



ANNUAL STATEMENT

For the Year Ended DECEMBER 31, 2016

OF THE CONDITION AND AFFAIRS OF THE

SOUTHERN OAK INSURANCE COMPANY

NAIC Group Code 0000 , 0000 NAIC Company Code 12247 Employer's ID Number 02-0733996
(Current Period) (Prior Period)

Organized under the Laws of Florida , State of Domicile or Port of Entry FL

Country of Domicile United States of America

Incorporated/Organized 11/30/2004 Commenced Business 11/30/2004

Statutory Home Office 816 A1A North, Suite 302 , Ponte Vedra Beach, FL, 32082
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 816 A1A North, Suite 302
(Street and Number)

Ponte Vedra Beach, FL, 32082 (904)353-4000
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 816 A1A North, Suite 302 , Ponte Vedra Beach, FL, 32082
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 816 A1A North, Suite 302
(Street and Number)

Ponte Vedra Beach, FL, 32082 (904)353-4000
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.southernoakins.com

Statutory Statement Contact Tony Alexander Loughman (904)353-4000
(Name) (Area Code)(Telephone Number)(Extension)

tony.loughman@southernoakins.com (904)353-4026
(E-Mail Address) (Fax Number)

OFFICERS

Name	Title
Tony Alexander Loughman	President
Sallyn Shilling Pajcic	Secretary
Stephen John Pajcic III	Treasurer
Ronald Everett Natherson Jr.	Chief Operating Officer
Daniel Michael Kutzer	Chief Financial Officer
Kimberly Ann Chaney	Vice-President

OTHERS

DIRECTORS OR TRUSTEES

Anne Kelley Pajcic	Stephen John Pajcic III
Ronald Everett Natherson Jr.	Tony Alexander Loughman
Sallyn Shilling Pajcic	

State of Florida
 County of St. Johns ss

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

_____ (Signature) Tony Alexander Loughman _____ (Printed Name) 1. President _____ (Title)	_____ (Signature) Daniel Michael Kutzer _____ (Printed Name) 2. Chief Financial Officer _____ (Title)	_____ (Signature) _____ (Printed Name) 3. _____ (Title)
---	---	---

Subscribed and sworn to before me this _____ day of _____, 2017

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

Yes[X] No[]

 (Notary Public Signature)

EXHIBIT OF PREMIUMS AND LOSSES

(Statutory Page 14)



NAIC Group Code: 0000

BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

NAIC Company Code: 12247

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	22,284,707	24,628,928		11,060,852	5,317,082	5,876,605	4,196,425	98,992	171,528	150,453	2,569,598	414,059
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	68,728,680	71,078,097		34,584,862	17,902,011	19,801,545	12,992,914	475,649	802,513	566,435	7,924,944	1,277,008
5.1 Commercial multiple peril (non - liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit A & H (group and individual)												
15.1 Collectively renewable A & H (b)												
15.2 Non-cancelable A & H (b)												
15.3 Guaranteed renewable A & H (b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other A & H (b)												
15.8 Federal Employees Health Benefits Plan premium												
16. Workers' compensation												
17.1 Other liability - occurrence												
17.2 Other Liability - claims-made												
17.3 Excess Workers' Compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)	91,013,387	95,707,025		45,645,714	23,219,093	25,678,149	17,189,339	574,641	974,041	716,888	10,494,541	1,691,067

19 Florida

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$.....0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0.

EXHIBIT OF PREMIUMS AND LOSSES

(Statutory Page 14)



NAIC Group Code: 0000

BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR

NAIC Company Code: 12247

19 Grand Total

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	22,284,707	24,628,928		11,060,852	5,317,082	5,876,605	4,196,425	98,992	171,528	150,453	2,569,598	414,059
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	68,728,680	71,078,097		34,584,862	17,902,011	19,801,545	12,992,914	475,649	802,513	566,435	7,924,944	1,277,008
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23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
30. Warranty												
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DETAILS OF WRITE-INS												
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3402.												
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3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$.....0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0.

