



ANNUAL STATEMENT

For the Year Ended December 31, 2017

of the Condition and Affairs of the

OHIO BAR LIAB INS CO

NAIC Group Code..... 0, 0

(Current Period) (Prior Period)

Organized under the Laws of OH

Incorporated/Organized..... December 5, 1978

Statutory Home Office

NAIC Company Code..... 37176

Employer's ID Number..... 31-0947214

1650 Lake Shore Drive..... Columbus OH US 43204
(Street and Number) (City or Town, State, County and Zip Code)

Country of Domicile US

1650 Lake Shore Drive..... Columbus OH US 43204
(Street and Number) (City or Town, State, County and Zip Code)

614-488-7924

(Area Code) (Telephone Number)

Mail Address

PO Box 2708..... Columbus OH US 43216-2708
(Street and Number or P. O. Box) (City or Town, State, County and Zip Code)

614-488-7924

(Area Code) (Telephone Number)

Primary Location of Books and Records

1650 Lake Shore Drive..... Columbus OH US 43204
(Street and Number) (City or Town, State, County and Zip Code)

614-488-7924

(Area Code) (Telephone Number)

Internet Web Site Address

www.oblic.com

614-488-7924

(Area Code) (Telephone Number) (Extension)

Statutory Statement Contact

Rodney K. McGough
(Name)
rmcgough@oblic.com
(E-Mail Address)

614-488-7936

(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Steven Craig Couch	President & CEO	2. Frederick Hunker	Secretary
3. E. Ann Gabriel	Treasurer	4.	

John Stephen Stith

Name	Title
President & CEO	Chair of the Board
Treasurer	Thomas Dean Lammers

Secretary

Vice Chair of the Board

OTHER

Mary Amos Augsburger
Barbara Jean Howard
Nancy Michong Pyon
John Stephen Stith

Paula Louise Brooks
Thomas Dean Lammers
Denny L Ramey
Thomas Michael Taggart

E. Ann Gabriel
Demetries Jo Neely
Carmen Vincent Roberto
Robin Geoffrey Weaver

Andrean Renee Horton #
Frederick Leonard Oremus
Heather Gay Sowald
Linde Hurst Webb

State of..... Ohio
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.

(Signature) Steven Craig Couch	(Signature) Frederick Hunker	(Signature) E. Ann Gabriel
1. (Printed Name) President & CEO	2. (Printed Name) Secretary	3. (Printed Name) Treasurer
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This _____ day of _____ 2018

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

Yes [X] No []

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)


 * 3 7 1 7 6 2 0 1 7 4 3 0 5 9 1 0 0 *

NAIC Group Code....0 NAIC Company Code....37176

Line of Business	BUSINESS IN GRAND TOTAL DURING THE YEAR											
	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3	4	5	6	7	8	9	10	11	12	
1 Direct Premiums Written	2 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	
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. 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-cancellable 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.....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....	150,400	150,400			55,000		100,000	8,890		12,688		
17.2 Other liability-claims-made.....	8,434,010	8,213,772		3,790,994	2,001,350	1,999,128	4,528,099	1,597,892	1,489,450	1,773,477	347,026	8,276
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....												
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....												
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	8,584,410	8,364,172	0	3,790,994	2,056,350	1,999,128	4,628,099	1,606,782	1,489,450	1,786,165	347,026	8,276

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 \$.....0.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)


 * 3 7 1 7 6 2 0 1 7 4 3 0 3 6 1 0 0 *

NAIC Group Code....0 NAIC Company Code....37176

BUSINESS IN THE STATE OF OHIO DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
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. 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-cancellable 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.....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....	150,400	150,400				55,000		100,000	8,890		12,688	
17.2 Other liability-claims-made.....	8,434,010	8,213,772			3,790,994	2,001,350	1,999,128	4,528,099	1,597,892	1,489,450	1,773,477	347,026
17.3 Excess workers' compensation.....												8,276
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....												
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....												
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	3,790,994	2,056,350	0	0	0	0	0	0
35. TOTALS (a).....	8,584,410	8,364,172	0	0	3,790,994	2,056,350	1,999,128	4,628,099	1,606,782	1,489,450	1,786,165	347,026
												8,276

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 \$.....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.

Sch. F - Pt. 1
NONE

Sch. F - Pt. 2
NONE

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable on										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Col. 15-[16+17]	19 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			

Authorized Other U.S. Unaffiliated Insurers

35-2293075.	11551...	Endurance Reinsurance Corporation of America.....	DE.....		101	.....	.....	.....19	.....10	.....	.....	.....46	.....	.....75	.....9	.....	.....66	.....
22-2005057.	26921...	Everest Reinsurance Group.....	DE.....		3	.....	.....	.....1	.....1	.....	.....	.....1	.....	.....3	.....1	.....	.....2	.....
06-1481194.	10829...	Markel Global Reinsurance Company (Alterra).....	DE.....		277	.....	.....	.....52	.....26	.....	.....	.....127	.....	.....205	.....27	.....	.....178	.....
13-3138390.	42307...	Navigators Insurance Company.....	NY.....		101	.....	.....	.....19	.....10	.....	.....	.....46	.....	.....75	.....10	.....	.....65	.....
13-3031176.	38636...	Partner Reinsurance Company of the U.S.	NY.....		109	.....	.....	.....20	.....10	.....	.....	.....50	.....	.....80	.....11	.....	.....69	.....
75-1444207.	30058...	SCOR Reinsurance Company.....	NY.....		109	.....	.....	.....20	.....10	.....	.....	.....50	.....	.....80	.....11	.....	.....69	.....
13-1675535.	25364...	Swiss Reinsurance America.....	NY.....		41	.....	.....	.....8	.....4	.....	.....	.....18	.....	.....30	.....4	.....	.....26	.....
13-2918573.	42439...	Toa Reinsurance Company of America.....	DE.....		130	.....	.....	.....24	.....12	.....	.....	.....59	.....	.....95	.....12	.....	.....83	.....
47-0574325.	32603...	Berkley Insurance Company.....	DE.....		(140)	.....	.....	.....54	.....10	.....	.....	.....64	.....	.....	.....	.....	.....64	.....
0999999.	Total Authorized Other U.S. Unaffiliated Insurers.....				731	.....0	.....0	.....217	.....93	.....0	.....0	.....397	.....0	.....707	.....85	.....0	.....622	.....0

