



35602201820100103

2018

Document Code: 201

# QUARTERLY STATEMENT AS OF SEPTEMBER 30, 2018 OF THE CONDITION AND AFFAIRS OF THE OHIC Insurance Company

|   |  |  |
|---|--|--|
| NAIC Group Code <u>0831</u> , <u>0831</u><br><small>(current period) (prior period)</small>           | NAIC Company Code <u>35602</u>   | Employer's ID Number <u>31-0926059</u> |
| Organized under the Laws of <u>Ohio</u> ,   | State of Domicile or Port of Entry <u>OH</u>   |  |
| Country of Domicile: <u>UNITED STATES OF AMERICA</u>  |  |  |
| Incorporated/Organized <u>02/09/1978</u>  | Commenced Business <u>03/01/1978</u>   |  |
| Statutory Home Office <u>300 E BROAD STREET, #450</u><br><small>(Street and Number)</small>           | <u>COLUMBUS, OH, 43215</u><br><small>(City or Town, State, Country and Zip Code)</small> |  |
| Main Administrative Office <u>185 GREENWOOD ROAD</u><br><small>(Street and Number)</small>            | <u>NAPA, CA, 94558</u><br><small>(City or Town, State, Country and Zip Code)</small>     |  |
|   | <u>(707)226-0100</u><br><small>(Area Code)(Telephone Number)</small>                     |  |
| Mail Address <u>PO BOX 2900</u><br><small>(Street and Number or P.O. Box)</small>                     | <u>NAPA, CA, 94558</u><br><small>(City or Town, State, Country and Zip Code)</small>     |  |
| Primary Location of Books and Records <u>185 GREENWOOD ROAD</u><br><small>(Street and Number)</small> | <u>(707)226-0100</u><br><small>(Area Code)(Telephone Number)</small>                     |  |
|   | <u>NAPA, CA, 94558</u><br><small>(City or Town, State, Country and Zip Code)</small>     |  |
| Internet Website Address <u>www.thedoctors.com</u>  |  |  |
| Statutory Statement Contact <u>DOUGLAS CHARLES WILL</u><br><small>(Name)</small>                      | <u>(707)226-0100</u><br><small>(Area Code)(Telephone Number)(Extension)</small>          |  |
| <u>statefilingOHIC@thedoctors.com</u><br><small>(E-Mail Address)</small>                              | <u>(707)226-0180</u><br><small>(Fax Number)</small>                                      |  |

### OFFICERS

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

### OTHERS

|  |   |
|--|---|
| WILLIAM ALLEN FLEMING, CHIEF OPERATING OFFICER | DARRELL BLAIR RANUM, REGIONAL VICE PRESIDENT    |
| DOUGLAS CHARLES WILL, VICE PRESIDENT           | DOUGLAS WILLIAM BOLTZ, ASSISTANT VICE PRESIDENT |

### DIRECTORS OR TRUSTEES

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

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

State of California  
County of NAPA ss

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

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

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 2018, by William Allen Fleming, proved to me on the basis of satisfactory evidence to be the person who appeared before me, and David Armand McHale, proved to me on the basis of satisfactory evidence to be the person who appeared before me, and David Gerard Preimesberger, proved to me on the basis of satisfactory evidence to be the person who appeared before me.

\_\_\_\_\_  
(Notary Public Signature)

a. Is this an original filing? Yes[X] No[ ]

b. If no: 1. State the amendment number 0  
2. Date filed \_\_\_\_\_  
3. Number of pages attached 0

**ASSETS**

|   | Current Statement Date |                            |  | 4<br>December 31<br>Prior Year Net<br>Admitted Assets |
|---|------------------------|----------------------------|--|---|
|   | 1<br>Assets            | 2<br>Nonadmitted<br>Assets | 3<br>Net Admitted<br>Assets<br>(Cols. 1 - 2) |   |
| 1. Bonds .....  | 16,080,068             |                            | 16,080,068                                   | 90,811,313  |
| 2. Stocks:  |                        |                            |  |   |
| 2.1 Preferred stocks .....  |                        |                            |  |   |
| 2.2 Common stocks .....   |                        |                            |  |   |
| 3. Mortgage loans on real estate:   |                        |                            |  |   |
| 3.1 First liens .....   |                        |                            |  |   |
| 3.2 Other than first liens .....  |                        |                            |  |   |
| 4. Real estate:   |                        |                            |  |   |
| 4.1 Properties occupied by the company (less \$.....0<br>encumbrances) .....  |                        |                            |  |   |
| 4.2 Properties held for the production of income (less \$.....0<br>encumbrances) .....  |                        |                            |  |   |
| 4.3 Properties held for sale (less \$.....0 encumbrances) .....   |                        |                            |  |   |
| 5. Cash (\$.....1,659,952), cash equivalents (\$.....379,477) and<br>short-term investments (\$.....0) .....  | 2,039,429              |                            | 2,039,429                                    | 2,866,915   |
| 6. Contract loans (including \$.....0 premium notes) .....  |                        |                            |  |   |
| 7. Derivatives .....  |                        |                            |  |   |
| 8. Other invested assets .....  |                        |                            |  |   |
| 9. Receivables for securities .....   |                        |                            |  |   |
| 10. Securities lending reinvested collateral assets .....   |                        |                            |  | 3,966,955   |
| 11. Aggregate write-ins for invested assets .....   |                        |                            |  |   |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) .....   | 18,119,497             |                            | 18,119,497                                   | 97,645,183  |
| 13. Title plants less \$.....0 charged off (for Title insurers only) .....  |                        |                            |  |   |
| 14. Investment income due and accrued .....   | 227,916                |                            | 227,916                                      | 698,015   |
| 15. Premiums and considerations:  |                        |                            |  |   |
| 15.1 Uncollected premiums and agents' balances in the course of<br>collection .....   |                        |                            |  |   |
| 15.2 Deferred premiums, agents' balances and installments booked<br>but deferred and not yet due (including \$.....0 earned but<br>unbilled premiums) ..... |                        |                            |  |   |
| 15.3 Accrued retrospective premiums (\$.....0) and contracts<br>subject to redetermination (\$.....0) .....   |                        |                            |  |   |
| 16. Reinsurance:  |                        |                            |  |   |
| 16.1 Amounts recoverable from reinsurers .....  | 201,814                |                            | 201,814                                      | 161,868   |
| 16.2 Funds held by or deposited with reinsured companies .....  |                        |                            |  |   |
| 16.3 Other amounts receivable under reinsurance contracts .....   |                        |                            |  |   |
| 17. Amounts receivable relating to uninsured plans .....  |                        |                            |  |   |
| 18.1 Current federal and foreign income tax recoverable and interest thereon .....  | 616,193                |                            | 616,193                                      |   |
| 18.2 Net deferred tax asset .....   | 5,952                  | 484                        | 5,468  | 137,683   |
| 19. Guaranty funds receivable or on deposit .....   |                        |                            |  |   |
| 20. Electronic data processing equipment and software .....   |                        |                            |  |   |
| 21. Furniture and equipment, including health care delivery assets<br>(\$.....0) .....  |                        |                            |  |   |
| 22. Net adjustments in assets and liabilities due to foreign exchange rates .....   |                        |                            |  |   |
| 23. Receivables from parent, subsidiaries and affiliates .....  | 56,524                 |                            | 56,524                                       |   |
| 24. Health care (\$.....0) and other amounts receivable .....   |                        |                            |  |   |
| 25. Aggregate write-ins for other-than-invested assets .....  |                        |                            |  |   |
| 26. TOTAL assets excluding Separate Accounts, Segregated Accounts and<br>Protected Cell Accounts (Lines 12 to 25) .....                                     | 19,227,897             | 484                        | 19,227,413                                   | 98,642,749  |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell<br>Accounts .....  |                        |                            |  |   |
| 28. TOTAL (Lines 26 and 27) .....   | 19,227,897             | 484                        | 19,227,413                                   | 98,642,749  |
| <b>DETAILS OF WRITE-INS</b>   |                        |                            |  |   |
| 1101. ....  |                        |                            |  |   |
| 1102. ....  |                        |                            |  |   |
| 1103. ....  |                        |                            |  |   |
| 1198. Summary of remaining write-ins for Line 11 from overflow page .....   |                        |                            |  |   |
| 1199. TOTALS (Lines 1101 through 1103 plus 1198) (Line 11 above) .....  |                        |                            |  |   |
| 2501. ....  |                        |                            |  |   |
| 2502. ....  |                        |                            |  |   |
| 2503. ....  |                        |                            |  |   |
| 2598. Summary of remaining write-ins for Line 25 from overflow page .....   |                        |                            |  |   |
| 2599. TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above) .....  |                        |                            |  |   |

**LIABILITIES, SURPLUS AND OTHER FUNDS**

|   | 1<br>Current<br>Statement Date | 2<br>December 31,<br>Prior Year |
|---|--------------------------------|---------------------------------|
| 1. Losses (current accident year \$.....0) .....  |                                | 5,900,832                       |
| 2. Reinsurance payable on paid losses and loss adjustment expenses .....  |                                |                                 |
| 3. Loss adjustment expenses .....   |                                | 2,105,104                       |
| 4. Commissions payable, contingent commissions and other similar charges .....  |                                |                                 |
| 5. Other expenses (excluding taxes, licenses and fees) .....  | 57,622                         | 57,622                          |
| 6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....  |                                |                                 |
| 7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)) .....  |                                | 13,628,244                      |
| 7.2 Net deferred tax liability .....  |                                |                                 |
| 8. Borrowed money \$.....0 and interest thereon \$.....0 .....  |                                |                                 |
| 9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$.....0 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act) ..... |                                |                                 |
| 10. Advance premium .....   |                                |                                 |
| 11. Dividends declared and unpaid:  |                                |                                 |
| 11.1 Stockholders .....   |                                |                                 |
| 11.2 Policyholders .....  |                                |                                 |
| 12. Ceded reinsurance premiums payable (net of ceding commissions) .....  |                                | 0                               |
| 13. Funds held by company under reinsurance treaties .....  |                                |                                 |
| 14. Amounts withheld or retained by company for account of others .....   |                                |                                 |
| 15. Remittances and items not allocated .....   |                                |                                 |
| 16. Provision for reinsurance (including \$.....0 certified) .....  |                                |                                 |
| 17. Net adjustments in assets and liabilities due to foreign exchange rates .....   |                                |                                 |
| 18. Drafts outstanding .....  |                                |                                 |
| 19. Payable to parent, subsidiaries and affiliates .....  | 125,182                        | 31,475                          |
| 20. Derivatives .....   |                                |                                 |
| 21. Payable for securities .....  |                                |                                 |
| 22. Payable for securities lending .....  |                                | 3,966,955                       |
| 23. Liability for amounts held under uninsured plans .....  |                                |                                 |
| 24. Capital notes \$.....0 and interest thereon \$.....0 .....  |                                |                                 |
| 25. Aggregate write-ins for liabilities .....   |                                |                                 |
| 26. TOTAL liabilities excluding protected cell liabilities (Lines 1 through 25) .....   | 182,804                        | 25,690,231                      |
| 27. Protected cell liabilities .....  |                                |                                 |
| 28. TOTAL liabilities (Lines 26 and 27) .....   | 182,804                        | 25,690,231                      |
| 29. Aggregate write-ins for special surplus funds .....   |                                |                                 |
| 30. Common capital stock .....  | 3,591,990                      | 3,591,990                       |
| 31. Preferred capital stock .....   |                                |                                 |
| 32. Aggregate write-ins for other-than-special surplus funds .....  |                                |                                 |
| 33. Surplus notes .....   |                                |                                 |
| 34. Gross paid in and contributed surplus .....   | 25,000,000                     | 78,000,000                      |
| 35. Unassigned funds (surplus) .....  | (9,547,381)                    | (8,639,472)                     |
| 36. Less treasury stock, at cost:   |                                |                                 |
| 36.1 .....0 shares common (value included in Line 30 \$.....0) .....  |                                |                                 |
| 36.2 .....0 shares preferred (value included in Line 31 \$.....0) .....   |                                |                                 |
| 37. Surplus as regards policyholders (Lines 29 to 35, less 36) .....  | 19,044,609                     | 72,952,518                      |
| 38. TOTALS (Page 2, Line 28, Col. 3) .....  | 19,227,413                     | 98,642,749                      |
| <b>DETAILS OF WRITE-INS</b>   |                                |                                 |
| 2501. ....  |                                |                                 |
| 2502. ....  |                                |                                 |
| 2503. ....  |                                |                                 |
| 2598. Summary of remaining write-ins for Line 25 from overflow page .....   |                                |                                 |
| 2599. TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above) .....  |                                |                                 |
| 2901. ....  |                                |                                 |
| 2902. ....  |                                |                                 |
| 2903. ....  |                                |                                 |
| 2998. Summary of remaining write-ins for Line 29 from overflow page .....   |                                |                                 |
| 2999. TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above) .....  |                                |                                 |
| 3201. ....  |                                |                                 |
| 3202. ....  |                                |                                 |
| 3203. ....  |                                |                                 |
| 3298. Summary of remaining write-ins for Line 32 from overflow page .....   |                                |                                 |
| 3299. TOTALS (Lines 3201 through 3203 plus 3298) (Line 32 above) .....  |                                |                                 |

