE							
8699999 Total - Cash Equivalents							



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

Physicians, including surgeons and osteopaths

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

		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)								
2.	Alaska (AK)								
3.	Arizona (AZ)								
4.	Arkansas (AR)								
5.	California (CA)								
6.	Colorado (CO)								
7.	Connecticut (CT)								
8.	Delaware (DE)								
9.	District of Columbia (DC)								
10.	Florida (FL)								
11.	Georgia (GA)								
12.	Hawaii (HI)								
13.	Idaho (ID)								
14.	Illinois (IL)								
15.	Indiana (IN)								
16.	Iowa (IA)								
17.	Kansas (KS)								
18.	Kentucky (KY)					4,021	1,000,000	1	2,075,198
19.	Louisiana (LA)								
20.	Maine (ME)								
21.	Maryland (MD)								
22.	Massachusetts (MA)								
23.	Michigan (MI)								
24.	Minnesota (MN)								
25.	Mississippi (MS)								
26.	Missouri (MO)								
27.	Montana (MT)								
28.	Nebraska (NE)								
29.	Nevada (NV)								
30.	New Hampshire (NH)								
31.	New Jersey (NJ)								
32.	New Mexico (NM)								
33.	New York (NY)								
34.	North Carolina (NC)								
35.	North Dakota (ND)								
36.	Ohio (OH)					(4,021)	735,000	6	943,050
37.	Oklahoma (OK)								
38.	Oregon (OR)								
39.	Pennsylvania (PA)								
40.	Rhode Island (RI)								
41.	South Carolina (SC)								
42.	South Dakota (SD)								
43.	Tennessee (TN)								
44.	Texas (TX)								
45.	Utah (UT)								
46.	Vermont (VT)								
47.	Virginia (VA)								
48.	Washington (WA)								
49.	West Virginia (WV)								
50.	Wisconsin (WI)								
51.	Wyoming (WY)								
52.	American Samoa (AS)								
53.	Guam (GU)								
54.	Puerto Rico (PR)								
55.	U.S. Virgin Islands (VI)								
56.	Northern Mariana Islands (MP)								
57.	Canada (CAN)								
58.	Aggregate other alien (OT)								
59.	Totals						1,735,000	7	3,018,248
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998.	Summary of remaining write-ins for Line 58 from overflow page								
58999.	TOTALS (Lines 5801 through 5803 plus 5898) (Line 58 above)								



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

Hospitals

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

		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)								
2.	Alaska (AK)								
3.	Arizona (AZ)								
4.	Arkansas (AR)								
5.	California (CA)								
6.	Colorado (CO)								
7.	Connecticut (CT)								
8.	Delaware (DE)								
9.	District of Columbia (DC)								
10.	Florida (FL)								
11.	Georgia (GA)								
12.	Hawaii (HI)								
13.	Idaho (ID)								
14.	Illinois (IL)								
15.	Indiana (IN)								
16.	Iowa (IA)								
17.	Kansas (KS)								
18.	Kentucky (KY)								
19.	Louisiana (LA)								
20.	Maine (ME)								
21.	Maryland (MD)					1,276,043	20,080,078	160	17,598,849
22.	Massachusetts (MA)								
23.	Michigan (MI)								
24.	Minnesota (MN)								
25.	Mississippi (MS)								
26.	Missouri (MO)								
27.	Montana (MT)								
28.	Nebraska (NE)								
29.	Nevada (NV)								
30.	New Hampshire (NH)								
31.	New Jersey (NJ)								
32.	New Mexico (NM)								
33.	New York (NY)								
34.	North Carolina (NC)								
35.	North Dakota (ND)								
36.	Ohio (OH)					(1,281,043)	1,380,000	3	2,421,884
37.	Oklahoma (OK)								
38.	Oregon (OR)								
39.	Pennsylvania (PA)								
40.	Rhode Island (RI)								
41.	South Carolina (SC)								
42.	South Dakota (SD)								
43.	Tennessee (TN)								
44.	Texas (TX)								
45.	Utah (UT)								
46.	Vermont (VT)								
47.	Virginia (VA)								
48.	Washington (WA)								
49.	West Virginia (WV)								
50.	Wisconsin (WI)								
51.	Wyoming (WY)								
52.	American Samoa (AS)								
53.	Guam (GU)								
54.	Puerto Rico (PR)								
55.	U.S. Virgin Islands (VI)								
56.	Northern Mariana Islands (MP)								
57.	Canada (CAN)								
58.	Aggregate other alien (OT)								
59.	Totals					(5,000)	21,460,078	163	20,020,733
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998.	Summary of remaining write-ins for Line 58 from overflow page								
58999.	TOTALS (Lines 5801 through 5803 plus 5898) (Line 58 above)								

Supp5 Sup. A To T - Other Healthcare Professionals NONE

Supp5 Sup. A To T - Other Healthcare Facilities NONE

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