Authorized Other Non-U.S. Insurers

AA-1120158	.....	Acapella Syndicate #2014.....	GBR.....		76	.....	.....	.....14	.....7	.....	.....	.....35	.....	.....56	.....7	.....	.....49	.....
AA-1120075	.....	Ark Syndicate #4020.....	GBR.....		142	.....	.....	.....27	.....13	.....	.....	.....65	.....	.....105	.....13	.....	.....92	.....
AA-1120337	.....	Aspen Insurance UK Limited.....	GBR.....		11	.....	.....	.....2	.....1	.....	.....	.....5	.....	.....8	.....1	.....	.....7	.....
AA-1126609	.....	Atrium Syndicate #603.....	GBR.....		30	.....	.....	.....6	.....3	.....	.....	.....14	.....	.....23	.....3	.....	.....20	.....
AA-1126609	.....	Atrium Syndicate #609.....	GBR.....		30	.....	.....	.....6	.....3	.....	.....	.....14	.....	.....23	.....3	.....	.....20	.....
AA-1128623	.....	Beazley Syndicate #2623.....	GBR.....		122	.....	.....	.....23	.....12	.....	.....	.....56	.....	.....91	.....12	.....	.....79	.....
AA-1126623	.....	Beazley Syndicate #623.....	GBR.....		28	.....	.....	.....5	.....2	.....	.....	.....12	.....	.....19	.....3	.....	.....16	.....
AA-1126958	.....	Canopius Syndicate #958.....	GBR.....		1	.....	.....	.....1	.....1	.....	.....	.....1	.....	.....3	.....1	.....	.....2	.....
AA-1126004	.....	Canopius Syndicate #4444.....	GBR.....		78	.....	.....	.....15	.....7	.....	.....	.....36	.....	.....58	.....7	.....	.....51	.....
AA-1128003	.....	XL Catlin Syndicate #2003.....	GBR.....		123	.....	.....	.....23	.....11	.....	.....	.....56	.....	.....90	.....12	.....	.....78	.....
AA-1127084	.....	Chaucer Syndicate #1084.....	GBR.....		.7	.....	.....	.....1	.....1	.....	.....	.....3	.....	.....5	.....1	.....	.....4	.....
AA-1120157	.....	Dale Syndicate #1729.....	GBR.....		.5	.....	.....	.....1	.....1	.....	.....	.....2	.....	.....4	.....1	.....	.....3	.....
AA-1126435	.....	Faraday Syndicate #435.....	GBR.....		19	.....	.....	.....3	.....2	.....	.....	.....8	.....	.....13	.....2	.....	.....11	.....
AA-1340125	.....	Hannover Ruck SE.....	DEU.....		120	.....	.....	.....22	.....11	.....	.....	.....55	.....	.....88	.....11	.....	.....77	.....
AA-1126033	.....	Hiscox #0033.....	GBR.....		1	.....	.....	.....1	.....1	.....	.....	.....1	.....	.....3	.....1	.....	.....2	.....
AA-1120098	.....	Hiscox #3624.....	GBR.....		1	.....	.....	.....1	.....1	.....	.....	.....1	.....	.....3	.....1	.....	.....2	.....
AA-1126006	.....	Liberty Syndicate #4472.....	GBR.....		197	.....	.....	.....36	.....17	.....	.....	.....89	.....	.....142	.....18	.....	.....124	.....
AA-1128791	.....	MAP Syndicate #2791.....	GBR.....		.9	.....	.....	.....1	.....1	.....	.....	.....4	.....	.....6	.....1	.....	.....5	.....
AA-1120158	.....	Pembroke Managing Agency LTD #2014.....	GBR.....		.1	.....	.....	.....1	.....1	.....	.....	.....1	.....	.....3	.....1	.....	.....2	.....
AA-1120102	.....	Ren Re Syndicate #1458.....	GBR.....		95	.....	.....	.....18	.....9	.....	.....	.....44	.....	.....71	.....8	.....	.....63	.....
AA-1126004	.....	RJ Kiln Syndicate #510.....	GBR.....		16	.....	.....	.....3	.....1	.....	.....	.....7	.....	.....11	.....1	.....	.....10	.....
AA-1460023	.....	Tokio Marine Kiln #1880.....	CHE.....		.45	.....	.....	.....8	.....4	.....	.....	.....20	.....	.....32	.....4	.....	.....28	.....
AA-1120086	.....	Tokio Marine Kiln #4141.....	CHE.....		.7	.....	.....	.....1	.....1	.....	.....	.....3	.....	.....5	.....1	.....	.....4	.....
AA-1126510	.....	Tokio Marine Kiln #510.....	CHE.....		10	.....	.....	.....2	.....1	.....	.....	.....5	.....	.....8	.....1	.....	.....7	.....
1299999.	Total Authorized Other Non-U.S. Insurers.....				1,174	.....0	.....0	.....221	.....112	.....0	.....0	.....537	.....0	.....870	.....114	.....0	.....756	.....0
1399999.	Total Authorized.....				1,905	.....0	.....0	.....438	.....205	.....0	.....0	.....934	.....0	.....1,577	.....199	.....0	.....1,378	.....0

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable on										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Col. 15-[16+17]	19 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			
4099999.		Total Authorized, Unauthorized and Certified.....			1,905	0	0	438	205	0	0	934	0	1,577	199	0	1,378	0	
9999999.		Totals.....			1,905	0	0	438	205	0	0	934	0	1,577	199	0	1,378	0	

Note: A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000.

