



QUARTERLY STATEMENT

As of March 31, 2018
of the Condition and Affairs of the

OHIO BAR LIAB INS CO

NAIC Group Code..... 0, 0 (Current Period) (Prior Period)	NAIC Company Code..... 37176	Employer's ID Number..... 31-0947214
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Incorporated/Organized..... December 5, 1978	Commenced Business..... September 1, 1979	
Statutory Home Office	1650 Lake Shore Drive .. Columbus .. OH .. US .. 43204 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	
Main Administrative Office	1650 Lake Shore Drive .. Columbus .. OH .. US .. 43204 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	614-488-7924 <i>(Area Code) (Telephone Number)</i>
Mail Address	PO Box 2708 .. Columbus .. OH .. US .. 43216-2708 <i>(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)</i>	
Primary Location of Books and Records	1650 Lake Shore Drive .. Columbus .. OH .. US .. 43204 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	614-488-7924 <i>(Area Code) (Telephone Number)</i>
Internet Web Site Address	www.oblic.com	
Statutory Statement Contact	Rodney K. McGough <i>(Name)</i> rmcgough@oblic.com <i>(E-Mail Address)</i>	614-488-7924 <i>(Area Code) (Telephone Number) (Extension)</i> 614-488-7936 <i>(Fax Number)</i>

OFFICERS

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

OTHER

John Stephen Stith	Chair of the Board	Thomas Dean Lammers	Vice Chair of the Board
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DIRECTORS OR TRUSTEES

Mary Amos Augsburg	Paula Louise Brooks	E. Ann Gabriel	Andreas Renee Horton
Barbara Jean Howard	Thomas Dean Lammers	Demetrios Jo Neely	Frederick Leonard Oremus
Nancy Michong Pyon	Denny L Ramey	Carmen Vincent Roberto	Heather Gay Sowald
John Stephen Stith	Thomas Michael Taggart	Robin Geoffrey Weaver	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 1. (Printed Name) President & CEO (Title)	_____ (Signature) Frederick Hunker 2. (Printed Name) Secretary (Title)	_____ (Signature) E. Ann Gabriel 3. (Printed Name) Treasurer (Title)
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Subscribed and sworn to before me
This _____ day of _____

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 _____

ASSETS

	Current Statement Date			4
	1	2	3	December 31 Prior Year Net Admitted Assets
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	30,827,367		30,827,367	29,523,120
2. Stocks:				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....	7,718,181		7,718,181	7,792,128
3. Mortgage loans on real estate:				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$....1,689,259), cash equivalents (\$....371,023) and short-term investments (\$.....0).....	2,060,282		2,060,282	1,405,801
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives.....			0	
8. Other invested assets.....			0	
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets.....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	40,605,830	0	40,605,830	38,721,049
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	272,403		272,403	329,276
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	438,607		438,607	398,196
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	9,710
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....			0	
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	205,100		205,100	201,500
21. Furniture and equipment, including health care delivery assets (\$.....0).....	126,358	126,358	0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....	31,029		31,029	29,533
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	1,065	0	1,065	1,069
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	41,680,392	126,358	41,554,034	39,690,333
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	41,680,392	126,358	41,554,034	39,690,333

DETAILS OF WRITE-INS

1101.....			0	
1102.....			0	
1103.....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Prepaid Postage.....	1,065		1,065	1,069
2502.....			0	
2503.....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	1,065	0	1,065	1,069

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31 Prior Year
1. Losses (current accident year \$.....0).....	5,076,341	4,190,534
2. Reinsurance payable on paid losses and loss adjustment expenses.....		
3. Loss adjustment expenses.....	2,000,387	1,786,165
4. Commissions payable, contingent commissions and other similar charges.....		
5. Other expenses (excluding taxes, licenses and fees).....	30,254	29,510
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	1,219	1,219
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	103,797	163,797
7.2 Net deferred tax liability.....	170,275	225,275
8. Borrowed money \$.....0 and interest thereon \$.....0.....		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$.....0 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	3,461,783	2,857,205
10. Advance premium.....	2,600	117,150
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....	723,826	199,428
13. Funds held by company under reinsurance treaties.....		
14. Amounts withheld or retained by company for account of others.....	32,050	24,550
15. Remittances and items not allocated.....		
16. Provision for reinsurance (including \$.....0 certified).....		
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....		
19. Payable to parent, subsidiaries and affiliates.....		30,293
20. Derivatives.....		
21. Payable for securities.....	175,000	
22. Payable for securities lending.....		
23. Liability for amounts held under uninsured plans.....		
24. Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	11,777,532	9,625,126
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	11,777,532	9,625,126
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....	1,000,000	1,000,000
31. Preferred capital stock.....		
32. Aggregate write-ins for other than special surplus funds.....	0	0
33. Surplus notes.....		
34. Gross paid in and contributed surplus.....	1,000,000	1,000,000
35. Unassigned funds (surplus).....	27,776,502	28,065,207
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36).....	29,776,502	30,065,207
38. Totals (Page 2, Line 28, Col. 3).....	41,554,034	39,690,333

