



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2017
OF THE CONDITION AND AFFAIRS OF THE

OLD DOMINION INSURANCE COMPANY

NAIC Group Code

0311

0311

NAIC Company Code

40231

Employer's ID Number

59-2070420

(Current)

(Prior)

Organized under the Laws of

FLORIDA

State of Domicile or Port of Entry

FL

Country of Domicile

United States of America

Incorporated/Organized

04/22/1981

Commenced Business

06/03/1981

Statutory Home Office

4601 TOUCHTON ROAD EAST, STE. 3300

JACKSONVILLE , FL, US 32246

(Street and Number)

(City or Town, State, Country and Zip Code)

Main Administrative Office

4601 TOUCHTON ROAD EAST, STE. 3300

(Street and Number)

JACKSONVILLE , FL, US 32246

904-380-7282

(City or Town, State, Country and Zip Code)

(Area Code) (Telephone Number)

Mail Address

55 WEST STREET

KEENE , NH, US 03431

(Street and Number or P.O. Box)

(City or Town, State, Country and Zip Code)

Primary Location of Books and Records

4601 TOUCHTON ROAD EAST, STE. 3300

(Street and Number)

JACKSONVILLE , FL, US 32246

904-380-7282

(City or Town, State, Country and Zip Code)

(Area Code) (Telephone Number)

Internet Website Address

WWW.MSAGROUP.COM

Statutory Statement Contact

GERARD W. WATERS

603-358-1442

(Name)

(Area Code) (Telephone Number)

WATERSG@MSAGROUP.COM

603-355-5577

(E-mail Address)

(FAX Number)

OFFICERS

PRESIDENT

CHRISTOPHER LAWRENCE COX

TREASURER

EDWARD JOHN KUHL

SECRETARY

BRUCE ROBERT FOX

OTHER

DEAN PHILLIP DORMAN, VP

NANCY LYNN GIORDANO-RAMOS, VP

DIRECTORS OR TRUSTEES

TERRY LAWRENCE BAXTER

ROBERT CHRIS DOERR

WILLIAM DAWSON GUNTER JR.

THOMAS MARK VAN BERKEL

COTTON MATHER CLEVELAND

ALBERT HENRY ELFNER III

IDALENE FAY KESNER

JOHN ADRIAN DELANEY

DAVID (NMN) FREEMAN

JAMES EVERITT MORLEY JR.

State of

FLORIDA

County of

DUVAL

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.

CHRISTOPHER LAWRENCE COX

BRUCE ROBERT FOX

EDWARD JOHN KUHL

President

Secretary

Treasurer

Subscribed and sworn to before me this

12TH

day of

JANUARY, 2018

a. Is this an original filing?

Yes [X] No []

b. If no,

1. State the amendment number.....

2. Date filed

3. Number of pages attached.....

LISA K. PENTON

NOTARY

DECEMBER 17, 2019

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	32,304,085		32,304,085	31,285,702
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks				
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens				
3.2 Other than first liens				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$				
encumbrances)				
4.2 Properties held for the production of income (less				
\$ encumbrances)				
4.3 Properties held for sale (less \$				
encumbrances)				
5. Cash (\$24,287 , Schedule E - Part 1), cash equivalents				
(\$225,320 , Schedule E - Part 2) and short-term				
investments (\$, Schedule DA)	249,606		249,606	581,516
6. Contract loans (including \$ premium notes)				
7. Derivatives (Schedule DB)				
8. Other invested assets (Schedule BA)	2,888,753		2,888,753	2,959,621
9. Receivable for securities				
10. Securities lending reinvested collateral assets (Schedule DL)				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	35,442,444		35,442,444	34,826,839
13. Title plants less \$ charged off (for Title insurers				
only)				
14. Investment income due and accrued	285,359		285,359	286,087
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection				
15.2 Deferred premiums and agents' balances and installments booked but				
deferred and not yet due (including \$				
earned but unbilled premiums)				
15.3 Accrued retrospective premiums (\$) and				
contracts subject to redetermination (\$)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	4,228		4,228	
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				
18.2 Net deferred tax asset	192,891	87,224	105,667	119,317
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software				
21. Furniture and equipment, including health care delivery assets				
(\$)				
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates	208,495		208,495	199,395
24. Health care (\$) and other amounts receivable				
25. Aggregate write-ins for other than invested assets	27,846		27,846	52,139
26. Total assets excluding Separate Accounts, Segregated Accounts and				
Protected Cell Accounts (Lines 12 to 25)	36,161,263	87,224	36,074,039	35,483,777
27. From Separate Accounts, Segregated Accounts and Protected Cell				
Accounts				
28. Total (Lines 26 and 27)	36,161,263	87,224	36,074,039	35,483,777
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)				
2501. State Tax Credits	27,846		27,846	52,139
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	27,846		27,846	52,139

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)		
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)		
4. Commissions payable, contingent commissions and other similar charges		
5. Other expenses (excluding taxes, licenses and fees)		
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1 Current federal and foreign income taxes (including \$ (10,779) on realized capital gains (losses))	6,702	65,188
7.2 Net deferred tax liability		
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$100,397,000 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ 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)	1,589	
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)		
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ certified) (Schedule F, Part 8)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities	7,160	6,710
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	15,451	71,898
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	15,451	71,898
29. Aggregate write-ins for special surplus funds		
30. Common capital stock	3,000,000	3,000,000
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus	32,577,678	32,577,678
35. Unassigned funds (surplus)	480,910	(165,799)
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		
36.2 shares preferred (value included in Line 31 \$)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	36,058,588	35,411,879
38. TOTALS (Page 2, Line 28, Col. 3)	36,074,039	35,483,777
DETAILS OF WRITE-INS		
2501. MISCELLANEOUS OTHER LIABILITIES	7,160	6,710
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	7,160	6,710
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 thru 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 thru 3203 plus 3298)(Line 32 above)		

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....		
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7)		
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)		
5. Aggregate write-ins for underwriting deductions		
6. Total underwriting deductions (Lines 2 through 5)		
7. Net income of protected cells		
8. Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7)		
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	838,321	820,706
10. Net realized capital gains or (losses) less capital gains tax of \$ (10,779) (Exhibit of Capital Gains (Losses))	(65,357)	85,059
11. Net investment gain (loss) (Lines 9 + 10)	772,964	905,765
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$)		
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)	772,964	905,765
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)	772,964	905,765
19. Federal and foreign income taxes incurred	112,605	(37,511)
20. Net income (Line 18 minus Line 19)(to Line 22)	660,359	943,276
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	35,411,879	34,602,682
22. Net income (from Line 20)	660,359	943,276
23. Net transfers (to) from Protected Cell accounts		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$		
25. Change in net unrealized foreign exchange capital gain (loss)		
26. Change in net deferred income tax	(86,183)	(148,213)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)	72,533	14,133
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
29. Change in surplus notes		
30. Surplus (contributed to) withdrawn from protected cells		
31. Cumulative effect of changes in accounting principles		
32. Capital changes:		
32.1 Paid in		
32.2 Transferred from surplus (Stock Dividend)		
32.3 Transferred to surplus		
33. Surplus adjustments:		
33.1 Paid in		
33.2 Transferred to capital (Stock Dividend)		
33.3 Transferred from capital		
34. Net remittances from or (to) Home Office		
35. Dividends to stockholders		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		
37. Aggregate write-ins for gains and losses in surplus		
38. Change in surplus as regards policyholders for the year (Lines 22 through 37)	646,709	809,196
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	36,058,588	35,411,879
DETAILS OF WRITE-INS		
0501.		
0502.		
0503.		
0598. Summary of remaining write-ins for Line 5 from overflow page		
0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above)		
OTHER INCOME		
1401.		
1402.		
1403.		
1498. Summary of remaining write-ins for Line 14 from overflow page		
1499. Totals (Lines 1401 thru 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 thru 3703 plus 3798)(Line 37 above)		

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	1,589	
2. Net investment income	1,195,884	1,229,041
3. Miscellaneous income		
4. Total (Lines 1 through 3)	1,197,473	1,229,041
5. Benefit and loss related payments	4,228	
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions		
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$110,787 tax on capital gains (losses)	160,312	(499,692)
10. Total (Lines 5 through 9)	164,540	(499,692)
11. Net cash from operations (Line 4 minus Line 10)	1,032,933	1,728,733
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	6,356,760	16,134,494
12.2 Stocks		
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets	27,970	13,463
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7 Miscellaneous proceeds		
12.8 Total investment proceeds (Lines 12.1 to 12.7)	6,384,730	16,147,957
13. Cost of investments acquired (long-term only):		
13.1 Bonds	7,765,215	17,984,634
13.2 Stocks		
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets		
13.6 Miscellaneous applications		
13.7 Total investments acquired (Lines 13.1 to 13.6)	7,765,215	17,984,634
14. Net increase (decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(1,380,485)	(1,836,678)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		
16.6 Other cash provided (applied)	15,644	(130,709)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	15,644	(130,709)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(331,908)	(238,653)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	581,516	820,169
19.2 End of period (Line 18 plus Line 19.1)	249,607	581,516

