



ANNUAL STATEMENT
For the Year Ended December 31, 2017
OF THE CONDITION AND AFFAIRS OF THE
Ohio Indemnity Company

NAIC Group Code 00000, 00000 NAIC Company Code 26565 Employer's ID Number 31-0620146
Organized under the Laws of Ohio, State of Domicile or Port of Entry Ohio
Country of Domicile United States
Incorporated/Organized 02/11/1956 Commenced Business 07/24/1956
Statutory Home Office 250 E. Broad St., 7th Floor, Columbus, OH, US 43215-0000
Main Administrative Office 250 E. Broad St., 7th Floor, Columbus, OH, US 43215-0000 614-228-2800
Mail Address 250 E. Broad St., 7th Floor, Columbus, OH, US 43215-0000
Primary Location of Books and Records 250 E. Broad St., 7th Floor, Columbus, OH, US 43215-0000 614-228-2800
Internet Web Site Address www.ohioindemnity.com
Statutory Statement Contact Matt C Nolan 614-220-5207
Mnolan@ohioindemnity.com 614-228-5552

OFFICERS

Table with 4 columns: Name, Title, Name, Title. Row 1: John Scott Sokol, CEO and President, Matthew Christopher Nolan, Vice President, CFO, Treasurer and Secretary.

OTHER OFFICERS

Table with 4 columns: Name, Title, Name, Title. Row 1: Daniel John Stephan, Senior Vice President, Stephen John Toth, Vice President. Row 2: Margaret Ann Noreen, Vice President.

DIRECTORS OR TRUSTEES

Table with 4 columns: Name, Title, Name, Title. Row 1: Kenton Robert Bowen, Annemarie LoConti, Robert W Price, John Scott Sokol. Row 2: Matthew Douglas Walter.

State of Ohio

ss

County of Franklin

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

John Scott Sokol, CEO and President; Matthew Christopher Nolan, Vice President, CFO, Treasurer and Secretary; Matthew Christopher Nolan, Vice President, CFO, Treasurer and Secretary. Subscribed and sworn to before me this 20th day of February, 2018. 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.

Iris A. Arnold, Notary
12/29/2021



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2017

NAIC Company Code 26565

Table with columns: Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees.

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

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

19.AL



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	18,575	17,878	0	11,025	6,646	7,981	1,335	800	800	0	0	2,910
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	925	929	0	92	0	(191)	589	0	0	0	272	145
26. Burglary and theft												
27. Boiler and machinery												
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. TOTAL (a)	19,499	18,808	0	11,117	6,646	7,790	1,923	800	800	0	272	3,055
DETAILS OF WRITE-INS												
3401.	0	0	0	0	0	0	0	0	0	0	0	0
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.AK



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2017

NAIC Company Code 26565

Table with 12 columns: Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Marine, Auto, and other insurance lines.

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

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

19.AZ



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	400,917	390,332		206,389	251,937	297,864	68,971	15,800	15,800		(138)	12,331
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence												
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	6,803	6,880		136		(1,102)	5,505				4,319	209
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,666,718	1,668,876		2,319	516,957	595,172	108,848	3,194	3,173		11,013	51,263
30. Warranty												
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	2,074,438	2,066,088	0	208,844	768,894	891,934	183,324	18,994	18,973	0	15,194	63,803
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.AR



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF California

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	177,426	167,610		94,825	171,448	199,318	34,433	4,363	4,363			4,525
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence												
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	10,744,465	10,886,173		5,342,787	5,074,152	5,245,130	1,480,395	221,075	220,102		2,819,481	273,996
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	593,951	552,354		259,396		22,781	162,415				367,549	15,146
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
30. Warranty	41,140	30,293		93,480		(25,363)	1,637					1,050
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	11,556,982	11,636,430	0	5,790,488	5,245,600	5,441,866	1,678,880	225,438	224,465	0	3,187,030	294,717
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.CA



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2017

NAIC Company Code 26565

Table with columns: Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees.

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

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

19.CO



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	35,414	35,830		19,060	21,069	24,100	4,231	600	600			639
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence												
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	166,477	169,107		8,923		(650)	27,440				41,658	3,005
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,360,376	1,036,727		1,038,323	665,051	760,970	302,400	71,823	69,718		258,418	24,557
30. Warranty												
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	1,562,267	1,241,664	0	1,066,306	686,120	784,420	334,071	72,423	70,318	0	300,076	28,201
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.CT



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	9,757	9,615		5,593	1,781	1,627	358	200	200			1,054
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence												
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	11,746	11,710		101		0	26				8,655	1,269
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	12,082	20,700		1,455	4,945	2,038	905				5,276	1,305
30. Warranty												
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	33,585	42,025	0	7,149	6,726	3,665	1,289	200	200	0	13,931	3,628
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.DE



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2017

NAIC Company Code 26565

Table with 12 columns: Line of Business, 1 Direct Premiums Written, 2 Direct Premiums Earned, 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. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc.

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

19.DC



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2017

NAIC Company Code 26565

Table with columns: Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees.

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

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

19.FL



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	390,619	364,127		205,753	146,207	146,520	29,364	13,025	13,025			18,765
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence												
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	54,316	47,652		27,405		842	13,635				33,957	2,609
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,717,672	1,764,755		524,781	1,477,400	1,594,804	386,442	56,924	53,317		547,145	82,517
30. Warranty												
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	2,162,607	2,176,534	0	757,939	1,623,607	1,742,166	429,441	69,949	66,342	0	581,102	103,891
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.GA



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	8,115	7,603		4,955	16,040	18,567	3,221	400	400			352
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence												
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	17,092	19,581		12,371		(835)	6,976				11,116	742
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,888,313	1,532,310		2,103,710	1,057,000	1,125,929	235,122	17,996	17,663		982,370	81,999
30. Warranty												
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	1,913,520	1,559,494	0	2,121,036	1,073,040	1,143,661	245,319	18,396	18,063	0	993,486	83,093
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.HI



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	22,358	18,469	0	12,817	5,496	10,202	4,706	400	400	0	0	337
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	4,842	4,844	0	513	0	0	325	0	0	0	1,468	73
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	378,588	362,905	0	298,525	210,215	212,444	71,024	6,329	6,146	0	63,206	5,707
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. TOTAL (a)	405,788	386,218	0	311,855	215,711	222,646	76,055	6,729	6,546	0	64,674	6,117
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.ID



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2017

NAIC Company Code 26565

Table with columns: Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees.

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

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

19.1L



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	71,593	69,079	0	35,632	3,245	2,167	652	800	800	0	0	1,146
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	62,452	66,970	0	9,392	0	756	10,069	0	0	0	25,303	1,000
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	10,234,480	10,227,217	0	149,842	5,523,380	5,770,614	1,245,123	186,566	183,863	0	1,055,582	163,829
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business	26,005	25,166	0	94,482	0	0	0	0	0	0	0	416
35. TOTAL (a)	10,394,530	10,388,432	0	289,348	5,526,625	5,773,537	1,255,844	187,366	184,663	0	1,080,885	166,391
DETAILS OF WRITE-INS												
3401. Excess of Loss	26,005	25,166	0	94,482	0	0	0	0	0	0	0	416
3402.												
3403.												
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)	26,005	25,166	0	94,482	0	0	0	0	0	0	0	416

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

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

19.IN



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2017

NAIC Company Code 26565

Table with 12 columns: Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc.

19.1A

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

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



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2017

NAIC Company Code 26565

Table with 12 columns: Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc.

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

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

19.KS



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	171,664	157,093	0	90,259	43,194	53,044	12,277	3,200	3,200	0	0	1,513
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	488,872	383,208	0	226,813	0	(12,503)	133,593	0	0	0	288,815	4,307
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,772,387	1,621,039	0	2,514,792	1,122,227	1,060,165	370,559	63,521	62,071	0	261,855	15,616
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. TOTAL (a)	2,432,923	2,161,340	0	2,831,864	1,165,421	1,100,706	516,429	66,721	65,271	0	550,670	21,436
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.KY



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	787,985	761,205	0	426,355	610,039	643,061	126,120	31,679	31,679	0	0	43,080
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	45,322	46,800	0	10,362	0	(2,724)	18,562	0	0	0	28,300	2,478
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,166,246	1,121,280	0	128,567	651,678	647,841	135,880	36,746	36,058	0	282,723	63,761
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. TOTAL (a)	1,999,553	1,929,285	0	565,284	1,261,717	1,288,178	280,562	68,425	67,737	0	311,023	109,319
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.LA



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2017

NAIC Company Code 26565

Table with columns: Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc.