**STATEMENT OF INCOME**

|   | 1<br>Current Year<br>to Date | 2<br>Prior Year<br>to Date | 3<br>Prior Year Ended<br>December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| <b>UNDERWRITING INCOME</b>  |                              |                            |                                      |
| 1. Premiums earned  |                              |                            |                                      |
| 1.1 Direct (written \$.....0)   |                              |                            |                                      |
| 1.2 Assumed (written \$.....0)  |                              |                            |                                      |
| 1.3 Ceded (written \$.....0)  |                              |                            |                                      |
| 1.4 Net (written \$.....0)  |                              |                            |                                      |
| <b>DEDUCTIONS:</b>  |                              |                            |                                      |
| 2. Losses incurred (current accident year \$.....0)   |                              |                            |                                      |
| 2.1 Direct  | 11,548,406                   | (15,955,000)               | (38,096,343)                         |
| 2.2 Assumed   |                              |                            |                                      |
| 2.3 Ceded   | 11,073,023                   | (6,992,357)                | (9,885,478)                          |
| 2.4 Net   | 475,383                      | (8,962,643)                | (28,210,865)                         |
| 3. Loss adjustment expenses incurred  | (289,472)                    | (5,898,983)                | (9,122,248)                          |
| 4. Other underwriting expenses incurred   | 727,164                      | 106,435                    | 137,088                              |
| 5. Aggregate write-ins for underwriting deductions  |                              |                            |                                      |
| 6. TOTAL underwriting deductions (Lines 2 through 5)  | 913,075                      | (14,755,190)               | (37,196,025)                         |
| 7. Net income of protected cells  |                              |                            |                                      |
| 8. Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)   | (913,075)                    | 14,755,190                 | 37,196,025                           |
| <b>INVESTMENT INCOME</b>  |                              |                            |                                      |
| 9. Net investment income earned   | 1,404,793                    | 1,913,576                  | 2,599,969                            |
| 10. Net realized capital gains (losses) less capital gains tax of \$.....(573,714)  | (1,308,605)                  | 97,732                     | 97,732                               |
| 11. Net investment gain (loss) (Lines 9 + 10)   | 96,188                       | 2,011,308                  | 2,697,701                            |
| <b>OTHER INCOME</b>   |                              |                            |                                      |
| 12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0)                             |                              |                            |                                      |
| 13. Finance and service charges not included in premiums  |                              |                            |                                      |
| 14. Aggregate write-ins for miscellaneous income  |                              |                            |                                      |
| 15. TOTAL other income (Lines 12 through 14)  |                              |                            |                                      |
| 16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)     | (816,887)                    | 16,766,498                 | 39,893,725                           |
| 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) | (816,887)                    | 16,766,498                 | 39,893,725                           |
| 19. Federal and foreign income taxes incurred   | (42,104)                     | 5,471,407                  | 13,576,438                           |
| 20. Net income (Line 18 minus Line 19) (to Line 22)   | (774,783)                    | 11,295,091                 | 26,317,287                           |
| <b>CAPITAL AND SURPLUS ACCOUNT</b>  |                              |                            |                                      |
| 21. Surplus as regards policyholders, December 31 prior year  | 72,952,518                   | 46,901,303                 | 46,901,303                           |
| 22. Net income (from Line 20)   | (774,783)                    | 11,295,091                 | 26,317,287                           |
| 23. Net transfers (to) from Protected Cell accounts   |                              |                            |                                      |
| 24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.....(191)   | (720)                        |                            | (1,103)                              |
| 25. Change in net unrealized foreign exchange capital gain (loss)   |                              |                            |                                      |
| 26. Change in net deferred income tax   | (237,231)                    | (127,712)                  | (215,702)                            |
| 27. Change in nonadmitted assets  | 104,825                      | 19,098                     | (49,266)                             |
| 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  | (53,000,000)                 |                            |                                      |
| 33.2 Transferred to capital (Stock Dividend)  |                              |                            |                                      |
| 33.3 Transferred from capital   |                              |                            |                                      |
| 34. Net remittances from or (to) Home Office  |                              |                            |                                      |
| 35. Dividends to stockholders   |                              |                            |                                      |
| 36. Change in treasury stock  |                              |                            |                                      |
| 37. Aggregate write-ins for gains and losses in surplus   |                              |                            |                                      |
| 38. Change in surplus as regards policyholders (Lines 22 through 37)  | (53,907,909)                 | 11,186,477                 | 26,051,215                           |
| 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)   | 19,044,609                   | 58,087,780                 | 72,952,518                           |
| <b>DETAILS OF WRITE-INS</b>   |                              |                            |                                      |
| 0501.   |                              |                            |                                      |
| 0502.   |                              |                            |                                      |
| 0503.   |                              |                            |                                      |
| 0598. Summary of remaining write-ins for Line 5 from overflow page  |                              |                            |                                      |
| 0599. TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)   |                              |                            |                                      |
| 1401.   |                              |                            |                                      |
| 1402.   |                              |                            |                                      |
| 1403.   |                              |                            |                                      |
| 1498. Summary of remaining write-ins for Line 14 from overflow page   |                              |                            |                                      |
| 1499. TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)  |                              |                            |                                      |
| 3701.   |                              |                            |                                      |
| 3702.   |                              |                            |                                      |
| 3703.   |                              |                            |                                      |
| 3798. Summary of remaining write-ins for Line 37 from overflow page   |                              |                            |                                      |
| 3799. TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above)  |                              |                            |                                      |

**CASH FLOW**

|  | 1<br>Current<br>Year<br>To Date | 2<br>Prior<br>Year<br>To Date | 3<br>Prior<br>Year Ended<br>December 31 |
|--|---------------------------------|-------------------------------|---|
| <b>Cash from Operations</b>  |                                 |                               |   |
| 1. Premiums collected net of reinsurance .....   | 0                               |                               |   |
| 2. Net investment income .....   | 1,995,893                       | 2,193,566                     | 2,902,494                               |
| 3. Miscellaneous income .....  |                                 |                               |   |
| 4. TOTAL (Lines 1 to 3) .....  | 1,995,893                       | 2,193,566                     | 2,902,494                               |
| 5. Benefit and loss related payments .....   | 6,416,161                       | (145,397)                     | (48,397)                                |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....                           |                                 |                               |   |
| 7. Commissions, expenses paid and aggregate write-ins for deductions .....   | 2,542,796                       | 2,550,168                     | 3,039,875                               |
| 8. Dividends paid to policyholders .....   |                                 |                               |   |
| 9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains<br>(losses) .....            | 13,628,619                      | (5,320,565)                   | (5,320,565)                             |
| 10. TOTAL (Lines 5 through 9) .....  | 22,587,576                      | (2,915,795)                   | (2,329,088)                             |
| 11. Net cash from operations (Line 4 minus Line 10) .....  | (20,591,683)                    | 5,109,360                     | 5,231,581                               |
| <b>Cash from Investments</b>   |                                 |                               |   |
| 12. Proceeds from investments sold, matured or repaid:   |                                 |                               |   |
| 12.1 Bonds .....   | 81,648,687                      | 27,787,428                    | 28,717,418                              |
| 12.2 Stocks .....  |                                 |                               |   |
| 12.3 Mortgage loans .....  |                                 |                               |   |
| 12.4 Real estate .....   |                                 |                               |   |
| 12.5 Other invested assets .....   |                                 |                               |   |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....                                  |                                 |                               | 0                                       |
| 12.7 Miscellaneous proceeds .....  | 3,969,375                       | 318,695                       |   |
| 12.8 TOTAL investment proceeds (Lines 12.1 to 12.7) .....  | 85,618,062                      | 28,106,123                    | 28,717,418                              |
| 13. Cost of investments acquired (long-term only):   |                                 |                               |   |
| 13.1 Bonds .....   | 8,924,093                       | 37,237,186                    | 37,689,924                              |
| 13.2 Stocks .....  |                                 |                               |   |
| 13.3 Mortgage loans .....  |                                 |                               |   |
| 13.4 Real estate .....   |                                 |                               |   |
| 13.5 Other invested assets .....   |                                 |                               |   |
| 13.6 Miscellaneous applications .....  |                                 | 5,000,613                     | 1,932,113                               |
| 13.7 TOTAL investments acquired (Lines 13.1 to 13.6) .....   | 8,924,093                       | 42,237,799                    | 39,622,037                              |
| 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) .....  | 76,693,969                      | (14,131,676)                  | (10,904,619)                            |
| <b>Cash from Financing and Miscellaneous Sources</b>   |                                 |                               |   |
| 16. Cash provided (applied):   |                                 |                               |   |
| 16.1 Surplus notes, capital notes .....  |                                 |                               |   |
| 16.2 Capital and paid in surplus, less treasury stock .....  | (53,000,000)                    |                               |   |
| 16.3 Borrowed funds .....  |                                 |                               |   |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities .....                                      |                                 |                               |   |
| 16.5 Dividends to stockholders .....   |                                 |                               |   |
| 16.6 Other cash provided (applied) .....   | (3,929,772)                     | 4,892,297                     | 1,843,030                               |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 through 16.4 minus Line 16.5<br>plus Line 16.6) ..... | (56,929,772)                    | 4,892,297                     | 1,843,030                               |
| <b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>   |                                 |                               |   |
| 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and<br>17) .....           | (827,486)                       | (4,130,019)                   | (3,830,008)                             |
| 19. Cash, cash equivalents and short-term investments:   |                                 |                               |   |
| 19.1 Beginning of year .....   | 2,866,915                       | 6,696,923                     | 6,696,923                               |
| 19.2 End of period (Line 18 plus Line 19.1) .....  | 2,039,429                       | 2,566,904                     | 2,866,915                               |

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

|         |  |  |  |  |
|---------|--|--|--|--|
| 20.0001 |  |  |  |  |
|---------|--|--|--|--|

## Notes to Financial Statement

**1. Summary of Significant Accounting Policies and Going Concern****A. Accounting Practices**

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

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

|   | SSAP # | F/S Page | F/S Line # | September 30, |               |
|---|--------|----------|------------|---------------|---------------|
|   |        |          |            | 2018          | 2017          |
| Net Income  |        |          |            |               |               |
| (1) State basis (Page 4, Line 20, Columns 1 & 3)                                | XXX    | XXX      | XXX        | \$ (774,783)  | \$ 26,317,287 |
| (2) State prescribed practices that are an increase / (decrease) from NAIC SAP: |        |          |            |               |               |
| (3) State permitted practices that are an increase / (decrease) from NAIC SAP:  |        |          |            |               |               |
| (4) NAIC SAP (1-2-3=4)  | XXX    | XXX      | XXX        | \$ (774,783)  | \$ 26,317,287 |
| Surplus   |        |          |            |               |               |
| (5) State basis (Page 3, Line 37, Columns 1 & 2)                                | XXX    | XXX      | XXX        | \$ 19,044,609 | \$ 72,952,518 |
| (6) State prescribed practices that are an increase / (decrease) from NAIC SAP: |        |          |            |               |               |
| (7) State permitted practices that are an increase / (decrease) from NAIC SAP:  |        |          |            |               |               |
| (8) NAIC SAP (5-6-7=8)  | XXX    | XXX      | XXX        | \$ 19,044,609 | \$ 72,952,518 |

**C. Accounting Policy**

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

**D. Going Concern**

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

**2. Accounting Changes and Corrections of Errors - None****3. Business Combinations and Goodwill - None****4. Discontinued Operations - None****5. Investments****D. Loan-Backed Securities**

(1) Prepayment assumptions for loan-backed and structured securities were obtained from our investment software vendor through an independent third-party source.

(2) Loan-backed and structured securities with a recognized other-than-temporary impairment - None

(3) Securities held that were other-than-temporary because the present value of cash flows expected to be collected was less than the amortized cost of securities - None

(4) All impaired securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss

|   | Amount       |
|---|--------------|
| a. The aggregate amount of unrealized losses:                             |              |
| 1. Less than 12 months  | \$ 3,786     |
| 2. 12 months or longer  | \$ 80,874    |
| b. The aggregate related fair value of securities with unrealized losses: |              |
| 1. Less than 12 months  | \$ 100,415   |
| 2. 12 months or longer  | \$ 1,142,177 |

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

**E. Dollar Repurchase Agreements and/or Securities Lending Transactions - None****F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - None****G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - None****H. Repurchase Agreements Transactions Accounted for as a Sale - None**

## Notes to Financial Statement

**5. Investments (Continued)**

- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - None
- M. Working Capital Finance Investments - None
- N. Offsetting and Netting of Assets and Liabilities - None

**6. Joint Ventures, Partnerships and Limited Liability Companies - None****7. Investment Income - No Significant Changes****8. Derivative Instruments - None****9. Income Taxes**

## A. Components of the Net Deferred Tax Asset/(Liability)

## (1) Change between years by tax character

|  | 09/30/2018 |         |                    | 12/31/2017 |           |                    | Change                |                      |                    |
|--|------------|---------|--------------------|------------|-----------|--------------------|-----------------------|----------------------|--------------------|
|  | (1)        | (2)     | (3)                | (4)        | (5)       | (6)                | (7)                   | (8)                  | (9)                |
|  | Ordinary   | Capital | Total<br>(Col 1+2) | Ordinary   | Capital   | Total<br>(Col 4+5) | Ordinary<br>(Col 1-4) | Capital<br>(Col 2-5) | Total<br>(Col 7+8) |
| (a) Gross deferred tax assets  | \$ 6,430   | \$ 485  | \$ 6,915           | \$ 231,329 | \$ 16,308 | \$ 247,637         | \$ (224,899)          | \$ (15,823)          | \$ (240,722)       |
| (b) Statutory valuation allowance adjustments                              |            |         |                    |            |           |                    |                       |                      |                    |
| (c) Adjusted gross deferred tax assets (1a - 1b)                           | 6,430      | 485     | 6,915              | 231,329    | 16,308    | 247,637            | (224,899)             | (15,823)             | (240,722)          |
| (d) Deferred tax assets nonadmitted  | 484        |         | 484                | 105,309    |           | 105,309            | (104,825)             |                      | (104,825)          |
| (e) Subtotal net admitted deferred tax asset (1c - 1d)                     | \$ 5,946   | \$ 485  | \$ 6,431           | \$ 126,020 | \$ 16,308 | \$ 142,328         | \$ (120,074)          | \$ (15,823)          | \$ (135,897)       |
| (f) Deferred tax liabilities   | 963        |         | 963                | 4,645      |           | 4,645              | (3,682)               |                      | (3,682)            |
| (g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f) | \$ 4,983   | \$ 485  | \$ 5,468           | \$ 121,375 | \$ 16,308 | \$ 137,683         | \$ (116,392)          | \$ (15,823)          | \$ (132,215)       |

## (2) Admission calculation components SSAP No. 101

|  | 09/30/2018 |         |                    | 12/31/2017 |           |                    | Change                |                      |                    |
|--|------------|---------|--------------------|------------|-----------|--------------------|-----------------------|----------------------|--------------------|
|  | (1)        | (2)     | (3)                | (4)        | (5)       | (6)                | (7)                   | (8)                  | (9)                |
|  | Ordinary   | Capital | Total<br>(Col 1+2) | Ordinary   | Capital   | Total<br>(Col 4+5) | Ordinary<br>(Col 1-4) | Capital<br>(Col 2-5) | Total<br>(Col 7+8) |
| (a) Federal income taxes paid in prior years recoverable through loss carrybacks   | \$ -       | \$ -    | \$ -               | \$ 85,012  | \$ 16,015 | \$ 101,027         | \$ (85,012)           | \$ (16,015)          | \$ (101,027)       |
| (b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation (lesser of 2(b)1 and 2(b)2 below) | 6,431      |         | 6,431              | 36,657     |           | 36,657             | (30,226)              |                      | (30,226)           |
| 1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date   | 6,431      |         | 6,431              | 36,657     |           | 36,657             | (30,226)              |                      | (30,226)           |
| 2. Adjusted gross deferred tax assets allowed per limitation threshold   | XXX        | XXX     | 2,855,727          | XXX        | XXX       | 10,921,529         | XXX                   | XXX                  | (8,065,802)        |
| (c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities   | -          |         | -                  | 4,645      |           | 4,645              | (4,645)               |                      | (4,645)            |
| (d) Deferred tax assets admitted as the result of application of SSAP No. 101. Total 2(a) + 2(b) + 2(c)  | \$ 6,431   | \$ -    | \$ 6,431           | \$ 126,314 | \$ 16,015 | \$ 142,329         | \$ (119,883)          | \$ (16,015)          | \$ (135,898)       |

## (3) Amount of adjusted gross DTAs that can be offset against existing gross DTLs

|  | 09/30/2018    | 12/31/2017    |
|--|---------------|---------------|
| (a) Ratio percentage used to determine recovery period and threshold limitation amount                               | 1,880.000%    | 1,210.000%    |
| (b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above | \$ 19,038,178 | \$ 72,810,190 |