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

B. Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on the total recoverables, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated
(1) Markel Global Reinsurance Company (Alterra).....	205	277	Yes [] No [X]
(2) Liberty Syndicate #4472.....	142	197	Yes [] No [X]
(3) Ark Syndicate #4020.....	105	142	Yes [] No [X]
(4) Toa Reinsurance Company of America.....	95	130	Yes [] No [X]
(5) Beazley Syndicate #2623.....	94	122	Yes [] No [X]

Sch. F - Pt. 4
NONE

Sch. F - Pt. 5
NONE

Sch. F - Pt. 6 - Sn. 1
NONE

Sch. F - Pt. 6 - Sn. 2
NONE

Sch. F - Pt. 7
NONE

Sch. F - Pt. 8
NONE

SCHEDULE F - PART 9

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	38,721,049		38,721,049
2. Premiums and considerations (Line 15).....	398,196		398,196
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....			0
4. Funds held by or deposited with reinsured companies (Line 16.2).....			0
5. Other assets.....	571,088		571,088
6. Net amount recoverable from reinsurers.....			0
7. Protected cell assets (Line 27).....			0
8. Totals (Line 28).....	39,690,333	0	39,690,333
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	5,976,699		5,976,699
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	419,801		419,801
11. Unearned premiums (Line 9).....	2,857,205		2,857,205
12. Advance premiums (Line 10).....	117,150		117,150
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....	199,428		199,428
15. Funds held by company under reinsurance treaties (Line 13).....			0
16. Amounts withheld or retained by company for account of others (Line 14).....	24,550		24,550
17. Provision for reinsurance (Line 16).....			0
18. Other liabilities.....	30,293		30,293
19. Total liabilities excluding protected cell business (Line 26).....	9,625,126	0	9,625,126
20. Protected cell liabilities (Line 27).....			0
21. Surplus as regards policyholders (Line 37).....	30,065,207	XXX	30,065,207
22. Totals (Line 38).....	39,690,333	0	39,690,333

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?..Yes [] No []

If yes, give full explanation:

Sch. H - Pt. 1
NONE

Sch. H - Pt. 2
NONE

Sch. H - Pt. 3
NONE

Sch. H - Pt. 4
NONE

Sch. H - Pt. 5
NONE

Sch. P - Pt. 1A
NONE

Sch. P - Pt. 1B
NONE

Sch. P - Pt. 1C
NONE

Sch. P - Pt. 1D
NONE

Sch. P - Pt. 1E
NONE

Sch. P - Pt. 1F - Sn. 1
NONE

Sch. P - Pt. 1F - Sn. 2
NONE

Sch. P - Pt. 1G
NONE

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.....XXX.....
2. 2008.....	146.....	.25	121.....	7.....	.....	4.....	.....	1.....	.....	.....	.....	12.....2.....
3. 2009.....	124.....	.23	101.....	.....	.....	1.....	.....	.....	.....	.....	.....	1.....1.....
4. 2010.....	72.....	.20	52.....	15.....	.....	92.....	.....	1.....	.....	.....	.....	108.....1.....
5. 2011.....	90.....	.25	.65.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....
6. 2012.....	104.....	.26	.78.....	15.....	.....	8.....	.....	.....	.....	.....	.....	.23.....1.....
7. 2013.....	299.....	.52	.247.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....
8. 2014.....	150.....	.14	136.....	.....	.....	44.....	.....	1.....	.....	.....	.....	.45.....3.....
9. 2015.....	218.....	.45	173.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....
10. 2016.....	218.....	.47	171.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....
11. 2017.....	150.....	.28	.122.....	.....	.....	.....	.....	.....	.....	.....	.....	0.....
12. Totals....	XXX.....	XXX.....	XXX.....	.37.....	.0.....	.149.....	.0.....	.3.....	.0.....	.....	.....	189.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	0.....	.....
2. 2008.....	0.....	.....
3. 2009.....	0.....	.....
4. 2010.....	0.....	.....
5. 2011.....	0.....	.....
6. 2012.....	0.....	.....
7. 2013.....	0.....	.....
8. 2014.....	.100.....	.....	.....	.....	.13.....	.....	.....	.....	.....	.....	.....	.113.....1.....	.....
9. 2015.....	0.....	.....
10. 2016.....	0.....	.....
11. 2017.....	0.....	.....
12. Totals....	.100.....	.0.....	.0.....	.0.....	.13.....	.0.....	.0.....	.0.....	.0.....	.0.....	.....	.113.....1.....	.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	0.....0.....
2. 2008.....	12.....	.0.....	12.....	8.2.....	.0.....	9.9.....	.....	.....	.....	.....	0.....0.....
3. 2009.....	1.....	.0.....	1.....	0.8.....	.0.....	1.0.....	.....	.....	.....	.....	0.....0.....
4. 2010.....	108.....	.0.....	108.....	150.0.....	.0.....	.207.7.....	.....	.....	.....	.....	0.....0.....
5. 2011.....	.0.....	.0.....	.0.....	.0.0.....	.0.....	.0.0.....	.....	.....	.....	.....	0.....0.....
6. 2012.....	.23.....	.0.....	.23.....	.22.1.....	.0.....	.29.5.....	.....	.....	.....	.....	0.....0.....
7. 2013.....	.0.....	.0.....	.0.....	.0.0.....	.0.....	.0.0.....	.....	.....	.....	.....	0.....0.....
8. 2014.....	.158.....	.0.....	.158.....	.105.3.....	.0.....	.116.2.....	.....	.....	.....	.....	.100.....13.....
9. 2015.....	.0.....	.0.....	.0.....	.0.0.....	.0.....	.0.0.....	.....	.....	.....	.....	0.....0.....
10. 2016.....	.0.....	.0.....	.0.....	.0.0.....	.0.....	.0.0.....	.....	.....	.....	.....	0.....0.....
11. 2017.....	.0.....	.0.....	.0.....	.0.0.....	.0.....	.0.0.....	.....	.....	.....	.....	0.....0.....
12. Totals....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	XXX.....	.....	.100.....13.....