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

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

19.ME



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	62,494	61,465	0	33,553	18,486	18,383	7,315	1,600	1,600	0	0	1,574
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	244,389	244,462	0	2,474	0	(40)	30,940	0	0	0	56,919	6,157
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,984,268	1,954,879	0	442,649	1,036,106	1,080,362	265,141	138,862	138,748	0	611,721	49,987
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. TOTAL (a)	2,291,151	2,260,806	0	478,676	1,054,592	1,098,705	303,396	140,462	140,348	0	668,640	57,718
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.MD



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	85,018	78,512	0	44,253	5,714	6,250	1,148	600	600	0	0	2,944
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	63,805	65,695	0	152	0	(4,488)	9,369	0	0	0	17,812	2,209
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	3,036,882	2,560,993	0	2,443,652	1,626,627	1,843,740	681,097	91,534	86,961	0	603,757	105,162
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. TOTAL (a)	3,185,705	2,705,200	0	2,488,057	1,632,341	1,845,502	691,614	92,134	87,561	0	621,569	110,315
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.MA



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	141,320	126,928	0	74,971	41,925	47,398	8,420	2,800	2,800	0	0	1,769
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	199,952	200,002	0	78,032	0	(3,808)	72,292	0	0	0	120,032	2,503
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	4,421,929	4,342,393	0	1,159,074	1,864,422	1,991,586	443,793	82,942	81,392	0	1,289,441	55,352
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. TOTAL (a)	4,763,201	4,669,323	0	1,312,077	1,906,347	2,035,176	524,505	85,742	84,192	0	1,409,473	59,624
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.MI



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	23,647	22,106	0	12,484	5,310	5,959	1,066	800	800	0	0	538
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	31,868	31,392	0	9,157	0	(925)	7,767	0	0	0	16,004	725
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	178,202	189,668	0	52,340	92,835	76,122	38,204	9,145	8,986	0	47,121	4,054
30. Warranty	1,120	821	0	1,043	0	341	341	0	0	0	0	25
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	234,837	243,987	0	75,024	98,145	81,497	47,378	9,945	9,786	0	63,125	5,342
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.MN



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	518,249	495,488	0	286,110	395,407	437,475	104,629	24,377	24,377	0	(78)	15,154
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	316	317	0	194	0	8	110	0	0	0	(277)	9
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	596,382	578,368	0	132,070	357,179	385,372	80,777	10,578	10,578	0	2,213	17,438
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. TOTAL (a)	1,114,947	1,074,173	0	418,374	752,586	822,855	185,516	34,955	34,955	0	1,858	32,601
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.MS



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	172,112	160,686	0	90,787	81,460	93,720	23,565	5,166	5,166	0	0	6,735
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	641,978	643,390	0	226,411	0	(32,375)	239,410	0	0	0	399,164	25,121
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	3,390,729	3,397,467	0	3,099,208	930,200	867,160	199,889	59,432	58,084	0	992,186	132,681
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. TOTAL (a)	4,204,819	4,201,543	0	3,416,406	1,011,660	928,505	462,864	64,598	63,250	0	1,391,350	164,537
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.MO



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2017

NAIC Company Code 26565

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc.

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

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

19.MT



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	4,003	3,278	0	2,496	0	(238)	0	0	0	0	0	65
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	0	0	0	0	0	(1,531)	3,809	0	0	0	(231)	0
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,193,198	1,237,954	0	534,768	344,891	362,967	72,365	13,974	13,818	0	286,287	19,472
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. TOTAL (a)	1,197,201	1,241,232	0	537,264	344,891	361,198	76,174	13,974	13,818	0	286,056	19,537
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.NE



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	10,426	10,232	0	5,603	259	310	52	200	200	0	0	(343)
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	16,713	16,724	0	2,819	0	(3,966)	6,472	0	0	0	10,603	(550)
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	(195,078)	1,297,797	0	979,538	728,085	621,574	204,292	1,288	1,276	0	(167,533)	6,419
30. Warranty	200	381	0	201	0	171	171	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	0
35. TOTAL (a)	(167,739)	1,325,134	0	988,161	728,344	618,089	210,987	1,488	1,476	0	(156,930)	5,519
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.NV



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2017

NAIC Company Code 26565

Table with columns: Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees.

19.NH

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

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



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	68,089	62,305	0	37,340	38,787	45,861	7,790	1,400	1,400	0	0	3,990
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	673,729	672,976	0	7,165	0	(1,502)	6,252	0	0	0	162,440	39,482
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,490,569	2,707,169	0	6,761,044	5,902,921	6,172,900	1,214,006	5,980	5,961	0	154,250	87,351
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. TOTAL (a)	2,232,387	3,442,450	0	6,805,549	5,941,708	6,217,259	1,228,048	7,380	7,361	0	316,690	130,823
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.NJ



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	38,724	37,145	0	20,151	27,064	31,741	5,435	400	400	0	0	1,076
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	1,140	1,140	0	0	0	0	0	0	0	0	238	32
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,874,973	1,969,308	0	470,909	1,042,229	1,126,199	285,404	60,544	59,682	0	614,166	52,114
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. TOTAL (a)	1,914,837	2,007,593	0	491,060	1,069,293	1,157,940	290,839	60,944	60,082	0	614,404	53,222
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.NM



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF New York

DURING THE YEAR 2017

NAIC Company Code 26565

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc.

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

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

19.NY



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	288,913	266,274	0	153,882	75,732	87,343	26,017	5,246	5,246	0	0	5,957
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	377,278	306,313	0	156,544	0	(18,616)	140,250	0	0	0	223,677	7,779
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,517,579	1,893,786	0	639,282	1,844,902	1,796,930	423,560	39,150	37,760	0	24,869	31,291
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. TOTAL (a)	2,183,770	2,466,373	0	949,708	1,920,634	1,865,657	589,827	44,396	43,006	0	248,546	45,027
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.NC



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	4,397	4,412	0	3,042	0	0	0	0	0	0	0	444
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	5,376	5,379	0	15	0	(24)	32	0	0	0	1,065	542
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	4,710	13,826	0	3,912	401	(232)	73	0	(53)	0	1,690	475
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. TOTAL (a)	14,483	23,617	0	6,969	401	(256)	105	0	(53)	0	2,755	1,461
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.ND



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	142,461	134,383	0	74,790	48,431	66,386	20,534	3,600	3,600	0	0	2,320
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	13,402	0	350	15,748	(33,790)	2,883	100	(4,053)	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	1,093,090	1,106,600	0	120,024	0	(4)	94,099	0	0	0	367,256	17,802
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	3,231,192	4,390,693	0	892,352	2,684,225	2,740,751	729,303	114,862	112,325	0	364,336	52,622
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. TOTAL (a)	4,466,743	5,645,078	0	1,087,516	2,748,404	2,773,343	846,819	118,562	111,872	0	731,592	72,744
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

and number of persons insured under indemnity only products

19.OH



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	458,003	453,255	0	234,736	349,717	383,471	88,248	18,612	18,612	0	0	10,230
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	99,647	98,647	0	25,374	0	(126)	32,260	0	0	0	63,099	2,226
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,843,710	1,781,677	0	361,462	1,039,852	1,132,175	198,502	43,180	42,438	0	584,607	41,181
30. Warranty	2,120	3,045	0	2,329	0	1,320	1,320	0	0	0	0	47
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	2,403,480	2,336,624	0	623,901	1,389,569	1,516,840	320,330	61,792	61,050	0	647,706	53,684
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19. OK



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2017

NAIC Company Code 26565

Table with columns: Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees.

19. OR

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

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



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	223,967	216,815	0	117,050	112,476	126,779	22,589	3,571	3,571	0	0	2,689
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	221,202	226,715	0	10,829	275	217	30,408	0	0	0	66,236	2,656
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	2,269,588	1,970,517	0	631,371	949,907	1,085,824	249,719	31,153	30,846	0	148,195	27,251
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. TOTAL (a)	2,714,757	2,414,047	0	759,250	1,062,658	1,212,820	302,716	34,724	34,417	0	214,431	32,596
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.PA



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	10,415	10,821	0	5,155	1,780	2,137	357	200	200	0	0	61
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	1,777	1,753	0	755	0	(1,960)	323	0	0	0	1,150	10
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	245,431	528,983	0	31,552	278,000	321,058	54,449	91,986	87,847	0	600	1,445
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. TOTAL (a)	257,623	541,557	0	37,462	279,780	321,235	55,129	92,186	88,047	0	1,750	1,516
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.RI



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	243,733	222,602	0	131,396	54,875	85,212	36,238	4,600	4,600	0	0	11,228
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	26,911	26,829	0	11,608	0	446	6,453	0	0	0	15,207	1,240
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	841,241	900,754	0	66,087	617,630	669,892	159,223	3,658	3,645	0	57,119	38,754
30. Warranty	880	733	0	868	0	303	303	0	0	0	0	41
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	1,112,765	1,150,918	0	209,959	672,505	755,853	202,217	8,258	8,245	0	72,326	51,263
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.SC



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2017

NAIC Company Code 26565

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc.

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

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

19.SD



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	354,515	325,598	0	183,651	156,016	184,351	45,743	9,000	9,000	0	78	11,102
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	311,740	247,719	0	142,017	0	2,787	66,716	0	0	0	177,417	9,762
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	1,083,010	1,600,455	0	1,405,575	1,277,194	1,203,698	393,406	16,988	16,666	0	284,975	33,915
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. TOTAL (a)	1,749,265	2,173,772	0	1,731,243	1,433,210	1,390,836	505,865	25,988	25,666	0	462,470	54,779
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.TN



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	115,201,774	79,818,179	0	168,509,592	43,113,854	49,866,552	10,828,690	1,595,016	1,483,709	0	0	2,716,812
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	479,513	545,080	0	147,504	0	(17,668)	193,239	0	0	0	302,649	11,309
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	13,742,204	13,640,204	0	2,585,323	7,783,548	8,140,152	1,848,506	310,849	307,370	0	3,341,570	324,084
30. Warranty	27,760	39,496	0	29,358	0	17,274	17,274	0	0	0	0	655
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	129,451,251	94,042,959	0	171,271,777	50,897,402	58,006,310	12,887,709	1,905,865	1,791,079	0	3,644,219	3,052,860
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.TX



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2017

NAIC Company Code 26565

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc.