DETAILS OF WRITE-INS

2501. CLE Coupon.....		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$.....3,098,690).....	2,205,400	2,008,200	8,364,172
1.2 Assumed..... (written \$.....0).....			
1.3 Ceded..... (written \$.....787,685).....	498,973	505,846	1,869,620
1.4 Net..... (written \$.....2,311,005).....	1,706,427	1,502,354	6,494,552
DEDUCTIONS:			
2. Losses incurred (current accident year \$.....0):			
2.1 Direct.....	1,508,342	357,814	1,999,128
2.2 Assumed.....			
2.3 Ceded.....	766,986	133,382	500,506
2.4 Net.....	741,356	224,432	1,498,622
3. Loss adjustment expenses incurred.....	830,555	511,325	2,086,394
4. Other underwriting expenses incurred.....	579,632	653,842	1,977,310
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	2,151,543	1,389,599	5,562,326
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	(445,116)	112,755	932,226
INVESTMENT INCOME			
9. Net investment income earned.....	145,107	167,837	839,702
10. Net realized capital gains (losses) less capital gains tax of \$.....0.....		140	328,686
11. Net investment gain (loss) (Lines 9 + 10).....	145,107	167,977	1,168,388
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0).....	0		
13. Finance and service charges not included in premiums.....			
14. Aggregate write-ins for miscellaneous income.....	0	0	0
15. Total other income (Lines 12 through 14).....	0	0	0
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	(300,009)	280,732	2,100,614
17. Dividends to policyholders.....			
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	(300,009)	280,732	2,100,614
19. Federal and foreign income taxes incurred.....	(60,000)	95,401	532,700
20. Net income (Line 18 minus Line 19) (to Line 22).....	(240,009)	185,331	1,567,914
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year.....	30,065,207	28,968,417	28,968,417
22. Net income (from Line 20).....	(240,009)	185,331	1,567,914
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.....0.....	(94,476)	267,888	589,649
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....	55,000		(47,183)
27. Change in nonadmitted assets.....	(9,220)	9,133	(13,590)
28. Change in provision for reinsurance.....			
29. Change in surplus notes.....			
30. Surplus (contributed to) withdrawn from protected cells.....			
31. Cumulative effect of changes in accounting principles.....			
32. Capital changes:			
32.1 Paid in.....			
32.2 Transferred from surplus (Stock Dividend).....			
32.3 Transferred to surplus.....			
33. Surplus adjustments:			
33.1 Paid in.....			
33.2 Transferred to capital (Stock Dividend).....			
33.3 Transferred from capital.....			
34. Net remittances from or (to) Home Office.....			
35. Dividends to stockholders.....			(1,000,000)
36. Change in treasury stock.....			
37. Aggregate write-ins for gains and losses in surplus.....	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37).....	(288,705)	462,352	1,096,790
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	29,776,502	29,430,769	30,065,207

DETAILS OF WRITE-INS

0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	0	0	0
3701.			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0	0

CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance.....	2,680,442	1,858,582	6,465,608
2. Net investment income.....	296,246	231,118	1,087,982
3. Miscellaneous income.....			
4. Total (Lines 1 through 3).....	2,976,688	2,089,700	7,553,590
5. Benefit and loss related payments.....	(154,161)	290,053	1,790,712
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	1,195,221	1,220,321	4,010,139
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....			987,652
10. Total (Lines 5 through 9).....	1,041,060	1,510,374	6,788,503
11. Net cash from operations (Line 4 minus Line 10).....	1,935,628	579,326	765,087
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	1,782,553	3,043,676	9,068,601
12.2 Stocks.....			999,999
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....			
12.7 Miscellaneous proceeds.....	175,000		
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	1,957,553	3,043,676	10,068,600
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	3,181,066	3,279,534	10,651,168
13.2 Stocks.....	20,529	12,026	75,988
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....		100	100
13.7 Total investments acquired (Lines 13.1 to 13.6).....	3,201,596	3,291,659	10,727,255
14. Net increase or (decrease) in contract loans and premium notes.....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	(1,244,043)	(247,983)	(658,656)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....			1,000,000
16.6 Other cash provided (applied).....	(37,104)	(28,879)	40,121
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	(37,104)	(28,879)	(959,879)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	654,481	302,464	(853,448)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	1,405,801	2,259,249	2,259,249
19.2 End of period (Line 18 plus Line 19.1).....	2,060,282	2,561,712	1,405,801

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001			
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NOTES TO FINANCIAL STATEMENTS

Note 1 – Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

	SSAP #	F/S Page	F/S Line #	2018	2017
NET INCOME					
(1) The Company state basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ (240,009)	\$ 1,567,914
(2) State Prescribed Practice that are an increase/(decrease) from NAIC SAP				\$	\$
(3) State Permitted Practice that are an increase/(decrease) from NAIC SAP				\$	\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ (240,009)	\$ 1,567,914
SURPLUS					
(5) The Company state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 29,776,502	\$ 30,065,207
(6) State Prescribed Practice that are an increase/(decrease) from NAIC SAP				\$	\$
(7) State Permitted Practice that are an increase/(decrease) from NAIC SAP				\$	\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 29,776,502	\$ 30,065,207

C. Accounting Policy - No significant changes.

D. Going Concern - No significant changes.

Note 2 – Accounting Changes and Corrections of Errors

No significant changes

Note 3 – Business Combinations and Goodwill

Not applicable.

Note 4 – Discontinued Operations

Not applicable.

Note 5 – Investments

D. Loan-Backed Securities

(1) Not Applicable.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

(3) Collateral Received - Not Applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - Not Applicable.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - Not Applicable.