SCHEDULE F - PART 1

Assumed Reinsurance as of December 31, Current Year (000 Omitted)

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Columns 6 + 7							
Other U.S. Unaffiliated Insurers														
59-3164851	10064	CITIZENS PROP INS CORP	FL	5,220					(610)	1,955				
0999998 Total - Other U.S. Unaffiliated Insurers - Reinsurance for which the total of Column 8 is less than \$100,000				5,220					(610)	1,955				
0999999 Total - Other U.S. Unaffiliated Insurers				5,220					(610)	1,955				
1099998 Total - Pools and Associations - Mandatory Pools - Reinsurance for which the total of Column 8 is less than \$100,000														
1099999 Total - Pools and Associations - Mandatory Pools - Pools, Associations or Other Similar Facilities														
1199998 Total - Pools and Associations - Voluntary Pools - Reinsurance for which the total of Column 8 is less than \$100,000														
1199999 Total - Pools and Associations - Voluntary Pools - Pools, Associations or Other Similar Facilities														
1299999 Total - Pools and Associations														
1399998 Total - Other Non-U.S. Insurers - Reinsurance for which the total of Column 8 is less than \$100,000														
1399999 Total - Other Non-U.S. Insurers														
9999999 Totals				5,220					(610)	1,955				

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effectuated or (Canceled) during Current Year

1 ID Number	2 NAIC Company Code	3 Name of Company	4 Date of Contract	5 Original Premium	6 Reinsurance Premium
<div style="border: 1px solid black; padding: 10px; display: inline-block;"> <h1 style="margin: 0;">N O N E</h1> </div>					
0299999 Total Reinsurance Assumed By Portfolio					

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17]	19 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Columns 7 thru 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			
Authorized - Other U.S. Unaffiliated Insurers																			
22-2005057	26921	EVEREST REINS CO	DE		1,594			3	0	48			292		343			343	
47-0698507	23680	ODYSSEY REINS CO	CT		407			0	0	5			72		77			77	
58-6016195	10235	AMERICAN SOUTHERN INS CO	KS		78								39		39			39	
13-5616275	19453	TRANSATLANTIC REINS CO	NY		1,109			2		31			202		235			235	
06-1430254	10348	ARCH REINS CO	DE		100								33		33			33	
39-6040366	19283	AMERICAN STANDARD INS CO OF WI	WI		4														
31-0542366	10677	CINCINNATI INS CO	OH		203			1		10			50		60			60	
0999998 Total - Authorized - Other U.S. Unaffiliated Insurers (Under \$100,000)																			
0999999 Total - Authorized - Other U.S. Unaffiliated Insurers					3,495			5	0	93			689		787			787	
Authorized - Pools - Mandatory Pools																			
AA-9991310	00000	FLORIDA HURRICANE CATASTROPHE FUND	FL		8,449								3,521		3,521			3,521	
1099999 Total - Authorized - Pools - Mandatory Pools					8,449								3,521		3,521			3,521	
Authorized - Other Non-U.S. Insurers																			
AA-1126033	00000	LLOYD'S SYNDICATE NUMBER 33	GBR		75								24		24			24	
AA-1126958	00000	LLOYD'S SYNDICATE NUMBER 958	GBR		1,865			3		48			346		396			396	
AA-1126382	00000	LLOYD'S SYNDICATE NUMBER 382	GBR		228			0		5			41		46			46	
AA-1128001	00000	LLOYD'S SYNDICATE NUMBER 2001	GBR		1,472			2		38			268		308			308	
AA-1128010	00000	LLOYD'S SYNDICATE NUMBER 2010	GBR		125					22			22		22			22	
AA-1120102	00000	LLOYD'S SYNDICATE NUMBER 1458	GBR		422			1		11			77		88			88	
AA-1120157	00000	LLOYD'S SYNDICATE NUMBER 1729	GBR		328			1		12			62		74			74	
AA-1120071	00000	LLOYD'S SYNDICATE NUMBER 2007	GBR		223					41			41		41			41	
AA-1127225	00000	LLOYD'S SYNDICATE NUMBER 1225	GBR		66					12			12		12			12	
AA-1120158	00000	LLOYD'S SYNDICATE NUMBER 2014	GBR		261			0		6			49		55			55	
AA-1126435	00000	LLOYD'S SYNDICATE NUMBER 435	GBR		688			0		4			119		123			123	
AA-1128003	00000	LLOYD'S SYNDICATE NUMBER 2003	GBR		318			1		16			59		76			76	
AA-1126566	00000	LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)	GBR		84								15		15			15	
AA-1126609	00000	LLOYD'S SYNDICATE NUMBER 609	GBR		22					4			4		4			4	
AA-1126727	00000	LLOYD'S SYNDICATE NUMBER 727	GBR		29					5			5		5			5	
AA-1126780	00000	LLOYD'S SYNDICATE NUMBER 780	GBR		116					21			21		21			21	
AA-1120096	00000	LLOYD'S SYNDICATE NUMBER 1880	GBR		13					10			10		10	5		5	
AA-1127084	00000	LLOYD'S SYNDICATE NUMBER 1084	GBR		642			1		12			115		127			127	
AA-1129000	00000	LLOYD'S SYNDICATE NUMBER 3000	GBR		343			1		17			64		82			82	
AA-1120085	00000	LLOYD'S SYNDICATE NUMBER 1274	GBR		137					23			23		23			23	
AA-1128791	00000	LLOYD'S SYNDICATE NUMBER 2791	GBR		150					37			37		37			37	
AA-1120075	00000	LLOYD'S SYNDICATE NUMBER 4020	GBR		388			1		10			67		77			77	
AA-1126510	00000	LLOYD'S SYNDICATE NUMBER 510	GBR		69					16			16		16	2		14	
AA-1120083	00000	LLOYD'S SYNDICATE NUMBER 1910	GBR		40														
AA-3194200	00000	MS Frontier Reins Ltd	BMU		125								20		20			20	35
1299998 Total - Authorized - Other Non-U.S. Insurers (Under \$100,000)																			
1299999 Total - Authorized - Other Non-U.S. Insurers					8,228			9		177			1,517		1,704	7		1,696	35
1399999 Total - Authorized					20,173			14	0	270			5,727		6,012	7		6,004	35
Unauthorized - Other U.S. Unaffiliated Insurers																			
39-6040366	19283	AMERICAN STANDARD INS CO OF WI	WI																3