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

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

19.UT



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	57,438	52,030	0	31,695	18,143	21,679	3,644	1,000	1,000	0	0	1,352
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	7,958	7,968	0	23	0	(1,179)	2,932	0	0	0	1,442	187
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	517,381	539,072	0	67,407	295,383	318,164	74,793	33,149	32,383	0	200,520	12,177
30. Warranty	40	113	0	68	0	50	50	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	0
35. TOTAL (a)	582,817	599,183	0	99,193	313,526	338,714	81,419	34,149	33,383	0	201,962	13,717
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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 \$

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

19.VT



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2017

NAIC Company Code 26565

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	185,150	178,292	0	93,144	96,909	96,728	30,270	6,199	6,199	0	0	4,346
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium (b)												
16. Workers' compensation												
17.1 Other liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability-Claims-Made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)												
23. Fidelity												
24. Surety	43,462	44,563	0	5,093	0	(4,534)	19,167	0	0	0	19,914	1,020
26. Burglary and theft												
27. Boiler and machinery												
28. Credit	2,230,871	1,664,133	0	1,469,318	1,375,887	1,448,725	357,682	41,146	40,930	0	289,107	52,370
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. TOTAL (a)	2,459,483	1,886,988	0	1,567,555	1,472,796	1,540,919	407,119	47,345	47,129	0	309,021	57,736
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
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

19.VA

(a) Finance and service charges not included in Lines 1 to 35 \$ and number of persons insured under indemnity only products

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



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2017

NAIC Company Code 26565

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc.

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

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

19.WA



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2017

NAIC Company Code 26565

Table with columns: Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees.

19.WV

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

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



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2017

NAIC Company Code 26565

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc.

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

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

19.WI



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2017

NAIC Company Code 26565

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc.

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

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

19.WY



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Consolidated

DURING THE YEAR 2017

NAIC Company Code 26565

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied lines, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril, Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health, Credit A & H, Collectively renewable A & H, Non-cancelable A & H, Guaranteed renewable A & H, Non-renewable for stated reasons only, Other accident only, Medicare Title XVIII, All other A & H, Federal Employees Health Benefits Plan premium, Workers' compensation, Other liability-Occurrence, Other Liability-Claims-Made, Excess workers' compensation, Products liability, Private passenger auto no-fault, Other private passenger auto liability, Commercial auto no-fault, Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft, Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, Warranty, Aggregate write-ins for other lines of business, TOTAL (a), and DETAILS OF WRITE-INS (3401-3498).

(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

19.GT

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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							
Other U.S. Unaffiliated Insurers														
87-0363183	39551	CONTINENTAL HERITAGE INS CO	FL	146			0		63					
36-2467238	12750	EVERGREEN NATL IND CO	OH	4,534			0	387	1,438					
20-8251511	12870	SENTRUITY CAS CO	TX	(366)		277	277	0	234					
0999999 - Total Other U.S. Unaffiliated Insurers				4,314	0	277	277	0	387	1,735	0	0	0	0
Other Non-U.S. Insurers														
AA-5780030	00000	DEVES INS CO LTD	THA				0							
9999999 Totals				4,314	0	277	277	0	387	1,735	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17]	19 Funds Held By Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers				
Authorized - Other U.S. Unaffiliated Insurers																				
36-2467238	12750	EVERGREEN NATL IND CO	OH		2,532					961				1,081		2,042	151		1,891	0
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers					2,532	0	0	0	0	961	0			1,081	0	2,042	151	0	1,891	0
1399999 - Total Authorized - Total Authorized					2,532	0	0	0	0	961	0			1,081	0	2,042	151	0	1,891	0
Unauthorized - Other U.S. Unaffiliated Insurers																				
20-0867830	12074	KUBOTA INS CORP	HI	2	122,572	3,766	173	2,020		9,866				172,427		188,252	7,909		180,343	388
86-0838815	15343	DRAKE PROP & CAS INS CO	AZ	2	247	0	0			0				0		5			(5)	0
20-1654390	15650	NEW WORLD RE	NV	2	821	254		15		1,470				5,656		7,395	(336)		7,731	0
20-5311574	15651	NORTHSTAR INS INC	NV		(1)	0				0				0		0			0	0
20-5357630	15653	PROCYON INS INC	NV		(1)	0				0				0		0			0	0
20-5311647	15654	SEMINOLE INSURANCE INC	NV		(1)	0				0				0		0			0	0
20-5311602	15655	SOUTHSTAR INS INC	NV		(1)	0				0				0		0			0	0
2299999 - Total Unauthorized - Other U.S. Unaffiliated Insurers					123,636	4,020	173	2,035	0	11,336	0			178,083	0	195,647	7,578	0	188,069	388
Unauthorized - Other non-U.S. Insurers																				
AA-0053249	00000	AMERICAN RISK SERV REINS CO LTD	TCA	2	27,385	3,626	93	429		975				0		5,123	2,914		2,209	5,092
AA-0040087	00000	CASTLETON FINANCIAL INS CO LTD	VGB	2	1,165	168	5	34		70				0		277	69		208	279
AA-0052910	00000	Tallgrass Ins Co Ltd	TCA	2	7,266	217	6	0		1,402				0		1,625	185		1,440	1,562
2599999 - Total Unauthorized - Other Non-U.S. Insurers					35,816	4,011	104	463	0	2,447	0			0		7,025	3,168	0	3,857	6,933
2699999 - Total Unauthorized - Total Unauthorized					159,452	8,031	277	2,498	0	13,783	0			178,083	0	202,672	10,746	0	191,926	7,321
4099999 - Total Authorized, Unauthorized and Certified					161,984	8,031	277	2,498	0	14,744	0			179,164	0	204,714	10,897	0	193,817	7,321
9999999 Totals					161,984	8,031	277	2,498	0	14,744	0			179,164	0	204,714	10,897	0	193,817	7,321

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. Evergreen National Indemnity Company	50.000	2,532
2. Castleton Financial Ins Co LTD	20.000	1,165
3. New World RE	15.000	821
4. Tallgrass Ins Co Ltd	7.500	7,266
5. American Risk Services Reins LTD	6.000	27,385

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. Kubota Ins. Corp	188,252	122,572	Yes [] No [X]
2. New World Re	7,395	821	Yes [] No [X]
3. American Risk Serv. Reins. LTD	5,123	27,385	Yes [] No [X]
4. Evergreen Natl Ind.Co	2,042	2,532	Yes [] No [X]
5. Tallgrass Ins. Co. LTD	1,625	7,266	Yes [] No [X]

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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							11 Total Due Cols. 5 + 10	12 Percentage Overdue Col. 10/Col. 11	13 Percentage More Than 120 Days Overdue Col. 9/ Col. 11
				5 Current	Overdue					10 Total Overdue Cols. 6 + 7 + 8 + 9			
					6 1 to 29 Days	7 30 - 90 Days	8 91 - 120 Days	9 Over 120 Days	10				
Unauthorized - Other U.S. Unaffiliated Insurers													
20-0867830	12074	KUBOTA INS CORP	HI	3,939	0	0	0	0	0	0	3,939	0.0	0.0
86-0838815	15343	DRAKE PROP & CAS INS CO	AZ	0	0	0	0	0	0	0	0	0.0	0.0
20-1654390	15650	NEW WORLD RE	NV	254	0	0	0	0	0	0	254	0.0	0.0
20-5311574	15651	NORTHSTAR INS INC	NV	0	0	0	0	0	0	0	0	0.0	0.0
20-5357630	15653	PROCYON INS INC	NV	0	0	0	0	0	0	0	0	0.0	0.0
20-5311647	15654	SEMINOLE INSURANCE INC	NV	0	0	0	0	0	0	0	0	0.0	0.0
20-5311602	15655	SOUTHSTAR INS INC	NV	0	0	0	0	0	0	0	0	0.0	0.0
2299999 - Total Unauthorized - Other U.S. Unaffiliated Insurers				4,193	0	0	0	0	0	0	4,193	0.0	0.0
Unauthorized - Other Non-U.S. Insurers													
AA-0053249	00000	AMERICAN RISK SERV REINS CO LTD	TCA	3,719	0	0	0	0	0	0	3,719	0.0	0.0
AA-0040087	00000	CASTLETON FINANCIAL INS CO LTD	VGB	173	0	0	0	0	0	0	173	0.0	0.0
AA-0052910	00000	Tal Igrass Ins Co Ltd	TCA	223	0	0	0	0	0	0	223	0.0	0.0
2599999 - Total Unauthorized - Other Non-U.S. Insurers				4,115	0	0	0	0	0	0	4,115	0.0	0.0
2699999 - Total Unauthorized - Total Unauthorized				8,308	0	0	0	0	0	0	8,308	0.0	0.0
4099999 - Total Authorized, Unauthorized and Certified				8,308	0	0	0	0	0	0	8,308	0.0	0.0
9999999 Totals				8,308	0	0	0	0	0	0	8,308	0.0	0.0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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	Domiciliary Jurisdiction	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 Column 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)
Other U.S. Unaffiliated Insurers																		
20-0867830	12074	KUBOTA INS CORP	HI	2	188,252	388	189,390		7,909	0	0	188,252	0	0	0	0	0	0
86-0838815	15343	DRAKE PROP & CAS INS CO	AZ	2	0	0	0		5	0	0	0	0	0	0	0	0	0
20-1654390	15650	NEW WORLD RE	NV	2	7,395	0	0		(336)	0	8,244	7,395	0	0	0	0	0	0
20-5311574	15651	NORTHSTAR INS INC	NV		0	0	0		0	0	0	0	0	0	0	0	0	0
20-5357630	15653	PROCYON INS INC	NV		0	0	0		0	0	0	0	0	0	0	0	0	0
20-5311647	15654	SEMINOLE INSURANCE INC	NV		0	0	0		0	0	0	0	0	0	0	0	0	0
20-5311602	15655	SOUTHSTAR INS INC	NV		0	0	0		0	0	0	0	0	0	0	0	0	0
0999999 - Total Other U.S. Unaffiliated Insurers					195,647	388	189,390	XXX	7,578	0	8,244	195,647	0	0	0	0	0	0
Other Non-U.S. Insurers																		
AA-0053249	00000	AMERICAN RISK SERV REINS CO LTD	TCA		5,123	5,092	0		2,914			5,123	0	0	0	0	0	0
AA-0040087	00000	CASTLETON FINANCIAL INS CO LTD	VGB		277	279	0		69			277	0	0	0	0	0	0
AA-0052910	00000	Tallgrass Ins Co Ltd	TCA		1,625	1,562	0		185			1,625	0	0	0	0	0	0
1299999 - Total Other Non-U.S. Insurers					7,025	6,933	0	XXX	3,168	0	0	7,025	0	0	0	0	0	0
1399999 - Total Affiliates and Others					202,672	7,321	189,390	XXX	10,746	0	8,244	202,672	0	0	0	0	0	0
9999999 Totals					202,672	7,321	189,390	XXX	10,746	0	8,244	202,672	0	0	0	0	0	0