H. Repurchase Agreements Transactions Accounted for as a Sale - Not Applicable.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - Not Applicable.

M. Working Capital Finance Investments

(2) Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs - Not Applicable.

(3) Any Events of Default or Working Capital Finance Investments - Not Applicable.

N. Offsetting and Netting of Assets and Liabilities - Not Applicable

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

Not Applicable.

Note 7 – Investment Income

No significant changes

Note 8 – Derivative Instruments

Not Applicable.

NOTES TO FINANCIAL STATEMENTS

Note 9 – Income Taxes

No significant changes

Note 10 – Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

No significant changes

Note 11 – Debt

B. FHLB (Federal Home Loan Bank) Agreements - Not Applicable.

Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan - Not Applicable.

E. Defined Contribution Plan

The Company participates in a qualified defined contribution plan sponsored by the Company. The qualified plan covers allemployees of the Company who have completed six months of service. Plan assets are invested with Ascensus Retirement. The investments selected are at the discretion of the employee. The Company funds pension costs at 10% of the employee's annual compensation. The Company's expense contributions were \$0 and \$0 for the years ended March 31, 2018 and December 31, 2017. The Company participates in a non-qualified deferred compensation plan for highly compensated employees. The assets associated with funding this obligation are held in a Rabbi Trust. The liability for the years ended March 31, 2018 and December 31, 2017 were \$32,050 and \$24,550.

Note 13 – Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

Not Applicable.

Note 14 – Liabilities, Contingencies and Assessments

Not Applicable.

Note 15 – Leases

Not Applicable.

Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

Not Applicable.

Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

B. Transfer and Servicing of Financial Assets

(2) Servicing Assets and Servicing Liabilities - Not Applicable.

(4) Securitizations, Asset-Based Financing Arrangements and Similar Transfers Accounted for as Sales - Not Applicable.

C. Wash Sales

(1) Description of the Objectives Regarding These Transactions - Not Applicable.

Note 18 – Gain or Loss to the Reporting Entity from Uninsured Plans and the Portion of Partially Insured Plans

Not Applicable.

Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

No significant changes

Note 20 – Fair Value Measurements

A. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date

	Level 1	Level 2	Level 3	Total	Net Asset Value (NAV) Included in Level 2
Assets at Fair Value					
Common Stocks	\$ 5,626,784	\$	\$	\$ 5,626,784	\$
Total	\$ 5,626,784	\$	\$	\$ 5,626,784	\$
Liabilities at Fair Value					
Non Qualified Def Compensation	\$ 32,050	\$	\$	\$ 32,050	\$
Total	\$ 32,050	\$	\$	\$ 32,050	\$

Note 21 – Other Items

Not Applicable.

NOTES TO FINANCIAL STATEMENTS

Note 22 – Events Subsequent

Not Applicable.

Note 23 – Reinsurance

No significant changes

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

F. Risk Sharing Provisions of the Affordable Care Act - Not Applicable.

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

A. Change in Incurred Losses and Loss Adjustment Expenses - No significant changes

Note 26 – Intercompany Pooling Arrangements

Not Applicable.

Note 27 – Structured Settlements

Not Applicable.

Note 28 – Health Care Receivables

Not Applicable.

Note 29 – Participating policies

Not Applicable.

Note 30 – Premium Deficiency Reserves

Not Applicable.

Note 31 – High Deductibles

Not Applicable.

Note 32 – Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

Not Applicable.

Note 33 – Asbestos/Environmental Reserves

Not Applicable.

Note 34 – Subscriber Savings Accounts

Not Applicable.

Note 35 – Multiple Peril Crop Insurance

Not Applicable.

Note 36 – Financial Guaranty Insurance

B. Schedule of Insured Financial Obligations at the End of the Period: - Not Applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change: _____
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No []
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. _____
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 4.2 If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? If yes, attach an explanation. Yes [] No [] N/A [X]
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2013
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2013
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 08/22/2014
- 6.4 By what department or departments?
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] N/A []
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 7.2 If yes, give full information:
- 8.1 Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
- 8.4 If the response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c) Compliance with applicable governmental laws, rules and regulations;
- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e) Accountability for adherence to the code.
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended? Yes [] No [X]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes No
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 0

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes No
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$ 0
13. Amount of real estate and mortgages held in short-term investments: \$ 0
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes No
- 14.2 If yes, please complete the following:

	1 Prior Year End Book/Adjusted Carrying Value		2 Current Quarter Book/Adjusted Carrying Value
14.21	0	\$	0
14.22	0	\$	0
14.23	2,078,114		2,091,397
14.24	0		0
14.25	0		0
14.26	0		0
14.27	2,078,114	\$	2,091,397
14.28	0	\$	0

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes No
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes No
- If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0
- 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0
- 16.3 Total payable for securities lending reported on the liability page: \$ 0
17. Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*? Yes No

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

1 Name of Custodian(s)	2 Custodian Address
US Bank	425 Walnut Street, Cincinnati, Ohio 45202

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

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

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes No
- 17.4 If yes, give full and complete information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation
Madison Scottsdale, a division of Madison Investment Advisors, LLC	U

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's assets? Yes No
- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets? Yes No
- 17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
110297	Madison Scottsdale, a division of Madison Investment Advisors, LLC		SEC	NO

- 18.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? Yes No
- 18.2 If no, list exceptions:

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

19. By self-designating 5*GI securities, the reporting entity is certifying the following elements for each self-designated 5*GI security:
- a. Documentation necessary to permit a full credit analysis of the security does not exist.
 - b. Issuer or obligor is current on all contracted interest and principal payments.
 - c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
- Has the reporting entity self-designated 5*GI securities?