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

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Underwriting and Investment Exhibit - Part 1 - Premiums Earned

N O N E

Underwriting and Investment Exhibit - Part 1A - Recapitulation of all Premiums

N O N E

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN						
Line of Business	1	Reinsurance Assumed		Reinsurance Ceded		6
	Direct Business (a)	2	3	4	5	Net Premiums Written Cols. 1+2+3-4-5
1. Fire	201,401			196,765	4,636	
2. Allied lines	12,408,585			12,408,585		
3. Farmowners multiple peril						
4. Homeowners multiple peril	3,837,049			3,773,425	63,624	
5. Commercial multiple peril	69,466,569			69,410,143	56,426	
6. Mortgage guaranty						
8. Ocean marine						
9. Inland marine	86,441			86,441		
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 (group and individual)						
15. Other accident and health						
16. Workers' compensation	12,030,902			12,030,902		
17.1 Other liability - occurrence	3,652,829			3,637,932	14,897	
17.2 Other liability - claims-made						
17.3 Excess workers' compensation						
18.1 Products liability - occurrence	4,184			4,184		
18.2 Products liability - claims-made						
19.1, 19.2 Private passenger auto liability	45,511,468			45,511,468		
19.3, 19.4 Commercial auto liability	23,654,002			23,649,906	4,096	
21. Auto physical damage	34,757,341			34,757,341		
22. Aircraft (all perils)						
23. Fidelity	9,982			9,982		
24. Surety	1,028,648			1,028,648		
26. Burglary and theft						
27. Boiler and machinery						
28. Credit						
29. International						
30. Warranty						
31. Reinsurance - nonproportional assumed property	XXX					
32. Reinsurance - nonproportional assumed liability	XXX					
33. Reinsurance - nonproportional assumed financial lines	XXX					
34. Aggregate write-ins for other lines of business						
35. TOTALS	206,649,401			206,505,722	143,679	
DETAILS OF WRITE-INS						
3401.						
3402.						
3403.						
3498. Summary of remaining write-ins for Line 34 from overflow page						
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)						

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X]

If yes: 1. The amount of such installment premiums \$
 2. Amount at which such installment premiums would have been reported had they been reported on an annualized basis \$

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

		Losses Paid Less Salvage				5	6	7	8
		1	2	3	4				
Line of Business		Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 -3)	Net Losses Unpaid Current Year (Part 2A , Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1.	Fire	2,455		2,455					
2.	Allied lines	9,253,757		9,253,757					
3.	Farmowners multiple peril								
4.	Homeowners multiple peril	1,983,180		1,983,180					
5.	Commercial multiple peril	40,444,210		40,444,210					
6.	Mortgage guaranty								
8.	Ocean marine								
9.	Inland marine	19,369		19,369					
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 (group and individual)								
15.	Other accident and health								
16.	Workers' compensation	3,099,172	14,290	3,113,462					
17.1	Other liability - occurrence	2,433,992		2,433,992					
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	26,447,813		26,447,813					
19.3, 19.4	Commercial auto liability	8,061,910		8,061,910					
21.	Auto physical damage	22,318,295		22,318,295					
22.	Aircraft (all perils)								
23.	Fidelity	(7,941)		(7,941)					
24.	Surety	36,482		36,482					
26.	Burglary and theft								
27.	Boiler and machinery								
28.	Credit								
29.	International								
30.	Warranty								
31.	Reinsurance - nonproportional assumed property	XXX							
32.	Reinsurance - nonproportional assumed liability	XXX							
33.	Reinsurance - nonproportional assumed financial lines	XXX							
34.	Aggregate write-ins for other lines of business								
35.	TOTALS	114,092,694	14,290	114,106,984					
DETAILS OF WRITE-INS									
3401.	.....							
3402.	.....							
3403.	.....							
3498.	Summary of remaining write-ins for Line 34 from overflow page								
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)								

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		Reported Losses				Incurred But Not Reported			8	9
		1	2	3	4	5	6	7		
Line of Business		Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1.	Fire	372		372		402,747		402,747		
2.	Allied lines	24,051		24,051		293,847		293,847		
3.	Farmowners multiple peril									
4.	Homeowners multiple peril	527,689		527,689		566,780		566,780		
5.	Commercial multiple peril	35,431,131		35,431,131		24,127,852		24,127,852		
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								(a)	
14.	Credit accident and health (group and individual)									
15.	Other accident and health								(a)	
16.	Workers' compensation	2,340,634	132,804	2,473,438		2,887,260	97,940	2,985,200		
17.1	Other liability - occurrence	1,025,543		1,025,543		4,555,903		4,555,903		
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	18,740,900		18,740,900		2,426,045		2,426,045		
19.3, 19.4	Commercial auto liability	9,006,566		9,006,566		2,266,714		2,266,714		
21.	Auto physical damage	756,657		756,657		(98,002)		(98,002)		
22.	Aircraft (all perils)									
23.	Fidelity									
24.	Surety	350,039		350,039		424,688		424,688		
26.	Burglary and theft									
27.	Boiler and machinery									
28.	Credit									
29.	International									
30.	Warranty									
31.	Reinsurance - nonproportional assumed property	XXX				XXX				
32.	Reinsurance - nonproportional assumed liability	XXX				XXX				
33.	Reinsurance - nonproportional assumed financial lines	XXX				XXX				
34.	Aggregate write-ins for other lines of business									
35.	TOTALS	68,203,582	132,804	68,336,386		37,853,834	97,940	37,951,774		
DETAILS OF WRITE-INS										
3401.	.....								
3402.	.....								
3403.	.....								
3498.	Summary of remaining write-ins for Line 34 from overflow page									
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)									

(a) Including \$ for present value of life indemnity claims.

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct	15,218,792			15,218,792
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	15,218,792			15,218,792
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)				
2. Commission and brokerage:				
2.1 Direct excluding contingent		30,989,584		30,989,584
2.2 Reinsurance assumed, excluding contingent				
2.3 Reinsurance ceded, excluding contingent		30,989,584		30,989,584
2.4 Contingent - direct				
2.5 Contingent - reinsurance assumed				
2.6 Contingent - reinsurance ceded				
2.7 Policy and membership fees				
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)				
3. Allowances to managers and agents				
4. Advertising				
5. Boards, bureaus and associations				
6. Surveys and underwriting reports				
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries			14,535	14,535
8.2 Payroll taxes				
9. Employee relations and welfare			2,252	2,252
10. Insurance				
11. Directors' fees			96	96
12. Travel and travel items			244	244
13. Rent and rent items			437	437
14. Equipment			459	459
15. Cost or depreciation of EDP equipment and software			75	75
16. Printing and stationery			1,341	1,341
17. Postage, telephone and telegraph, exchange and express			8,057	8,057
18. Legal and auditing			655	655
19. Totals (Lines 3 to 18)			28,151	28,151
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$				
20.2 Insurance department licenses and fees				
20.3 Gross guaranty association assessments				
20.4 All other (excluding federal and foreign income and real estate)				
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
21. Real estate expenses				
22. Real estate taxes				
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses			39,087	39,087
25. Total expenses incurred			67,238	(a) 67,238
26. Less unpaid expenses - current year				
27. Add unpaid expenses - prior year				
28. Amounts receivable relating to uninsured plans, prior year				
29. Amounts receivable relating to uninsured plans, current year				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)			67,238	67,238
DETAILS OF WRITE-INS				
2401. Miscellaneous Expenses			39,087	39,087
2402.				
2403.				
2498. Summary of remaining write-ins for Line 24 from overflow page				
2499. Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above)			39,087	39,087