24

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

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

(a)	Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
	001	1	122041594	Sumitoma Mitsui Banking Corporation	164,128
	001	1	026010090	Sumitomo Mitsui Trust Bank	25,262

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

SCHEDULE F - PART 8

Provision for Overdue Reinsurance as of December 31, Current Year

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Reinsurance Recoverable All Items	5 Funds Held By Company Under Reinsurance Treaties	6 Letters of Credit	7 Ceded Balances Payable	8 Other Miscellaneous Balances	9 Other Allowed Offset Items	10 Sum of Cols. 5 through 9 but not in Excess of Col. 4	11 Col. 4 minus Col. 10	12 Greater of Col. 11 or Schedule F - Part 4 Cols. 8 + 9
Provision for Overdue Reinsurance											
20-0867830	12074	KUBOTA INS CORP	188,252	388	189,390	7,909	0	0	188,252	0	0
86-0838815	15343	DRAKE PROP & CAS INS CO	0	0	0	5	0	0	0	0	0
20-1654390	15650	NEW WORLD RE	7,395	0	0	(336)	0	8,244	7,395	0	0
20-5311574	15651	NORTHSTAR INS INC	0	0	0	0	0	0	0	0	0
20-5357630	15653	PROCYON INS INC	0	0	0	0	0	0	0	0	0
20-5311647	15654	SEMINOLE INSURANCE INC	0	0	0	0	0	0	0	0	0
20-5311602	15655	SOUTHSTAR INS INC	0	0	0	0	0	0	0	0	0
AA-0053249	00000	AMERICAN RISK SERV REINS CO LTD	5,123	5,092	0	2,914	0	0	5,123	0	0
AA-0040087	00000	CASTLETON FINANCIAL INS CO LTD	277	279	0	69	0	0	277	0	0
AA-0052910	00000	Tal Igrass Ins Co Ltd	1,625	1,562	0	185	0	0	1,625	0	0
9999999 Totals			202,672	7,321	189,390	10,746	0	8,244	202,672	0	0

1. Total	0
2. Line 1 x .20	0
3. Schedule F - Part 7 Col. 11	0
4. Provision for Overdue Authorized Reinsurance (Lines 2 + 3)	0
5. Provision for Reinsurance Ceded to Unauthorized Reinsurers (Schedule F - Part 5, Col. 19 x 1000)	0
6. Provision for Reinsurance Ceded to Certified Reinsurers (Schedule F, Part 6, Section 1, Col. 21 x 1000)	0
7. Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Schedule F, Part 6, Section 2, Col. 15 x 1000)	0
8. Provision for Reinsurance (sum Lines 4 + 5 + 6 + 7) (Enter this amount on Page 3, Line 16)	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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)	124,185,140		124,185,140
2. Premiums and considerations (Line 15)	17,097,556		17,097,556
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	8,307,625	(8,307,625)	0
4. Funds held by or deposited with reinsured companies (Line 16.2)	0		0
5. Other assets	2,918,834	187,105,930	190,024,764
6. Net amount recoverable from reinsurers		0	0
7. Protected cell assets (Line 27)	0		0
8. Totals (Line 28)	152,509,155	178,798,305	331,307,460
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	19,024,092	17,243,083	36,267,175
10. Taxes, expenses, and other obligations (Lines 4 through 8)	4,731,174		4,731,174
11. Unearned premiums (Line 9)	56,854,690	179,772,290	236,626,980
12. Advance premiums (Line 10)	0		0
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)	10,896,876	(10,896,876)	0
15. Funds held by company under reinsurance treaties (Line 13)	7,320,192	(7,320,192)	0
16. Amounts withheld or retained by company for account of others (Line 14)	6,231,250		6,231,250
17. Provision for reinsurance (Line 16)	0		0
18. Other liabilities	1,988,268		1,988,268
19. Total liabilities excluding protected cell business (Line 26)	107,046,542	178,798,305	285,844,847
20. Protected cell liabilities (Line 27)	0		0
21. Surplus as regards policyholders (Line 37)	45,462,613	X X X	45,462,613
22. Totals (Line 38)	152,509,155	178,798,305	331,307,460

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 [X]

If yes, give full explanation:

Schedule H - Part 1

NONE

Schedule H - Part 2

NONE

Schedule H - Part 3

NONE

Schedule H - Part 4

NONE

Schedule H - Part 5 - Health Claims

NONE

Schedule P - Part 1A - Home/Farm

NONE

Schedule P - Part 1B - Private Passenger

NONE

Schedule P - Part 1C - Comm Auto/Truck

NONE

Schedule P - Part 1D - Workers' Comp

NONE

Schedule P - Part 1E - Comm Multi Peril

NONE

Schedule P - Part 1F - Med Pro Liab Occ

NONE

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. 2008	0	0	0	0	0	0	0	0	0	0	0	0
3. 2009	0	0	0	0	0	0	0	0	0	0	0	0
4. 2010	0	0	0	0	0	0	0	0	0	0	0	0
5. 2011	0	0	0	0	0	0	0	0	0	0	0	0
6. 2012	0	0	0	0	0	0	0	0	0	0	0	0
7. 2013	0	0	0	0	0	0	0	0	0	0	0	0
8. 2014	0	0	0	0	0	0	0	0	0	0	0	0
9. 2015	0	0	0	0	0	0	0	0	0	0	0	0
10. 2016	0	0	0	0	0	0	0	0	0	0	0	0
11. 2017	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.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	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.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	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. 2008	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2009	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2010	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2011	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2012	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2013	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2014	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2015	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2016	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2017	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.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	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.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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. 2008	33,211	6,469	26,742	21,416	3,866	707	19	250	0	460	18,488	9,556
3. 2009	23,508	7,148	16,360	16,942	1,419	277	(1)	182	0	261	15,983	8,754
4. 2010	23,487	2,670	20,817	11,669	1,034	313	(1)	172	0	409	11,121	6,380
5. 2011	22,621	3,072	19,549	8,211	746	275	(1)	145	0	308	7,886	4,550
6. 2012	20,315	2,863	17,452	5,998	1,841	228	1	204	0	338	4,588	3,386
7. 2013	18,526	4,175	14,351	4,444	1,550	231	12	232	0	119	3,345	2,820
8. 2014	3,073	0	3,073	1,050	0	129	0	20	0	1	1,199	1,299
9. 2015	2,027	0	2,027	1,042	0	101	0	7	0	1	1,150	1,517
10. 2016	895	0	895	543	0	0	0	1	0	0	544	1,024
11. 2017	39	0	39	12	0	0	0	0	0	0	12	48
12. Totals	XXX	XXX	XXX	71,327	10,456	2,261	29	1,213	0	1,897	64,316	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.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	0	0	3	0	0	0	0	0	0	0	0	3	0
12.	0	0	3	0	0	0	0	0	0	0	0	3	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.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	22,373	3,885	18,488	67.4	60.1	69.1	0	0	0.0	0	0
3.	17,401	1,418	15,983	74.0	19.8	97.7	0	0	0.0	0	0
4.	12,154	1,033	11,121	51.7	38.7	53.4	0	0	0.0	0	0
5.	8,631	745	7,886	38.2	24.3	40.3	0	0	0.0	0	0
6.	6,430	1,842	4,588	31.7	64.3	26.3	0	0	0.0	0	0
7.	4,907	1,562	3,345	26.5	37.4	23.3	0	0	0.0	0	0
8.	1,199	0	1,199	39.0	0.0	39.0	0	0	0.0	0	0
9.	1,150	0	1,150	56.7	0.0	56.7	0	0	0.0	0	0
10.	544	0	544	60.8	0.0	60.8	0	0	0.0	0	0
11.	15	0	15	38.5	0.0	38.5	0	0	0.0	3	0
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	3	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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. 2008	0	0	0	0	0	0	0	0	0	0	0	0
3. 2009	0	0	0	0	0	0	0	0	0	0	0	0
4. 2010	0	0	0	0	0	0	0	0	0	0	0	0
5. 2011	0	0	0	0	0	0	0	0	0	0	0	0
6. 2012	0	0	0	0	0	0	0	0	0	0	0	0
7. 2013	0	0	0	0	0	0	0	0	0	0	0	0
8. 2014	0	0	0	0	0	0	0	0	0	0	0	0
9. 2015	0	0	0	0	0	0	0	0	0	0	0	0
10. 2016	0	0	0	0	0	0	0	0	0	0	0	0
11. 2017	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.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	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.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