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17]	19 Funds Held By Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Columns 7 thru 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers				
2299998 Total - Unauthorized - Other U.S. Unaffiliated Insurers (Under \$100,000)																				
2299999 Total - Unauthorized - Other U.S. Unaffiliated Insurers																				3
Unauthorized - Other Non-U.S. Insurers																				
AA-3191190	00000	Hamilton Re Ltd	BMU		244			0		5			46		51			51		
AA-3191203	00000	Blue Water Re Ltd	BMU		662								174		174			174		
AA-5324100	00000	Taiping Reins Co Ltd	HKG		41								8		8			8	9	
AA-3191166	00000	Oak Leaf Re Ltd	BMU		5,694	(929)	(26)	929	26				2,372		2,372			2,372		
AA-5320039	00000	Peak Reins Co Ltd	HKG		299			1		10			49		60			60		
AA-1460019	00000	Amlin AG	CHE		1,088			1		24			195		220			220		
AA-3191289	00000	Fidelis Ins Bermuda Ltd	BMU		228			1		10			57		67			67		
2599998 Total - Unauthorized - Other Non-U.S. Insurers (Under \$100,000)																				
2599999 Total - Unauthorized - Other Non-U.S. Insurers						8,256	(929)	(26)	932	26	48		2,901		2,951			2,951	9	
2699999 Total - Unauthorized						8,256	(929)	(26)	932	26	48		2,901		2,951			2,951	12	
Certified - Other Non-U.S. Insurers																				
AA-3190770	00000	ACE TEMPEST REINS CO LTD	BMU		901			0		5			187		192			192		
AA-3194126	00000	ARCH REINS LTD	BMU		881			1		24			157		182			182		
AA-3190829	00000	MARKEL BERMUDA LTD	BMU		397			1		10			70		80			80	18	
AA-3190870	00000	Validus Reins Ltd	BMU		905			1		26			165		193			193		
AA-1460023	00000	Tokio Millennium Re AG	CHE		295															
AA-3194122	00000	DaVinci Reins Ltd	BMU		935			1		10			181		192			192		
AA-3194130	00000	Endurance Specialty Ins Ltd	BMU		701			1		14			171		186			186		
AA-1560483	00000	Hannover Ruck SE	CAN		1,004			3		48			245		295			295		
AA-3190686	00000	Partner Reins Co Ltd	BMU		348			1		10			51		61			61		
AA-3190339	00000	RENAISSANCE REINS LTD	BMU		1,406			1		14			272		287			287		
AA-3190757	00000	XL Re Ltd	BMU		270								43		43			43		
3899998 Total - Certified - Other Non-U.S. Insurers (under \$100,000)																				
3899999 Total - Certified - Other Non-U.S. Insurers						8,044			9		160		1,543		1,711			1,711	18	
3999999 Total - Certified						8,044			9		160		1,543		1,711			1,711	18	
4099999 Total - Authorized, Unauthorized and Certified						36,472	(929)	(26)	955	26	479		10,170		10,674	7		10,667	65	
4199999 Total - Protected Cells																				
9999999 Totals						36,472	(929)	(26)	955	26	479		10,170		10,674	7		10,667	65	