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	XXX.....	
2. 2008.....	5,510	1,460	4,050	2,258	300	1,144	190	410		.29	3,322	191	
3. 2009.....	5,585	1,483	4,102	2,147	.50	1,061	.203	.398			3,353	172	
4. 2010.....	5,759	1,621	4,138	1,769	.375	.676	.61	.271			2,280	118	
5. 2011.....	5,781	1,419	4,362	1,882		1,176	20	.327		.5	3,365	154	
6. 2012.....	6,244	1,430	4,814	1,303		1,006	.74	.322			2,557	133	
7. 2013.....	6,830	1,690	5,140	.702		1,016	.7	.203			1,914	108	
8. 2014.....	7,232	1,736	5,496	.875	.19	.831	.27	.204		.5	1,864	97	
9. 2015.....	7,188	1,506	5,682	1,429	.77	1,454	.144	.204		.9	2,866	.88	
10. 2016.....	7,650	1,634	6,016	.637	.31	.762	.12	.200			1,556	64	
11. 2017.....	8,214	1,842	6,372	.913	.30	.150		.219			1,252	.88	
12. Totals....	XXX.....	XXX.....	XXX.....	13,915	.882	9,276	.738	.2,758	.0	.48	24,329	XXX.....	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....											0		
2. 2008.....	.169				.39				.2		210	2	
3. 2009.....					.4				.2		6	1	
4. 2010.....											0		
5. 2011.....	.5				.5				.2		12	1	
6. 2012.....											0		
7. 2013.....	.185				.124				.6		315	7	
8. 2014.....	.308	.54	.5		.78	.10	.3		.9		339	10	
9. 2015.....	.902	.38	.10		.298	.69	.5		.22		1,130	25	
10. 2016.....	1,128	106	.20		.421	.127	.10		.36		1,382	38	
11. 2017.....	1,561	240	.235		.696		.110		.109		2,471	.88	
12. Totals....	4,258	438	.270	.0	1,665	.206	.128	.0	.188	.0	5,865	.172	

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0	0
2. 2008.....	4,022	490	3,532	73.0	33.6	.872				169	.41
3. 2009.....	3,612	253	3,359	64.7	.17.1	.819				0	.6
4. 2010.....	2,716	436	2,280	47.2	.26.9	.55.1				0	.0
5. 2011.....	3,397	.20	3,377	.58.8	.1.4	.77.4				.5	.7
6. 2012.....	2,631	.74	2,557	.42.1	.5.2	.53.1				0	.0
7. 2013.....	2,236	.7	2,229	.32.7	.0.4	.43.4				185	130
8. 2014.....	2,313	110	2,203	.32.0	.6.3	.40.1				.259	.80
9. 2015.....	4,324	328	3,996	.60.2	.21.8	.70.3				.874	.256
10. 2016.....	3,214	276	2,938	.42.0	.16.9	.48.8				1,042	340
11. 2017.....	3,993	270	3,723	.48.6	.14.7	.58.4				1,556	915
12. Totals....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0	.0	XXX.....	4,090	1,775

Sch. P - Pt. 1I
NONE

Sch. P - Pt. 1J
NONE

Sch. P - Pt. 1K
NONE

Sch. P - Pt. 1L
NONE

Sch. P - Pt. 1M
NONE

Sch. P - Pt. 1N
NONE

Sch. P - Pt. 1O
NONE

Sch. P - Pt. 1P
NONE

Sch. P - Pt. 1R - Sn. 1
NONE

Sch. P - Pt. 1R - Sn. 2
NONE

Sch. P - Pt. 1S
NONE

Sch. P - Pt. 1T
NONE

Sch. P - Pt. 2A
NONE

Sch. P - Pt. 2B
NONE

Sch. P - Pt. 2C
NONE

Sch. P - Pt. 2D
NONE

Sch. P - Pt. 2E
NONE

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

NONE**SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

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

NONE**SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER & MACHINERY)**

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

NONE**SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

1. Prior....	12	47	4	116	204	167	167	167	167	167	0	0
2. 2008....	295	44	44	80	4	32	10	10	11	11	0	1
3. 2009....	XXX.			186	294	10	86	86	86	86	0	(85)
4. 2010....	XXX.	XXX.	8	8	16	125	115	107	107	107	0	0
5. 2011....	XXX.	XXX.	XXX.	73							(45)	0
6. 2012....	XXX.	XXX.	XXX.	XXX.	9						(17)	23
7. 2013....	XXX.	XXX.	XXX.	XXX.	XXX.						0	0
8. 2014....	XXX.	XXX.	XXX.	XXX.	XXX.						(5)	107
9. 2015....	XXX.	XXX.	XXX.	XXX.	XXX.						0	0
10. 2016....	XXX.	XXX.	XXX.	XXX.	XXX.						0	XXX....
11. 2017....	XXX.	XXX.	XXX.	XXX.	XXX.						XXX.	XXX....
											(67)	46

12. Totals

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

1. Prior....	3,129	2,355	2,110	1,813	1,715	1,749	1,758	1,857	1,925	1,925	0	.68
2. 2008....	2,873	2,714	2,999	3,154	3,168	3,128	3,153	3,198	3,182	3,189	7	(9)
3. 2009....	XXX.	3,530	3,084	3,131	3,380	3,231	2,894	2,956	2,956	2,959	3	3
4. 2010....	XXX.	XXX.	2,830	2,506	2,273	2,073	2,043	2,099	2,050	2,008	(42)	(91)
5. 2011....	XXX.	XXX.	XXX.	3,195	3,179	3,072	3,241	3,233	3,152	3,037	(115)	(196)
6. 2012....	XXX.	XXX.	XXX.	XXX.	2,690	2,488	2,475	2,348	2,218	2,235	17	(113)
7. 2013....	XXX.	XXX.	XXX.	XXX.	XXX.	2,825	2,468	2,157	2,074	2,020	(54)	(137)
8. 2014....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	2,811	2,398	2,072	1,990	(82)	(408)
9. 2015....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	3,246	3,692	3,763	.71	517
10. 2016....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	2,821	2,700	(121)	XXX....
11. 2017....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	3,395	XXX.	XXX....
											(316)	(366)