Yes [] No [X]

GENERAL INTERROGATORIES (continued)

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? Yes [] No [X] N/A []
 If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? Yes [] No [X]
 If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? Yes [] No [X]

3.2 If yes, give full and complete information thereto:

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see *Annual Statement Instructions* pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero? Yes [] No [X]

4.2 If yes, complete the following schedule:

1 Line of Business	2 Maximum Interest	3 Disc. Rate	Total Discount				Discount Taken During Period			
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 Total	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 Total
	0.000	0.000	0	0	0	0	0	0	0	0
Total	XXX	XXX	0	0	0	0	0	0	0	0

5.1 Operating Percentages:

5.1 A&H loss percent	0.000%
5.2 A&H cost containment percent	0.000%
5.3 A&H expense percent excluding cost containment expenses	0.000%

6.1 Do you act as a custodian for health savings accounts? Yes [] No [X]

6.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$ 0

6.3 Do you act as an administrator for health savings accounts? Yes [] No [X]

6.4 If yes, please provide the amount of funds administered as of the reporting date. \$ 0

7. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [] No [X]

7.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No [X]

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
------------------------------	----------------	------------------------	----------------------------------	---------------------------	---	--

NONE

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year to Date	3 Prior Year to Date	4 Current Year to Date	5 Prior Year to Date	6 Current Year to Date	7 Prior Year to Date
1. Alabama.....AL	N						
2. Alaska.....AK	N						
3. Arizona.....AZ	N						
4. Arkansas.....AR	N						
5. California.....CA	N						
6. Colorado.....CO	N						
7. Connecticut.....CT	N						
8. Delaware.....DE	N						
9. District of Columbia.....DC	N						
10. Florida.....FL	N						
11. Georgia.....GA	N						
12. Hawaii.....HI	N						
13. Idaho.....ID	N						
14. Illinois.....IL	N						
15. Indiana.....IN	N						
16. Iowa.....IA	N						
17. Kansas.....KS	N						
18. Kentucky.....KY	N						
19. Louisiana.....LA	N						
20. Maine.....ME	N						
21. Maryland.....MD	N						
22. Massachusetts.....MA	N						
23. Michigan.....MI	N						
24. Minnesota.....MN	N						
25. Mississippi.....MS	N						
26. Missouri.....MO	N						
27. Montana.....MT	N						
28. Nebraska.....NE	N						
29. Nevada.....NV	N						
30. New Hampshire.....NH	N						
31. New Jersey.....NJ	N						
32. New Mexico.....NM	N						
33. New York.....NY	N						
34. North Carolina.....NC	N						
35. North Dakota.....ND	N						
36. Ohio.....OH	L	3,098,690	2,748,525	1,508,342	357,814	6,022,966	4,644,135
37. Oklahoma.....OK	N						
38. Oregon.....OR	N						
39. Pennsylvania.....PA	N						
40. Rhode Island.....RI	N						
41. South Carolina.....SC	N						
42. South Dakota.....SD	N						
43. Tennessee.....TN	N						
44. Texas.....TX	N						
45. Utah.....UT	N						
46. Vermont.....VT	N						
47. Virginia.....VA	N						
48. Washington.....WA	N						
49. West Virginia.....WV	N						
50. Wisconsin.....WI	N						
51. Wyoming.....WY	N						
52. American Samoa.....AS	N						
53. Guam.....GU	N						
54. Puerto Rico.....PR	N						
55. US Virgin Islands.....VI	N						
56. Northern Mariana Islands.....MP	N						
57. Canada.....CAN	N						
58. Aggregate Other Alien.....OT	XXX	0	0	0	0	0	0
59. Totals.....	XXX	3,098,690	2,748,525	1,508,342	357,814	6,022,966	4,644,135