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

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

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

ANNUAL STATEMENT FOR THE YEAR **2016** OF THE **SOUTHERN OAK INSURANCE COMPANY**

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
1)	FLORIDA HURRICANE CAT FUND	3,521	8,449	Yes[] No[X] ...
2)	OAK LEAF RE LTD	2,372	5,694	Yes[] No[X] ...
3)	LLOYD'S SYNDICATE NUMBER 958	396	1,865	Yes[] No[X] ...
4)	EVEREST REINS CO	343	1,594	Yes[] No[X] ...
5)	LLOYD'S SYNDICATE NUMBER 2001	308	1,472	Yes[] No[X] ...

SCHEDULE F - PART 4

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							12 Percentage Overdue Col. 10/Col. 11	13 Percentage More Than 120 Days Overdue Col. 9/Col. 11
				5 Current	Overdue				11 Total Due Cols. 5 + 10			
					6 1 - 29 Days	7 30-90 Days	8 91-120 Days	9 Over 120 Days		10 Total Overdue Columns 6 + 7 + 8 + 9		
Unauthorized - Other Non-U.S. Insurers												
AA-3191166	00000	Oak Leaf Re Ltd	BMU	(955)						(955)		
2599999 Total - Unauthorized - Other Non-U.S. Insurers				(955)						(955)		
2699999 Total - Unauthorized				(955)						(955)		
4099999 Total - Authorized, Unauthorized and Certified				(955)						(955)		
4199999 Total - Protected Cells												
9999999 Totals				(955)						(955)		

SCHEDULE F - PART 5

Provision for Unauthorized Reinsurance as of December 31, Current Year (000 Omitted)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Special Code	Reinsurance Recoverable All Items Schedule F Pt. 3, Col. 15	Funds Held By Company Under Reinsurance Treaties	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Ceded Balances Payable	Miscellaneous Balances Payable	Trust Funds and Other Allowed Offset Items	Total Collateral and Offsets Allowed (Cols. 7+8+10 +11+12 But Not in Excess of Col. 6)	Provision for Unauthorized Reinsurance (Col. 6 minus Col. 13)	Recoverable Paid Losses & LAE Expenses Over 90 Days Past Due Not In Dispute	20 % of Amount in Col. 15	20% of Amount in Dispute Included in Column 6	Provision for Overdue Reinsurance (Col. 16 plus Col. 17)	Total Provision for Reinsurance Ceded to Unauthorized Reinsurers (Col. 14 + Col. 18 but not in Excess of Col. 6)
Other U.S. Unaffiliated Insurers																		
39-6040366	19283	AMERICAN STANDARD INS CO OF WI	WI				3											
0999999 Total - Other U.S. Unaffiliated Insurers							3											
Other Non-U.S. Insurers																		
AA-3191190	00000	Hamilton Re Ltd	BMU		51		51					51						
AA-3191203	00000	Blue Water Re Ltd	BMU		174						3,095	174						
AA-5324100	00000	Taiping Reins Co Ltd	HKG		8	9						8						
AA-3191166	00000	Oak Leaf Re Ltd	BMU		2,372						2,925	2,372						
AA-5320039	00000	Peak Reins Co Ltd	HKG		60		60					60						
AA-1460019	00000	Amlin AG	CHE		220		220					220						
AA-3191289	00000	Fidelis Ins Bermuda Ltd	BMU		67		67					67						
1299999 Total - Other Non-U.S. Insurers					2,951	9	398	X X X			6,020	2,951						
1399999 Total - Affiliates and Others					2,951	12	398	X X X			6,020	2,951						
1499999 Total - Protected Cells								X X X										
9999999 Totals					2,951	12	398	X X X			6,020	2,951						

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1. Amounts in dispute totaling \$.....0 are included in Column 5.
2. Amounts in dispute totaling \$.....0 are excluded from Column 14.