(a) Includes management fees of \$ 0 to affiliates and \$ 0 to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds	(a) .....90,570	.....124,399
1.1	Bonds exempt from U.S. tax	(a) .....465,684	.....466,316
1.2	Other bonds (unaffiliated)	(a) .....345,342	.....309,914
1.3	Bonds of affiliates	(a) .....	.....
2.1	Preferred stocks (unaffiliated)	(b) .....	.....
2.11	Preferred stocks of affiliates	(b) .....	.....
2.2	Common stocks (unaffiliated) .....	.....	.....
2.21	Common stocks of affiliates .....	.....	.....
3.	Mortgage loans	(c) .....	.....
4.	Real estate	(d) .....	.....
5	Contract loans .....	.....	.....
6	Cash, cash equivalents and short-term investments	(e) .....4,691	.....4,930
7	Derivative instruments	(f) .....	.....
8.	Other invested assets .....	.....	.....
9.	Aggregate write-ins for investment income .....	.....	.....
10.	Total gross investment income	906,287	905,559
11.	Investment expenses		(g) .....67,238
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		(i)
15.	Aggregate write-ins for deductions from investment income .....		.....
16.	Total deductions (Lines 11 through 15)		67,238
17.	Net investment income (Line 10 minus Line 16)		838,321
DETAILS OF WRITE-INS			
0901.	.....	
0902.	.....	
0903.	.....	
0998.	Summary of remaining write-ins for Line 9 from overflow page		
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)		
1501.	.....	
1502.	.....	
1503.	.....	
1598.	Summary of remaining write-ins for Line 15 from overflow page		
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		

- (a) Includes \$7,782 accrual of discount less \$364,617 amortization of premium and less \$32,244 paid for accrued interest on purchases.
- (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
- (c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	(1,714)	.....	(1,714)	.....	.....
1.1	Bonds exempt from U.S. tax	(19,427)	.....	(19,427)	.....	.....
1.2	Other bonds (unaffiliated)	(12,097)	.....	(12,097)	.....	.....
1.3	Bonds of affiliates .....	.....	.....	.....	.....	.....
2.1	Preferred stocks (unaffiliated) .....	.....	.....	.....	.....	.....
2.11	Preferred stocks of affiliates .....	.....	.....	.....	.....	.....
2.2	Common stocks (unaffiliated) .....	.....	.....	.....	.....	.....
2.21	Common stocks of affiliates .....	.....	.....	.....	.....	.....
3.	Mortgage loans .....	.....	.....	.....	.....	.....
4.	Real estate .....	.....	.....	.....	.....	.....
5.	Contract loans .....	.....	.....	.....	.....	.....
6.	Cash, cash equivalents and short-term investments .....	.....	.....	.....	.....	.....
7.	Derivative instruments .....	.....	.....	.....	.....	.....
8.	Other invested assets .....	.....	(42,898)	(42,898)	.....	.....
9.	Aggregate write-ins for capital gains (losses) .....	.....	.....	.....	.....	.....
10.	Total capital gains (losses)	(33,238)	(42,898)	(76,136)	.....	.....
DETAILS OF WRITE-INS						
0901.	.....				
0902.	.....				
0903.	.....				
0998.	Summary of remaining write-ins for Line 9 from overflow page					
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)					

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			
2. Stocks (Schedule D):			
2.1 Preferred stocks			
2.2 Common stocks			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			
3.2 Other than first liens.....			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			
4.2 Properties held for the production of income.....			
4.3 Properties held for sale			
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			
6. Contract loans			
7. Derivatives (Schedule DB)			
8. Other invested assets (Schedule BA)			
9. Receivables for securities			
10. Securities lending reinvested collateral assets (Schedule DL)			
11. Aggregate write-ins for invested assets			
12. Subtotals, cash and invested assets (Lines 1 to 11)			
13. Title plants (for Title insurers only)			
14. Investment income due and accrued			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection			
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			
15.3 Accrued retrospective premiums and contracts subject to redetermination			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			
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			
18.2 Net deferred tax asset	87,224	159,757	72,533
19. Guaranty funds receivable or on deposit			
20. Electronic data processing equipment and software			
21. Furniture and equipment, including health care delivery assets			
22. Net adjustment in assets and liabilities due to foreign exchange rates			
23. Receivables from parent, subsidiaries and affiliates			
24. Health care and other amounts receivable			
25. Aggregate write-ins for other than invested assets			
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	87,224	159,757	72,533
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28. Total (Lines 26 and 27)	87,224	159,757	72,533
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)			
2501. Prepaid Additional Minimum Pension			
2502.			
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)			

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

NOTES TO THE FINANCIAL STATEMENTS

- 1 Summary of Significant Accounting Policies:
- A. The accompanying financial statements of the Company have been prepared in conformity with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manuals.

	SSAP #	F/S Page	F/S Line #	2017	2016
Net Income:					
1) Company state basis (Page 4 Line 20, Columns 1 & 2)	XXX	XXX	XXX	660,360	943,276
2) State Prescribed Practices that (increase)/decrease NAIC SAP	-	-	-	-	-
3) State Permitted Practices that (increase)/decrease NAIC SAP	-	-	-	-	-
4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	660,360	943,276
Surplus:					
5) Company state basis (Page 3 Line 37, Columns 1 & 2)	XXX	XXX	XXX	36,058,588	35,411,879
6) State Prescribed Practices that (increase)/decrease NAIC SAP	-	-	-	-	-
7) State Permitted Practices that (increase)/decrease NAIC SAP	-	-	-	-	-
8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	36,058,588	35,411,879

- B. The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.
- C. Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by the daily pro rata method for direct business and are based on reports received from ceding companies for reinsurance. Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.
- 1) Short-term investments include investments with remaining maturities of one year or less at the time of acquisition and are principally stated at amortized cost.
- 2) Bonds not backed by other loans are stated at amortized cost using the scientific method.
- 3) Common Stocks are stated at market value except that investments in stocks of uncombined subsidiaries and affiliates in which the Company has an interest of 20% or more are carried on the equity basis.
- 4) Preferred Stocks are stated at market value except Sinking Fund Preferred Stocks, which are carried at amortized cost.
- 5) Mortgage loans are reported at unpaid principal balances, less allowance for impairment.
- 6) Single class and multi-class mortgage-backed/asset-backed securities are valued at the lower of amortized cost using the interest method including anticipated prepayments or fair market value. Prepayment assumptions are obtained from "The Asset Backed Securities Group" and are based on the current interest rate and economic environment. The retrospective adjustment method is used to value all such securities.
- 7) The Company's insurance subsidiaries are reported at their underlying statutory equity. Noninsurance subsidiaries, which have significant ongoing operations other than for the Company, are reported at GAAP equity. The net change in the subsidiaries' equity is included in the change in net unrealized capital gains or losses.
- 8) Partnerships and Limited Liability Companies are carried at GAAP equity value.
- 9) All derivatives are stated at fair value.
- 10) The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53, Property-Casualty Contracts – Premiums.
- 11) Loss and loss adjustment expense reserves represents management's best estimate of the ultimate net cost of all reported and unreported losses incurred through December 31. The Group does not discount loss and loss adjustment expense reserves except for certain permanent long-term disability claims related to worker's compensation coverage's. The reserves for unpaid losses and loss adjustment expenses are estimated using individual case-basis valuations and statistical analyses. Those estimates are subject to the effects of trends in loss severity and frequency. Although considerable variability is inherent in such estimates, management believes the reserves for losses and loss adjustment expenses are adequate. The estimates are continually reviewed and adjusted as necessary as experience develops or new information becomes known; such adjustments are included in current operations.
- 12) The Company has not modified its capitalization policy from the prior period.
- 13) The Company does not estimate pharmaceutical rebate receivables.
- D. Going Concern:
Based upon its evaluation of relevant conditions and events, management does not have substantial doubt about the Company'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:
- A. Mortgage Loans: None
- B. Debt Restructuring: None
- C. Reverse Mortgages: None
- D. Loan-Backed Securities:
- 1) Prepayment assumptions for mortgage-backed/loan-backed and structured securities were obtained from Moody's and the Mortgage Industry Advisory Corporation.
- 2) There are no recognized other-than-temporary impairments.
- 3) There are no current-period other-than-temporary impairments.
- 4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):
- a. The aggregate amount of unrealized losses:
1. Less than 12 Months \$28,510
2. 12 Months or Longer \$30,878
- b. The aggregate related fair value of securities with unrealized losses:
1. Less than 12 Months \$4,444,746
2. 12 Months or Longer \$1,374,001
- 5) Bonds in an unrealized loss position are regularly reviewed for other-than temporary declines in value. Factors considered in determining whether a decline is other-than-temporary include the length of time a bond has been in an unrealized loss position and the reasons for the decline in value. Assessments include judgments about an obligor's or guarantor's current and projected financial position, projected ability to service and repay its debt obligations, the existence of, and realizable value for, any collateral backing the obligations, and the macro-economic and micro-economic outlooks for specific industries and issuers. Estimating the future cash flows of loan-backed securities also involves assumptions regarding the underlying collateral such as prepayment rates, default and recovery rates, existence of subordinated classes capable of absorbing losses, and third-party servicing abilities.
- E. Repurchase Agreements: 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
- I. Reverse Repurchase Agreements Transactions Accounted for as Sale: None
- J. Real Estate: None impaired
- K. Investments in low-income housing tax credits (LIHTC): None