## Notes to Financial Statement

## 9. Income Taxes (Continued)

## (4) Impact of tax-planning strategies

## (a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character

|   | 09/30/2018 |         | 12/31/2017 |           | Change                 |                       |
|---|------------|---------|------------|-----------|------------------------|-----------------------|
|   | (1)        | (2)     | (3)        | (4)       | (5)                    | (6)                   |
|   | Ordinary   | Capital | Ordinary   | Capital   | Ordinary<br>(Col. 1-3) | Capital<br>(Col. 2-4) |
| 1. Adjusted gross DTAs amount from Note 9A1(c).....   | \$ 6,430   | \$ 485  | \$ 231,329 | \$ 16,308 | \$ (224,899)           | \$ (15,823)           |
| 2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies.....                  | %          | %       | %          | %         | %                      | %                     |
| 3. Net admitted adjusted gross DTAs amount from Note 9A1(e).....  | \$ 5,946   | \$ 485  | \$ 126,020 | \$ 16,308 | \$ (120,074)           | \$ (15,823)           |
| 4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies..... | %          | %       | %          | %         | %                      | %                     |

## (b) Use of reinsurance-related tax-planning strategies

Does the company's tax-planning strategies include the use of reinsurance? NO

## B. Regarding Deferred Tax Liabilities That Are Not Recognized - None

## Notes to Financial Statement

## 9. Income Taxes (Continued)

## C. Major Components of Current Income Taxes Incurred

|  | (1)          | (2)           | (3)             |
|--|--------------|---------------|-----------------|
| Current income taxes incurred consist of the following major components: | 09/30/2018   | 12/31/2017    | Change (1-2)    |
| 1. Current Income Tax  |              |               |                 |
| (a) Federal  | \$ (42,104)  | \$ 13,576,438 | \$ (13,618,542) |
| (b) Foreign  |              |               |                 |
| (c) Subtotal   | \$ (42,104)  | \$ 13,576,438 | \$ (13,618,542) |
| (d) Federal income tax on net capital gains                              | (573,714)    | 52,625        | (626,339)       |
| (e) Utilization of capital loss carry-forwards                           |              |               |                 |
| (f) Other  |              |               |                 |
| (g) Federal and foreign income taxes incurred                            | \$ (615,818) | \$ 13,629,063 | \$ (14,244,881) |
| 2. Deferred Tax Assets   |              |               |                 |
| (a) Ordinary   |              |               |                 |
| (1) Discounting of unpaid losses   | \$           | \$ 224,899    | \$ (224,899)    |
| (2) Unearned premium reserve   |              |               |                 |
| (3) Policyholder reserves  |              |               |                 |
| (4) Investments  |              |               |                 |
| (5) Deferred acquisition costs   |              |               |                 |
| (6) Policyholder dividends accrual                                       |              |               |                 |
| (7) Fixed assets   |              |               |                 |
| (8) Compensation and benefits accrual                                    |              |               |                 |
| (9) Pension accrual  |              |               |                 |
| (10) Receivables - nonadmitted   |              |               |                 |
| (11) Net operating loss carry-forward                                    |              |               |                 |
| (12) Tax credit carry-forward  |              |               |                 |
| (13) Other (including items less than 5% of total ordinary tax assets)   | 6,430        | 6,430         | -               |
| (99) Subtotal  | \$ 6,430     | \$ 231,329    | \$ (224,899)    |
| (b) Statutory valuation allowance adjustment                             |              |               |                 |
| (c) Nonadmitted  | 484          | 105,309       | (104,825)       |
| (d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)               | \$ 5,946     | \$ 126,020    | \$ (120,074)    |
| (e) Capital  |              |               |                 |
| (1) Investments  | \$ 485       | \$ 16,308     | \$ (15,823)     |
| (2) Net capital loss carry-forward                                       |              |               |                 |
| (3) Real estate  |              |               |                 |
| (4) Other (including items <5% of total capital tax assets)              |              |               |                 |
| (99) Subtotal  | \$ 485       | \$ 16,308     | \$ (15,823)     |
| (f) Statutory valuation allowance adjustment                             |              |               |                 |
| (g) Nonadmitted  |              |               |                 |
| (h) Admitted capital deferred tax assets (2e99 - 2f - 2g)                | 485          | 16,308        | (15,823)        |
| (i) Admitted deferred tax assets (2d + 2h)                               | \$ 6,431     | \$ 142,328    | \$ (135,897)    |
| 3. Deferred Tax Liabilities  |              |               |                 |
| (a) Ordinary   |              |               |                 |
| (1) Investments  | \$ 963       | \$ 4,645      | \$ (3,682)      |
| (2) Fixed assets   |              |               |                 |
| (3) Deferred and uncollected premium                                     |              |               |                 |
| (4) Policyholder reserves  |              |               |                 |
| (5) Other (including items <5% of total ordinary tax liabilities)        |              |               |                 |
| (99) Subtotal  | \$ 963       | \$ 4,645      | \$ (3,682)      |
| (b) Capital  |              |               |                 |
| (1) Investments  | \$           | \$            | \$              |
| (2) Real estate  |              |               |                 |
| (3) Other (including items <5% of total capital tax liabilities)         |              |               |                 |
| (99) Subtotal  | \$           | \$            | \$              |
| (c) Deferred tax liabilities (3a99 + 3b99)                               | \$ 963       | \$ 4,645      | \$ (3,682)      |
| 4. Net deferred tax assets/liabilities (2i - 3c)                         | \$ 5,468     | \$ 137,683    | \$ (132,215)    |

## Notes to Financial Statement

**9. Income Taxes (Continued)**

## D. Among the More Significant Book to Tax Adjustments

|  | September 30, 2018  | Effective Tax Rate |
|--|---------------------|--------------------|
| Provision Computed at Statutory Rate .....         | \$ (292,026)        | 21.000%            |
| Increase/(Decrease) in taxes resulting from: ..... |                     |                    |
| Tax-exempt Interest .....                          | (86,657)            | 6.000              |
| Loss and LAE Reserves .....                        | (224,749)           | 16.000             |
| Accrued Market Discount .....                      | 3,681               |                    |
| OTTI .....   | (16,015)            | 1.000              |
| Other .....  | (51)                |                    |
| Total statutory income taxes                       | <u>\$ (615,817)</u> | <u>44.000%</u>     |

## E. Operating Loss and Tax Credit Carryforwards

- (1) At September 30, 2018, the Company had the following unused loss carryforwards available to offset against future taxable income.

Net operating loss carryforward, \$ -  
Capital loss carryforward, \$ -  
AMT credit carryforward of, \$ -

- (2) Income tax expense available for recoupment

|            | Ordinary      | Capital   | Total         |
|------------|---------------|-----------|---------------|
| 2016 ..... | \$ -          | \$ -      | \$ -          |
| 2017 ..... | \$ 13,575,619 | \$ 52,625 | \$ 13,628,244 |
| 2018 ..... | \$ -          | \$ -      | \$ -          |

- (3) Deposits admitted under IRC Section 6603 - None

## F. Consolidated Federal Income Tax Return

- (1) The Company's Federal Income Tax Return is consolidated with The Doctors Company (TDC) and its other subsidiaries. See Schedule Y for a complete list of the entities with which the Federal Tax Return is consolidated for the current year.
- (2) The method of allocation between the companies is subject to a written agreement approved by the Board of Directors. Tax payments are made to, or refunds received from TDC in amounts which would result from filing separate tax returns with federal taxing authorities.

## G. Federal or Foreign Income Tax Loss Contingencies

The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

**10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties - No Significant Changes****11. Debt - None****12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans - None****13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations**

## 4. Dividends Paid and Declared

On May 25, 2018, the Company received approval from the Ohio Department of Insurance to pay an extraordinary dividend of \$53,000,000 to TDC on or after June 11, 2018. The dividend was paid on June 27, 2018.

**14. Liabilities, Contingencies and Assessments - No Significant Changes****15. Leases - None****16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk - No Significant Changes****17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities**

## B. Transfers and Servicing of Financial Assets

- (2) The Company engages in securities lending activities to further its investment objectives. The terms and conditions of the program are governed by a Master Securities Lending Agreement between the Company or its parent and its administering agent. The agent regularly reviews Company portfolios and makes securities available to the general market. When a transaction is executed, the agent handles all aspects of the transaction. The Company receives daily and monthly reports of earnings, counterparty exposure and collateral position. Collateral positions are required to be 102% of the amount loaned and are invested in short-term securities generally less than 90 days in length, while the maximum maturity of any repurchase agreement shall not exceed 93 days. The Company understands the inherent risks in these transactions and has structured the agreement in order to sufficiently manage or mitigate these risks. The Company maintains effective control of the loaned securities and has the ability to recall any securities on loan. Collateral assets are of high quality and short term, further reducing risk. The Company has no securities on loan as of September 30, 2018.

- (4) None

## C. Wash Sales - None

**18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans - None**

## Notes to Financial Statement

## 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - None

## 20. Fair Value Measurements

## A. Fair Value Measurement

The Company has categorized its assets and liabilities that are reported on the balance sheet at fair value into the three-level fair value hierarchy as reflected in the table below. The three-level fair value hierarchy is based on the degree of subjectivity inherent in the valuation method by which fair value was determined. The three levels are defined as follows.

- Level 1 – Quoted prices in active markets for identical assets and liabilities: This category for items measured at fair value on a recurring basis includes exchange-traded stocks. The fair value of these stocks is based on quoted prices in active markets.
- Level 2 – Significant observable inputs: The estimated fair values for some of these items are determined by independent pricing services using observable inputs. Others are based on quotes from markets which are not considered actively traded. This category for items measured at fair value on a recurring basis may include long-term bonds.
- Level 3 – Significant unobservable inputs: The estimated fair values for these items may be determined by various parties using methods that are not available to the Company, or that may be unavailable to the general public. This category for items measured at fair value on a recurring basis may include limited partnerships or other invested assets.

## (1) Fair value measurements at reporting date

| Description for each class of asset or liability | Level 1 | Level 2   | Level 3 | Total     | Net Asset Value (NAV) included in Level 2 |
|--|---------|-----------|---------|-----------|---|
| a. Assets at fair value                          |         |           |         |           |   |
| Bonds .....                                      | \$ –    | \$ 57,131 | \$ –    | \$ 57,131 | \$ –                                      |
| Total assets measured at fair value              | \$ –    | \$ 57,131 | \$ –    | \$ 57,131 | \$ –                                      |
| b. Liabilities at fair value                     |         |           |         |           |   |
| .....  | \$ –    | \$ –      | \$ –    | \$ –      | \$ –                                      |
| Total liabilities measured at fair value         | \$ –    | \$ –      | \$ –    | \$ –      | \$ –                                      |

At the end of each reporting period, the Company evaluates whether any event has occurred or circumstances have changed that would cause an instrument to be transferred between Levels 1 and 2. This policy also applies to transfers into or out of Level 3 as stated in paragraph 3 below. During the current year, no transfers into or out of Level 1 or 2 were required.

## (2) Fair value measurements in Level 3 of the fair value hierarchy - None

## (3) Policy on Transfers Into and Out of Level 3

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred into or out of Level 3. During the current year, no transfers into or out of Level 3 were required.

## (4) Inputs and Techniques Used for Level 2 and level 3 Fair Values

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

Preferred stocks carried at fair value categorized as Level 2 were valued using a market approach. These valuations were determined to be Level 2 valuations because either quoted markets prices for similar instruments in an active market were utilized via matrix pricing as described above or because quoted markets prices for identical instruments trading in an inactive market were utilized.

Common stocks carried at fair value categorized as Level 2 were valued using a market approach. These valuations were determined to be Level 2 valuations because quoted markets prices for identical instruments trading in an inactive market were utilized. When an equity instrument is illiquid due to limited trading activity, the use of quoted markets prices for identical instruments was determined by the Company to be the most reliable method to determine fair value.

The Company has no assets or liabilities measured at fair value in the Level 3 category.

## (5) Derivative fair values - None

## B. Other Fair Value Disclosures - None

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

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

| Type of Financial Instrument                            | Aggregate Fair Value | Admitted Assets | Level 1   | Level 2       | Level 3 | Not Practicable (Carrying Value) | Net Asset Value (NAV) included in Level 2 |
|---|----------------------|-----------------|-----------|---------------|---------|----------------------------------|---|
| Bonds .....   | \$ 16,695,662        | \$ 16,080,068   | \$ –      | \$ 16,695,662 | \$ –    | \$ –                             | \$ –                                      |
| Cash, cash equivalents and short-term investments ..... | 2,039,429            | 2,039,429       | 2,039,429 | –             | –       | –                                | –   |

## D. Not Practicable to Estimate Fair Value - None

## 21. Other Items - None

## 22. Events Subsequent

Management of the Company has evaluated all events occurring after September 30, 2018 through November 13, 2018, the date the statutory financial statements were available to be issued.

# Notes to Financial Statement

**23. Reinsurance** - None

**24. Retrospectively Rated Contracts & Contracts Subject to Redetermination** - None

**25. Changes in Incurred Losses and Loss Adjustment Expenses**

A. Reasons for Changes in the Provision for Incurred Loss and Loss Adjustment Expenses Attributable to Insured Events of Prior Years

Incurred losses and loss adjustment expenses attributable to insured events of prior years has increased by \$185,910 from \$746,073,024 as of December 31, 2017 to \$746,258,934 as of September 30, 2018 as a result of re-estimation of unpaid losses and loss adjustment expenses on medical malpractice lines of insurance. This increase is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

Effective May 31, 2018, the Company ceded all of their remaining loss and loss adjustment expense liabilities to TDC under an Assumed Reinsurance Agreement (ARA). The ARA had no income or surplus effect and was approved by the Ohio Department of Insurance on June 6, 2018. The amount of the cession was \$7,502,151.

B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Losses and Loss Adjustment Expenses - None

**26. Intercompany Pooling Arrangements** - None

**27. Structured Settlements** - None

**28. Health Care Receivables** - None

**29. Participating Policies** - None

**30. Premium Deficiency Reserves**

|   |            |
|---|------------|
| 1. Liability carried for premium deficiency reserves:             | \$—        |
| 2. Date of the most recent evaluation of this liability:          | 12/31/2017 |
| 3. Was anticipated investment income utilized in the calculation? | NO         |

**31. High Deductibles** - None

**32. Discounting of Liabilities by Withdrawal Characteristics For Unpaid Losses or Unpaid Loss Adjustment Expenses** - None

**33. Asbestos/Environmental Reserves** - None

**34. Subscriber Savings Accounts** - None

**35. Multiple Peril Crop Insurance** - None

**36. Financial Guaranty Insurance** - None

# GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES GENERAL

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

| 1<br>Name of Entity | 2<br>NAIC Company Code | 3<br>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? Yes[ ] No[X] N/A[ ]  
If yes, attach an explanation.
  
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .....12/31/2015.....
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .....12/31/2015.....
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .....02/24/2017.....
- 6.4 By what department or departments?  
Ohio Department of Insurance
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes[ ] No[ ] N/A[X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes[ ] No[ ] N/A[X]
  
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes[ ] No[X]
- 7.2 If yes, give full information
  
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes[ ] No[X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes[ ] No[X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

| 1<br>Affiliate Name | 2<br>Location (City, State) | 3<br>FRB       | 4<br>OCC       | 5<br>FDIC      | 6<br>SEC       |
|---------------------|-----------------------------|----------------|----------------|----------------|----------------|
| .....               | .....                       | ..... No ..... | ..... No ..... | ..... No ..... | ..... No ..... |

- 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).

### FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes[X] No[ ]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$..... 56,524

### INVESTMENT

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

## GENERAL INTERROGATORIES (Continued)

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

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes  No   
 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes  No  N/A   
 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 the 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<br>Name of Custodian(s)        | 2<br>Custodian Address                     |
|----------------------------------|--|
| Northern Trust Corporation ..... | 50 S. LaSalle St., Chicago, IL 60603 ..... |

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<br>Name(s) | 2<br>Location(s) | 3<br>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<br>Old Custodian | 2<br>New Custodian | 3<br>Date of Change | 4<br>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<br>Name of Firm or Individual                    | 2<br>Affiliation |
|--|------------------|
| Deutsche Investment Management Americas, Inc. .... | U .....          |
| Richard E. Anderson, MD .....                      | I .....          |
| David Preimesberger .....                          | I .....          |
| David Charles, MD .....                            | I .....          |
| Steven Bensinger .....                             | I .....          |
| Eugene M. Bullis .....                             | I .....          |
| Charles Kossman, MD .....                          | I .....          |
| Robert Pike .....                                  | I .....          |
| Mary Ann Thode, JD .....                           | I .....          |
| T.C. Wilson .....                                  | I .....          |

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets? 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<br>Central Registration<br>Depository Number | 2<br>Name of Firm or Individual                    | 3<br>Legal Entity<br>Identifier (LEI) | 4<br>Registered<br>With | 5<br>Investment Management<br>Agreement (IMA) Filed |
|--|--|---------------------------------------|-------------------------|---|
| 104518 .....                                   | Deutsche Investment Management Americas, Inc. .... |                                       | SEC .....               | NO .....  |

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes  No

18.2 If no, list exceptions:

N/A

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.

**GENERAL INTERROGATORIES (Continued)**

Has the reporting entity self-designated 5\*GI securities?

Yes[ ] No[X]

# GENERAL INTERROGATORIES

## PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?  
If yes, attach an explanation. Yes[ ] No[ ] N/A[X]
2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?  
If yes, attach an explanation. Yes[ ] No[X]
- 3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? 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<br>Line of Business | 2<br>Maximum Interest | 3<br>Discount Rate | TOTAL DISCOUNT     |                 |           |            | DISCOUNT TAKEN DURING PERIOD |                 |            |             |
|-----------------------|-----------------------|--------------------|--------------------|-----------------|-----------|------------|------------------------------|-----------------|------------|-------------|
|                       |                       |                    | 4<br>Unpaid Losses | 5<br>Unpaid LAE | 6<br>IBNR | 7<br>TOTAL | 8<br>Unpaid Losses           | 9<br>Unpaid LAE | 10<br>IBNR | 11<br>TOTAL |
| 04.2999 Total .....   |                       |                    | .....              | .....           | .....     | .....      | .....                        | .....           | .....      | .....       |

5. 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 balance of the 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[X] No[ ]
- 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<br>NAIC<br>Company<br>Code | 2<br>ID Number   | 3<br>Name of<br>Reinsurer | 4<br>Domiciliary<br>Jurisdiction | 5<br>Type of<br>Reinsurer | 6<br>Certified<br>Reinsurer Rating<br>(1 through 6) | 7<br>Effective Date<br>of Certified<br>Reinsurer Rating |
|------------------------------|------------------|---------------------------|----------------------------------|---------------------------|---|---|
|                              |                  |                           |                                  |                           |   |   |
|                              |                  |                           |                                  |                           |   |   |
| <b>All other insurers</b>    |                  |                           |                                  |                           |   |   |
| 00000 .....                  | AA-5320039 ..... | Peak Reins Co Ltd .....   | HKG .....                        | Unauthorized .....        |   |   |
|                              |                  |                           |                                  |                           |   |   |

# SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

## Current Year to Date - Allocated by States and Territories

|   | 1                 | Direct Premiums Written |                    | Direct Losses Paid (Deducting Salvage) |                    | Direct Losses Unpaid |                    |
|---|-------------------|-------------------------|--------------------|--|--------------------|----------------------|--------------------|
|   |                   | 2                       | 3                  | 4                                      | 5                  | 6                    | 7                  |
| States, etc.  | Active Status (a) | Current Year To Date    | Prior Year To Date | Current Year To Date                   | Prior Year To Date | Current Year To Date | Prior Year To Date |
| 1. Alabama (AL)   | N                 |                         |                    |  |                    |                      |                    |
| 2. Alaska (AK)  | L                 |                         |                    |  |                    |                      |                    |
| 3. Arizona (AZ)   | L                 |                         |                    |  |                    |                      |                    |
| 4. Arkansas (AR)  | L                 |                         |                    |  |                    |                      |                    |
| 5. California (CA)  | N                 |                         |                    |  |                    |                      |                    |
| 6. Colorado (CO)  | L                 |                         |                    |  |                    |                      |                    |
| 7. Connecticut (CT)   | N                 |                         |                    |  |                    |                      |                    |
| 8. Delaware (DE)  | N                 |                         |                    |  |                    |                      |                    |
| 9. District of Columbia (DC)  | N                 |                         |                    |  |                    |                      |                    |
| 10. Florida (FL)  | N                 |                         |                    |  |                    |                      |                    |
| 11. Georgia (GA)  | L                 |                         |                    |  |                    |                      |                    |
| 12. Hawaii (HI)   | N                 |                         |                    |  |                    |                      |                    |
| 13. Idaho (ID)  | L                 |                         |                    |  |                    |                      |                    |
| 14. Illinois (IL)   | L                 |                         |                    |  |                    |                      |                    |
| 15. Indiana (IN)  | L                 |                         |                    |  |                    | 112,430              |                    |
| 16. Iowa (IA)   | L                 |                         |                    |  |                    |                      |                    |
| 17. Kansas (KS)   | L                 |                         |                    |  |                    |                      |                    |
| 18. Kentucky (KY)   | L                 |                         |                    |  |                    | 3,747,658            | 3,075,198          |
| 19. Louisiana (LA)  | N                 |                         |                    |  |                    |                      |                    |
| 20. Maine (ME)  | N                 |                         |                    |  |                    |                      |                    |
| 21. Maryland (MD)   | L                 |                         |                    |  |                    | 285,372              | 21,204,564         |
| 22. Massachusetts (MA)  | N                 |                         |                    |  |                    |                      |                    |
| 23. Michigan (MI)   | L                 |                         |                    |  |                    |                      |                    |
| 24. Minnesota (MN)  | L                 |                         |                    |  |                    |                      |                    |
| 25. Mississippi (MS)  | N                 |                         |                    |  |                    |                      |                    |
| 26. Missouri (MO)   | L                 |                         |                    |  |                    |                      |                    |
| 27. Montana (MT)  | L                 |                         |                    |  |                    |                      |                    |
| 28. Nebraska (NE)   | L                 |                         |                    |  |                    |                      |                    |
| 29. Nevada (NV)   | L                 |                         |                    |  |                    |                      |                    |
| 30. New Hampshire (NH)  | N                 |                         |                    |  |                    |                      |                    |
| 31. New Jersey (NJ)   | E                 |                         |                    |  |                    |                      |                    |
| 32. New Mexico (NM)   | L                 |                         |                    |  |                    |                      |                    |
| 33. New York (NY)   | L                 |                         |                    |  |                    |                      |                    |
| 34. North Carolina (NC)   | N                 |                         |                    |  |                    |                      |                    |
| 35. North Dakota (ND)   | L                 |                         |                    |  |                    |                      |                    |
| 36. Ohio (OH)   | L                 |                         |                    |  |                    | 15,485,662           | 6,004,297          |
| 37. Oklahoma (OK)   | L                 |                         |                    |  |                    |                      |                    |
| 38. Oregon (OR)   | L                 |                         |                    |  |                    |                      |                    |
| 39. Pennsylvania (PA)   | L                 |                         |                    |  |                    |                      |                    |
| 40. Rhode Island (RI)   | N                 |                         |                    |  |                    |                      |                    |
| 41. South Carolina (SC)   | N                 |                         |                    |  |                    |                      |                    |
| 42. South Dakota (SD)   | L                 |                         |                    |  |                    |                      |                    |
| 43. Tennessee (TN)  | L                 |                         |                    |  |                    |                      |                    |
| 44. Texas (TX)  | L                 |                         |                    |  |                    |                      |                    |
| 45. Utah (UT)   | L                 |                         |                    |  |                    |                      |                    |
| 46. Vermont (VT)  | N                 |                         |                    |  |                    |                      |                    |
| 47. Virginia (VA)   | N                 |                         |                    |  |                    |                      |                    |
| 48. Washington (WA)   | L                 |                         |                    |  |                    |                      |                    |
| 49. West Virginia (WV)  | L                 |                         |                    |  |                    |                      |                    |
| 50. Wisconsin (WI)  | L                 |                         |                    | 60,000                                 |                    |                      |                    |
| 51. Wyoming (WY)  | L                 |                         |                    |  |                    |                      |                    |
| 52. American Samoa (AS)   | N                 |                         |                    |  |                    |                      |                    |
| 53. Guam (GU)   | N                 |                         |                    |  |                    |                      |                    |
| 54. Puerto Rico (PR)  | N                 |                         |                    |  |                    |                      |                    |
| 55. U.S. Virgin Islands (VI)  | N                 |                         |                    |  |                    |                      |                    |
| 56. Northern Mariana Islands (MP)                                   | N                 |                         |                    |  |                    |                      |                    |
| 57. Canada (CAN)  | N                 |                         |                    |  |                    |                      |                    |
| 58. Aggregate other alien (OT)                                      | X X X             |                         |                    |  |                    |                      |                    |
| 59. Totals  | X X X             |                         |                    | 60,000                                 |                    | 19,631,122           | 30,284,059         |
| <b>DETAILS OF WRITE-INS</b>   |                   |                         |                    |  |                    |                      |                    |
| 58001   | X X X             |                         |                    |  |                    |                      |                    |
| 58002   | X X X             |                         |                    |  |                    |                      |                    |
| 58003   | X X X             |                         |                    |  |                    |                      |                    |
| 58998 Summary of remaining write-ins for Line 58 from overflow page | X X X             |                         |                    |  |                    |                      |                    |
| 58999 TOTALS (Lines 58001 through 58003 plus 58998) (Line 58 above) | X X X             |                         |                    |  |                    |                      |                    |

(a) Active Status Counts:

|  |       |  |       |
|--|-------|--|-------|
| L Licensed or Chartered - Licensed insurance carrier or domiciled RRG  | 33    | R Registered - Non-domiciled RRGs                              | _____ |
| E Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile See DSLI) | 1     | Q Qualified - Qualified or accredited reinsurer                | _____ |
| D Domestic Surplus Lines Insurer (DSL) Reporting entities authorized to write surplus lines in the state of domicile.                  | _____ | N None of the above Not allowed to write business in the state | 23    |

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

|  | FEIN       | STATE | NAIC # | OWNERSHIP |
|--|------------|-------|--------|-----------|
| The Doctors Company, An Interinsurance Exchange (TDC)                    | 95-3014772 | CA    | 34495  |           |
| Insurance Subsidiaries and their Affiliates                              |            |       |        |           |
| TDC National Assurance Company (TDCNA)                                   | 95-4234708 | OR    | 41050  | 100%      |
| TDC Specialty Insurance Company (TDCSI)                                  | 95-4241120 | DC    | 34487  | 100%      |
| TDC Specialty Underwriters, Inc. (TDCSU)                                 | 81-1383341 | CT    |        | 100%      |
| OHIC Insurance Company (OHIC)  | 31-0926059 | OH    | 35602  | 100%      |
| The Doctors Company Risk Retention Group, A Reciprocal Exchange (TDCRRG) | 80-0787558 | DC    | 14347  | 0%        |
| TDCRRG Attorney In Fact, Inc. (TDCRRG AIF)                               | 82-3550531 | DC    |        | 100%      |
| TDC Special Risks Insurance Company (TDCSR)                              | 30-0638006 | DC    |        | 100%      |
| First Professionals Insurance Company, Inc. (FPIC)                       | 59-6614702 | FL    | 33383  | 100%      |
| American Physicians Assurance Corporation (APA)                          | 38-2102867 | MI    | 33006  | 100%      |
| Chandler Office Park, LLC  | 38-3511421 | MI    |        | 100%      |
| Michigan Medical Advantage, Inc., dba Medical Advantage Group (MAG)      | 38-3316792 | MI    |        | 100%      |
| Consortium of Independent Physician Associations, Inc. (CIPA)            | 20-3476926 | MI    |        | 100%      |
| Sales and Administration Subsidiaries                                    |            |       |        |           |
| The Doctors Management Company (TDMC)                                    | 95-2958888 | CA    |        | 100%      |
| The Doctors Company Insurance Services, LLC (TDCIS)                      | 30-0597630 | CA    |        | 100%      |
| Real Estate Investment   |            |       |        |           |
| Napa Kohl's Holdings, LLC  | 47-3861060 | CA    |        | 100%      |
| Napa Parkway Plaza, LLC  | 47-3854901 | CA    |        | 58%       |
| Napa Town Center Partners, LLC   | 68-0512177 | CA    |        | 100%      |
| Napa Center Preferred, LLC   | 46-3923579 | CA    |        | 12%       |
| Wake Forest Investments, LLC   | 81-3199862 | CA    |        | 100%      |
| Market of Wake Forest, LLC   | 81-3107313 | NC    |        | 70%       |
| Pier 88 Investment Partners, LLC   | 46-3506954 | DE    |        | 29.07%    |
| Asheville Marketplace Holdings, LLC                                      | 82-4381367 | NC    |        | 100%      |
| Asheville Marketplace, TIC   | 30-1027710 | NC    |        | 74.90%    |