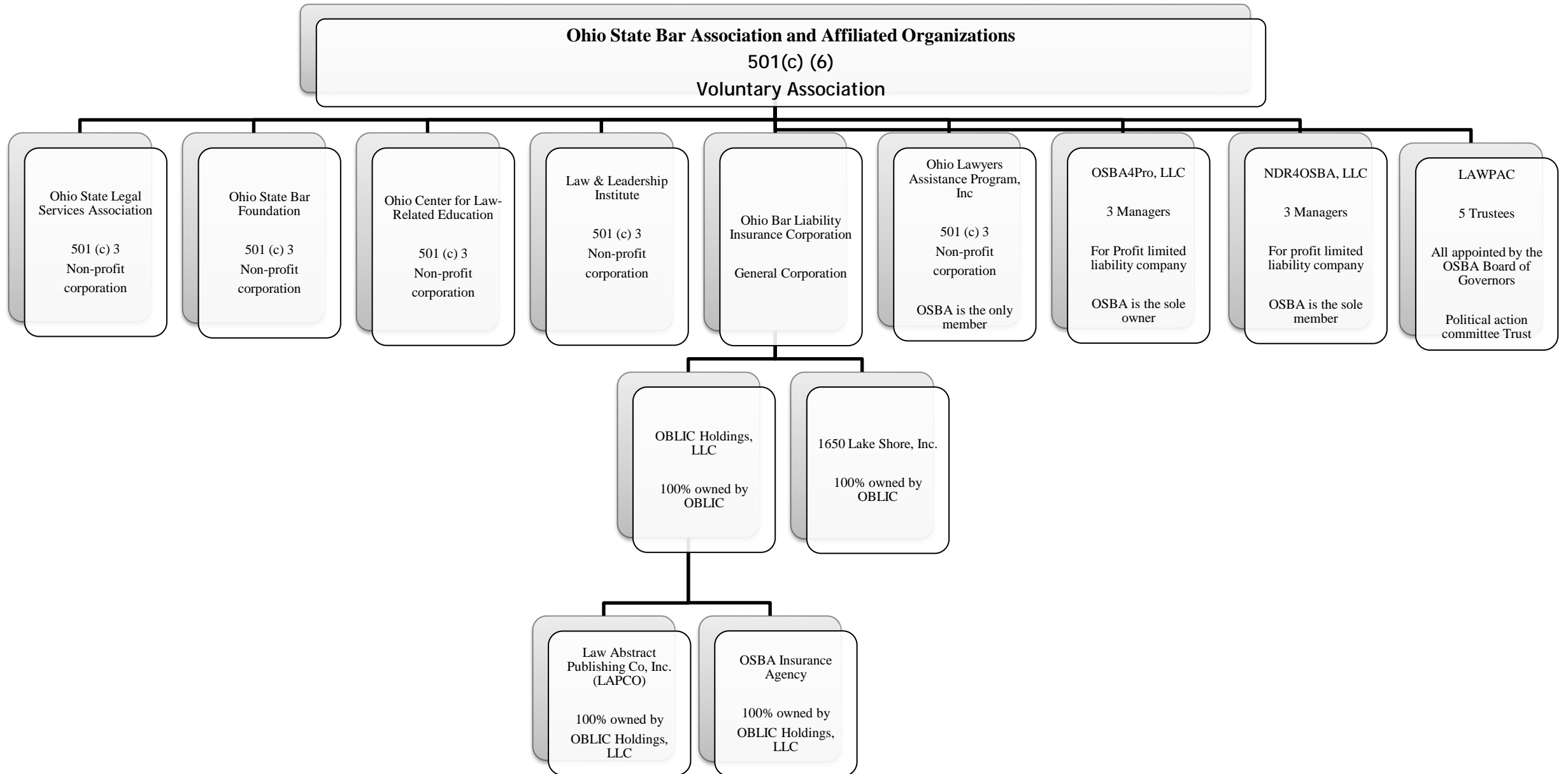
DETAILS OF WRITE-INS

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

(a) Active Status Count

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....	1	R - Registered - Non-domiciled RRGs.....	0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - See DSLI).....	0	Q - Qualified - Qualified or accredited reinsurer.....	0
D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile.....	0	N - None of the above - Not allowed to write business in the state.....	56

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



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SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
<p style="font-size: 2em; font-weight: bold; margin: 0;">NONE</p>															

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PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....			0.000	
2. Allied lines.....			0.000	
3. Farmowners multiple peril.....			0.000	
4. Homeowners multiple peril.....			0.000	
5. Commercial multiple peril.....			0.000	
6. Mortgage guaranty.....			0.000	
8. Ocean marine.....			0.000	
9. Inland marine.....			0.000	
10. Financial guaranty.....			0.000	
11.1. Medical professional liability - occurrence.....			0.000	
11.2. Medical professional liability - claims-made.....			0.000	
12. Earthquake.....			0.000	
13. Group accident and health.....			0.000	
14. Credit accident and health.....			0.000	
15. Other accident and health.....			0.000	
16. Workers' compensation.....			0.000	
17.1 Other liability-occurrence.....	54,669		0.000	46.774
17.2 Other liability-claims made.....	2,150,731	1,508,342	70.132	17.348
17.3 Excess workers' compensation.....			0.000	
18.1 Products liability-occurrence.....			0.000	
18.2 Products liability-claims made.....			0.000	
19.1, 19.2 Private passenger auto liability.....			0.000	
19.3, 19.4 Commercial auto liability.....			0.000	
21. Auto physical damage.....			0.000	
22. Aircraft (all perils).....			0.000	
23. Fidelity.....			0.000	
24. Surety.....			0.000	
26. Burglary and theft.....			0.000	
27. Boiler and machinery.....			0.000	
28. Credit.....			0.000	
29. International.....			0.000	
30. Warranty.....			0.000	
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0.000	
35. Totals.....	2,205,400	1,508,342	68.393	17.818
DETAILS OF WRITE-INS				
3401.....			0.000	
3402.....			0.000	
3403.....			0.000	
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0.000	XXX
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0.000	