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

NOTES TO THE FINANCIAL STATEMENTS

- L. Restricted Assets:
1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted						
	Current Year					6 Total From Prior Year	7 Increase/ (Decrease) (5 minus 6)
	1 Total General Account G/A	2 G/A Supporting Protected Cell Account Activity (a)	3 Total Protected Cell Account Restricted Assets	4 Protected Cell Account Assets Supporting G/A Activity (b)	5 Total (1 plus 3)		
a. Subject to contractual obligation for which liability is not shown							
b. Collateral held under security lending agreements							
c. Subject to repurchase agreements							
d. Subject to reverse repurchase agreements							
e. Subject to dollar repurchase agreements							
f. Subject to dollar reverse repurchase agreements							
g. Placed under option contracts							
h. Letter stock or securities restricted as to sale excl. FHLB cap. stock							
i. FHLB capital stock							
j. On deposit with states	4,446,371				4,446,371	4,040,537	405,834
k. On deposit with other regulatory bodies							
l. Pledged as collateral to FHLB (including assets backing funding agreements)							
m. Pledged as collateral not captured in other categories							
n. Other restricted assets							
o. Total restricted assets	4,446,371				4,446,371	4,040,537	405,834

	Current Year			
	8 Total Nonadmitted Restricted	9 Total Admitted Restricted (5 minus 8)	Percentage	
			10 Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	11 Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown				
c. Subject to repurchase agreements				
d. Subject to reverse repurchase agreements				
e. Subject to dollar repurchase agreements				
f. Subject to dollar reverse repurchase agreements				
g. Placed under option contracts				
h. Letter stock or securities restricted as to sale excl. FHLB cap. stock				
i. FHLB capital stock				
j. On deposit with states		4,446,371	12.30%	12.33%
k. On deposit with other regulatory bodies				
l. Pledged as collateral to FHLB (including assets backing funding agreements)				
m. Pledged as collateral not captured in other categories				
n. Other restricted assets				
o. Total restricted assets		4,446,371	12.30%	12.33%

- (c) Column 5 divided by Asset Page, Column 1, Line 28
- (d) Column 9 divided by Asset Page, Column 3, Line 28
2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts that share similar characteristics, such as Reinsurance and Derivatives, are reported in the aggregate): None
3. Detail of other restricted assets (contracts that share similar characteristics, such as Reinsurance and Derivatives, are reported in the aggregate): None
4. Collateral Received and Reflected as Assets within the Reporting Entity's Financial Statements: None
- M. Working Capital Finance Investments: None
- N. Offsetting and Netting of Assets and Liabilities: None
- O. Structured Notes: None
- P. 5* Securities: None
- Q. Short Sales: None
- R. Prepayment Penalty and Acceleration Fees: None
- 6 Joint Ventures, Partnerships and Limited Liability Companies:
- A. None exceed 10% of admitted assets.
- B. The Company invests in limited liability companies that generate federal and state tax credits available for the Company's use. The Company recognized \$42,898 of impairment losses on these investments based on the audited equity balances of the investees.
7. Investment Income due and accrued: None nonadmitted.
8. Derivative Instruments: None

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

NOTES TO THE FINANCIAL STATEMENTS

9. Income Taxes:

A. Deferred Tax Assets and Liabilities:

1. Components of Net Deferred Tax Asset/Liability

	December 31, 2017			December 31, 2016		
	Ordinary	Capital	Total	Ordinary	Capital	Total
Gross deferred tax assets	195,771	-	195,771	281,948	-	281,948
Statutory valuation allowance adjustment	-	-	-	-	-	-
Adjusted gross deferred tax assets	195,771	-	195,771	281,948	-	281,948
Deferred tax assets nonadmitted	87,224	-	87,224	159,757	-	159,757
Subtotal net deferred tax assets/(net deferred tax liability)	108,547	-	108,547	122,191	-	122,191
Deferred tax liabilities	-	2,880	2,880	-	2,875	2,875
Net admitted deferred tax assets/(net deferred tax liability)	108,547	(2,880)	105,667	122,191	(2,875)	119,316

	Change		
	Ordinary	Capital	Total
Gross deferred tax assets	(86,177)	-	(86,177)
Statutory valuation allowance adjustment	-	-	-
Adjusted gross deferred tax assets	(86,177)	-	(86,177)
Deferred tax assets nonadmitted	(72,533)	-	(72,533)
Subtotal net deferred tax assets/(net deferred tax liability)	(13,644)	-	(13,644)
Deferred tax liabilities	-	5	5
Net admitted deferred tax assets/(net deferred tax liability)	(13,644)	(5)	(13,649)

2. Admission Calculation Components

	December 31, 2017			December 31, 2016		
	Ordinary	Capital	Total	Ordinary	Capital	Total
a. Federal income taxes paid in prior years recoverable through loss carrybacks	105,667	-	105,667	65,188	-	65,188
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 (the lesser of 2(b)1 and 2(b)2 below):	-	-	-	54,129	-	54,129
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	-	-	-	54,129	-	54,129
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	5,392,938	XXX	XXX	5,293,884
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	2,880	-	2,880	2,875	-	2,875
d. Deferred tax assets admitted as the result of application of SSAP 101.						
Total 2(a) + 2(b) + 2(c)	108,547	-	108,547	122,192	-	122,192

	Changes		
	Ordinary	Capital	Total
a. Federal income taxes paid in prior years recoverable through loss carrybacks	40,479	-	40,479
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 (the lesser of 2(b)1 and 2(b)2 below):	(54,129)	-	(54,129)
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	(54,129)	-	(54,129)
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	99,054
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	5	-	5
d. Deferred tax assets admitted as the result of application of SSAP 101.			
Total 2(a) + 2(b) + 2(c)	(13,645)	-	(13,645)

3. Other Admissibility Criteria

	December 31, 2017	December 31, 2016
Ratio percentage used to determine recovery period and threshold limitation amount	10,090%	9,755%
Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	35,952,921	35,292,562

4. The company does not currently employ tax planning strategies to recognize the admission of deferred tax assets.
- B. There are no temporary differences for which a deferred tax liability has not been established.

C. Current and Deferred Income Taxes

1. Current Income Tax

	December 31, 2017	December 31, 2016
Federal	17,481	(45,598)
Foreign	-	-
Subtotal	17,481	(45,598)
Federal income tax on net capital gains	(10,779)	110,787
Utilization of capital loss carry-forwards	-	-
Other	95,123	8,088
Federal and foreign income taxes incurred	101,825	73,277

2. Deferred Tax Assets

	December 31, 2017	December 31, 2016	Change
Ordinary:			
Fixed assets	34,932	60,298	(25,366)
Tax credit carry-forward	105,667	119,317	(13,650)
Other	55,172	102,333	(47,161)
Subtotal	195,771	281,948	(86,177)
Statutory valuation allowance adjustment	-	-	-
Nonadmitted	87,224	159,757	(72,533)
Admitted ordinary deferred tax assets	108,547	122,191	(13,644)
Capital:			
Subtotal	-	-	-
Statutory valuation allowance adjustment	-	-	-
Nonadmitted	-	-	-
Admitted capital deferred tax assets	-	-	-
Admitted deferred tax assets	108,547	122,191	(13,644)

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

NOTES TO THE FINANCIAL STATEMENTS

3. Deferred Tax Liabilities

	December 31, 2017	December 31, 2016	Change
Ordinary:			
Subtotal	-	-	-
Capital:			
Investments	2,880	2,875	5
Other	-	-	-
Subtotal	2,880	2,875	5
Deferred tax liabilities	2,880	2,875	5
Net deferred tax assets/liabilities	105,667	119,316	(13,649)

- D. Reconciliation of Federal Income Tax at Statutory Rate to Actual Federal Income Tax Incurred.
The provision for federal and foreign income taxes incurred is different from that which would be obtained by applying the statutory Federal income tax rate to income before income taxes. The significant items causing this difference are as follows:

	December 31, 2017	Effective Tax Rate
Provision computed at statutory rate	266,765	35.0%
Tax exempt interest	(138,729)	(18.2)
Tax Cuts and Jobs Act deferred tax expense	58,149	7.6
Other	1,823	0.3
Total	188,008	24.7%
Federal and foreign income taxes incurred	112,604	14.8%
Realized capital gains tax	(10,779)	(1.4)
Change in net deferred income taxes	86,183	11.3
Total statutory income taxes	188,008	24.7%