**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) | *  |
| 0831       | The Doctors Group | 34495             | 95-3014772 |              |     |  | The Doctors Company, An Interinsurance Exchange         | CA                   | UDP                              | The Doctors Management Company                          | Ownership, Board of Directors, Attorney-In-Fact                                    |  |   | N                                |    |
| 0831       | The Doctors Group | 33006             | 38-2102867 |              |     |  | American Physicians Assurance Corporation               | MI                   | IA                               | The Doctors Company, An Interinsurance Exchange         | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 33006             | 38-2102867 |              |     |  | American Physicians Assurance Corporation               | MI                   | IA                               | The Doctors Management Company                          | Board of Directors, Management   |  | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 00000             | 30-1027710 |              |     |  | Asheville Marketplace, TIC                              | NC                   | NIA                              | The Doctors Company, An Interinsurance Exchange         | Ownership  | 74.9                                       | The Doctors Company, An Interinsurance Exchange, ZH Asheville, LLC                | N                                |    |
| 0831       | The Doctors Group | 00000             | 82-4381367 |              |     |  | Asheville Marketplace Holdings, LLC                     | NC                   | NIA                              | The Doctors Company, An Interinsurance Exchange         | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 00000             | 38-3511421 |              |     |  | Chandler Office Park, LLC                               | MI                   | NIA                              | The Doctors Company, An Interinsurance Exchange         | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 00000             | 20-3476926 |              |     |  | Consortium of Independent Physician Associations, Inc.  | MI                   | NIA                              | Michigan Medical Advantage, DBA Medical Advantage Group | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 33383             | 59-6614702 |              |     |  | First Professionals Insurance Company, Inc.             | FL                   | IA                               | The Doctors Company, An Interinsurance Exchange         | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 33383             | 59-6614702 |              |     |  | First Professionals Insurance Company, Inc.             | FL                   | IA                               | The Doctors Management Company                          | Board of Directors, Management   |  | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 00000             | 81-3107313 |              |     |  | Market of Wake Forest, LLC                              | NC                   | NIA                              | Wake Forest Investments, LLC                            | Ownership  | 70.0                                       | The Doctors Company, An Interinsurance Exchange, Wake Forest Investments, LLC     | N                                |    |
| 0831       | The Doctors Group | 00000             | 38-3316792 |              |     |  | Michigan Medical Advantage, DBA Medical Advantage Group | MI                   | NIA                              | The Doctors Company, An Interinsurance Exchange         | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 00000             | 38-3316792 |              |     |  | Michigan Medical Advantage, DBA Medical Advantage Group | MI                   | NIA                              | The Doctors Management Company                          | Board of Directors, Management   |  | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 00000             | 46-3923579 |              |     |  | Napa Center Preferred, LLC                              | CA                   | NIA                              | The Doctors Company, An Interinsurance Exchange         | Influence  | 12.0                                       | The Doctors Company, An Interinsurance Exchange, Napa Center Holdings, LLC        | N                                |    |
| 0831       | The Doctors Group | 00000             | 47-3681060 |              |     |  | Napa Kohl's Holdings, LLC                               | CA                   | NIA                              | The Doctors Company, An Interinsurance Exchange         | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 00000             | 47-3854901 |              |     |  | Napa Parkway Plaza, LLC                                 | CA                   | NIA                              | Napa Kohl's Holdings, LLC                               | Ownership  | 58.0                                       | The Doctors Company, An Interinsurance Exchange, Napa Kohl's Holdings, LLC        | N                                |    |
| 0831       | The Doctors Group | 00000             | 68-0512177 |              |     |  | Napa Town Center Partners, LLC                          | CA                   | NIA                              | The Doctors Company, An Interinsurance Exchange         | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 35602             | 31-0926059 |              |     |  | OHIC Insurance Company                                  | OH                   | RE                               | The Doctors Company, An Interinsurance Exchange         | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 35602             | 31-0926059 |              |     |  | OHIC Insurance Company                                  | OH                   | RE                               | The Doctors Management Company                          | Board of Directors, Management   |  | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 00000             | 46-3506954 |              |     |  | Pier 88 Investment Partners, LLC                        | DE                   | NIA                              | The Doctors Company, An Interinsurance Exchange         | Ownership  | 29.1                                       | The Doctors Company, An Interinsurance Exchange, Pier 88 Investment Partners, LLC | N                                |    |
| 0831       | The Doctors Group | 00000             | 30-0638006 |              |     |  | TDC Special Risks Insurance Company                     | DC                   | IA                               | The Doctors Company, An Interinsurance Exchange         | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |
| 0831       | The Doctors Group | 00000             | 30-0638006 |              |     |  | TDC Special Risks Insurance Company                     | DC                   | IA                               | The Doctors Management Company                          | Board of Directors, Management   |  | The Doctors Company, An Interinsurance Exchange                                   | N                                |    |

## 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) | *  |
| 0831       | The Doctors Group | 34487             | 95-4241120 |              |     |  | TDC Specialty Insurance Company             | DC                   | IA                               | The Doctors Company, An Interinsurance Exchange  | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange | N                                |    |
| 0831       | The Doctors Group | 34487             | 95-4241120 |              |     |  | TDC Specialty Insurance Company             | DC                   | IA                               | The Doctors Management Company                   | Board of Directors, Management   |  | The Doctors Company, An Interinsurance Exchange | N                                |    |
| 0831       | The Doctors Group | 00000             | 81-1383341 |              |     |  | TDC Specialty Underwriters, Inc.            | CT                   | NIA                              | TDC Specialty Insurance Company                  | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange | N                                |    |
| 0831       | The Doctors Group | 00000             | 30-0597630 |              |     |  | The Doctors Company Insurance Services, LLC | CA                   | NIA                              | The Doctors Company, An Interinsurance Exchange  | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange | N                                |    |
| 0831       | The Doctors Group | 00000             | 30-0597630 |              |     |  | The Doctors Company Insurance Services, LLC | CA                   | NIA                              | The Doctors Management Company                   | Board of Directors, Management   |  | The Doctors Company, An Interinsurance Exchange | N                                |    |
| 0831       | The Doctors Group | 14347             | 80-0787558 |              |     |  | The Doctors Company Risk Retention Group    | DC                   | IA                               | The Doctors Management Company                   | Board of Directors, Management   |  | The Doctors Company, An Interinsurance Exchange | N                                |    |
| 0831       | The Doctors Group | 14347             | 80-0787558 |              |     |  | The Doctors Company Risk Retention Group    | DC                   | IA                               | TDCRRG Attorney-In-Fact                          | Attorney-In-Fact   |  | The Doctors Company, An Interinsurance Exchange | N                                |    |
| 0831       | The Doctors Group | 00000             | 82-3550531 |              |     |  | TDCRRG Attorney-In-Fact                     | DC                   | NIA                              | The Doctors Company Risk Retention Group         | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange | N                                |    |
| 0831       | The Doctors Group | 00000             | 82-3550531 |              |     |  | TDCRRG Attorney-In-Fact                     | DC                   | NIA                              | The Doctors Management Company                   | Board of Directors, Management   |  | The Doctors Company, An Interinsurance Exchange | N                                |    |
| 0831       | The Doctors Group | 00000             | 95-2958888 |              |     |  | The Doctors Management Company              | CA                   | NIA                              | The Doctors Company, An Interinsurance Exchange  | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange | N                                |    |
| 0831       | The Doctors Group | 41050             | 95-4234708 |              |     |  | TDC National Assurance Company              | OR                   | IA                               | The Doctors Company, An Interinsurance Exchange  | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange | N                                |    |
| 0831       | The Doctors Group | 41050             | 95-4234708 |              |     |  | TDC National Assurance Company              | OR                   | IA                               | The Doctors Management Company                   | Board of Directors, Management   |  | The Doctors Company, An Interinsurance Exchange | N                                |    |
| 0831       | The Doctors Group | 00000             | 81-3199862 |              |     |  | Wake Forest Investments, LLC                | DE                   | NIA                              | The Doctors Company, An Interinsurance Exchange  | Ownership  | 100.0                                      | The Doctors Company, An Interinsurance Exchange | N                                |    |

Q12.1

| Asterisk | Explanation |
|----------|-------------|
| 0000001  |             |

**PART 1 - LOSS EXPERIENCE**

| Line of Business  | Current Year to Date           |                                |                                | 4<br>Prior Year to Date<br>Direct Loss<br>Percentage |
|---|--------------------------------|--------------------------------|--------------------------------|--|
|   | 1<br>Direct Premiums<br>Earned | 2<br>Direct Losses<br>Incurred | 3<br>Direct<br>Loss Percentage |  |
| 1. Fire   |                                |                                |                                |  |
| 2. Allied lines   |                                |                                |                                |  |
| 3. Farmowners multiple peril  |                                |                                |                                |  |
| 4. Homeowners multiple peril  |                                |                                |                                |  |
| 5. Commercial multiple peril  |                                |                                |                                |  |
| 6. Mortgage guaranty  |                                |                                |                                |  |
| 8. Ocean marine   |                                |                                |                                |  |
| 9. Inland marine  |                                |                                |                                |  |
| 10. Financial guaranty  |                                |                                |                                |  |
| 11.1 Medical professional liability - occurrence                    |                                |                                |                                |  |
| 11.2 Medical professional liability - claims made                   |                                | 11,548,406                     |                                |  |
| 12. Earthquake  |                                |                                |                                |  |
| 13. Group accident and health                                       |                                |                                |                                |  |
| 14. Credit accident and health                                      |                                |                                |                                |  |
| 15. Other accident and health                                       |                                |                                |                                |  |
| 16. Workers' compensation   |                                |                                |                                |  |
| 17.1 Other liability - occurrence                                   |                                |                                |                                |  |
| 17.2 Other liability - claims made                                  |                                |                                |                                |  |
| 17.3 Excess Workers' Compensation                                   |                                |                                |                                |  |
| 18.1 Products liability - occurrence                                |                                |                                |                                |  |
| 18.2 Products liability - claims made                               |                                |                                |                                |  |
| 19.1 19.2 Private passenger auto liability                          |                                |                                |                                |  |
| 19.3 19.4 Commercial auto liability                                 |                                |                                |                                |  |
| 21. Auto physical damage  |                                |                                |                                |  |
| 22. Aircraft (all perils)   |                                |                                |                                |  |
| 23. Fidelity  |                                |                                |                                |  |
| 24. Surety  |                                |                                |                                |  |
| 26. Burglary and theft  |                                |                                |                                |  |
| 27. Boiler and machinery  |                                |                                |                                |  |
| 28. Credit  |                                |                                |                                |  |
| 29. International   |                                |                                |                                |  |
| 30. Warranty  |                                |                                |                                |  |
| 31. Reinsurance-Nonproportional Assumed Property                    | X X X                          | X X X                          | X X X                          | X X X  |
| 32. Reinsurance-Nonproportional Assumed Liability                   | X X X                          | X X X                          | X X X                          | X X X  |
| 33. Reinsurance-Nonproportional Assumed Financial Lines             | X X X                          | X X X                          | X X X                          | X X X  |
| 34. Aggregate write-ins for other lines of business                 |                                |                                |                                |  |
| 35. TOTALS  |                                | 11,548,406                     |                                |  |
| DETAILS OF WRITE-INS  |                                |                                |                                |  |
| 3401.   |                                |                                |                                |  |
| 3402.   |                                |                                |                                |  |
| 3403.   |                                |                                |                                |  |
| 3498. Summary of remaining write-ins for Line 34 from overflow page |                                |                                |                                |  |
| 3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above)    |                                |                                |                                |  |

**PART 2 - DIRECT PREMIUMS WRITTEN**

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

**NONE**

**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 Reserves Developed (Savings)/ Deficiency (Cols. 11 + 12) |
| 1. 2015 + Prior .....                                    | 21,737  | (13,731)                                  | 8,006  | 8,192  |  | 8,192  |   |  |                                      |  | (13,545)   | 13,731   | 186  |
| 2. 2016 .....  |   |   |  |  |  |  |   |  |                                      |  |  |  |  |
| 3. Subtotals 2016 + Prior .....                          | 21,737  | (13,731)                                  | 8,006  | 8,192  |  | 8,192  |   |  |                                      |  | (13,545)   | 13,731   | 186  |
| 4. 2017 .....  |   |   |  |  |  |  |   |  |                                      |  |  |  |  |
| 5. Subtotals 2017 + Prior .....                          | 21,737  | (13,731)                                  | 8,006  | 8,192  |  | 8,192  |   |  |                                      |  | (13,545)   | 13,731   | 186  |
| 6. 2018 .....  | X X X   | X X X                                     | X X X  | X X X  |  |  | X X X   |  |                                      |  | X X X  | X X X  | X X X  |
| 7. Totals .....  | 21,737  | (13,731)                                  | 8,006  | 8,192  |  | 8,192  |   |  |                                      |  | (13,545)   | 13,731   | 186  |
| 8. Prior Year-End Surplus As Regards Policyholders ..... | 72,953  |   |  |  |  |  |   |  |                                      |  | Col. 11, Line 7<br>As % of Col. 1<br>Line 7<br>1..... (62.314)   | Col. 12, Line 7<br>As % of Col. 2<br>Line 7<br>2..... (100.000)  | Col. 13, Line 7<br>As % of Col. 3<br>Line 7<br>3..... 2.321                                |
|  |   |   |  |  |  |  |   |  |                                      |  |  |  | Col. 13, Line 7<br>Line 8<br>4..... 0.255  |

Q14

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

**RESPONSES**

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

Explanations:

Bar Codes:

Trusteed Surplus Statement



Medicare Part D Coverage Supplement



Director and Officer Supplement





STATEMENT AS OF **September 30, 2018** OF THE **OHIC Insurance Company**  
**SCHEDULE A - VERIFICATION**

**Real Estate**

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

**NONE**

**SCHEDULE B - VERIFICATION**

**Mortgage Loans**

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

**NONE**

**SCHEDULE BA - VERIFICATION**

**Other Long-Term Invested Assets**

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

**NONE**

**SCHEDULE D - VERIFICATION**

**Bonds and Stocks**

|  | 1            | 2                               |
|--|--------------|---------------------------------|
|  | Year To Date | Prior Year Ended<br>December 31 |
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....                           | 90,811,313   | 82,051,913                      |
| 2. Cost of bonds and stocks acquired .....   | 8,924,093    | 37,689,924                      |
| 3. Accrual of discount .....   | 3,963        | 14,208                          |
| 4. Unrealized valuation increase (decrease) .....  | (912)        | (1,396)                         |
| 5. Total gain (loss) on disposals .....  | (1,859,283)  | 150,356                         |
| 6. Deduct consideration for bonds and stocks disposed of .....   | 81,651,107   | 28,717,418                      |
| 7. Deduct amortization of premium .....  | 124,964      | 376,274                         |
| 8. Total foreign exchange change in book/adjusted carrying value .....   |              |                                 |
| 9. Deduct current year's other-than-temporary impairment recognized .....                                      | 25,455       |                                 |
| 10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....      | 2,420        |                                 |
| 11. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9 + 10) ..... | 16,080,068   | 90,811,313                      |
| 12. Deduct total nonadmitted amounts .....   |              |                                 |
| 13. Statement value at end of current period (Line 11 minus Line 12) .....                                     | 16,080,068   | 90,811,313                      |

## 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**

|   | 1  | 2   | 3   | 4   | 5  | 6   | 7  | 8  |
|---|--|---|---|---|--|---|--|--|
| NAIC Designation                        | Book/Adjusted<br>Carrying Value<br>Beginning of<br>Current Quarter | Acquisitions<br>During Current<br>Quarter | Dispositions<br>During Current<br>Quarter | Non-Trading<br>Activity During<br>Current Quarter | Book/Adjusted<br>Carrying Value<br>End of<br>First Quarter | Book/Adjusted<br>Carrying Value<br>End of<br>Second Quarter | Book/Adjusted<br>Carrying Value<br>End of<br>Third Quarter | Book/Adjusted<br>Carrying Value<br>December 31<br>Prior Year |
| <b>BONDS</b>                            |  |   |   |   |  |   |  |  |
| 1. NAIC 1 (a) .....                     | 23,912,217   |   | 7,806,252                                 | (25,897)  | 66,433,526   | 23,912,217  | 16,080,068   | 74,308,384   |
| 2. NAIC 2 (a) .....                     |  |   |   |   | 11,054,275   |   |  | 16,502,929   |
| 3. NAIC 3 (a) .....                     |  |   |   |   | 204,705  |   |  |  |
| 4. NAIC 4 (a) .....                     |  |   |   |   |  |   |  |  |
| 5. NAIC 5 (a) .....                     |  |   |   |   |  |   |  |  |
| 6. NAIC 6 (a) .....                     |  |   |   |   |  |   |  |  |
| 7. Total Bonds .....                    | 23,912,217   |   | 7,806,252                                 | (25,897)  | 77,692,506   | 23,912,217  | 16,080,068   | 90,811,313   |
| <b>PREFERRED STOCK</b>                  |  |   |   |   |  |   |  |  |
| 8. NAIC 1 .....                         |  |   |   |   |  |   |  |  |
| 9. NAIC 2 .....                         |  |   |   |   |  |   |  |  |
| 10. NAIC 3 .....                        |  |   |   |   |  |   |  |  |
| 11. NAIC 4 .....                        |  |   |   |   |  |   |  |  |
| 12. NAIC 5 .....                        |  |   |   |   |  |   |  |  |
| 13. NAIC 6 .....                        |  |   |   |   |  |   |  |  |
| 14. Total Preferred Stock .....         |  |   |   |   |  |   |  |  |
| 15. Total Bonds & Preferred Stock ..... | 23,912,217   |   | 7,806,252                                 | (25,897)  | 77,692,506   | 23,912,217  | 16,080,068   | 90,811,313   |