12. Totals

Sch. P - Pt. 2I
NONE

Sch. P - Pt. 2J
NONE

Sch. P - Pt. 2K
NONE

Sch. P - Pt. 2L
NONE

Sch. P - Pt. 2M
NONE

Sch. P - Pt. 2N
NONE

Sch. P - Pt. 2O
NONE

Sch. P - Pt. 2P
NONE

Sch. P - Pt. 2R - Sn. 1
NONE

Sch. P - Pt. 2R - Sn. 2
NONE

Sch. P - Pt. 2S
NONE

Sch. P - Pt. 2T
NONE

Sch. P - Pt. 3A
NONE

Sch. P - Pt. 3B
NONE

Sch. P - Pt. 3C
NONE

Sch. P - Pt. 3D
NONE

Sch. P - Pt. 3E
NONE

SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017		
1. Prior.....	.....000.....											
2. 2008.....												
3. 2009.....	....XXX.....											
4. 2010.....	....XXX.....	....XXX.....										
5. 2011.....	....XXX.....	....XXX.....	....XXX.....									
6. 2012.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....								
7. 2013.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....							
8. 2014.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....						
9. 2015.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....					
10. 2016.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....				
11. 2017.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....			

NONE**SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

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

NONE**SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

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

NONE**SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

1. Prior.....	.....000.....	.....7.....	.....7.....	.....83.....	.....169.....	.....167.....	.....167.....	.....167.....	.....167.....	.....167.....	.....10.....	
2. 2008.....	.....40.....	.....44.....	.....44.....	.....80.....	.....80.....	.....11.....	.....12.....	.....11.....	.....11.....	.....11.....	.....2.....	
3. 2009.....	....XXX.....	.....46.....	.....104.....	.....104.....	.....104.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	
4. 2010.....	....XXX.....	....XXX.....		.....16.....	.....106.....	.....106.....	.....107.....	.....107.....	.....107.....	.....107.....	.....1.....	
5. 2011.....	....XXX.....	....XXX.....	....XXX.....									
6. 2012.....	....XXX.....	....XXX.....	....XXX.....									
7. 2013.....	....XXX.....	....XXX.....	....XXX.....									
8. 2014.....	....XXX.....	....XXX.....	....XXX.....									
9. 2015.....	....XXX.....	....XXX.....	....XXX.....									
10. 2016.....	....XXX.....	....XXX.....	....XXX.....									
11. 2017.....	....XXX.....	....XXX.....	....XXX.....									

NONE**SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**

1. Prior.....	.....000.....	.....787.....	.....1,478.....	.....1,527.....	.....1,722.....	.....1,731.....	.....1,737.....	.....1,728.....	.....1,729.....	.....1,729.....	.....2,286.....	.....1,705.....
2. 2008.....	.....270.....	.....1,134.....	.....1,870.....	.....2,349.....	.....2,748.....	.....2,759.....	.....2,842.....	.....2,883.....	.....2,912.....	.....2,912.....	.....42.....	.....147.....
3. 2009.....	....XXX.....	.....259.....	.....1,088.....	.....1,766.....	.....2,213.....	.....2,654.....	.....2,778.....	.....2,795.....	.....2,951.....	.....2,955.....	.....37.....	.....134.....
4. 2010.....	....XXX.....	....XXX.....	.....220.....	.....1,056.....	.....1,695.....	.....1,847.....	.....1,882.....	.....1,987.....	.....2,009.....	.....2,009.....	.....27.....	.....91.....
5. 2011.....	....XXX.....	....XXX.....	....XXX.....	.....639.....	.....1,348.....	.....2,149.....	.....2,819.....	.....2,911.....	.....2,988.....	.....3,027.....	.....47.....	.....106.....
6. 2012.....	....XXX.....	....XXX.....	....XXX.....		.....266.....	.....1,321.....	.....1,925.....	.....2,050.....	.....2,155.....	.....2,235.....	.....35.....	.....98.....
7. 2013.....	....XXX.....	....XXX.....	....XXX.....			.....284.....	.....847.....	.....1,521.....	.....1,664.....	.....1,711.....	.....23.....	.....78.....
8. 2014.....	....XXX.....	....XXX.....	....XXX.....				.....184.....	.....763.....	.....1,518.....	.....1,660.....	.....19.....	.....68.....
9. 2015.....	....XXX.....	....XXX.....	....XXX.....					.....593.....	.....1,794.....	.....2,076.....	.....15.....	.....48.....
10. 2016.....	....XXX.....	....XXX.....	....XXX.....						.....289.....	.....1,356.....	.....18.....	.....8.....
11. 2017.....	....XXX.....	....XXX.....	....XXX.....							.....1,033.....	.....22.....	.....47.....

Sch. P - Pt. 3I
NONE

Sch. P - Pt. 3J
NONE

Sch. P - Pt. 3K
NONE

Sch. P - Pt. 3L
NONE

Sch. P - Pt. 3M
NONE

Sch. P - Pt. 3N
NONE

Sch. P - Pt. 3O
NONE

Sch. P - Pt. 3P
NONE

Sch. P - Pt. 3R - Sn. 1
NONE

Sch. P - Pt. 3R - Sn. 2
NONE

Sch. P - Pt. 3S
NONE

Sch. P - Pt. 3T
NONE

Sch. P - Pt. 4A
NONE

Sch. P - Pt. 4B
NONE

Sch. P - Pt. 4C
NONE

Sch. P - Pt. 4D
NONE

Sch. P - Pt. 4E
NONE

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

NONE**SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

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

NONE**SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

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

NONE**SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

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

NONE**SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**

1. Prior.....	233	61	.8	.....	.....	.....	.....	.....	.....	.....
2. 2008.....	458	110	16	.....	.....	.....	.....	.....	.....	2
3. 2009.....	XXX.....	439	.158	.73	.....	.....	.....	.....	.....	.....
4. 2010.....	XXX.....	XXX.....	.360	127	50	.....	.....	.....	.....	.....
5. 2011.....	XXX.....	XXX.....	XXX.....	435	131	.15	7	.8	.....	(1)
6. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	272	.35	9	.9	.....	.....
7. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	316	40	.....	11	.....
8. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	399	.53	.28	.8
9. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	431	.70	.15
10. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.259	.30
11. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	345