PART 2 - DIRECT PREMIUMS WRITTEN

Lines of Business	1	2	3
	Current Quarter	Current Year to Date	Prior Year Year to Date
1. Fire.....			
2. Allied lines.....			
3. Farmowners multiple peril.....			
4. Homeowners multiple peril.....			
5. Commercial multiple peril.....			
6. Mortgage guaranty.....			
8. Ocean marine.....			
9. Inland marine.....			
10. Financial guaranty.....			
11.1. Medical professional liability - occurrence.....			
11.2. Medical professional liability - claims made.....			
12. Earthquake.....			
13. Group accident and health.....			
14. Credit accident and health.....			
15. Other accident and health.....			
16. Workers' compensation.....			
17.1 Other liability-occurrence.....	54,669	54,669	32,069
17.2 Other liability-claims made.....	3,044,021	3,044,021	2,716,456
17.3 Excess workers' compensation.....			
18.1 Products liability-occurrence.....			
18.2 Products liability-claims made.....			
19.1 19.2 Private passenger auto liability.....			
19.3 19.4 Commercial auto liability.....			
21. Auto physical damage.....			
22. Aircraft (all perils).....			
23. Fidelity.....			
24. Surety.....			
26. Burglary and theft.....			
27. Boiler and machinery.....			
28. Credit.....			
29. International.....			
30. Warranty.....			
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0
35. Totals.....	3,098,690	3,098,690	2,748,525
DETAILS OF WRITE-INS			
3401.....			
3402.....			
3403.....			
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2018 Loss and LAE Payments on Claims Reported as of Prior Year-End	2018 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2018 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year-End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year-End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols. 7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/Deficiency (Cols. 11 + 12)
1. 2015 + Prior.....	2,059	66	2,125	(879)		(879)	2,547		15	2,562	(391)	(51)	(442)
2. 2016.....	1,316	66	1,382	162		162	684		15	699	(470)	(51)	(521)
3. Subtotals 2016 + Prior.....	3,375	132	3,507	(717)	0	(717)	3,231	0	30	3,261	(861)	(102)	(963)
4. 2017.....	2,017	454	2,471	(127)		(127)	2,148		255	2,403	4	(199)	(195)
5. Subtotals 2017 + Prior.....	5,392	586	5,978	(844)	0	(844)	5,379	0	285	5,664	(857)	(301)	(1,158)
6. 2018.....	XXX	XXX	XXX	XXX	1,313	1,313	XXX	1,319	93	1,412	XXX	XXX	XXX
7. Totals.....	5,392	586	5,978	(844)	1,313	469	5,379	1,319	378	7,076	(857)	(301)	(1,158)
8. Prior Year-End's Surplus As Regards Policyholders	30,065												
											Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7
											1.(15.9)%	2.(51.4)%	3.(19.4)%
													Col. 13, Line 7 Line 8
													4.(3.9)%

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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

Explanation:

1. The data for this supplement is not required to be filed.
2. The data for this supplement is not required to be filed.
3. The data for this supplement is not required to be filed.
4. The data for this supplement is not required to be filed.

Bar Code:



Overflow Page for Write-Ins

NONE

SCHEDULE A - VERIFICATION

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Current year change in encumbrances.....		
4. Total gain (loss) on disposals.....		
5. Deduct amounts received on disposals.....		
6. Total foreign exchange change in book/adjusted carrying value.....		
7. Deduct current year's other-than-temporary impairment recognized.....		
8. Deduct current year's depreciation.....		
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....	0	0
10. Deduct total nonadmitted amounts.....		
11. Statement value at end of current period (Line 9 minus Line 10).....	0	0

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....		
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and mortgage interest points and commitment fees.....		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....		
10. Deduct current year's other-than-temporary impairment recognized.....		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Total valuation allowance.....		
13. Subtotal (Line 11 plus Line 12).....	0	0
14. Deduct total nonadmitted amounts.....		
15. Statement value at end of current period (Line 13 minus Line 14).....	0	0

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....		
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and depreciation.....		
9. Total foreign exchange change in book/adjusted carrying value.....		
10. Deduct current year's other-than-temporary impairment recognized.....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	0	0

NONE

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	37,315,777	35,879,204
2. Cost of bonds and stocks acquired.....	3,201,596	10,727,155
3. Accrual of discount.....	2,008	17,624
4. Unrealized valuation increase (decrease).....	(95,006)	590,180
5. Total gain (loss) on disposals.....	0	498,009
6. Deduct consideration for bonds and stocks disposed of.....	1,782,553	10,068,600
7. Deduct amortization of premium.....	96,274	327,795
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees.....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10).....	38,545,548	37,315,777
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	38,545,548	37,315,777

SCHEDULE D - PART 1B

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a).....	27,548,485	3,181,066	1,782,553	(392,662)	28,554,336			27,548,485
2. NAIC 2 (a).....	1,974,635			298,396	2,273,031			1,974,635
3. NAIC 3 (a).....					0			
4. NAIC 4 (a).....					0			
5. NAIC 5 (a).....					0			
6. NAIC 6 (a).....					0			
7. Total Bonds.....	29,523,120	3,181,066	1,782,553	(94,266)	30,827,367	0	0	29,523,120
PREFERRED STOCK								
8. NAIC 1.....					0			
9. NAIC 2.....					0			
10. NAIC 3.....					0			
11. NAIC 4.....					0			
12. NAIC 5.....					0			
13. NAIC 6.....					0			
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	29,523,120	3,181,066	1,782,553	(94,266)	30,827,367	0	0	29,523,120

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

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999.....		XXX	NONE		

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	987,208
2. Cost of short-term investments acquired.....		
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....		987,208
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	0	0
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	0	0