(a)

Issuing or Confirming Bank Reference Number	Letter of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letter of Credit Amount
1257	1	021000018	The Bank of NY Mellon	51
9999	1	026007728	NAB	60
7265	1	000000022	Barclays Bank	220
9999	1	021000089	Citibank	67

SCHEDULE F - PART 6 - Section 1

Provision for Reinsurance Ceded to Certified Reinsurers as of December 31 Current Year (000 OMITTED)

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Certified Reinsurer Rating (1 through 6)	6 Effective Date of Certified Reinsurer Rating	7 Percent Collateral Required for Full Credit (0% - 100%)	8 Net Amount Recoverable from Reinsurers (Sch. F Part 3 Col. 18)	9 Catastrophe Recoverables Qualifying for Collateral Deferral	10 Net Recoverables Subject to Requirements for Full Credit (Col. 8 - Col. 9)	11 Dollar Amount of Collateral Required (Col. 10 x Col. 7)	Collateral Provided						18 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements (Col. 17 / Col. 10)	19 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 18 / Col. 7 not to exceed 100%)	20 Amount of Credit Allowed for Net Recoverables (Col. 9 + (Col. 10 x Col. 19))	21 Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 8 - Col. 20)		
											12 Multiple Beneficiary Trust	13 Funds held by Company Under Reinsurance Treaties	14 Letters of Credit	15 Issuing or Confirming Bank Reference Number (a)	16 Other Allowable Collateral	17 Total Collateral Provided (Col. 12 + 13 + 14 + 16)						
0899999 Total - Affiliates																	X X X	X X X	X X X			
Other Non-U.S. Insurers																						
AA-3190770	00000	ACE TEMPEST REINS CO LTD	BMU	2	10/06/2010	10.000	192		192	19					38		38	19.792	100.000	192		
AA-3194126	00000	ARCH REINS LTD	BMU	3	12/30/2015	20.000	182		182	36					36		36	20.005	100.000	182		
AA-3190829	00000	MARKEL BERMUDA LTD	BMU	3	12/31/2015	20.000	80		80	16		18			18		18	22.500	100.000	80		
AA-3190870	00000	Validus Reins Ltd	BMU	3	10/03/2016	20.000	193		193	39					96		96	49.819	100.000	193		
AA-3194122	00000	DaVinci Reins Ltd	BMU	4	12/31/2015	50.000	192		192	96	96				96		96	50.000	100.000	192		
AA-3194130	00000	Endurance Specialty Ins Ltd	BMU	3	10/03/2016	20.000	186		186	37	38				38		38	20.430	100.000	186		
AA-1560483	00000	Hannover Ruck SE	CAN	2	01/19/2016	10.000	295		295	30	30				30		30	10.154	100.000	295		
AA-3190686	00000	Partner Reins Co Ltd	BMU	3	01/03/2017	20.000	61		61	12	13				13		13	21.311	100.000	61		
AA-3190339	00000	RENAISSANCE REINS LTD	BMU	3	12/31/2015	20.000	287		287	57	58				58		58	20.177	100.000	287		
AA-3190757	00000	XL Re Ltd	BMU	3	01/06/2016	20.000	43		43	9					9		9	20.930	100.000	43		
1299999 Total - Other Non-U.S. Insurers											1,712					433	X X X	433	X X X	X X X	1,712	
1399999 Total - Affiliates and Others											1,712					433	X X X	433	X X X	X X X	1,712	
1499999 Total - Protected Cells																	X X X		X X X	X X X		
9999999 Totals											1,712					433	X X X	433	X X X	X X X	1,712	

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(a)

Issuing or Confirming Bank Reference Number	Letter of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
5034	1	021000089	Citibank, N.A.	38
1066	1	026009593	Bank of America	36
9041	2	026002574	Barclays Bank PLC NY	16
9041	2	021001088	HSBC Bank USA, NA, NY	16
9041	2	021000021	JP Morgan Chase Bank, N.A.	16
9041	2	021000018	The Bank of NY Mellon	16
9041	2	026002655	Lloyds TSB Bank, PLC	16
9041	2	061000104	Suntrust Bank	16
2209	1	026009632	Bank of Tokyo	9

SCHEDULE F - PART 6 - Section 2

Provision for Overdue Reinsurance Ceded to Certified Reinsurers as of December 31, Current Year (000 OMITTED)