**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	24	24	4	4	0	0	26	0	XXX
2. 2016	72,140	71,853	287	42,162	42,116	1,872	1,872	414	0	97	460	XXX
3. 2017	87,188	86,802	386	43,628	43,318	1,554	1,554	239	0	214	549	XXX
4. Totals	XXX	XXX	XXX	85,814	85,458	3,430	3,430	653	0	337	1,009	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.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2,036	2,020	9,867	9,867	0	0	0	0	108	0	52	124	458
4.	2,036	2,020	9,867	9,867	0	0	0	0	108	0	52	124	458

	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.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	44,448	43,988	460	61.6	61.2	160.3	0	0	0.0	0	0
3.	57,432	56,759	673	65.9	65.4	174.4	0	0	0.0	16	108
4.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	16	108

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	14	0	0	0	0	0	1	14	XXX
2. 2016	8,257	34	8,223	3,600	49	118	0	35	0	58	3,704	1,588
3. 2017	11,302	35	11,267	3,818	32	171	0	21	0	59	3,978	2,420
4. Totals	XXX	XXX	XXX	7,432	81	289	0	56	0	118	7,696	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.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	466	0	1,014	13	0	0	0	0	9	0	1	1,476	216
4.	466	0	1,014	13	0	0	0	0	9	0	1	1,476	216

	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.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	3,753	49	3,704	45.5	144.1	45.0	0	0	0.0	0	0
3.	5,499	45	5,454	48.7	128.6	48.4	0	0	0.0	1,467	9
4.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,467	9

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2016	13,237	2,688	10,549	0	0	0	0	26	0	0	26	XXX
3. 2017	11,782	2,376	9,406	0	0	0	0	14	0	0	14	XXX
4. Totals	XXX	XXX	XXX	0	0	0	0	40	0	0	40	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	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded					
1.	0	0	1,293	406	0	0	0	0	0	0	0	887	0
2.	0	0	1,177	293	0	0	0	0	0	0	0	884	0
3.	0	0	1,118	254	0	0	0	0	6	0	0	870	0
4.	0	0	3,588	953	0	0	0	0	6	0	0	2,641	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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	887	0
2.	1,203	293	910	9.1	10.9	8.6	0	0	0.0	884	0
3.	1,138	254	884	9.7	10.7	9.4	0	0	0.0	864	6
4.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	2,635	6

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						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	56	(35)	112	1	0	0	104	202	XXX
2. 2016	95,855	33,917	61,938	59,387	22,454	2,314	340	296	0	1,757	39,203	XXX
3. 2017	120,720	37,915	82,805	54,657	18,975	2,236	329	223	0	794	37,812	XXX
4. Totals	XXX	XXX	XXX	114,100	41,394	4,662	670	519	0	2,655	77,217	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.	2	0	2	0	0	0	0	0	0	0	0	4	0
2.	23	0	197	0	0	0	0	0	0	0	3	220	0
3.	4,704	478	14,108	3,904	0	0	0	0	100	0	251	14,530	1,884
4.	4,729	478	14,307	3,904	0	0	0	0	100	0	254	14,754	1,884

	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.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	4	0
2.	62,217	22,794	39,423	64.9	67.2	63.6	0	0	0.0	220	0
3.	76,028	23,686	52,342	63.0	62.5	63.2	0	0	0.0	14,430	100
4.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	14,654	100

Schedule P - Part 1M - International

NONE

Schedule P - Part 1N - Reinsurance

NONE

Schedule P - Part 1O - Reinsurance

NONE

Schedule P - Part 1P - Reinsurance

NONE

Schedule P - Part 1R - Prod Liab Occur

NONE

Schedule P - Part 1R - Prod Liab Claims

NONE

Schedule P - Part 1S-Fin./Mtg. Guaranty

NONE

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 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. 2016	84	18	66	0	0	0	0	0	0	0	0	0
3. 2017	89	26	63	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.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	27	0	0	0	0	0	0	0	0	27	0
4.	0	0	27	0	0	0	0	0	0	0	0	27	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.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	27	0	27	30.3	0.0	42.9	0	0	0.0	27	0
4.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	27	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	11 One Year	12 Two Year
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.XXX
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.XXX	.XXX
12. Totals											0	0

NONE

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.XXX
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.XXX	.XXX
12. Totals											0	0

NONE

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.XXX
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.XXX	.XXX
12. Totals											0	0

NONE

**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. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.XXX
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.XXX	.XXX
12. Totals											0	0

NONE

SCHEDULE P - PART 2E- COMMERCIAL MULTIPLE PERIL

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.XXX
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.XXX	.XXX
12. Totals											0	0

NONE

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

**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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	One Year	Two Year
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX
12. Totals											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. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX
12. Totals											0	0

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX
12. Totals											0	0

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

1. Prior	.750	.700	.796	.806	.804	.802	.802	.802	.802	.802	.802	.0	.0
2. 2008	19,898	18,221	18,214	18,232	18,240	18,238	18,238	18,238	18,238	18,238	18,238	.0	.0
3. 2009	XXX	14,693	15,057	15,974	15,801	15,801	15,801	15,801	15,801	15,801	15,801	.0	.0
4. 2010	XXX	XXX	11,215	9,457	10,949	10,949	10,949	10,949	10,949	10,949	10,949	.0	.0
5. 2011	XXX	XXX	XXX	9,747	8,106	7,766	7,741	7,741	7,741	7,741	7,741	.0	.0
6. 2012	XXX	XXX	XXX	XXX	6,637	4,688	4,384	4,384	4,384	4,384	4,384	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	4,849	3,111	3,113	3,113	3,113	3,113	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	1,500	1,179	1,179	1,179	1,179	.0	.0
9. 2015	XXX	1,232	1,150	1,143	(7)	(89)							
10. 2016	XXX	860	543	(317)	XXX								
11. 2017	XXX	15	XXX	XXX									
12. Totals											(324)	(89)	

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	XXX
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX	.0
12. Totals											0	0	

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	11 One Year	12 Two Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	96	7	7	0	(89)
2. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	49	46	(3)	XXX
3. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	326	XXX	XXX
4. Totals											(3)	(89)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	1,005	705	684	(21)	(321)						
2. 2016	XXX	3,743	3,669	(74)	XXX							
3. 2017	XXX	XXX	5,424	XXX	XXX							
4. Totals											(95)	(321)

SCHEDULE P - PART 2K - FIDELITY, SURETY

1. Prior	XXX	2,740	1,763	887	(876)	(1,853)						
2. 2016	XXX	1,020	884	(136)	XXX							
3. 2017	XXX	XXX	864	XXX	XXX							
4. Totals											(1,012)	(1,853)

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

1. Prior	XXX	9,924	7,929	7,672	(257)	(2,252)						
2. 2016	XXX	37,750	39,127	1,377	XXX							
3. 2017	XXX	XXX	52,019	XXX	XXX							
4. Totals											1,120	(2,252)

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior	0	0	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

NONE

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

**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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	11 One Year	12 Two Year
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.XXX
11. 2017	.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	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.XXX
11. 2017	.XXX	.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	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.XXX
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.XXX	.XXX
12. Totals											0	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	11 One Year	12 Two Year
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX
12. Totals											0	0

NONE

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. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX
12. Totals											0	0

NONE

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

1. Prior	XXX	.0	.0	.0	.0	.0						
2. 2016	XXX	.0	.0	.0	XXX							
3. 2017	XXX	.0	XXX	XXX								
4. Totals											0	0

NONE

SCHEDULE P - PART 2T - WARRANTY

1. Prior	XXX	.27	.0	.0	.0	(27)						
2. 2016	XXX	.27	.0	(27)	XXX							
3. 2017	XXX	.27	XXX	XXX								
4. Totals											(27)	(27)

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

SCHEDULE P - PART 3A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11	12	
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment	
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017			
1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0

NONE

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

1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0

NONE

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

1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0

NONE

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

1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0

NONE

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017		
1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0

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. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0

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. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.XXX	.XXX
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.XXX	.XXX
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.XXX	.XXX
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.XXX	.XXX
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.XXX	.XXX
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.XXX	.XXX