**Sch. DB - Pt. A - Verification
NONE**

**Sch. DB - Pt. B - Verification
NONE**

**Sch. DB - Pt. C - Sn. 1
NONE**

**Sch. DB - Pt. C - Sn. 2
NONE**

**Sch. DB - Verification
NONE**

SCHEDULE E - PART 2 - VERIFICATION

Cash Equivalents

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	992,212	
2. Cost of cash equivalents acquired.....	2,463,482	11,651,428
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....	3,084,671	10,659,216
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/ adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	371,023	992,212
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	371,023	992,212

**Sch. A - Pt. 2
NONE**

**Sch. A - Pt. 3
NONE**

**Sch. B - Pt. 2
NONE**

**Sch. B - Pt. 3
NONE**

**Sch. BA - Pt. 2
NONE**

**Sch. BA - Pt. 3
NONE**

SCHEDULE D - PART 3

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
Bonds - U.S. Government									
38376G SM 3	GNR 1096 C - CMBS		02/13/2018	Piper Jaffray Co.		394,524	384,357	683	1
0599999	Total - Bonds - U.S. Government					394,524	384,357	683	XXX
Bonds - U.S. Special Revenue and Special Assessment									
3132X0 N2 3	FEDERAL AGRICULTURAL MORTGAGE CORP.		03/06/2018	BONY/VINING-SPARKS IBG A LTD P.		400,000	400,000		1
3133EJ EB 1	FEDERAL FARM CREDIT BANKS FUNDING CORP.		02/21/2018	BONY/VINING-SPARKS IBG A LTD P.		350,000	350,000		1
3133EJ JK 6	FEDERAL FARM CREDIT BANKS FUNDING CORP.		03/27/2018	U.S. Bank		175,000	175,000		1
3136A8 T4 2	FNR 12113B MA - CMO/RMBS		01/23/2018	VARIOUS		526,933	525,037	1,074	1
3137BB A9 1	FHR 4337B BA - CMO/RMBS		01/17/2018	BONY/VINING-SPARKS IBG A LTD P.		370,659	371,298	650	1
3137FD F9 8	FHR 4757B CA - CMO/RMBS		02/12/2018	RBC CAPITAL MARKETS, LLC		400,942	396,114	539	1
59333P 2E 7	MIAMI-DADE CNTY FLA AVIATION REV.		01/16/2018	Piper Jaffray Co.		317,938	325,000	2,245	1FE
3199999	Total - Bonds - U.S. Special Revenue and Special Assessments					2,541,473	2,542,449	4,508	XXX
Bonds - Industrial and Miscellaneous									
06051G HB 8	BANK OF AMERICA CORP.		03/23/2018	BONY/VINING-SPARKS IBG A LTD P.		245,070	250,000	888	1FE
3899999	Total - Bonds - Industrial and Miscellaneous					245,070	250,000	888	XXX
8399997	Total - Bonds - Part 3					3,181,066	3,176,807	6,079	XXX
8399999	Total - Bonds					3,181,066	3,176,807	6,079	XXX
Common Stocks - Mutual Funds									
808509 75 6	SCHWAB CAP:TOT STK MKT		03/28/2018	Charles Schwab & Co Inc.	156.130	7,500	XXX		V
921937 68 6	VANGUARD SC VAL IDX;ADM		03/22/2018	U.S. Bank	58.755	3,340	XXX		U
921937 69 4	VANGUARD MC VAL IDX;ADM		03/22/2018	U.S. Bank	64.313	3,715	XXX		U
921937 71 0	VANGUARD SC GR IDX;ADM		03/22/2018	U.S. Bank	18.689	1,108	XXX		U
921937 72 8	VANGUARD MC GR IDX;ADM		03/22/2018	U.S. Bank	23.074	1,327	XXX		U
922908 72 8	VANGUARD TSM IDX;ADM		03/22/2018	U.S. Bank	52.168	3,539	XXX		U
9299999	Total - Common Stocks - Mutual Funds					20,529	XXX	0	XXX
9799997	Total - Common Stocks - Part 3					20,529	XXX	0	XXX
9799999	Total - Common Stocks					20,529	XXX	0	XXX
9899999	Total - Preferred and Common Stocks					20,529	XXX	0	XXX
9999999	Total - Bonds, Preferred and Common Stocks					3,201,596	XXX	6,079	XXX

QE04

(a) For all common stock bearing NAIC market indicator "U" provide the number of such issues:....5.