(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

QS102

**SCHEDULE DA - PART 1**

**Short - Term Investments**

|                       | 1<br>Book/Adjusted<br>Carrying<br>Value | 2 | 3<br>Actual<br>Cost | 4<br>Interest Collected<br>Year To Date | 5<br>Paid for Accrued<br>Interest<br>Year To Date |
|-----------------------|---|---|---------------------|---|---|
| 9199999. Totals ..... | <b>NONE</b>                             |   |                     |   |   |

**SCHEDULE DA - Verification**

**Short-Term Investments**

|  | 1<br>Year To Date | 2<br>Prior Year Ended<br>December 31 |
|--|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value, December 31 of prior year .....   |                   | 25,001                               |
| 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 .....  |                   | 25,001                               |
| 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 +<br>3 + 4 + 5 - 6 - 7 + 8 - 9) ..... |                   |                                      |
| 11. Deduct total nonadmitted amounts .....   |                   |                                      |
| 12. Statement value at end of current period (Line 10 minus Line 11) .....                                   |                   |                                      |

**SI04 Schedule DB - Part A Verification ..... NONE**

**SI04 Schedule DB - Part B Verification ..... NONE**

**SI05 Schedule DB Part C Section 1 ..... NONE**

**SI06 Schedule DB Part C Section 2 ..... NONE**

**SI07 Schedule DB - Verification ..... NONE**

**SCHEDULE E - PART 2 - VERIFICATION**

(Cash Equivalents)

|     |  | 1            | 2                               |
|-----|--|--------------|---------------------------------|
|     |  | Year To Date | Prior Year Ended<br>December 31 |
| 1.  | Book/adjusted carrying value, December 31 of prior year .....  | 576,812      | .....                           |
| 2.  | Cost of cash equivalents acquired .....  | 7,192,168    | 1,064,458                       |
| 3.  | Accrual of discount .....  | .....        | .....                           |
| 4.  | Unrealized valuation increase (decrease) .....   | .....        | .....                           |
| 5.  | Total gain (loss) on disposals .....   | .....        | .....                           |
| 6.  | Deduct consideration received on disposals .....   | 7,389,503    | 487,646                         |
| 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 +<br>3 + 4 + 5 - 6 - 7 + 8 - 9) ..... | 379,477      | 576,812                         |
| 11. | Deduct total nonadmitted amounts .....   | .....        | .....                           |
| 12. | Statement value at end of current period (Line 10 minus Line 11) .....                                   | 379,477      | 576,812                         |

**E01 Schedule A Part 2 ..... NONE**

**E01 Schedule A Part 3 ..... NONE**

**E02 Schedule B Part 2 ..... NONE**

**E02 Schedule B Part 3 ..... NONE**

**E03 Schedule BA Part 2 ..... NONE**

**E03 Schedule BA Part 3 ..... NONE**

**E04 Schedule D Part 3 ..... NONE**

# SCHEDULE D - PART 4

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

| 1<br>CUSIP<br>Identification                               | 2<br>Description   | 3<br>F<br>o<br>r<br>e<br>i<br>g<br>n | 4<br>Disposal<br>Date | 5<br>Name of<br>Purchaser | 6<br>Number<br>of Shares<br>of Stock | 7<br>Consideration | 8<br>Par<br>Value | 9<br>Actual<br>Cost | 10<br>Prior Year<br>Book/<br>Adjusted<br>Carrying<br>Value | Change in Book/Adjusted Carrying Value                   |  |   |   |  | 16<br>Book/<br>Adjusted<br>Carrying Value<br>at Disposal<br>Date | 17<br>Foreign<br>Exchange<br>Gain (Loss)<br>on Disposal | 18<br>Realized<br>Gain (Loss)<br>on Disposal | 19<br>Total<br>Gain (Loss)<br>on Disposal | 20<br>Bond Interest/<br>Stock<br>Dividends<br>Received<br>During Year | 21<br>Stated<br>Contractual<br>Maturity<br>Date | 22<br>NAIC<br>Designation<br>or Market<br>Indicator (a) |       |
|--|--|--------------------------------------|-----------------------|---------------------------|--------------------------------------|--------------------|-------------------|---------------------|--|--|--|---|---|--|--|---|--|---|---|---|---|-------|
|  |  |                                      |                       |                           |                                      |                    |                   |                     |  | 11<br>Unrealized<br>Valuation<br>Increase/<br>(Decrease) | 12<br>Current Year's<br>(Amortization)/<br>Accretion | 13<br>Current Year's<br>Other Than<br>Temporary<br>Impairment<br>Recognized | 14<br>Total<br>Change in<br>B./A.C.V.<br>(11 + 12 - 13) | 15<br>Total<br>Foreign<br>Exchange<br>Change in<br>B./A.C.V. |  |   |  |   |   |   |   |       |
| <b>Bonds - U.S. Governments</b>                            |  |                                      |                       |                           |                                      |                    |                   |                     |  |  |  |   |   |  |  |   |  |   |   |   |   |       |
| 36296KMW9  | GNMA #693473   |                                      | 09/17/2018            | PRINCIPAL RECEIPT         | X X X                                | 2,351              | 2,351             | 2,364               | 2,395  |  | (45)   |   | (45)  |  | 2,351  |   |  |   | 95  | 06/15/2038                                      | 1   |       |
| 36207JZR7  | GNMA PASS-THRU X SINGLE FAMILY                                   |                                      | 09/17/2018            | PRINCIPAL RECEIPT         | X X X                                | 208                | 208               | 211                 | 208  |  |  |   |   |  | 208  |   |  |   | 9   | 05/15/2028                                      | 1   |       |
| 36208WCM3  | GNMA PASS-THRU X SINGLE FAMILY                                   |                                      | 09/17/2018            | PRINCIPAL RECEIPT         | X X X                                | 328                | 328               | 328                 | 328  |  | 1  |   | 1   |  | 328  |   |  |   | 14  | 07/15/2028                                      | 1   |       |
| 36209NCP5  | GNMA PASS-THRU X SINGLE FAMILY                                   |                                      | 09/17/2018            | PRINCIPAL RECEIPT         | X X X                                | 131                | 131               | 133                 | 131  |  |  |   |   |  | 131  |   |  |   | 6   | 05/15/2028                                      | 1   |       |
| 36295QVU1  | GNMA PASS-THRU X SINGLE FAMILY                                   |                                      | 09/17/2018            | PRINCIPAL RECEIPT         | X X X                                | 4,269              | 4,269             | 4,303               | 4,318  |  | (49)   |   | (49)  |  | 4,269  |   |  |   | 191   | 11/15/2037                                      | 1   |       |
| 36295XZZ1  | GNMA PASS-THRU X SINGLE FAMILY                                   |                                      | 09/17/2018            | PRINCIPAL RECEIPT         | X X X                                | 205                | 205               | 207                 | 211  |  | (6)  |   | (6)   |  | 205  |   |  |   | 8   | 02/15/2038                                      | 1   |       |
| 36296GRY9  | GNMA PASS-THRU X SINGLE FAMILY                                   |                                      | 09/17/2018            | PRINCIPAL RECEIPT         | X X X                                | 198                | 198               | 200                 | 206  |  | (8)  |   | (8)   |  | 198  |   |  |   | 8   | 06/15/2038                                      | 1   |       |
| 0599999  | Subtotal - Bonds - U.S. Governments                              |                                      |                       |                           | X X X                                | 7,690              | 7,690             | 7,746               | 7,797  |  | (107)  |   | (107)   |  | 7,690  |   |  |   | 331   | X X X   | X X X   |       |
| <b>Bonds - U.S. Special Revenue, Special Assessment</b>    |  |                                      |                       |                           |                                      |                    |                   |                     |  |  |  |   |   |  |  |   |  |   |   |   |   |       |
| 254845GB0  | DISTRICT COLUMBIA WTR & SWR AU                                   |                                      |                       |                           |                                      |                    |                   |                     |  |  |  |   |   |  |  |   |  |   |   |   |   |       |
|  | SR   |                                      | 07/24/2018            | CITIBANK, N.A.            | X X X                                | 1,006,620          | 1,000,000         | 1,046,420           | 1,004,508  |  | (3,383)  |   | (3,383)   |  | 1,001,125  |   | 5,495  | 5,495                                     | 40,972  | 10/01/2024                                      | 1FE   |       |
| 3137ARXSO  | FHLMC REMIC SERIES 4073  |                                      | 09/17/2018            | PRINCIPAL RECEIPT         | X X X                                | 20,127             | 20,127            | 22,228              | 21,659   |  | (1,532)  |   | (1,532)   |  | 20,127   |   |  |   | 495   | 07/15/2041                                      | 1   |       |
| 3137ASBP8  | FHLMC REMIC SERIES 4077  |                                      | 09/17/2018            | PRINCIPAL RECEIPT         | X X X                                | 15,796             | 15,796            | 17,047              | 16,664   |  | (868)  |   | (868)   |  | 15,796   |   |  |   | 346   | 11/15/2041                                      | 1   |       |
| 3137B1RP9  | FHLMC REMIC SERIES 4189  |                                      | 09/17/2018            | PRINCIPAL RECEIPT         | X X X                                | 23,461             | 23,461            | 25,550              | 25,163   |  | (1,702)  |   | (1,702)   |  | 23,461   |   |  |   | 521   | 11/15/2042                                      | 1   |       |
| 31384VV33  | FNMA #535334   |                                      | 09/25/2018            | PRINCIPAL RECEIPT         | X X X                                | 174                | 174               | 180                 | 178  |  | (3)  |   | (3)   |  | 175  |   |  |   | 9   | 06/01/2030                                      | 1   |       |
| 31391SM64  | FNMA #675481   |                                      | 09/25/2018            | PRINCIPAL RECEIPT         | X X X                                | 722                | 722               | 746                 | 739  |  | (17)   |   | (17)  |  | 722  |   |  |   | 23  | 02/01/2033                                      | 1   |       |
| 31400WSW1  | FNMA #699933   |                                      | 09/25/2018            | PRINCIPAL RECEIPT         | X X X                                | 26,458             | 26,458            | 26,648              | 26,777   |  | (319)  |   | (319)   |  | 26,458   |   |  |   | 971   | 04/01/2033                                      | 1   |       |
| 31406UK31  | FNMA #820314   |                                      | 09/25/2018            | PRINCIPAL RECEIPT         | X X X                                | 12,948             | 12,948            | 12,748              | 12,776   |  | 172  |   | 172   |  | 12,948   |   |  |   | 381   | 08/01/2035                                      | 1   |       |
| 31411W4N4  | FNMA #917129   |                                      | 09/25/2018            | PRINCIPAL RECEIPT         | X X X                                | 390                | 390               | 384                 | 385  |  | 5  |   | 5   |  | 390  |   |  |   | 16  | 06/01/2037                                      | 1   |       |
| 31414SYU1  | FNMA #975123   |                                      | 09/25/2018            | PRINCIPAL RECEIPT         | X X X                                | 344                | 344               | 343                 | 343  |  | 1  |   | 1   |  | 344  |   |  |   | 11  | 05/01/2038                                      | 1   |       |
| 31371KZAZ  | FNMA PASS-THRU LNG 30 YEAR                                       |                                      | 09/25/2018            | PRINCIPAL RECEIPT         | X X X                                | 4,170              | 4,170             | 4,492               | 4,642  |  | (471)  |   | (471)   |  | 4,170  |   |  |   | 158   | 02/01/2033                                      | 1   |       |
| 31394AP26  | FNMA REMIC TRUST 2004-76   |                                      | 09/25/2018            | PRINCIPAL RECEIPT         | X X X                                | 3,283              | 3,283             | 3,492               | 3,302  |  | (19)   |   | (19)  |  | 3,283  |   |  |   | 86  | 10/25/2019                                      | 1   |       |
| 67755CNC8  | OHIO ST BLDG AUTH  |                                      | 07/24/2018            | WACHOVIA BANK             | X X X                                | 1,007,030          | 1,000,000         | 1,102,420           | 1,008,348  |  | (6,243)  |   | (6,243)   |  | 1,002,105  |   | 4,925  | 4,925                                     | 43,021  | 10/01/2018                                      | 1FE   |       |
| 678657HS9  | OKLAHOMA CITY OKLA WTR UTILS T REV                               |                                      | 07/24/2018            | WACHOVIA BANK             | X X X                                | 1,166,183          | 1,130,000         | 1,199,473           | 1,142,596  |  | (4,638)  |   | (4,638)   |  | 1,137,958  |   | 28,225                                       | 28,225                                    | 60,424  | 07/01/2039                                      | 1FE   |       |
| 6817934P7  | OMAHA PUB PWR DIST NEB ELEC RE ELE                               |                                      | 07/24/2018            | Donaldson Lufkin Jenrette | X X X                                | 1,003,114          | 985,000           | 1,026,774           | 991,055  |  | (3,139)  |   | (3,139)   |  | 987,915  |   | 15,199                                       | 15,199                                    | 48,566  | 02/01/2039                                      | 1FE   |       |
| 797669TV0  | SAN FRANCISCO CALIF BAY AREA R SAL                               |                                      | 07/24/2018            | MORGAN STANLEY            | X X X                                | 1,067,690          | 1,000,000         | 1,140,550           | 1,039,188  |  | (8,550)  |   | (8,550)   |  | 1,030,639  |   | 37,051                                       | 37,051                                    | 53,472  | 07/01/2021                                      | 1FE   |       |
| 3199999  | Subtotal - Bonds - U.S. Special Revenue, Special Assessment      |                                      |                       |                           | X X X                                | 5,358,510          | 5,222,874         | 5,629,495           | 5,298,323  |  | (30,706)   |   | (30,706)  |  | 5,267,616  |   | 90,895                                       | 90,895                                    | 249,472   | X X X   | X X X   |       |
| <b>Bonds - Industrial and Miscellaneous (Unaffiliated)</b> |  |                                      |                       |                           |                                      |                    |                   |                     |  |  |  |   |   |  |  |   |  |   |   |   |   |       |
| 61748HAR2  | MORGAN STANLEY CAP 2004-5AR                                      |                                      | 09/25/2018            | PRINCIPAL RECEIPT         | X X X                                | 4,285              | 4,285             | 4,301               | 4,283  | 88   | (86)   |   | 2   |  | 4,285  |   |  |   | 101   | 07/25/2034                                      | 1FM   |       |
| 94989CAW1  | WELLS FARGO COML TR 2015-C26                                     |                                      | 07/24/2018            | MONTGOMERY SECURITIES     | X X X                                | 479,043            | 500,000           | 517,891             | 513,501  |  | (1,747)  |   | (1,747)   |  | 511,753  |   | (32,710)                                     | (32,710)                                  | 9,498   | 02/18/2048                                      | 1FM   |       |
| 95000FAS5  | WELLS FARGO COML TR 2016-C35                                     |                                      | 07/24/2018            | MONTGOMERY SECURITIES     | X X X                                | 929,336            | 1,000,000         | 1,009,917           | 1,007,823  |  | (832)  |   | (832)   |  | 1,006,992  |   | (77,656)                                     | (77,656)                                  | 17,455  | 07/17/2048                                      | 1FM   |       |
| 95000PAD6  | WELLS FARGO COML TR 2016-C37                                     |                                      | 07/24/2018            | WACHOVIA BANK             | X X X                                | 984,688            | 1,000,000         | 1,009,923           | 1,008,628  |  | (712)  |   | (712)   |  | 1,007,916  |   | (23,229)                                     | (23,229)                                  | 23,010  | 12/17/2049                                      | 1FM   |       |
| 3899999  | Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)   |                                      |                       |                           | X X X                                | 2,397,352          | 2,504,285         | 2,542,032           | 2,534,235  | 88   | (3,377)  |   | (3,289)   |  | 2,530,946  |   | (133,595)                                    | (133,595)                                 | 50,064  | X X X   | X X X   |       |
| 8399997  | Subtotal - Bonds - Part 4  |                                      |                       |                           | X X X                                | 7,763,552          | 7,734,849         | 8,179,273           | 7,840,355  | 88   | (34,190)   |   | (34,102)  |  | 7,806,252  |   | (42,700)                                     | (42,700)                                  | 299,867   | X X X   | X X X   |       |
| 8399998  | Summary Item from Part 5 for Bonds (N/A to Quarterly)            |                                      |                       |                           | X X X                                | X X X              | X X X             | X X X               | X X X  | X X X  | X X X  | X X X   | X X X   | X X X  | X X X  | X X X   | X X X  | X X X                                     | X X X   | X X X   | X X X   | X X X |
| 8399999  | Subtotal - Bonds   |                                      |                       |                           | X X X                                | 7,763,552          | 7,734,849         | 8,179,273           | 7,840,355  | 88   | (34,190)   |   | (34,102)  |  | 7,806,252  |   | (42,700)                                     | (42,700)                                  | 299,867   | X X X   | X X X   |       |
| 8999998  | Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly) |                                      |                       |                           | X X X                                | X X X              | X X X             | X X X               | X X X  | X X X  | X X X  | X X X   | X X X   | X X X  | X X X  | X X X   | X X X  | X X X                                     | X X X   | X X X   | X X X   | X X X |
| 8999999  | Subtotal - Preferred Stocks                                      |                                      |                       |                           | X X X                                | X X X              | X X X             | X X X               | X X X  | X X X  | X X X  | X X X   | X X X   | X X X  | X X X  | X X X   | X X X  | X X X                                     | X X X   | X X X   | X X X   | X X X |
| 9799998  | Summary Item from Part 5 for Common Stocks (N/A to Quarterly)    |                                      |                       |                           | X X X                                | X X X              | X X X             | X X X               | X X X  | X X X  | X X X  | X X X   | X X X   | X X X  | X X X  | X X X   | X X X  | X X X                                     | X X X   | X X X   | X X X   | X X X |
| 9799999  | Subtotal - Common Stocks   |                                      |                       |                           | X X X                                | X X X              | X X X             | X X X               | X X X  | X X X  | X X X  | X X X   | X X X   | X X X  | X X X  | X X X   | X X X  | X X X                                     | X X X   | X X X   | X X X   | X X X |
| 9899999  | Subtotal - Preferred and Common Stocks                           |                                      |                       |                           | X X X                                | X X X              | X X X             | X X X               | X X X  | X X X  | X X X  | X X X   | X X X   | X X X  | X X X  | X X X   | X X X  | X X X                                     | X X X   | X X X   | X X X   | X X X |
| 9999999  | Total - Bonds, Preferred and Common Stocks                       |                                      |                       |                           | X X X                                | 7,763,552          | X X X             | 8,179,273           | 7,840,355  | 88   | (34,190)   |   | (34,102)  |  | 7,806,252  |   | (42,700)                                     | (42,700)                                  | 299,867   | X X X   | X X X   |       |