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

1. Prior	.000	.693	.795	.806	.804	.802	.802	.802	.802	.802	.802	(12,825)	3,058
2. 2008	19,219	18,144	18,213	18,232	18,240	18,238	18,238	18,238	18,238	18,238	18,238	8,261	1,295
3. 2009	.XXX	11,543	14,875	15,782	15,801	15,801	15,801	15,801	15,801	15,801	15,801	7,772	982
4. 2010	.XXX	.XXX	7,447	8,985	10,949	10,949	10,949	10,949	10,949	10,949	10,949	5,510	870
5. 2011	.XXX	.XXX	.XXX	5,893	7,738	7,741	7,741	7,741	7,741	7,741	7,741	3,965	585
6. 2012	.XXX	.XXX	.XXX	.XXX	3,665	4,384	4,384	4,384	4,384	4,384	4,384	2,851	535
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	3,013	3,111	3,113	3,113	3,113	3,113	2,270	550
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	756	1,179	1,179	1,179	1,179	873	426
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	989	1,143	1,143	1,143	1,030	487
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	539	543	543	749	275
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	12	33	15

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. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

**SCHEDULE P - PART 3I - SPECIAL PROPERTY
(FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017		
1. Prior	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.000	.7	.7	.XXX	.XXX
2. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.46	.46	.XXX	.XXX
3. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.310	.XXX	.XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior	.XXX	.000	.670	.684	.0	.0						
2. 2016	.XXX	.2,391	.3,669	.1,090	.498							
3. 2017	.XXX	.3,957	.1,695	.509								

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior	.XXX	.000	.0	.0	.XXX	.XXX						
2. 2016	.XXX	.0	.0	.XXX	.XXX							
3. 2017	.XXX	.0	.XXX	.XXX								

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

1. Prior	.XXX	.000	.7,466	.7,668	.XXX	.XXX						
2. 2016	.XXX	.26,652	.38,907	.XXX	.XXX							
3. 2017	.XXX	.37,589	.XXX	.XXX								

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.XXX	.XXX
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.XXX	.XXX
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.XXX	.XXX
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.XXX	.XXX
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.XXX	.XXX
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.XXX	.XXX
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.XXX	.XXX

NONE

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

**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	12	
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment	
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017			
1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	XXX	XXX
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	XXX	XXX
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	XXX	XXX
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	XXX	XXX
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	0	XXX	XXX

**SCHEDULE P - PART 3O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	XXX	XXX
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	XXX	XXX
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	XXX	XXX
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	XXX	XXX
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	0	XXX	XXX

**SCHEDULE P - PART 3P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
3. 2009	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
4. 2010	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
5. 2011	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
6. 2012	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
7. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	.0	XXX	XXX
8. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	.0	XXX	XXX
9. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	.0	XXX	XXX
10. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	.0	.0	XXX	XXX
11. 2017	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.0	0	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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	12	
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment	
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017			
1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0

NONE

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

1. Prior	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0

NONE

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

1. Prior	XXX	.000	.0	.0	XXX	XXX						
2. 2016	XXX	.0	.0	XXX	XXX							
3. 2017	XXX	XXX	0	XXX	XXX							

NONE

SCHEDULE P - PART 3T - WARRANTY

1. Prior	XXX	.000	.0	.0	.0	.0						
2. 2016	XXX	.0	.0	.0	.0							
3. 2017	XXX	XXX	0	0	.0							

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity 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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

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

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

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

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

SCHEDULE P - PART 4D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	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. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	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. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior	747	7	1	0	0	0	0	0	0	0
2. 2008	3,540	76	1	0	0	0	0	0	0	0
3. 2009	XXX	2,905	10	12	0	0	0	0	0	0
4. 2010	XXX	XXX	3,455	473	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	3,648	366	22	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	2,746	291	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	1,578	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	734	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	157	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	139	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3

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

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

**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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.96	.0	.0
2. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
3. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	.494	.0	.0						
2. 2016	XXX	.585	.0							
3. 2017	XXX	XXX	1,001							

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior	XXX	2,740	1,763	.887						
2. 2016	XXX	1,020	.884							
3. 2017	XXX	XXX	.864							

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

1. Prior	XXX	7,007	.289	.2						
2. 2016	XXX	6,381	.197							
3. 2017	XXX	XXX	10,204							

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	.0	.0	.0						
6. 2012	XXX	.0	.0	.0						
7. 2013	XXX	.0	.0	.0						
8. 2014	XXX	.0	.0	.0						
9. 2015	XXX	.0	.0	.0						
10. 2016	XXX	.0	.0							
11. 2017	XXX	0								

NONE

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

**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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017							
1. Prior	0	0	0	0	0	0	0	0	0	0							
2. 2008	0	0	0	0	0	0	0	0	0	0							
3. 2009	XXX	0	0	0	0	0	0	0	0	0							
4. 2010	XXX	XXX	0	NONE							0	0					
5. 2011	XXX	XXX	XXX								0	0	0	0	0	0	
6. 2012	XXX	XXX	XXX								XXX	0	0	0	0	0	
7. 2013	XXX	XXX	XXX								XXX	XXX	0	0	0	0	
8. 2014	XXX	XXX	XXX								XXX	XXX	XXX	0	0	0	
9. 2015	XXX	XXX	XXX								XXX	XXX	XXX	XXX	0	0	
9. 2016	XXX	XXX	XXX								XXX	XXX	XXX	XXX	XXX	0	
11. 2017	XXX	XXX	XXX								XXX	XXX	XXX	XXX	XXX	XXX	0

**SCHEDULE P - PART 4O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior	0	0	0	0	0	0	0	0	0	0							
2. 2008	0	0	0	0	0	0	0	0	0	0							
3. 2009	XXX	0	0	0	0	0	0	0	0	0							
4. 2010	XXX	XXX	0	NONE							0	0					
5. 2011	XXX	XXX	XXX								0	0	0	0	0	0	
6. 2012	XXX	XXX	XXX								XXX	0	0	0	0	0	
7. 2013	XXX	XXX	XXX								XXX	XXX	0	0	0	0	
8. 2014	XXX	XXX	XXX								XXX	XXX	XXX	0	0	0	
9. 2015	XXX	XXX	XXX								XXX	XXX	XXX	XXX	0	0	
9. 2016	XXX	XXX	XXX								XXX	XXX	XXX	XXX	XXX	0	
11. 2017	XXX	XXX	XXX								XXX	XXX	XXX	XXX	XXX	XXX	0

**SCHEDULE P - PART 4P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

1. Prior	0	0	0	0	0	0	0	0	0	0							
2. 2008	0	0	0	0	0	0	0	0	0	0							
3. 2009	XXX	0	0	0	0	0	0	0	0	0							
4. 2010	XXX	XXX	0	NONE							0	0					
5. 2011	XXX	XXX	XXX								0	0	0	0	0	0	
6. 2012	XXX	XXX	XXX								XXX	0	0	0	0	0	
7. 2013	XXX	XXX	XXX								XXX	XXX	0	0	0	0	
8. 2014	XXX	XXX	XXX								XXX	XXX	XXX	0	0	0	
9. 2015	XXX	XXX	XXX								XXX	XXX	XXX	XXX	0	0	
9. 2016	XXX	XXX	XXX								XXX	XXX	XXX	XXX	XXX	0	
11. 2017	XXX	XXX	XXX								XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	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. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

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

1. Prior	XXX	0	0	0						
2. 2016	XXX	0	0							
3. 2017	XXX	0								

NONE

SCHEDULE P - PART 4T - WARRANTY

1. Prior	XXX	27	0	0						
2. 2016	XXX	27	0							
3. 2017	XXX	27								

Schedule P - Part 5A- SN1

NONE

Schedule P - Part 5A- SN2

NONE

Schedule P - Part 5A- SN3

NONE

Schedule P - Part 5B- SN1

NONE

Schedule P - Part 5B- SN2

NONE

Schedule P - Part 5B- SN3

NONE

Schedule P - Part 5C- SN1

NONE

Schedule P - Part 5C- SN2

NONE

Schedule P - Part 5C- SN3

NONE

Schedule P - Part 5D- SN1

NONE

Schedule P - Part 5D- SN2

NONE

Schedule P - Part 5D- SN3

NONE

Schedule P - Part 5E- SN1

NONE

Schedule P - Part 5E- SN2

NONE

Schedule P - Part 5E- SN3

NONE

Schedule P - Part 5F- SN1A

NONE

Schedule P - Part 5F- SN2A

NONE

Schedule P - Part 5F- SN3A

NONE

Schedule P - Part 5F- SN1B

NONE

Schedule P - Part 5F- SN2B

NONE

Schedule P - Part 5F- SN3B

NONE

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
1. Prior	1,463	4	13	3	2	0	0	0	0	0
2. 2008	7,504	8,199	8,240	8,251	8,261	8,261	8,261	8,261	8,261	8,261
3. 2009	XXX	5,706	7,338	7,763	7,772	7,772	7,772	7,772	7,772	7,772
4. 2010	XXX	XXX	3,753	4,608	5,510	5,510	5,510	5,510	5,510	5,510
5. 2011	XXX	XXX	XXX	3,041	3,965	3,965	3,965	3,965	3,965	3,965
6. 2012	XXX	XXX	XXX	XXX	2,008	2,851	2,851	2,851	2,851	2,851
7. 2013	XXX	XXX	XXX	XXX	XXX	2,154	2,270	2,270	2,270	2,270
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	873	873	873	873
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,030	1,030	1,030
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	749
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33