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	F o r e i g n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase (Decrease)	Current Year's (Amortization) / Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)
Bonds - U.S. Government																					
36208S	DQ 2		03/01/2018	Paydown		337	337	335	335		2		2		337			0	2	07/15/2029	1
36209R	CG 6		03/01/2018	Paydown		3	3	3	3		0		0		3			0	0	12/15/2029	1
36217V	AY 0		03/01/2018	Paydown		77	77	77	77		0		0		77		0	0	1	01/15/2030	1
38376G	SM 3		03/01/2018	Paydown		970	970	995			(26)		(26)		970		0	0	0	07/16/2044	1
38378B	X5 3		03/01/2018	Paydown		26,876	26,876	26,557	26,547		329		329		26,876		0	0	47	06/16/2053	1
38378B	XQ 7		03/01/2018	Paydown		1,354	1,354	1,356	1,354		(0)		(0)		1,354		0	0	2	01/16/2036	1
38379N	YA 4		03/01/2018	Paydown		22,900	22,900	23,383	23,375		(475)		(475)		22,900		0	0	44	08/20/2041	1
0599999	Total - Bonds - U.S. Government					52,516	52,516	52,706	51,690	0	(170)	0	(170)	0	52,516	0	0	0	96	XXX	XXX
Bonds - U.S. Special Revenue and Special Assessment																					
3136A8	T4 2		03/01/2018	Paydown		18,919	18,919	18,988			(68)		(68)		18,919		0	0	19	08/25/2041	1
3136AP	QC 9		03/01/2018	Paydown		18,150	18,150	18,328	18,330		(180)		(180)		18,150		0	0	47	05/25/2043	1
3136AT	LD 4		03/01/2018	Paydown		11,128	11,128	11,312	11,311		(183)		(183)		11,128		0	0	32	01/25/2045	1
3136AV	V9 7		03/01/2018	Paydown		12,018	12,018	12,468	12,465		(448)		(448)		12,018		0	0	32	08/25/2040	1
3137BB	A9 1		03/01/2018	Paydown		11,252	11,252	11,233			19		19		11,252		0	0	18	02/15/2046	1
3137BH	FC 6		03/01/2018	Paydown		4,884	4,884	4,987	4,982		(98)		(98)		4,884		(0)	(0)	13	11/15/2041	1
3137BM	2S 4		03/01/2018	Paydown		11,071	11,071	11,211	11,212		(140)		(140)		11,071		0	0	37	01/15/2042	1
3137BM	H6 6		03/01/2018	Paydown		8,163	8,163	8,280	8,279		(116)		(116)		8,163		0	0	25	11/15/2043	1
3137BY	6U 9		03/01/2018	Paydown		3,964	3,964	4,059	4,055		(91)		(91)		3,964		0	0	10	09/15/2042	1
3137FD	F9 8		03/01/2018	Paydown		5,488	5,488	5,555			(67)		(67)		5,488		0	0		07/15/2045	1
60534T	NG 6		01/02/2018	Maturity @ 100.0		350,000	350,000	413,413	350,000				0		350,000		0	0	8,750	01/01/2018	1FE
3199999	Total - Bonds - U.S. Special Revenue and Special Assessments					455,037	455,037	519,834	420,634	0	(1,373)	0	(1,373)	0	455,037	0	0	0	8,982	XXX	XXX
Bonds - Industrial and Miscellaneous																					
06051G	ET 2		01/11/2018	Maturity @ 100.0		100,000	100,000	99,672	99,998		2		2		100,000		0	0	1,000	01/11/2018	1FE
14912L	5P 2		03/01/2018	Maturity @ 100.0		400,000	400,000	400,192	400,008		(8)		(8)		400,000		0	0	2,600	03/01/2018	1FE
46625H	GY 0		01/16/2018	Maturity @ 100.0		400,000	400,000	426,572	400,146		(146)		(146)		400,000		0	0	12,000	01/15/2018	1FE
58933Y	AC 9		01/31/2018	Maturity @ 100.0		375,000	375,000	374,239	374,988		12		12		375,000		0	0	2,063	01/31/2018	1FE
3899999	Total - Bonds - Industrial and Miscellaneous					1,275,000	1,275,000	1,300,675	1,275,139	0	(139)	0	(139)	0	1,275,000	0	0	0	17,663	XXX	XXX
8399997	Total - Bonds - Part 4					1,782,553	1,782,553	1,873,215	1,747,464	0	(1,682)	0	(1,682)	0	1,782,553	0	0	0	26,740	XXX	XXX
8399999	Total - Bonds					1,782,553	1,782,553	1,873,215	1,747,464	0	(1,682)	0	(1,682)	0	1,782,553	0	0	0	26,740	XXX	XXX
9999999	Total - Bonds, Preferred and Common Stocks					1,782,553	XXX	1,873,215	1,747,464	0	(1,682)	0	(1,682)	0	1,782,553	0	0	0	26,740	XXX	XXX

QE05

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues:0.

Sch. DB - Pt. A - Sn. 1
NONE

Sch. DB - Pt. B - Sn. 1
NONE

Sch. DB - Pt. D - Sn. 1
NONE

Sch. DB - Pt. D - Sn. 2
NONE

Sch. DL - Pt. 1
NONE

Sch. DL - Pt. 2
NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
Open Depositories								
Key Bank.....					1,047,997	1,262,943	1,689,159	XXX
0199999. Total Open Depositories.....	XXX	XXX	0	0	1,047,997	1,262,943	1,689,159	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	0	0	1,047,997	1,262,943	1,689,159	XXX
0499999. Cash in Company's Office.....	XXX	XXX	XXX	XXX	100	100	100	XXX
0599999. Total Cash.....	XXX	XXX	0	0	1,048,097	1,263,043	1,689,259	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8	9
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
Exempt Money Market Mutual Funds as Identified by the SVO								
	FIRST AMER:GVT OBLG;Y.....		03/29/2018.....	.....1.250		.....371,023	.....627	.....551
85999999	Total - Exempt Money Market Mutual Funds as Identified by the SVO.....					.....371,023	.....627	.....551
88999999	Total - Cash Equivalents.....					.....371,023	.....627	.....551

QE13