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

QE05

**E06 Schedule DB Part A Section 1 ..... NONE**

**E07 Schedule DB Part B Section 1 ..... NONE**

**E08 Schedule DB Part D Section 1 ..... NONE**

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

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

**E10 Schedule DL - Part 1 - Securities Lending Collateral Assets ..... NONE**

**E11 Schedule DL - Part 2 - Securities Lending Collateral Assets ..... NONE**

**SCHEDULE E - PART 1 - CASH****Month End Depository Balances**

| 1<br>Depository  | 2<br>Code | 3<br>Rate of Interest | 4<br>Amount of Interest Received During Current Quarter | 5<br>Amount of Interest Accrued at Current Statement Date | Book Balance at End of Each Month During Current Quarter |              |             | 9<br>* |
|--|-----------|-----------------------|---|---|--|--------------|-------------|--------|
|  |           |                       |   |   | 6  | 7            | 8           |        |
|  |           |                       |   |   | First Month  | Second Month | Third Month |        |
| <b>open depositories</b>   |           |                       |   |   |  |              |             |        |
| Wells Fargo Bank, N.A. .... San Francisco, CA .....  |           |                       | 7,970   |   | 1,783,616  | 1,726,645    | 1,659,952   | X X X  |
| 0199998 Deposits in .....0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - open depositories      | X X X     | X X X                 |   |   |  |              |             | X X X  |
| 0199999 Totals - Open Depositories .....   | X X X     | X X X                 | 7,970   |   | 1,783,616  | 1,726,645    | 1,659,952   | X X X  |
| 0299998 Deposits in .....8 depositories that do not exceed the allowable limit in any one depository (see Instructions) - suspended depositories | X X X     | X X X                 |   |   |  |              |             | X X X  |
| 0299999 Totals - Suspended Depositories .....  | X X X     | X X X                 |   |   |  |              |             | X X X  |
| 0399999 Total Cash On Deposit .....  | X X X     | X X X                 | 7,970   |   | 1,783,616  | 1,726,645    | 1,659,952   | X X X  |
| 0499999 Cash in Company's Office .....   | X X X     | X X X                 | X X X   | X X X   |  |              |             | X X X  |
| 0599999 Total Cash .....   | X X X     | X X X                 | 7,970   |   | 1,783,616  | 1,726,645    | 1,659,952   | X X X  |

## 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<br>Acquired | Rate of<br>Interest | Maturity<br>Date | Book/Adjusted<br>Carrying Value | Amount of<br>Interest<br>Due & Accrued | Amount Received<br>During Year |
| 7799999  | Subtotals - Bonds - Total Bonds - Issuer Obligations                          |      |                  |                     |                  |                                 |  |                                |
| 7899999  | Subtotals - Bonds - Total Bonds - Residential Mortgage-Backed Securities      |      |                  |                     |                  |                                 |  |                                |
| 7999999  | Subtotals - Bonds - Total Bonds - Commercial Mortgage-Backed Securities       |      |                  |                     |                  |                                 |  |                                |
| 8099999  | Subtotals - Bonds - Total Bonds - Other Loan-Backed and Structured Securities |      |                  |                     |                  |                                 |  |                                |
| 8199999  | Subtotals - Bonds - SVO Identified Funds                                      |      |                  |                     |                  |                                 |  |                                |
| 8399999  | Subtotals - Bonds - Total Bonds   |      |                  |                     |                  |                                 |  |                                |
| 8499999  | Subtotals - Sweep Accounts  |      |                  |                     |                  |                                 |  |                                |
| <b>Exempt Money Market Mutual Funds - as Identified by SVO</b> |   |      |                  |                     |                  |                                 |  |                                |
| 665279873  | MFB NORTHN INSTL FDS TREAS PORTFOL  |      | 09/30/2018       | 0.000               | X X X            | 354,476                         |  | 33,755                         |
| 94975H296  | WELLS FARGO ADV TREAS PLUS INSTI  | SD   | 12/31/2017       | 0.000               | X X X            | 25,001                          |  | 155                            |
| 8599999  | Subtotals - Exempt Money Market Mutual Funds - as Identified by SVO           |      |                  |                     |                  | 379,477                         |  | 33,910                         |
| 8699999  | Subtotals - All Other Money Market Mutual Funds                               |      |                  |                     |                  |                                 |  |                                |
| 8799999  | Subtotals - Other Cash Equivalents  |      |                  |                     |                  |                                 |  |                                |
| 8899999  | Total - Cash Equivalents  |      |                  |                     |                  | 379,477                         |  | 33,910                         |

QE13



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

**Physicians, including surgeons and osteopaths**

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

|                                   | 1   | 2                      | Direct Losses Paid |                  | 5                      | Direct Losses Unpaid |                  | 8                                       |
|-----------------------------------|---|------------------------|--------------------|------------------|------------------------|----------------------|------------------|---|
|                                   |   |                        | 3                  | 4                |                        | 6                    | 7                |   |
| States, Etc.                      | Direct Premiums Written                                       | Direct Premiums Earned | Amount             | Number of Claims | Direct Losses Incurred | Amount Reported      | Number of Claims | Direct Losses Incurred but not Reported |
| 1. Alabama (AL)                   |   |                        |                    |                  |                        |                      |                  |   |
| 2. Alaska (AK)                    |   |                        |                    |                  |                        |                      |                  |   |
| 3. Arizona (AZ)                   |   |                        |                    |                  |                        |                      |                  |   |
| 4. Arkansas (AR)                  |   |                        |                    |                  |                        |                      |                  |   |
| 5. California (CA)                |   |                        |                    |                  |                        |                      |                  |   |
| 6. Colorado (CO)                  |   |                        |                    |                  |                        |                      |                  |   |
| 7. Connecticut (CT)               |   |                        |                    |                  |                        |                      |                  |   |
| 8. Delaware (DE)                  |   |                        |                    |                  |                        |                      |                  |   |
| 9. District of Columbia (DC)      |   |                        |                    |                  |                        |                      |                  |   |
| 10. Florida (FL)                  |   |                        |                    |                  |                        |                      |                  |   |
| 11. Georgia (GA)                  |   |                        |                    |                  |                        |                      |                  |   |
| 12. Hawaii (HI)                   |   |                        |                    |                  |                        |                      |                  |   |
| 13. Idaho (ID)                    |   |                        |                    |                  |                        |                      |                  |   |
| 14. Illinois (IL)                 |   |                        |                    |                  |                        |                      |                  |   |
| 15. Indiana (IN)                  |   |                        |                    |                  | 112,430                | 30,000               | 2                | 82,430                                  |
| 16. Iowa (IA)                     |   |                        |                    |                  |                        |                      |                  |   |
| 17. Kansas (KS)                   |   |                        |                    |                  |                        |                      |                  |   |
| 18. Kentucky (KY)                 |   |                        |                    |                  | (92,515)               | 1,000,000            | 1                | 2,747,658                               |
| 19. Louisiana (LA)                |   |                        |                    |                  |                        |                      |                  |   |
| 20. Maine (ME)                    |   |                        |                    |                  |                        |                      |                  |   |
| 21. Maryland (MD)                 |   |                        |                    |                  |                        |                      |                  |   |
| 22. Massachusetts (MA)            |   |                        |                    |                  |                        |                      |                  |   |
| 23. Michigan (MI)                 |   |                        |                    |                  |                        |                      |                  |   |
| 24. Minnesota (MN)                |   |                        |                    |                  |                        |                      |                  |   |
| 25. Mississippi (MS)              |   |                        |                    |                  |                        |                      |                  |   |
| 26. Missouri (MO)                 |   |                        |                    |                  |                        |                      |                  |   |
| 27. Montana (MT)                  |   |                        |                    |                  |                        |                      |                  |   |
| 28. Nebraska (NE)                 |   |                        |                    |                  |                        |                      |                  |   |
| 29. Nevada (NV)                   |   |                        |                    |                  |                        |                      |                  |   |
| 30. New Hampshire (NH)            |   |                        |                    |                  |                        |                      |                  |   |
| 31. New Jersey (NJ)               |   |                        |                    |                  |                        |                      |                  |   |
| 32. New Mexico (NM)               |   |                        |                    |                  |                        |                      |                  |   |
| 33. New York (NY)                 |   |                        |                    |                  |                        |                      |                  |   |
| 34. North Carolina (NC)           |   |                        |                    |                  |                        |                      |                  |   |
| 35. North Dakota (ND)             |   |                        |                    |                  |                        |                      |                  |   |
| 36. Ohio (OH)                     |   |                        |                    |                  | 11,825,085             | 12,475,000           | 4                | 413,160                                 |
| 37. Oklahoma (OK)                 |   |                        |                    |                  |                        |                      |                  |   |
| 38. Oregon (OR)                   |   |                        |                    |                  |                        |                      |                  |   |
| 39. Pennsylvania (PA)             |   |                        |                    |                  |                        |                      |                  |   |
| 40. Rhode Island (RI)             |   |                        |                    |                  |                        |                      |                  |   |
| 41. South Carolina (SC)           |   |                        |                    |                  |                        |                      |                  |   |
| 42. South Dakota (SD)             |   |                        |                    |                  |                        |                      |                  |   |
| 43. Tennessee (TN)                |   |                        |                    |                  |                        |                      |                  |   |
| 44. Texas (TX)                    |   |                        |                    |                  |                        |                      |                  |   |
| 45. Utah (UT)                     |   |                        |                    |                  |                        |                      |                  |   |
| 46. Vermont (VT)                  |   |                        |                    |                  |                        |                      |                  |   |
| 47. Virginia (VA)                 |   |                        |                    |                  |                        |                      |                  |   |
| 48. Washington (WA)               |   |                        |                    |                  |                        |                      |                  |   |
| 49. West Virginia (WV)            |   |                        |                    |                  |                        |                      |                  |   |
| 50. Wisconsin (WI)                |   |                        |                    |                  |                        |                      |                  |   |
| 51. Wyoming (WY)                  |   |                        |                    |                  |                        |                      |                  |   |
| 52. American Samoa (AS)           |   |                        |                    |                  |                        |                      |                  |   |
| 53. Guam (GU)                     |   |                        |                    |                  |                        |                      |                  |   |
| 54. Puerto Rico (PR)              |   |                        |                    |                  |                        |                      |                  |   |
| 55. U.S. Virgin Islands (VI)      |   |                        |                    |                  |                        |                      |                  |   |
| 56. Northern Mariana Islands (MP) |   |                        |                    |                  |                        |                      |                  |   |
| 57. Canada (CAN)                  |   |                        |                    |                  |                        |                      |                  |   |
| 58. Aggregate other alien (OT)    |   |                        |                    |                  |                        |                      |                  |   |
| 59. Totals                        |   |                        |                    |                  | 11,845,000             | 13,505,000           | 7                | 3,243,248                               |
| <b>DETAILS OF WRITE-INS</b>       |   |                        |                    |                  |                        |                      |                  |   |
| 58001.                            |   |                        |                    |                  |                        |                      |                  |   |
| 58002.                            |   |                        |                    |                  |                        |                      |                  |   |
| 58003.                            |   |                        |                    |                  |                        |                      |                  |   |
| 58998.                            | Summary of remaining write-ins for Line 58 from overflow page |                        |                    |                  |                        |                      |                  |   |
| 58999.                            | TOTALS (Lines 5801 through 5803 plus 5898) (Line 58 above)    |                        |                    |                  |                        |                      |                  |   |