Sch. P - Pt. 4I

NONE

Sch. P - Pt. 4J

NONE

Sch. P - Pt. 4K

NONE

Sch. P - Pt. 4L

NONE

Sch. P - Pt. 4M

NONE

Sch. P - Pt. 4N

NONE

Sch. P - Pt. 4O

NONE

Sch. P - Pt. 4P

NONE

Sch. P - Pt. 4R - Sn. 1

NONE

Sch. P - Pt. 4R - Sn. 2

NONE

Sch. P - Pt. 4S

NONE

Sch. P - Pt. 4T

NONE

Sch. P - Pt. 5A - Sn. 1

NONE

Sch. P - Pt. 5A - Sn. 2

NONE

Sch. P - Pt. 5A - Sn. 3

NONE

Sch. P - Pt. 5B - Sn. 1

NONE

Sch. P - Pt. 5B - Sn. 2

NONE

Sch. P - Pt. 5B - Sn. 3

NONE

Sch. P - Pt. 5C - Sn. 1
NONE

Sch. P - Pt. 5C - Sn. 2
NONE

Sch. P - Pt. 5C - Sn. 3
NONE

Sch. P - Pt. 5D - Sn. 1
NONE

Sch. P - Pt. 5D - Sn. 2
NONE

Sch. P - Pt. 5D - Sn. 3
NONE

Sch. P - Pt. 5E - Sn. 1
NONE

Sch. P - Pt. 5E - Sn. 2
NONE

Sch. P - Pt. 5E - Sn. 3
NONE

Sch. P - Pt. 5F - Sn. 1A
NONE

Sch. P - Pt. 5F - Sn. 2A
NONE

Sch. P - Pt. 5F - Sn. 3A
NONE

Sch. P - Pt. 5F - Sn. 1B
NONE

Sch. P - Pt. 5F - Sn. 2B
NONE

Sch. P - Pt. 5F - Sn. 3B
NONE

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

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior.....	1	1				1			.1	
2. 2008.....	1	1				2				
3. 2009.....	XXX		.3	.3	2	.1	1	1		
4. 2010.....	XXX	XXX	.1	.1		.1	.1	.1		
5. 2011.....	XXX	XXX	XXX		2					
6. 2012.....	XXX	XXX	XXX	XXX	1				.1	
7. 2013.....	XXX	XXX	XXX	XXX	XXX					
8. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX		1	.2	.1
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior.....					1	.5	.5	.5	.9	
2. 2008.....	2	2	.2	.2	2	.2	.2	2	.2	.2
3. 2009.....	XXX	2	.2	.2	3	.2	.2	2	.1	.1
4. 2010.....	XXX	XXX	.1	.1		.1	.1	.1	.1	.1
5. 2011.....	XXX	XXX	XXX		2					
6. 2012.....	XXX	XXX	XXX	XXX	1				.1	.1
7. 2013.....	XXX	XXX	XXX	XXX	XXX					
8. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX		2	.3	.3
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE**SECTION 1B**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior.....	106	68	55	27	(18)	26	24	1	(4)	.....
2. 2008.....	6	25	47	60	70	77	78	78	42	42
3. 2009.....	XXX	4	23	48	60	67	74	74	37	37
4. 2010.....	XXX	XXX	4	22	49	58	62	63	27	27
5. 2011.....	XXX	XXX	XXX	7	29	53	66	71	47	47
6. 2012.....	XXX	XXX	XXX	XXX	5	37	59	67	35	35
7. 2013.....	XXX	XXX	XXX	XXX	XXX	2	27	37	23	23
8. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	10	35	19	19
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20	15	15
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	18
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior.....	112	45	28	14	6	1	.....	.....	.....	.....
2. 2008.....	119	70	38	23	11	4	3	3	2	2
3. 2009.....	XXX	125	66	30	16	8	3	2	1	1
4. 2010.....	XXX	XXX	107	45	18	8	4	2	2	.....
5. 2011.....	XXX	XXX	XXX	81	54	24	13	6	4	1
6. 2012.....	XXX	XXX	XXX	XXX	74	36	18	7	1	.....
7. 2013.....	XXX	XXX	XXX	XXX	XXX	69	41	19	11	7
8. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	69	34	10	10
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	76	47	25
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	82	38
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	88

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior.....	182	193	24	24	10	4	3,126	3,312	(76)	.....
2. 2008.....	35	100	137	162	178	185	188	266	191	191
3. 2009.....	XXX	40	95	133	154	163	170	244	172	172
4. 2010.....	XXX	XXX	26	67	93	107	115	178	120	118
5. 2011.....	XXX	XXX	XXX	31	85	122	144	215	157	154
6. 2012.....	XXX	XXX	XXX	XXX	40	91	121	188	134	133
7. 2013.....	XXX	XXX	XXX	XXX	XXX	29	83	120	112	108
8. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	76	111	97	97
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20	110	88
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	82	64
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	88