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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	113	0	0	0	0	0	0	0	0	0
3. 2009	XXX	152	0	16	0	0	0	0	0	0
4. 2010	XXX	XXX	258	30	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	108	0	1	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	129	4	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	109	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	7	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	49	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	88	0
11. 2017	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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
1. Prior	1,263	34	15	4	2	0	0	0	0	0
2. 2008	8,687	9,483	9,530	9,544	9,556	9,556	9,556	9,556	9,556	9,556
3. 2009	XXX	6,378	8,267	8,743	8,754	8,754	8,754	8,754	8,754	8,754
4. 2010	XXX	XXX	4,374	5,357	6,380	9,380	6,380	6,380	6,380	6,380
5. 2011	XXX	XXX	XXX	3,486	4,549	4,950	4,550	4,550	4,550	4,550
6. 2012	XXX	XXX	XXX	XXX	1,302	3,386	3,386	3,386	3,386	3,386
7. 2013	XXX	XXX	XXX	XXX	XXX	2,820	2,820	2,820	2,820	2,820
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	1,306	1,299	1,299	1,299
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,566	1,517	1,517
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	363	1,024
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	48

Schedule P - Part 5H- SN1B

NONE

Schedule P - Part 5H- SN2B

NONE

Schedule P - Part 5H- SN3B

NONE

Schedule P - Part 5R- SN1A

NONE

Schedule P - Part 5R- SN2A

NONE

Schedule P - Part 5R- SN3A

NONE

Schedule P - Part 5R- SN1B

NONE

Schedule P - Part 5R- SN2B

NONE

Schedule P - Part 5R- SN3B

NONE

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity 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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
2. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3. 2017	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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
2. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3. 2017	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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
2. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

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

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX

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

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2009	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2010	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2011	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
6. 2012	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	33,211	33,211	33,211	33,211	33,211	33,211	33,211	33,211	33,211	33,211	.0
3. 2009	XXX	23,508	23,508	23,508	23,508	23,508	23,508	23,508	23,508	23,508	.0
4. 2010	XXX	XXX	23,487	23,487	23,487	23,487	23,487	23,487	23,487	23,487	.0
5. 2011	XXX	XXX	XXX	22,621	22,621	22,621	22,621	22,621	22,621	22,621	.0
6. 2012	XXX	XXX	XXX	XXX	20,315	20,315	20,315	20,315	20,315	20,315	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	18,526	18,526	18,526	18,526	18,526	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	3,073	3,073	3,073	3,073	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	2,027	2,027	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,337	2,337	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sc P-Pt 1)	0	0	0	0	0	18,526	3,073	2,027	895	39	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2008	6,469	6,469	6,469	6,469	6,469	6,469	6,469	6,469	6,469	6,469	.0
3. 2009	XXX	7,148	7,148	7,148	7,148	7,148	7,148	7,148	7,148	7,148	.0
4. 2010	XXX	XXX	2,670	2,670	2,670	2,670	2,670	2,670	2,670	2,670	.0
5. 2011	XXX	XXX	XXX	3,072	3,072	3,072	3,072	3,072	3,072	3,072	.0
6. 2012	XXX	XXX	XXX	XXX	2,863	2,863	2,863	2,863	2,863	2,863	.0
7. 2013	XXX	XXX	XXX	XXX	XXX	4,175	4,175	4,175	4,175	4,175	.0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sc P-Pt 1)	0	0	0	0	0	4,175	0	0	0	0	XXX

Schedule P - Part 6H - SN1B

NONE

Schedule P - Part 6H - SN2B

NONE

Schedule P - Part 6M - SN1

NONE

Schedule P - Part 6M - SN2

NONE

Schedule P - Part 6N - SN1

NONE

Schedule P - Part 6N - SN2

NONE

Schedule P - Part 6O - SN1

NONE

Schedule P - Part 6O - SN2

NONE

Schedule P - Part 6R - SN1A

NONE

Schedule P - Part 6R - SN2A

NONE

Schedule P - Part 6R - SN1B

NONE

Schedule P - Part 6R - SN2B

NONE

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

**SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS
(\$'000 OMITTED)**

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	0		0.0	0		0.0
2. Private Passenger Auto Liability/Medical	0		0.0	0		0.0
3. Commercial Auto/Truck Liability/Medical	0		0.0	0		0.0
4. Workers' Compensation	0		0.0	0		0.0
5. Commercial Multiple Peril	0		0.0	0		0.0
6. Medical Professional Liability-Occurrence	0		0.0	0		0.0
7. Medical Professional Liability -Claims-Made	0		0.0	0		0.0
8. Special Liability	0		0.0	0		0.0
9. Other Liability-Occurrence	3		0.0	26		0.0
10. Other Liability-Claims-Made	0		0.0	0		0.0
11. Special Property	122		0.0	584		0.0
12. Auto Physical Damage	1,477		0.0	10,706		0.0
13. Fidelity/Surety	2,642		0.0	9,550		0.0
14. Other	14,754		0.0	77,640		0.0
15. International	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
20. Products Liability-Claims-Made	0		0.0	0		0.0
21. Financial Guaranty/Mortgage Guaranty	0		0.0	0		0.0
22. Warranty	27		0.0	50		0.0
23. Totals	19,024	0	0.0	98,556	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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	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
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

**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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SECTION 5

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

**SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS
(\$000 OMITTED)**

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	0		0.0	0		0.0
2. Private Passenger Auto Liability/Medical	0		0.0	0		0.0
3. Commercial Auto/Truck Liability/Medical	0		0.0	0		0.0
4. Workers' Compensation	0		0.0	0		0.0
5. Commercial Multiple Peril	0		0.0	0		0.0
6. Medical Professional Liability-Occurrence	0		0.0	0		0.0
7. Medical Professional Liability -Claims-Made	0		0.0	0		0.0
8. Special Liability	0		0.0	0		0.0
9. Other Liability-Occurrence	3		0.0	26		0.0
10. Other Liability-Claims-made	0		0.0	0		0.0
11. Special Property	122		0.0	584		0.0
12. Auto Physical Damage	1,477		0.0	10,706		0.0
13. Fidelity/Surety	2,642		0.0	9,550		0.0
14. Other	14,754		0.0	77,640		0.0
15. International	0		0.0	0		0.0
16. Reinsurance-Nonproportional Assumed Property	0		0.0	0		0.0
17. Reinsurance-Nonproportional Assumed Liability	0		0.0	0		0.0
18. Reinsurance-Nonproportional Assumed Financial Lines	0		0.0	0		0.0
19. Products Liability-Occurrence	0		0.0	0		0.0
20. Products Liability-Claims-Made	0		0.0	0		0.0
21. Financial Guaranty/Mortgage Guaranty	0		0.0	0		0.0
22. Warranty	27		0.0	50		0.0
23. Totals	19,024	0	0.0	98,556	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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity 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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	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 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity 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 to be included.
- 1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
 If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:
- 1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? \$
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No []
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No []
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A []
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior		
1.602	2008		
1.603	2009		
1.604	2010		
1.605	2011		
1.606	2012		
1.607	2013		
1.608	2014		
1.609	2015		
1.610	2016		
1.611	2017		
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 | \$6,732 |
6. Claim count information is reported per claim or per claimant (indicate which).CLAIM
 If not the same in all years, explain in Interrogatory 7.
- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [] No [X]
- 7.2 An extended statement may be attached.

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity Company

SCHEDULE T – PART 2
INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN

Allocated By States and Territories

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity 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)
26565	31-0620146	Ohio Indemnity Company	(9,500,000)				(6,902,363)				(16,402,363)	
00000	31-0790882	Bancinsurance Corporation	9,500,000				63,258				9,563,258	
00000	45-0481062	Ultimate Services Agency, LLC					6,839,105				6,839,105	
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Ohio Indemnity 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 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?		.....SEE EXPLANATION.....
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?		.....SEE EXPLANATION.....

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?		.....SEE EXPLANATION.....
13. Will the Financial Guaranty Insurance Exhibit be filed by March 1?		.....NO.....
14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?		.....NO.....
15. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?		.....NO.....
16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?		.....NO.....
17. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?		.....NO.....
18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?		.....SEE EXPLANATION.....
19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?		.....NO.....
20. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?		.....YES.....
21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?		.....YES.....
22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?		.....SEE EXPLANATION.....
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 partner be filed electronically with the NAIC by March 1?		.....SEE EXPLANATION.....
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?		.....SEE EXPLANATION.....
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?		.....SEE EXPLANATION.....

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

28. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?NO.....

APRIL FILING

29. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?SEE EXPLANATION.....

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 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?SEE EXPLANATION.....

Explanation:

8. None required

11. None required

12. Under 100 stockholders

13.

14.

15.

16.

17.

18. None required

19.

22. None required

23.

24.

25. None required

26. None required

27. None required

28.

29. None required

30.

31.

32.

33.

34.