- E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits
1. The company has general business credit carry forwards available of \$105,667 expiring in 2035.
 2. The following is income tax expense for 2017 and 2016 that is available for recoupment in the event of future net losses:

Year	Amount
2017	6,702
2016	160,311

3. The company did not have any protective tax deposits under section 6603 of the Internal Revenue Code.
- F. The Company files a consolidated federal income tax return with its ultimate parent company, Main Street America Group Mutual Holdings, Inc. (MSAGMH) and all of its 80% and greater owned subsidiaries. See Schedule Y, Part 1 for a list of these subsidiaries. The entities included in this consolidated tax return have a tax sharing agreement that allocates the consolidated tax provision among the companies. The method of allocation among the companies within the same consolidated group (for tax purposes) is subject to a written agreement, approved by the Board of Directors. Allocations are based upon separate tax return calculations with tax benefits recognized for net losses currently recoverable on a consolidated basis.
- G. 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 and Affiliates:
- A. The Company is owned by Main Street America Group, Incorporated.
 - B. Details of Transactions Greater than ½% of Admitted Assets: None
 - C. Change in Terms of Intercompany Arrangements: None
 - D. At, December 31, 2017 the Company reported \$208,495 amounts due from NGMIC. The terms of the settlement require that these amounts be settled within 90 days of the end of each month.
 - E. The Company has given no loan guarantees to affiliates.
 - F. The Company is in an Intercompany Pooling Agreement, see Note 26.
 - G. All outstanding shares of The Company are owned by Main Street America Financial Corporation.
 - H. Amount Deducted for Investment in Upstream Company: None.
 - I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets: None
 - J. The Company does not have any impairment write downs in investments in Subsidiary, Controlled or Affiliated Companies during the current period.
 - K. The Company does not have any investment in a foreign insurance subsidiary.
 - L. Downstream noninsurance holding company: None.
 - M. All SCA Investments: None
 - N. Investment in Insurance SCA's: None
11. Debt: None
12. Retirement Plans, Deferred Compensation, and Other Postretirement Benefit Plans: None
13. Capital and Surplus and Shareholders, Dividend Restrictions and Quasi-Reorganizations:
1. The Company's authorized capital stock consists of 2,000,000 shares of common stock with a \$1.00 per share par value. All 2,000,000 shares are issued to Main Street America Financial Corporation.
 2. The Company has no preferred stock.
 3. No approval has been requested by the Company to the state of domicile.
 4. No ordinary dividends have been paid.
 5. None.
 6. No restrictions on the Company's surplus.
 7. No advances.
 8. No amounts of stock held for special purposes.
 9. No changes in special surplus funds from the prior year.
 10. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses are \$ 0.
 11. The Company issued no surplus debentures or similar obligations.
 12. No restatement due to prior quasi-reorganizations.
 13. No quasi-reorganizations in the prior 10 years.
14. Liabilities, Contingencies and Assessments:
- A. Contingent Commitments: None
 - B. Assessments: No material financial effect.
 - C. Gain Contingencies: None
 - D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits: None
 - E. Product warranties: None
 - F. Joint and Several Liabilities: None
 - G. All Other Contingencies: None
15. Leases: None
16. Financial instruments with off-balance sheet risk and financial instruments with concentrations of credit risk: None
17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities: None
18. Gain or Loss to the Company from Uninsured A&H Plans and the Uninsured Portion of Partially Insured Plans: None
19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators: None
20. Fair Value Measurements:
- A. 1. Assets Measured at Fair Value on a Recurring Basis: None
 2. Assets Measured at Fair Value on a Recurring Basis using Significant Unobservable Inputs (Level 3): None
 3. Transfers between levels in the hierarchy are recognized at the end of the reporting period.

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

NOTES TO THE FINANCIAL STATEMENTS

4. Cash equivalents and certain fixed maturities are recorded at fair value in the financial statements. In instances where there are quoted prices in active markets for identical instruments, as is the case within the U.S. Treasury market, these securities are categorized at Level 1 of the fair value hierarchy. For securities where the fair value of fixed income securities are estimated using recently executed transactions, market price quotations, bond spreads, or models that have inputs from published interest rate yield curves, these securities are generally categorized as Level 2 of the hierarchy. Those securities with fair values estimated by the insurer using significant unobservable inputs are categorized as Level 3 of the hierarchy.

Most equity securities are recorded at fair value in the financial statements. The fair value of most common stocks is generally based on quoted prices in active markets. As such, common stocks are generally categorized as Level 1 of the hierarchy. The fair value of most preferred stocks are generally determined by quoted prices for similar instruments in active markets, hence they are categorized as Level 2 of the fair value hierarchy.

C.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Not Practical (Carrying Value)
Cash, cash equivalents, short-term investments	249,606	249,606	249,606	-	-	-
Bonds	32,745,118	32,304,085	4,343,737	28,401,381	-	-
Common Stock	-	-	-	-	-	-
Preferred Stock	-	-	-	-	-	-
Mortgage Loans	-	-	-	-	-	-
Total	32,994,724	32,553,691	4,593,343	28,401,381	-	-

D. Not Practical to Estimate Fair Value: None.

21. Other Items:

A. Extraordinary Items: None

B. Troubled Debt Restructuring: None

C. Other Disclosures:

Special Disability Trust:

a. The amount of credit taken by the insurer in the determination of its loss reserves for the prior calendar year and the current reporting period on a year-to-date basis is \$0 and \$0 respectively.

b. The amount of payments received by the insurer from the Special Disability Trust Fund during the prior calendar year and the year-to-date recoveries for the current year is \$0.

c. The amount the insurer was assessed by the Special Disability Trust Fund during the prior calendar year and during is \$0.

d. Agents Balances as reported on Page 2, line 15.1: None

1. Business Interruption Insurance Recoveries: None

D. Business Interruption Insurance Recoveries: None

E. State Transfer Credits:

1. Carrying value of transferable state tax credits gross of any related tax liabilities and total unused transferable state tax credits by state and in total.

Description	State	Carrying Value	Unused transferable State Tax Credits
Historic	GA	27,847	71,399
Total		27,847	71,399

2. Method of Estimating Utilization of Remaining Transferable State Tax Credits:

The Company estimated the utilization of the remaining Transferable State Tax credits by projecting future state tax liability.

3. Impairment Loss: The Company recognized no impairment losses.

F. Subprime-Mortgage-Related Risk Exposure: None

22. Events Subsequent: None

23. Reinsurance:

A. Unsecured Reinsurance Recoverable that exceed 3% of policyholders' surplus as of 12/31/2017: None

B. Reinsurance Recoverable in Dispute: None

C. Reinsurance Assumed and Ceded as of 12/31/2017:

	Assumed Premium Reserve	Assumed Commission Equity	Ceded Premium Reserve	Ceded Commission Equity	Net Premium Reserve	Net Commission Equity
a. Affiliates	-	-	(100,349,000)	(9,332,457)	(100,349,000)	(9,332,457)
b. All Other	-	-	(49,000)	(4,557)	(49,000)	(4,557)
c. Total	-	-	(100,398,000)	(9,337,014)	(100,398,000)	(9,337,014)

d. Direct Unearned Premium Reserve: \$100,397,305

D. Uncollectible Reinsurance: None

E. Commutation of Ceded Reinsurance: None

F. Retroactive Reinsurance: None

G. Reinsurance Accounted for as a Deposit: None

H. Disclosures for the Transfer of Property and Casualty Run-off Agreements: None

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation: None

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination: None

25. Change in Incurred Losses and Loss Adjusting Expenses: None

26. Intercompany Pooling Arrangements:

NGM is the lead company in an intercompany pooling arrangement ("the Pool") for the Group. NGM assumes 100% of the underwriting results of the Pool. NGM's subsidiary companies cede 100% of their net underwriting results to the Pool. The subsidiaries receive no ceding commission or retrocession from NGM. NGM also assumes 100% of the net underwriting results of GDM, SVM and AM through separate quota share reinsurance agreements. These separate quota share agreements provide that GDM, SVM and AM will receive a 5% ceding commission based on their net written premiums.

Property and casualty excess of loss and catastrophe reinsurance coverage for the Pool is maintained by NGM with non-affiliated reinsurers. Facultative and certain auto facility and legacy cessions to non-affiliated reinsurers by the other Pool participants occur prior to cession to the Pool.

See Note 10 D for intercompany balances.

27. Structured Settlements: None

28. Health Care Receivables: None

29. Participating Policies: None

30. Premium Deficiency Reserves: None, anticipated investment income was considered as a factor in the premium deficiency calculation.

31. High Deductible Policies: None

32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses: None

33. Asbestos and 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

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?
If yes, complete Schedule Y, Parts 1, 1A and 2

Yes [X] No []

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

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

1.3

State Regulating?