Sch. P - Pt. 5R - Sn. 1A
NONE

Sch. P - Pt. 5R - Sn. 2A
NONE

Sch. P - Pt. 5R - Sn. 3A
NONE

Sch. P - Pt. 5R - Sn. 1B
NONE

Sch. P - Pt. 5R - Sn. 2B
NONE

Sch. P - Pt. 5R - Sn. 3B
NONE

Sch. P - Pt. 5T - Sn. 1
NONE

Sch. P - Pt. 5T - Sn. 2
NONE

Sch. P - Pt. 5T - Sn. 3
NONE

Sch. P - Pt. 6C - Sn. 1
NONE

Sch. P - Pt. 6C - Sn. 2
NONE

Sch. P - Pt. 6D - Sn. 1
NONE

Sch. P - Pt. 6D - Sn. 2
NONE

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
2. 2008.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0
3. 2009.....	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....	0
4. 2010.....	XXX	XXX	.....	.....	.....	.....	.....	.....	.....	.....	0
5. 2011.....	XXX	XXX	XXX	.....	.....	.....	.....	.....	.....	.....	0
6. 2012.....	XXX	XXX	XXX	XXX	.....	.....	.....	.....	.....	.....	0
7. 2013.....	XXX	XXX	XXX	XXX	XXX	.....	.....	.....	.....	.....	0
8. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	.....	.....	0
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	.....	0
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	0
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....	0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Prem.(P-Pt 1)	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX

NONE**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
2. 2008.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0
3. 2009.....	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....	0
4. 2010.....	XXX	XXX	.....	.....	.....	.....	.....	.....	.....	.....	0
5. 2011.....	XXX	XXX	XXX	.....	.....	.....	.....	.....	.....	.....	0
6. 2012.....	XXX	XXX	XXX	XXX	.....	.....	.....	.....	.....	.....	0
7. 2013.....	XXX	XXX	XXX	XXX	XXX	.....	.....	.....	.....	.....	0
8. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	.....	.....	0
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	.....	0
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	0
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....	0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Prem.(P-Pt 1)	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX

NONE**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
2. 2008.....	146	146	146	146	146	146	146	146	146	146	146
3. 2009.....	XXX	124	124	124	124	124	124	124	124	124	124
4. 2010.....	XXX	XXX	72	72	72	72	72	72	72	72	72
5. 2011.....	XXX	XXX	XXX	90	90	90	90	90	90	90	90
6. 2012.....	XXX	XXX	XXX	XXX	105	105	105	105	105	105	105
7. 2013.....	XXX	XXX	XXX	XXX	299	299	299	299	299	299	299
8. 2014.....	XXX	XXX	XXX	XXX	XXX	150	150	150	150	150	150
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	218	218	218	218	218
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	218	218	218	218
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	150	150	150
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	150
13. Earned Prem.(P-Pt 1)	146	124	72	90	104	299	150	218	218	218	150

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.....	1	1	.....	.....	.....	.....	.....	.....	.....	.....	0
2. 2008.....	.25	.25	.25	.25	.25	.25	.25	.25	.25	.25	.25
3. 2009.....	XXX	23	23	23	23	23	23	23	23	23	23
4. 2010.....	XXX	XXX	20	20	20	20	20	20	20	20	20
5. 2011.....	XXX	XXX	XXX	25	25	25	25	25	25	25	25
6. 2012.....	XXX	XXX	XXX	XXX	.25	.25	.25	.25	.25	.25	.25
7. 2013.....	XXX	XXX	XXX	XXX	52	52	52	52	52	52	52
8. 2014.....	XXX	XXX	XXX	XXX	XXX	17	17	17	17	17	17
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	35	35	35	35	35
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	35	35	35
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22	22	22
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22
13. Earned Prem.(P-Pt 1)	.25	.23	.20	.25	.26	.52	.14	.45	.47	.28	.XXX

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

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	
1. Prior.....				(1,003)	(4,148)						0
2. 2008.....	5,510	5,510	5,510	5,510	5,510	5,510	5,510	5,510	5,510	5,510	
3. 2009.....	XXX	5,585	5,585	5,585	5,585	5,585	5,585	5,585	5,585	5,585	
4. 2010.....	XXX	XXX	5,915	5,915	5,915	5,915	5,915	5,915	5,915	5,915	
5. 2011.....	XXX	XXX	XXX	5,781	5,781	5,781	5,781	5,781	5,781	5,781	
6. 2012.....	XXX	XXX	XXX	XXX	6,243	6,243	6,243	6,243	6,243	6,243	
7. 2013.....	XXX	XXX	XXX	XXX	XXX	6,830	6,830	6,830	6,830	6,830	
8. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	7,232	7,232	7,232	7,232	
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,188	7,188	7,188	
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,650	7,650	
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,213	8,213
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,213
13. Earned Prem.(P-Pt 1)	5,510	5,585	5,759	5,781	6,244	6,830	7,232	7,188	7,650	8,214	XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	
1. Prior.....											0
2. 2008.....	1,460	1,460	1,460	1,460	1,460	1,460	1,460	1,460	1,460	1,460	
3. 2009.....	XXX	1,483	1,483	1,483	1,483	1,483	1,483	1,483	1,483	1,483	
4. 2010.....	XXX	XXX	1,620	1,621	1,621	1,621	1,621	1,621	1,621	1,621	
5. 2011.....	XXX	XXX	XXX	1,419	1,419	1,419	1,419	1,419	1,419	1,419	
6. 2012.....	XXX	XXX	XXX	XXX	1,431	1,431	1,431	1,431	1,431	1,431	
7. 2013.....	XXX	XXX	XXX	XXX	XXX	1,690	1,690	1,690	1,690	1,690	
8. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	1,736	1,736	1,736	1,736	
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,478	1,478	1,478	
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,463	1,463	
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,847	1,847
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,847
13. Earned Prem.(P-Pt 1)	1,460	1,483	1,621	1,419	1,430	1,690	1,736	1,506	1,634	1,842	XXX

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

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017	
1. Prior.....											0
2. 2008.....											0
3. 2009.....	XXX										0
4. 2010.....	XXX	XXX									0
5. 2011.....	XXX	XXX	XXX								0
6. 2012.....	XXX	XXX	XXX	XXX							0
7. 2013.....	XXX	XXX	XXX	XXX	XXX						0
8. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX					0
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
13. Earned Prem.(P-Pt 1)											XXX