35. None required

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Bar Code:

13. 
2 6 5 6 5 2 0 1 7 2 4 0 0 0 0 0

14. 
2 6 5 6 5 2 0 1 7 3 6 0 5 9 0 0 0

15. 
2 6 5 6 5 2 0 1 7 4 5 5 0 0 0 0 0

16. 
2 6 5 6 5 2 0 1 7 4 9 0 0 0 0 0 0

17. 
2 6 5 6 5 2 0 1 7 3 8 5 0 0 0 0 0

19. 
2 6 5 6 5 2 0 1 7 3 6 5 0 0 0 0 0

23. 
2 6 5 6 5 2 0 1 7 5 0 0 0 0 0 0 0

24. 
2 6 5 6 5 2 0 1 7 5 0 5 0 0 0 0 0

28. 
2 6 5 6 5 2 0 1 7 5 5 5 0 0 0 0 0

30. 
2 6 5 6 5 2 0 1 7 3 0 6 0 0 0 0 0

31. 
2 6 5 6 5 2 0 1 7 2 1 0 0 0 0 0 0

32. 
2 6 5 6 5 2 0 1 7 2 1 6 5 9 0 0 0

33. 
2 6 5 6 5 2 0 1 7 2 1 7 0 0 0 0 0

34. 
2 6 5 6 5 2 0 1 7 5 5 0 0 0 0 0 0

OVERFLOW PAGE FOR WRITE-INS

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

Assets	2
Cash Flow	5
Exhibit of Capital Gains (Losses)	12
Exhibit of Net Investment Income	12
Exhibit of Nonadmitted Assets	13
Exhibit of Premiums and Losses (State Page)	19
Five-Year Historical Data	17
General Interrogatories	15
Jurat Page	1
Liabilities, Surplus and Other Funds	3
Notes To Financial Statements	14
Overflow Page For Write-Ins	100
Schedule A – Part 1	E01
Schedule A – Part 2	E02
Schedule A – Part 3	E03
Schedule A – Verification Between Years	SI02
Schedule B – Part 1	E04
Schedule B – Part 2	E05
Schedule B – Part 3	E06
Schedule B – Verification Between Years	SI02
Schedule BA – Part 1	E07
Schedule BA – Part 2	E08
Schedule BA – Part 3	E09
Schedule BA – Verification Between Years	SI03
Schedule D – Part 1	E10
Schedule D – Part 1A – Section 1	SI05
Schedule D – Part 1A – Section 2	SI08
Schedule D – Part 2 – Section 1	E11
Schedule D – Part 2 – Section 2	E12
Schedule D – Part 3	E13
Schedule D – Part 4	E14
Schedule D – Part 5	E15
Schedule D – Part 6 – Section 1	E16
Schedule D – Part 6 – Section 2	E16
Schedule D – Summary By Country	SI04
Schedule D – Verification Between Years	SI03
Schedule DA – Part 1	E17

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule DA – Verification Between Years	SI10
Schedule DB – Part A – Section 1	E18
Schedule DB – Part A – Section 2	E19
Schedule DB – Part A – Verification Between Years	SI11
Schedule DB – Part B – Section 1	E20
Schedule DB – Part B – Section 2	E21
Schedule DB – Part B – Verification Between Years	SI11
Schedule DB – Part C – Section 1	SI12
Schedule DB – Part C – Section 2	SI13
Schedule DB – Part D – Section 1	E22
Schedule DB – Part D – Section 2	E23
Schedule DB – Verification	SI14
Schedule DL – Part 1	E24
Schedule DL – Part 2	E25
Schedule E – Part 1 – Cash	E26
Schedule E – Part 2 – Cash Equivalents	E27
Schedule E – Part 3 – Special Deposits	E28
Schedule E – Part 2 - Verification Between Years	SI15
Schedule F – Part 1	20
Schedule F – Part 2	21
Schedule F – Part 3	22
Schedule F – Part 4	23
Schedule F – Part 5	24
Schedule F – Part 6 – Section 1	25
Schedule F – Part 6 – Section 2	26
Schedule F – Part 7	27
Schedule F – Part 8	28
Schedule F – Part 9	29
Schedule H – Accident and Health Exhibit – Part 1	30
Schedule H – Part 2, Part 3, and Part 4	31
Schedule H – Part 5 – Health Claims	32
Schedule P – Part 1 – Summary	33
Schedule P – Part 1A – Homeowners/Farmowners	35
Schedule P – Part 1B – Private Passenger Auto Liability/Medical	36
Schedule P – Part 1C – Commercial Auto/Truck Liability/Medical	37
Schedule P – Part 1D – Workers’ Compensation (Excluding Excess Workers’ Compensation)	38

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

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

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule P – Part 3B – Private Passenger Auto Liability/Medical	62
Schedule P – Part 3C – Commercial Auto/Truck Liability/Medical	62
Schedule P – Part 3D – Workers’ Compensation (Excluding Excess Workers’ Compensation)	62
Schedule P – Part 3E – Commercial Multiple Peril	62
Schedule P – Part 3F – Section 1 – Medical Professional Liability – Occurrence	63
Schedule P – Part 3F – Section 2 – Medical Professional Liability – Claims-Made	63
Schedule P – Part 3G – Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	63
Schedule P – Part 3H – Section 1 – Other Liability – Occurrence	63
Schedule P – Part 3H – Section 2 – Other Liability – Claims-Made	63
Schedule P – Part 3I – Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, and Theft)	64
Schedule P – Part 3J – Auto Physical Damage	64
Schedule P – Part 3K – Fidelity/Surety	64
Schedule P – Part 3L – Other (Including Credit, Accident and Health)	64
Schedule P – Part 3M – International	64
Schedule P – Part 3N – Reinsurance – Nonproportional Assumed Property	65
Schedule P – Part 3O – Reinsurance – Nonproportional Assumed Liability	65
Schedule P – Part 3P – Reinsurance – Nonproportional Assumed Financial Lines	65
Schedule P – Part 3R – Section 1 – Products Liability – Occurrence	66
Schedule P – Part 3R – Section 2 – Products Liability – Claims-Made	66
Schedule P – Part 3S – Financial Guaranty/Mortgage Guaranty	66
Schedule P – Part 3T – Warranty	66
Schedule P – Part 4A – Homeowners/Farmowners	67
Schedule P – Part 4B – Private Passenger Auto Liability/Medical	67
Schedule P – Part 4C – Commercial Auto/Truck Liability/Medical	67
Schedule P – Part 4D – Workers’ Compensation (Excluding Excess Workers’ Compensation)	67
Schedule P – Part 4E – Commercial Multiple Peril	67
Schedule P – Part 4F – Section 1 – Medical Professional Liability – Occurrence	68
Schedule P – Part 4F – Section 2 – Medical Professional Liability – Claims-Made	68
Schedule P – Part 4G – Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	68
Schedule P – Part 4H – Section 1 – Other Liability – Occurrence	68
Schedule P – Part 4H – Section 2 – Other Liability – Claims-Made	68
Schedule P – Part 4I – Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary and Theft)	69
Schedule P – Part 4J – Auto Physical Damage	69
Schedule P – Part 4K – Fidelity/Surety	69
Schedule P – Part 4L – Other (Including Credit, Accident and Health)	69
Schedule P – Part 4M – International	69
Schedule P – Part 4N – Reinsurance – Nonproportional Assumed Property	70
Schedule P – Part 4O – Reinsurance – Nonproportional Assumed Liability	70
Schedule P – Part 4P – Reinsurance – Nonproportional Assumed Financial Lines	70
Schedule P – Part 4R – Section 1 – Products Liability – Occurrence	71
Schedule P – Part 4R – Section 2 – Products Liability – Claims-Made	71

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule P – Part 4S – Financial Guaranty/Mortgage Guaranty	71
Schedule P – Part 4T – Warranty	71
Schedule P – Part 5A – Homeowners/Farmowners	72
Schedule P – Part 5B – Private Passenger Auto Liability/Medical	73
Schedule P – Part 5C – Commercial Auto/Truck Liability/Medical	74
Schedule P – Part 5D – Workers’ Compensation (Excluding Excess Workers’ Compensation)	75
Schedule P – Part 5E – Commercial Multiple Peril	76
Schedule P – Part 5F – Medical Professional Liability – Claims-Made	78
Schedule P – Part 5F – Medical Professional Liability – Occurrence	77
Schedule P – Part 5H – Other Liability – Claims-Made	80
Schedule P – Part 5H – Other Liability – Occurrence	79
Schedule P – Part 5R – Products Liability – Claims-Made	82
Schedule P – Part 5R – Products Liability – Occurrence	81
Schedule P – Part 5T – Warranty	83
Schedule P – Part 6C – Commercial Auto/Truck Liability/Medical	84
Schedule P – Part 6D – Workers’ Compensation (Excluding Excess Workers’ Compensation)	84
Schedule P – Part 6E – Commercial Multiple Peril	85
Schedule P – Part 6H – Other Liability – Claims-Made	86
Schedule P – Part 6H – Other Liability – Occurrence	85
Schedule P – Part 6M – International	86
Schedule P – Part 6N – Reinsurance – Nonproportional Assumed Property	87
Schedule P – Part 6O – Reinsurance – Nonproportional Assumed Liability	87
Schedule P – Part 6R – Products Liability – Claims-Made	88
Schedule P – Part 6R – Products Liability – Occurrence	88
Schedule P – Part 7A – Primary Loss Sensitive Contracts	89
Schedule P – Part 7B – Reinsurance Loss Sensitive Contracts	91
Schedule P Interrogatories	93
Schedule T – Exhibit of Premiums Written	94
Schedule T – Part 2 – Interstate Compact	95
Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	96
Schedule Y – Part 1A – Detail of Insurance Holding Company System	97
Schedule Y – Part 2 – Summary of Insurer’s Transactions With Any Affiliates	98
Statement of Income	4
Summary Investment Schedule	SI01
Supplemental Exhibits and Schedules Interrogatories	99
Underwriting and Investment Exhibit Part 1	6
Underwriting and Investment Exhibit Part 1A	7
Underwriting and Investment Exhibit Part 1B	8
Underwriting and Investment Exhibit Part 2	9
Underwriting and Investment Exhibit Part 2A	10
Underwriting and Investment Exhibit Part 3	11