Florida

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

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2015

3.2

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

3.3

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).

04/18/2017

3.4

By what department or departments?

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

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

3.6

Have all of the recommendations within the latest financial examination report been complied with?

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

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business?
4.12 renewals?

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

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business?
4.22 renewals?

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

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [] No [X]

5.2

If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

6.1

Has the 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]

6.2

If yes, give full information:

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes [] No [X]

7.2

If yes,
7.21 State the percentage of foreign control;
7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).

1	2
Nationality	Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

GENERAL INTERROGATORIES

- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [] No [X]
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [] No [X]
- 8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

Ernst & Young, LLP, 200 Claredon Street, Boston, MA
- 10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [] No []
- 10.2

If the response to 10.1 is yes, provide information related to this exemption:
- 10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [] No [X]
- 10.4

If the response to 10.3 is yes, provide information related to this exemption:
- 10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?

Yes [X] No [] N/A []
- 10.6

If the response to 10.5 is no or n/a, please explain
11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?

Dean Dorman
55 West Street
Keene, NH 03431
Employee of the Company.
- 12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes [] No [X]
- 12.11

Name of real estate holding company
- 12.12

Number of parcels involved
- 12.13

Total book/adjusted carrying value

\$
- 12.2

If, yes provide explanation:
13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1

What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
- 13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes [] No []
- 13.3

Have there been any changes made to any of the trust indentures during the year?

Yes [] No []
- 13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes [] No [] N/A []
- 14.1

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.
- 14.11

If the response to 14.1 is No, please explain:
- 14.2

Has the code of ethics for senior managers been amended?

Yes [] No [X]
- 14.21

If the response to 14.2 is yes, provide information related to amendment(s).
- 14.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [] No [X]
- 14.31

If the response to 14.3 is yes, provide the nature of any waiver(s).

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.
- Yes [] No [X]

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof?
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof?
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person?
- Yes [X] No []
- Yes [X] No []
- Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers
- 20.12 To stockholders not officers
- 20.13 Trustees, supreme or grand (Fraternal Only)
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers
- 20.22 To stockholders not officers
- 20.23 Trustees, supreme or grand (Fraternal Only)
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others
- 21.22 Borrowed from others
- 21.23 Leased from others
- 21.24 Other
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment
- 22.22 Amount paid as expenses
- 22.23 Other amounts paid
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:
- Yes [] No [X]
- \$
- \$
- \$
- \$
- \$
- \$
- \$
- \$
- \$
- \$
- Yes [] No [X]
- \$
- \$
- \$
- Yes [X] No []
- \$ 208,495

INVESTMENT

- 24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03)
- 24.02 If no, give full and complete information relating thereto
- 24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
- 24.04 Does the Company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions?
- 24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs.
- 24.06 If answer to 24.04 is no, report amount of collateral for other programs.
- 24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?
- 24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?
- 24.09 Does the reporting entity or the reporting entity 's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending?
- Yes [X] No []
-
-
- Yes [] No [] N/A [X]
- \$
- \$
- Yes [] No [] N/A [X]
- Yes [] No [] N/A [X]
- Yes [] No [] N/A [X]

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

GENERAL INTERROGATORIES

24.10 For the reporting entity’s security lending program state the amount of the following as December 31 of the current year:

24.101	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.	\$	
24.102	Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.	\$	
24.103	Total payable for securities lending reported on the liability page.	\$	

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03). Yes ☒ No ☐

25.2	If yes, state the amount thereof at December 31 of the current year:	25.21 Subject to repurchase agreements	\$	
		25.22 Subject to reverse repurchase agreements	\$	
		25.23 Subject to dollar repurchase agreements	\$	
		25.24 Subject to reverse dollar repurchase agreements	\$	
		25.25 Placed under option agreements	\$	
		25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock	\$	
		25.27 FHLB Capital Stock	\$	
		25.28 On deposit with states	\$	4,446,371
		25.29 On deposit with other regulatory bodies	\$	
		25.30 Pledged as collateral - excluding collateral pledged to an FHLB	\$	
		25.31 Pledged as collateral to FHLB - including assets backing funding agreements	\$	
		25.32 Other	\$	

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes ☐ No ☒

26.2 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.

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes ☐ No ☒

27.2 If yes, state the amount thereof at December 31 of the current year. \$

28. 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 ☐

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

1 Name of Custodian(s)	2 Custodian's Address
US Bank	1025 Connecticut ave. N.W., Washington, DC 20036

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

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

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? Yes ☐ No ☒

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

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

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

GENERAL INTERROGATORIES

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

1 Name of Firm or Individual	2 Affiliation
Asset Allocation & Mgt Co, LLC	U.....
Municrest Investment Mgt Co, LLC	U.....
Thomas Frazier	I.....
.....

28.0597 For those firms/individuals listed in the table for Question 28.05, 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 [X] No []

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets?..... Yes [X] No []

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
109875	Asset Allocation & Mgt Co, LLC	549300DSCH1V5W3U963	SEC	NO.....
111631	Municrest Investment Mgt Co, LLC	N/A	SEC	NO.....
.....

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? Yes [] No [X]

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
29.2999 - Total		

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
.....

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds	32,304,085	32,745,118	441,033
30.2 Preferred stocks			
30.3 Totals	32,304,085	32,745,118	441,033

30.4 Describe the sources or methods utilized in determining the fair values:
Securities Evaluations, Inc. was used to determine fair values, if prices were available. For other bonds and preferred stocks, the fair values were calculated using broker matrix pricing.

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [] No [X]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [] No []

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
S&P Capital IQ was used to determine fair values, if prices were available. For other bonds and preferred stocks, the fair values were calculated using broker matrix pricing.

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []

32.2 If no, list exceptions:
.....

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

GENERAL INTERROGATORIES

33. By self-designating 5*GI securities, the reporting entity is certifying the following elements of each self-designated 5*GI security:
a. Documentation necessary to permit a full credit analysis of the security does not exist.
b. Issuer or obligor is current on all contracted interest and principal payments.
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
Has the reporting entity self-designated 5*GI securities? Yes [] No [X]

OTHER

34.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$

34.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
.....

35.1 Amount of payments for legal expenses, if any?\$

35.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
.....

36.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?\$

36.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
.....

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force?

Yes [] No [X]

1.2

If yes, indicate premium earned on U. S. business only.

\$ _____

1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?

\$ _____

1.31

Reason for excluding

.....

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.

\$ _____

1.5

Indicate total incurred claims on all Medicare Supplement Insurance.

\$ _____

1.6

Individual policies:

Most current three years:

1.61

Total premium earned

\$ _____

1.62

Total incurred claims

\$ _____

1.63

Number of covered lives

.....

All years prior to most current three years

1.64

Total premium earned

\$ _____

1.65

Total incurred claims

\$ _____

1.66

Number of covered lives

.....

1.7

Group policies:

Most current three years:

1.71

Total premium earned

\$ _____

1.72

Total incurred claims

\$ _____

1.73

Number of covered lives

.....

All years prior to most current three years

1.74

Total premium earned

\$ _____

1.75

Total incurred claims

\$ _____

1.76

Number of covered lives

.....

2.

Health Test:

1

Current Year

2

Prior Year

2.1

Premium Numerator

.....

2.2

Premium Denominator

.....

2.3

Premium Ratio (2.1/2.2)

0.000

.....

0.000

2.4

Reserve Numerator

.....

2.5

Reserve Denominator

.....

2.6

Reserve Ratio (2.4/2.5)

0.000

.....

0.000

3.1

Does the reporting entity issue both participating and non-participating policies?

Yes [] No []

3.2

If yes, state the amount of calendar year premiums written on:

3.21

Participating policies

\$ _____

3.22

Non-participating policies

\$ _____

4.

For mutual reporting Entities and Reciprocal Exchanges Only:

4.1

Does the reporting entity issue assessable policies?

Yes [] No [X]

4.2

Does the reporting entity issue non-assessable policies?

Yes [] No [X]

4.3

If assessable policies are issued, what is the extent of the contingent liability of the policyholders?

%

4.4

Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.

\$ _____

5.

For Reciprocal Exchanges Only:

5.1

Does the Exchange appoint local agents?

Yes [] No []

5.2

If yes, is the commission paid:

5.21

Out of Attorney's-in-fact compensation.....

Yes [] No [] N/A []

5.22

As a direct expense of the exchange.....

Yes [] No [] N/A []

5.3

What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?

.....

5.4

Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred?

Yes [] No []

5.5

If yes, give full information

.....

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ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

6.1

What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?
100% intercompany cession to parent company, NGM Insurance Company.