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

**Hospitals**

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

|                                   | 1   | 2                      | Direct Losses Paid |                  | 5                      | Direct Losses Unpaid |                  | 8                                       |
|-----------------------------------|---|------------------------|--------------------|------------------|------------------------|----------------------|------------------|---|
|                                   |   |                        | 3                  | 4                |                        | 6                    | 7                |   |
| States, Etc.                      | Direct Premiums Written                                       | Direct Premiums Earned | Amount             | Number of Claims | Direct Losses Incurred | Amount Reported      | Number of Claims | Direct Losses Incurred but not Reported |
| 1. Alabama (AL)                   |   |                        |                    |                  |                        |                      |                  |   |
| 2. Alaska (AK)                    |   |                        |                    |                  |                        |                      |                  |   |
| 3. Arizona (AZ)                   |   |                        |                    |                  |                        |                      |                  |   |
| 4. Arkansas (AR)                  |   |                        |                    |                  |                        |                      |                  |   |
| 5. California (CA)                |   |                        |                    |                  |                        |                      |                  |   |
| 6. Colorado (CO)                  |   |                        |                    |                  |                        |                      |                  |   |
| 7. Connecticut (CT)               |   |                        |                    |                  |                        |                      |                  |   |
| 8. Delaware (DE)                  |   |                        |                    |                  |                        |                      |                  |   |
| 9. District of Columbia (DC)      |   |                        |                    |                  |                        |                      |                  |   |
| 10. Florida (FL)                  |   |                        |                    |                  |                        |                      |                  |   |
| 11. Georgia (GA)                  |   |                        |                    |                  |                        |                      |                  |   |
| 12. Hawaii (HI)                   |   |                        |                    |                  |                        |                      |                  |   |
| 13. Idaho (ID)                    |   |                        |                    |                  |                        |                      |                  |   |
| 14. Illinois (IL)                 |   |                        |                    |                  |                        |                      |                  |   |
| 15. Indiana (IN)                  |   |                        |                    |                  |                        |                      |                  |   |
| 16. Iowa (IA)                     |   |                        |                    |                  |                        |                      |                  |   |
| 17. Kansas (KS)                   |   |                        |                    |                  |                        |                      |                  |   |
| 18. Kentucky (KY)                 |   |                        |                    |                  |                        |                      |                  |   |
| 19. Louisiana (LA)                |   |                        |                    |                  |                        |                      |                  |   |
| 20. Maine (ME)                    |   |                        |                    |                  |                        |                      |                  |   |
| 21. Maryland (MD)                 |   |                        |                    |                  | 55,310                 | 305,000              | 3                | (19,628)                                |
| 22. Massachusetts (MA)            |   |                        |                    |                  |                        |                      |                  |   |
| 23. Michigan (MI)                 |   |                        |                    |                  |                        |                      |                  |   |
| 24. Minnesota (MN)                |   |                        |                    |                  |                        |                      |                  |   |
| 25. Mississippi (MS)              |   |                        |                    |                  |                        |                      |                  |   |
| 26. Missouri (MO)                 |   |                        |                    |                  |                        |                      |                  |   |
| 27. Montana (MT)                  |   |                        |                    |                  |                        |                      |                  |   |
| 28. Nebraska (NE)                 |   |                        |                    |                  |                        |                      |                  |   |
| 29. Nevada (NV)                   |   |                        |                    |                  |                        |                      |                  |   |
| 30. New Hampshire (NH)            |   |                        |                    |                  |                        |                      |                  |   |
| 31. New Jersey (NJ)               |   |                        |                    |                  |                        |                      |                  |   |
| 32. New Mexico (NM)               |   |                        |                    |                  |                        |                      |                  |   |
| 33. New York (NY)                 |   |                        |                    |                  |                        |                      |                  |   |
| 34. North Carolina (NC)           |   |                        |                    |                  |                        |                      |                  |   |
| 35. North Dakota (ND)             |   |                        |                    |                  |                        |                      |                  |   |
| 36. Ohio (OH)                     |   |                        |                    |                  | (344,235)              | 1,255,000            | 4                | 1,342,502                               |
| 37. Oklahoma (OK)                 |   |                        |                    |                  |                        |                      |                  |   |
| 38. Oregon (OR)                   |   |                        |                    |                  |                        |                      |                  |   |
| 39. Pennsylvania (PA)             |   |                        |                    |                  |                        |                      |                  |   |
| 40. Rhode Island (RI)             |   |                        |                    |                  |                        |                      |                  |   |
| 41. South Carolina (SC)           |   |                        |                    |                  |                        |                      |                  |   |
| 42. South Dakota (SD)             |   |                        |                    |                  |                        |                      |                  |   |
| 43. Tennessee (TN)                |   |                        |                    |                  |                        |                      |                  |   |
| 44. Texas (TX)                    |   |                        |                    |                  |                        |                      |                  |   |
| 45. Utah (UT)                     |   |                        |                    |                  |                        |                      |                  |   |
| 46. Vermont (VT)                  |   |                        |                    |                  |                        |                      |                  |   |
| 47. Virginia (VA)                 |   |                        |                    |                  |                        |                      |                  |   |
| 48. Washington (WA)               |   |                        |                    |                  |                        |                      |                  |   |
| 49. West Virginia (WV)            |   |                        |                    |                  |                        |                      |                  |   |
| 50. Wisconsin (WI)                |   |                        | 60,000             | 1                | (7,669)                |                      |                  |   |
| 51. Wyoming (WY)                  |   |                        |                    |                  |                        |                      |                  |   |
| 52. American Samoa (AS)           |   |                        |                    |                  |                        |                      |                  |   |
| 53. Guam (GU)                     |   |                        |                    |                  |                        |                      |                  |   |
| 54. Puerto Rico (PR)              |   |                        |                    |                  |                        |                      |                  |   |
| 55. U.S. Virgin Islands (VI)      |   |                        |                    |                  |                        |                      |                  |   |
| 56. Northern Mariana Islands (MP) |   |                        |                    |                  |                        |                      |                  |   |
| 57. Canada (CAN)                  |   |                        |                    |                  |                        |                      |                  |   |
| 58. Aggregate other alien (OT)    |   |                        |                    |                  |                        |                      |                  |   |
| 59. Totals                        |   |                        | 60,000             | 1                | (296,594)              | 1,560,000            | 7                | 1,322,874                               |
| <b>DETAILS OF WRITE-INS</b>       |   |                        |                    |                  |                        |                      |                  |   |
| 58001.                            |   |                        |                    |                  |                        |                      |                  |   |
| 58002.                            |   |                        |                    |                  |                        |                      |                  |   |
| 58003.                            |   |                        |                    |                  |                        |                      |                  |   |
| 58998.                            | Summary of remaining write-ins for Line 58 from overflow page |                        |                    |                  |                        |                      |                  |   |
| 58999.                            | TOTALS (Lines 5801 through 5803 plus 5898) (Line 58 above)    |                        |                    |                  |                        |                      |                  |   |

**Supp5 Sup. A To T - Other Healthcare Professionals ..... NONE**

**Supp5 Sup. A To T - Other Healthcare Facilities ..... NONE**

# INDEX TO PROPERTY & CASUALTY QUARTERLY STATEMENT

Accident and Health Insurance; Q3; Q13  
 Accounting Changes and Corrections of Errors; Q6, Note 2  
 Accounting Practices and Policies; Q6, Note 1  
 Admitted Assets; Q2; QSI01  
 Affiliated Transactions; Q2; Q3; Q7; Q7.1  
 Asbestos Losses and Loss Adjustment Expenses; Q6, Note 33  
 Bonds; Q2; Q5; Q7.1; Q7.2; QSI01; QSI02; QE04; QE05; QSupp2  
 Business Combinations and Goodwill; Q6, Note 3  
 Capital Gains (Losses); Q3; Q4; Q5  
 Capital Stock; Q3; Q4; Q6, Note 13  
 Capital Notes; Q3; Q5; Q6, Note 11  
 Caps; QE06; QSI04  
 Cash; Q2; Q5; QE12; QSupp2  
 Cash Equivalents; Q2; Q5; QE13  
 Collars; QE06; QSI04  
 Commissions; Q3; Q5  
 Common Stock; Q2; Q7.1; Q7.2; QSI01; QE04; QE05; QSupp2  
 Counterparty Exposure; Q6, Note 8; QE06; QE08  
 Contingencies; Q6, Note 14  
 Debt; Q6, Note 11  
 Deferred Compensation; Q6, Note 12  
 Derivative Instruments; Q6, Note 8; QSI04; QSI05; QSI06; QSI07; QE06; QE07; QE08  
 Director and Officer; QSupp7  
 Discontinued Operations; Q6, Note 4  
 Discounting of Liabilities; Q6, Note 32; Q8  
 Electronic Data Processing Equipment; Q2  
 Environmental Losses and Loss Adjustment Expenses; Q6, Note 33  
 Exchange or Counterparty; QE06; QE08  
 Expenses; Q3; Q4; Q5; Q8; QE01; QSupp3  
 Extinguishment of Liabilities; Q6, Note 17  
 Extraordinary Items; Q6, Note 21  
 Fair Value; Q7, Note 20  
 Federal ID Number; Q9  
 Federal Reserve Board; Q7  
 Finance and Service Charge; Q4  
 Floors; QE06; QSI04  
 Foreign Exchange; Q2; Q3; Q4; QSI01; QSI02; QSI03; QE04; QE05  
 Forwards; QE06; QSI04  
 Futures Contracts; QE07; QSI04  
 Guaranty Fund; Q2  
 Health Care Receivables; Q6, Note 28  
 Hedging Transactions; Q7.1; QE06; QE07  
 High Deductible Policies; Q6, Note 31  
 Holding Company; Q7; Q11; Q12  
 Income Generation Transactions; QE06; QE07  
 Income Taxes; Q2; Q3; Q4; Q5; Q6, Note 9  
 Intercompany Pooling; Q6, Note 26  
 Investment Income; Q2; Q4; Q5; Q6, Note 7; QSupp2  
 Investments; Q2; Q4; Q6, Note 5; Q7.1; Q7.2; QSI01; QSI03; QE03; QE04; QE05; QE08; QE13; QSupp2  
 Joint Venture; Q6, Note 6  
 Leases; Q6, Note 15  
 Licensing; Q3; Q7; Q10  
 Limited Liability Company (LLC); Q6, Note 6  
 Limited Partnership; Q6, Note 6  
 Lines of Business; Q8; Q13  
 Long-Term Invested Assets; QSI01; QE03  
 Loss Development; Q6  
 Losses; Q3; Q4; Q5; Q6, Note 25; Q8; Q10; Q13; Q14; QSupp1; QSupp3  
 Loss Adjustment Expenses; Q3; Q6, Note 26; Q8; Q14; QSupp3  
 Managing General Agents; Q6, Note 19; Q7  
 Medical Malpractice Insurance; Q13; Q15; QSupp5  
 Medicare Part D Coverage; QSupp6  
 Mortgage Loans; Q2; Q5; Q7.1; QSI01; QE02; QSupp2  
 Multiple Peril Crop Insurance; Q6, Note 35  
 Nonadmitted Assets; Q2; Q4; QSI01; QSI03  
 Non-Tabular Discount; Q6, Note 32  
 Off-Balance Sheet Risk; Q6, Note 16

## INDEX TO PROPERTY & CASUALTY QUARTERLY STATEMENT

Options; Q7.1; QE06; QSI04  
Organizational Chart; Q7; Q11  
Other Derivative Transactions; QE06; QE07  
Parent, Subsidiaries and Affiliates; Q2; Q3; Q6, Note 10; Q7.1  
Participating Policies; Q6, Note 29  
Pharmaceutical Rebates; Q6, Note 28  
Policyholder Dividends; Q3; Q4; Q5  
Postemployment Benefits; Q6, Note 12  
Postretirement Benefits; Q6, Note 12  
Preferred Stock; Q2; Q7.1; Q7.2; QSI01; QSI02; QE04; QSupp2  
Premium Deficiency Reserves; Q6, Note 30  
Premium Notes; Q2; Q5  
Premiums; Q3; Q5; Qsupp3  
    Accrued Retrospective; Q2  
    Advance; Q3  
    Direct; Q10; Q13  
    Earned; Q4; Q10; Q13; QSupp5  
    Earned but Unbilled; Q2  
    Unearned; Q3  
    Written; Q4; Q10; Q13; QSupp5  
Quasi Reorganizations; Q6, Note 13  
Real Estate; Q2; Q5; Q7.1; QSI01; QE01; QSupp2  
Redetermination, Contract Subject to; Q6, Note 24  
Reinsurance; Q6, Note 23  
    Assumed; Q13  
    Ceded; Q3; Q9; QSupp3  
    Commutation; Q6, Note 23  
    Funds Held; Q2; Q3  
    Losses; Q3; Q4; Q8; QSupp3  
    Payable; Q3; QSupp3  
    Premiums; Q3; QSupp3  
    Receivable; Q2; QSupp3  
    Unsecured; Q6, Note 23  
    Uncollectible; Q6, Note 23  
Reserves  
    Incurred but Not Reported (IBNR); Q8; Q14  
    Unpaid Loss Adjustment Expense (LAE); Q14  
Retirement Plans; Q6, Note 12  
Retrospectively Rated Contracts; Q6, Note 24  
Salvage and Subrogation; Q10  
Securities Lending; Q2; Q3; QE9; QE11  
Servicing of Financial Assets; Q6, Note 17  
Short-Term Investments; Q2; Q5; Q7.1; QSI03; QSupp2  
Special Deposits; QSupp2  
Stockholder Dividends; Q3; Q4; Q5  
Structured Settlements; Q6, Note 27  
Subscriber Savings Accounts; Q6, Note 34  
Subsequent Events; Q6, Note 22  
Surplus; Q3; Q4; Q5; Q6, Note 13; Q14; Q15; QSupp1; QSupp2; QSupp3  
Surplus Notes; Q3; Q4; Q5  
Swaps; QE07; QSI04  
Synthetic Assets; QSI04; QSI05  
Tabular Discount; Q6, Note 32  
Third Party Administrator; Q6, Note 19; Q7  
Treasury Stock; Q3; Q4; Q5  
Underwriting Expenses; Q4  
Uninsured Accident and Health; Q3; Q6, Note 18  
Valuation Allowance; QSI01  
Wash Sales; Q6, Note 17