NONE**NONE****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
2. 2008.....											0
3. 2009.....	XXX										0
4. 2010.....	XXX	XXX									0
5. 2011.....	XXX	XXX	XXX								0
6. 2012.....	XXX	XXX	XXX	XXX							0
7. 2013.....	XXX	XXX	XXX	XXX	XXX						0
8. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX					0
9. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0
10. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0
11. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
13. Earned Prem.(P-Pt 1)											XXX

Sch. P - Pt. 6N - Sn. 1

NONE

Sch. P - Pt. 6N - Sn. 2

NONE

Sch. P - Pt. 6O - Sn. 1

NONE

Sch. P - Pt. 6O - Sn. 2

NONE

Sch. P - Pt. 6R - Sn. 1A

NONE

Sch. P - Pt. 6R - Sn. 2A

NONE

Sch. P - Pt. 6R - Sn. 1B

NONE

Sch. P - Pt. 6R - Sn. 2B

NONE

Sch. P - Pt. 7A - Sn. 1

NONE

Sch. P - Pt. 7A - Sn. 2

NONE

Sch. P - Pt. 7A - Sn. 3

NONE

Sch. P - Pt. 7A - Sn. 4

NONE

Sch. P - Pt. 7A - Sn. 5

NONE

Sch. P - Pt. 7B - Sn. 1

NONE

Sch. P - Pt. 7B - Sn. 2

NONE

Sch. P - Pt. 7B - Sn. 3

NONE

Sch. P - Pt. 7B - Sn. 4

NONE

Sch. P - Pt. 7B - Sn. 5

NONE

Sch. P - Pt. 7B - Sn. 6

NONE

Sch. P - Pt. 7B - Sn. 7

NONE

SCHEDULE P INTERROGATORIES

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

1.1 Does the company issue Medical Professional Liability Claims-Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? 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)? Yes [] No [X]

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

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

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

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

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 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 PER CLAIM

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

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.

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

Allocated by States and Territories

States, Etc.	Direct Business Only					6 Totals
	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	
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	0

NONE

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

1	2	3	4	5	6	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8	9	10	11	12 Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14	15	16 Is an SCA Filing Required? * (Y/N)
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK		Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)			Ultimate Controlling Entity(ies)/Person(s)		
Members															
.....	The Ohio State Bar Association	.....	31-4271520..	.....	.....	.....	The Ohio State Bar Association.....	OH.....	NIA.....	OSBA Board of Governors.....	Ownership.....	....100.000	OSBA Board of Governors.....	.....	N.....
.....	OBLIC.....	37176..	31-0947214..	.....	.....	.....	Ohio Bar Liability Insurance Company.....	OH.....	IA.....	OBLIC Board of Directors.....	Board.....	.....	OSBA Board of Governors.....	.....	N.....
.....	1650 Lake Shore, Inc.....	.....	31-1394604..	.....	.....	.....	1650 Lake Shore, Inc.....	OH.....	NIA.....	1650 Board of Directors.....	Board.....	.....	OBLIC Board of Directors.....	.....	Y.....
.....	OBLIC Holdings, LLC.....	.....	46-5150262..	.....	.....	.....	OBLIC Holdings, LLC.....	OH.....	NIA.....	Ohio Bar Liability Insurance Company.....	Ownership.....	....100.000	OBLIC Board of Directors.....	.....	Y.....
.....	OSBAIA.....	.....	31-1382704..	.....	.....	.....	Ohio State Bar Association Insurance Agency.....	OH.....	NIA.....	OSBAIA Board of Directors.....	Board.....	.....	OBLIC Holdings, LLC.....	.....	N.....
.....	LAPCO.....	.....	34-0895283..	.....	.....	.....	Law Abstract Publishing Company.....	OH.....	NIA.....	OBLIC Holdings, LLC.....	Owner.....	....100.000	OBLIC Holdings, LLC.....	.....	N.....

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

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

Affiliated Transactions

37176.....	31-4271520.....	The Ohio State Bar Association.....	1,000,000									1,000,000
	31-0947214.....	OBPLIC.....	(875,000)									(875,000)
	31-1394604.....	1650 Lake Shore, Inc.....	(125,000)									(125,000)
9999999.	Control Totals.....		0	0	0	0	0	0	XXX	0	0	0

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

1. Will an actuarial opinion be filed by March 1?
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?
3. Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?
4. Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?

APRIL FILING

5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?
6. Will the Management's Discussion and Analysis be filed by April 1?
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1?

MAY FILING

8. Will this company be included in a combined annual statement that is filed with the NAIC by May 1?

JUNE FILING

9. Will an audited financial report be filed by June 1?
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?

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?

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?
13. Will the Financial Guaranty Insurance Exhibit be filed by March 1?
14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?
15. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?
16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?
17. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?
18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?
19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?
20. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?
21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?
22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?
23. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?
24. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?
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?
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?
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?
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?

APRIL FILING

29. Will the Credit Insurance Experience Exhibit be filed with state of domicile and the NAIC by April 1?
30. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?
31. Will the Accident and Health Policy Experience Exhibit be filed by April 1?
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?
33. Will the regulator-only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?
34. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?

AUGUST FILING

35. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?

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.

EXPLANATION:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.

BAR CODE:

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12. The data for this supplement is not required to be filed.



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13. The data for this supplement is not required to be filed.



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34. The data for this supplement is not required to be filed.

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35. The data for this supplement is not required to be filed.

Overflow Page for Write-Ins

Additional Write-ins for Underwriting and Investment Exhibit-Part 3:

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
2404. Charitable contribution.....		56,915		.56,915
2405. Loss Prevention and Control.....		28,921		.28,921
2406. Investment Fees.....		103,025		103,025
2407. Other expenses.....		146,659		146,659
2497. Summary of remaining write-ins for Line 24.....	0	232,495	103,025	335,520

Overflow Page for Write-Ins

NONE

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