6.2

Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process.
PML was estimated by the RMS catastrophe model. PML's are generated by windstorms on the East Coast.

6.3

What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?
100% intercompany cession to parent company, NGM Insurance Company.

6.4

Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?

Yes [X] No []

6.5

If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss.
.....

7.1

Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss ratio cap, an aggregate limit or any similar provisions)?.....

Yes [] No [X]

7.2

If yes, indicate the number of reinsurance contracts containing such provisions:

7.3

If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?.....

Yes [] No []

8.1

Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?

Yes [] No [X]

8.2

If yes, give full information
.....

9.1

Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
(c) Aggregate stop loss reinsurance coverage;
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.

Yes [] No [X]

9.2

Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.

Yes [] No [X]

9.3

If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.

9.4

Except for transactions meeting the requirements of paragraph 32 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?

Yes [] No [X]

9.5

If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.

9.6

The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
(a) The entity does not utilize reinsurance; or,
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.

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

10.

If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?

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

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force? Yes [] No [X]

11.2 If yes, give full information
.....

12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:

12.11 Unpaid losses\$

12.12 Unpaid underwriting expenses (including loss adjustment expenses)\$

12.2 Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral, and other funds\$

12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes [] No [] N/A []

12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:

12.41 From %

12.42 To..... %

12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves , including unpaid losses under loss deductible features of commercial policies? Yes [] No []

12.6 If yes, state the amount thereof at December 31 of the current year:

12.61 Letters of credit\$

12.62 Collateral and other funds.....\$

13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation):\$ 1,350,000

13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes [] No [X]

13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.4

14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes [] No [X]

14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:
.....

14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes [] No []

14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [] No []

14.5 If the answer to 14.4 is no, please explain:
.....

15.1 Has the reporting entity guaranteed any financed premium accounts? Yes [] No [X]

15.2 If yes, give full information
.....

16.1 Does the reporting entity write any warranty business? Yes [] No [X]
If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home					
16.12 Products					
16.13 Automobile					
16.14 Other*					

* Disclose type of coverage:
.....

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that it excludes from Schedule F - Part 5?

Yes [] No [X]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F - Part 5. Provide the following information for this exemption:

17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 excluded from Schedule F - Part 5	\$
17.12 Unfunded portion of Interrogatory 17.11	\$
17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$
17.14 Case reserves portion of Interrogatory 17.11	\$
17.15 Incurred but not reported portion of Interrogatory 17.11	\$
17.16 Unearned premium portion of Interrogatory 17.11	\$
17.17 Contingent commission portion of Interrogatory 17.11	\$

Provide the following information for all other amounts included in Schedule F - P art 3 and excluded from Schedule F - Part 5, not included above.

17.18 Gross amount of unauthorized reinsurance in Schedule F - Part 3 excluded from Schedule F - Part 5	\$
17.19 Unfunded portion of Interrogatory 17.18	\$
17.20 Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$
17.21 Case reserves portion of Interrogatory 17.18	\$
17.22 Incurred but not reported portion of Interrogatory 17.18	\$
17.23 Unearned premium portion of Interrogatory 17.18	\$
17.24 Contingent commission portion of Interrogatory 17.18	\$

18.1 Do you act as a custodian for health savings accounts?

Yes [] No [X]

18.2 If yes, please provide the amount of custodial funds held as of the reporting date.

\$

18.3 Do you act as an administrator for health savings accounts?

Yes [] No [X]

18.4 If yes, please provide the balance of funds administered as of the reporting date.

\$

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

	1 2017	2 2016	3 2015	4 2014	5 2013
Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	84,853,385	70,084,267	56,066,571	56,063,978	58,174,279
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	47,453,768	46,016,749	42,967,304	41,234,251	42,066,913
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	73,303,618	82,812,067	82,413,773	81,609,602	79,207,346
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	1,038,630	1,036,559	1,037,701	1,106,158	1,048,974
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)	206,649,401	199,949,642	182,485,349	180,013,989	180,497,512
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12. Total (Line 35)					
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)					
14. Net investment gain or (loss) (Line 11)	772,964	905,765	622,725	813,157	798,913
15. Total other income (Line 15)					
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	112,605	(37,511)	(578,203)	(529,794)	147,400
18. Net income (Line 20)	660,359	943,276	1,200,928	1,342,951	651,513
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	36,074,039	35,483,777	34,609,392	34,005,087	32,779,242
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)					
20.2 Deferred and not yet due (Line 15.2)					
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	15,451	71,898	6,710	213,629	1,042,557
22. Losses (Page 3, Line 1)					
23. Loss adjustment expenses (Page 3, Line 3)					
24. Unearned premiums (Page 3, Line 9)					
25. Capital paid up (Page 3, Lines 30 & 31)	3,000,000	3,000,000	3,000,000	3,000,000	3,000,000
26. Surplus as regards policyholders (Page 3, Line 37)	36,058,588	35,411,879	34,602,682	33,791,458	31,736,685
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	1,032,933	1,728,733	888,987	1,655,440	946,693
Risk-Based Capital Analysis					
28. Total adjusted capital	36,058,588	35,411,879	34,602,682	33,791,458	31,736,685
29. Authorized control level risk-based capital	356,333	361,806	534,558	423,938	405,665
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0					
30. Bonds (Line 1)	91.1	89.8	88.3	87.5	88.7
31. Stocks (Lines 2.1 & 2.2)					
32. Mortgage loans on real estate (Lines 3.1 and 3.2)					
33. Real estate (Lines 4.1, 4.2 & 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)	0.7	1.7	2.5	4.4	3.6
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)	8.2	8.5	9.3	8.0	7.6
38. Receivables for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)					
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47					
49. Total Investment in Parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)					

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2017	2 2016	3 2015	4 2014	5 2013
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)					
52. Dividends to stockholders (Line 35)					
53. Change in surplus as regards policyholders for the year (Line 38)	646,709	809,196	811,225	2,054,772	651,513
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	40,057,177	37,596,329	35,511,596	41,283,467	34,943,268
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	31,593,876	20,872,212	19,058,258	22,488,298	21,884,848
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	42,427,390	29,340,174	21,654,545	22,749,264	22,284,080
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	28,541	355	60,899	41,701	7,318
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59. Total (Line 35)	114,106,984	87,809,070	76,285,298	86,562,730	79,119,514
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65. Total (Line 35)					
Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2)					
68. Loss expenses incurred (Line 3)					
69. Other underwriting expenses incurred (Line 4)					
70. Net underwriting gain (loss) (Line 8)					
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)					
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)					
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	0.0				
One Year Loss Development (\$000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11)					
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0).....					
Two Year Loss Development (\$000 omitted)					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)					
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)					

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [] No []

If no, please explain:

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES

SCHEDULE P - PART 1 - SUMMARY

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	1,653	1,653	3,039	3,039	15	15			XXX
2. 2008.....	101,056	101,056		41,485	41,485	6,882	6,882	661	661			XXX
3. 2009.....	109,486	109,486		41,417	41,417	5,475	5,475	792	792			XXX
4. 2010.....	131,933	131,933		58,305	58,305	4,682	4,682	840	840			XXX
5. 2011.....	152,051	152,051		74,490	74,490	4,488	4,488	1,101	1,101			XXX
6. 2012.....	171,673	171,673		83,888	83,888	5,367	5,367	973	973			XXX
7. 2013.....	179,119	179,119		79,743	79,743	5,454	5,454	1,050	1,050			XXX
8. 2014.....	178,648	178,648		75,118	75,118	4,529	4,529	1,002	1,002			XXX
9. 2015.....	179,672	179,672		60,899	60,899	2,929	2,929	968	968			XXX
10. 2016.....	192,235	192,235		71,087	71,087	2,116	2,116	1,179	1,179			XXX
11. 2017.....	198,948	198,948		62,789	62,789	963	963	1,514	1,514			XXX
12. Totals	XXX	XXX	XXX	650,873	650,873	45,922	45,922	10,094	10,094			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	9,784	9,784	1,183	1,183			359	359	46	46			XXX
2. 2008.....	3,299	3,299	534	534			167	167	16	16			XXX
3. 2009.....	1,877	1,877	497	497			211	211	9	9			XXX
4. 2010.....	3,252	3,252	507	507			342	342	37	37			XXX
5. 2011.....	982	982	693	693			436	436	5	5			XXX
6. 2012.....	2,903	2,903	875	875			499	499	12	12			XXX
7. 2013.....	4,053	4,053	1,320	1,320			749	749	18	18			XXX
8. 2014.....	3,718	3,718	1,552	1,552			976	976	14	14			XXX
9. 2015.....	4,906	4,906	1,566	1,566			1,571	1,571	20	20			XXX
10. 2016.....	13,628	13,628	6,497	6,497			2,332	2,332	56	56			XXX
11. 2017.....	19,936	19,936	22,727	22,727			3,398	3,398	386	386			XXX
12. Totals	68,336	68,336	37,952	37,952			11,040	11,040	618	618			XXX

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2008.....	53,043	53,043		52.5	52.5						
3. 2009.....	50,277	50,277		45.9	45.9						
4. 2010.....	67,964	67,964		51.5	51.5						
5. 2011.....	82,194	82,194		54.1	54.1						
6. 2012.....	94,516	94,516		55.1	55.1						
7. 2013.....	92,388	92,388		51.6	51.6						
8. 2014.....	86,909	86,909		48.6	48.6						
9. 2015.....	72,858	72,858		40.6	40.6						
10. 2016.....	96,894	96,894		50.4	50.4						
11. 2017.....	111,713	111,713		56.2	56.2						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements which will reconcile Part 1 with Parts 2 and 4.

Schedule P - Part 2 - Summary

N O N E

Schedule P - Part 3 - Summary

N O N E

Schedule P - Part 4 - Summary

N O N E

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE OLD DOMINION INSURANCE COMPANY

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories									
States, Etc.	1	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4	5	6	7	8	9
		2	3						
	Active Status	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Losses Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Finance and Service Charges Not Included in Premiums	Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
1. Alabama	AL	N							
2. Alaska	AK	N							
3. Arizona	AZ	N							
4. Arkansas	AR	N							
5. California	CA	N							
6. Colorado	CO	N							
7. Connecticut	CT	L	20,365,185	14,111,275	5,848,287	8,946,354	4,074,461	79,919	
8. Delaware	DE	L	4,191	161		55	55	3	
9. District of Columbia	DC	N							
10. Florida	FL	L	114,791,648	117,571,505	59,326,012	78,638,664	77,301,309	82,348	
11. Georgia	GA	L	4,014,293	4,322,879	6,274,388	1,613,236	3,038,252	16,416	
12. Hawaii	HI	N							
13. Idaho	ID	N							
14. Illinois	IL	N							
15. Indiana	IN	N							
16. Iowa	IA	N							
17. Kansas	KS	N							
18. Kentucky	KY	N							
19. Louisiana	LA	N							
20. Maine	ME	L	70	70		(2)	11		
21. Maryland	MD	L	2,566,821	2,541,083	1,361,669	1,349,652	490,583	21,247	
22. Massachusetts	MA	L	675	460		(5)			
23. Michigan	MI	N							
24. Minnesota	MN	N							
25. Mississippi	MS	N							
26. Missouri	MO	N							
27. Montana	MT	N							
28. Nebraska	NE	N							
29. Nevada	NV	N							
30. New Hampshire	NH	L	4,627,686	4,608,307	1,695,708	1,447,386	906,856	37,144	
31. New Jersey	NJ	N							
32. New Mexico	NM	N							
33. New York	NY	L	32,533,501	30,425,246	21,099,310	20,682,399	10,645,600	453,327	
34. North Carolina	NC	L	675	675					
35. North Dakota	ND	N							
36. Ohio	OH	N							
37. Oklahoma	OK	N							
38. Oregon	OR	N							
39. Pennsylvania	PA	L	6,755,366	6,890,465	4,704,688	4,821,776	1,499,977	64,667	
40. Rhode Island	RI	L	9,559,523	10,088,685	6,464,766	6,537,077	3,274,510	79,186	
41. South Carolina	SC	L	5,164,859	5,342,466	3,828,775	3,706,930	2,231,627	34,841	
42. South Dakota	SD	N							
43. Tennessee	TN	L	1,653,301	1,607,416	543,821	831,166	467,882	8,536	
44. Texas	TX	N							
45. Utah	UT	N							
46. Vermont	VT	L	525,861	600,778	161,124	333,479	535,351	486	
47. Virginia	VA	L	4,085,746	4,426,169	2,784,146	2,877,606	1,590,942	42,179	
48. Washington	WA	N							
49. West Virginia	WV	N							
50. Wisconsin	WI	N							
51. Wyoming	WY	N							
52. American Samoa	AS	N							
53. Guam	GU	N							
54. Puerto Rico	PR	N							
55. U.S. Virgin Islands	VI	N							
56. Northern Mariana Islands	MP	N							
57. Canada	CAN	N							
58. Aggregate other alien ..	OT	XXX							
59. Totals	(a) 16	206,649,401	202,537,640		114,092,694	131,785,773	106,057,416	920,299	
DETAILS OF WRITE-INS									
58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX								
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX								

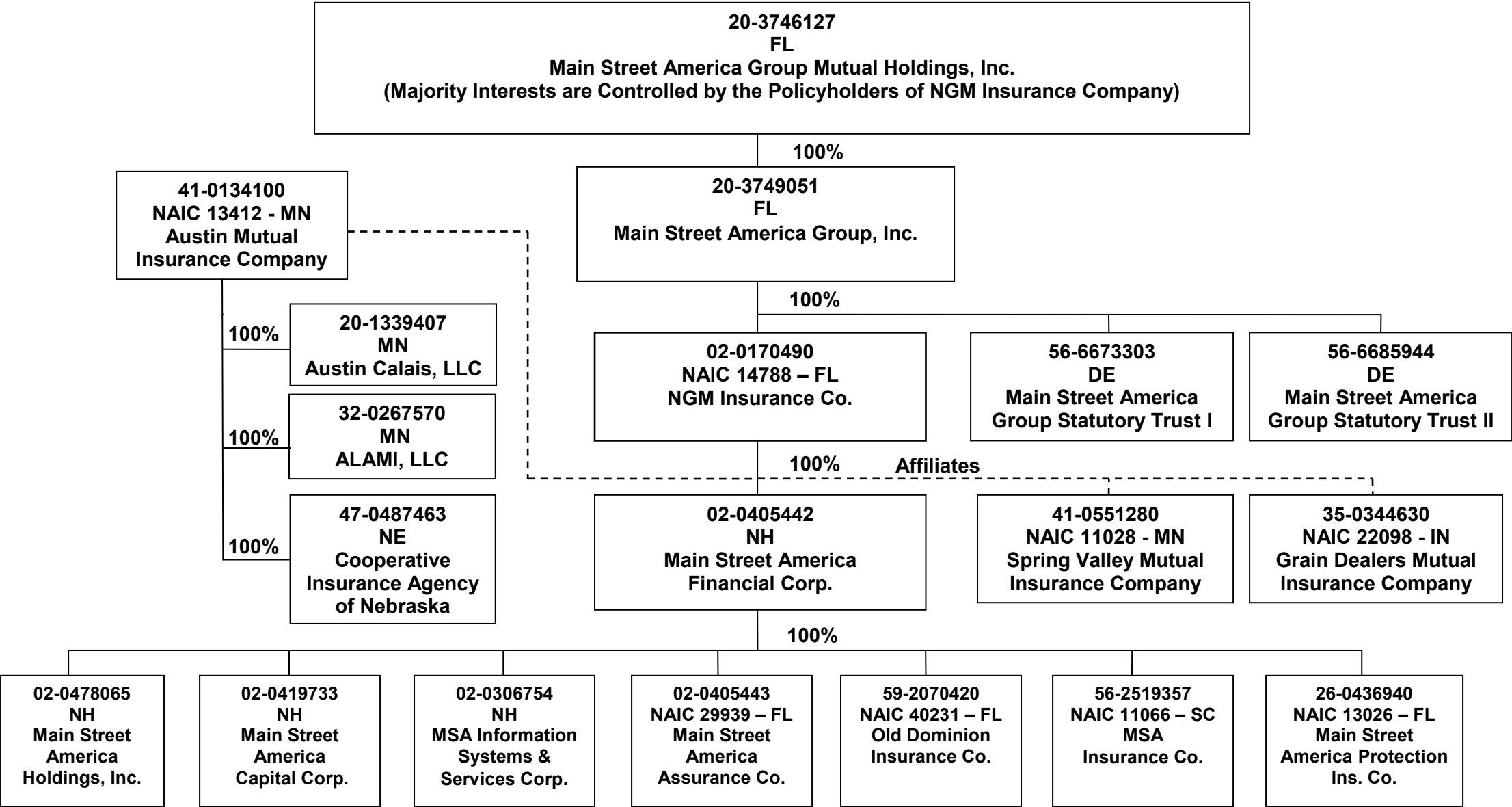
(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile - see DSLI);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

Explanation of basis of allocation of premiums by states, etc.

Direct Premiums are allocated to the state in which the risk is located.

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

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
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