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Recoverable on Paid Loss and LAE More Than 90 Days Overdue (a)	6 Total Reinsurance Recoverable on Paid Losses and LAE (b)	7 Amounts Received Prior 90 Days	8 Percent More Than 90 Days Overdue	9 20% of Amount in Col. 5	10 20% of Amounts in Dispute Excluded from Col. 5	11 Amount of Credit Allowed for Net Recoverables (Sch. F Part 6 Section 1, Col. 20)	Complete if Column 8 is 20% or Greater			15 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of Col. 9 + Col. 10 or Col. 14) not to exceed Col. 11	
											12 Total Collateral Provided (Sch. F Part 6, Section 1 Col. 17) not to exceed Col. 11	13 Net Unsecured Recoverable for which Credit is Allowed (Col. 11 - Col. 12)	14 20% of Amount in Col. 13		
Other Non-U.S. Insurers															
AA-3190770	00000	ACE TEMPEST REINS CO LTD	BMU												
AA-3194126	00000	Arch Reins Ltd	BMU												
AA-3190829	00000	Markel Bermuda Ltd	BMU												
AA-3190870	00000	Validus Reins Ltd	BMU												
AA-1460023	00000	Tokio Millennium Re AG	CHE												
1299999 Total - Other Non-U.S. Insurers							X X X								
1399999 Total - Affiliates and Others							X X X								
1499999 Total - Protected Cells							X X X								
9999999 Totals							X X X								

(a) From Schedule F - Part 4 Columns 8 + 9, total certified, less \$.....0 in dispute.

(b) From Schedule F - Part 3 Columns 7 + 8, total certified, less \$.....0 in dispute.

SCHEDULE F - PART 7

Provision for Overdue Authorized Reinsurance as of December 31, Current Year

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Reinsurance Recoverable on Paid Losses & LAE More Than 90 Days Overdue (a)	5 Total Reinsurance Recoverable on Paid Losses and Paid LAE (b)	6 Amounts Received Prior 90 Days	7 Column 4 Divided By (Cols. 5 + 6)	8 Amounts in Col. 4 for Companies Reporting less than 20% in Col. 7	9 Amounts in Dispute Excluded from Col. 4 for Companies Reporting less than 20% in Col. 7	10 20% of Amount in Col. 9	11 Amount Reported in Col. 8 x 20% + Col. 10
			N O N E							
9999999 Totals						X X X				

(a) From Schedule F - Part 4 Columns 8 + 9, total authorized, less \$.....0 in dispute.
 (b) From Schedule F - Part 3 Columns 7 + 8, total authorized, less \$.....0 in dispute.

SCHEDULE F - PART 8

Provision for Overdue Reinsurance as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11	12
ID Number	NAIC Company Code	Name of Reinsurer	Reinsurance Recoverable All Items	Funds Held By Company Under Reinsurance Treaties	Letters of Credit	Ceded Balances Payable	Other Miscellaneous Balances	Other Allowed Offset Items	Sum of Cols. 5 through 9 but not in Excess of Column 4	Column 4 minus Column 10	Greater of Column 11 or Schedule F Part 4 Col. 8+9
9999999 Totals											
1. Total											
2. Line 1 x .20											
3. Schedule F - Part 7 Column 11											
4. Provision for Overdue Authorized Reinsurance (Line 2 + 3)											
5. Provision for Reinsurance Ceded to Unauthorized Reinsurers (Schedule F Part 5 Col. 19 x 1000)											
6. Provision for Reinsurance Ceded to Certified Reinsurers (Schedule F Part 6, Sn 1, Col. 21 x 1000)											
7. Provision for Overdue Reins. Ceded to Certified Reinsrs (Sch. F Part 6, Sn 2, Col. 15 x 1000)											
8. Provision for Reinsurance (sum Lines 4 + 5 + 6 + 7) (Enter this amount on Page 3, Line 16)											

SCHEDULE F - PART 9

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Column 3)			
1. Cash and invested assets (Line 12)	108,295,960		108,295,960
2. Premiums and considerations (Line 15)	4,497,997		4,497,997
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	(954,808)	954,808	0
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	3,508,117		3,508,117
6. Net amount recoverable from reinsurers		9,143,695	9,143,695
7. Protected cell assets (Line 27)			
8. TOTALS (Line 28)	115,347,267	10,098,503	125,445,770
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	20,830,106		20,830,106
10. Taxes, expenses, and other obligations (Lines 4 through 8)	(185,685)		(185,685)
11. Unearned premiums (Line 9)	37,430,205	10,170,443	47,600,648
12. Advance premiums (Line 10)	2,117,932		2,117,932
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)	7,402	(7,402)	0
15. Funds held by company under reinsurance treaties (Line 13)	64,538	(64,538)	0
16. Amounts withheld or retained by company for account of others (Line 14)			
17. Provision for reinsurance (Line 16)			
18. Other liabilities	823,442		823,442
19. TOTAL Liabilities excluding protected cell business (Line 26)	61,087,942	10,098,503	71,186,445
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	54,259,325	X X X	54,259,325
22. TOTALS (Line 38)	115,347,267	10,098,503	125,445,770

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

If yes, give full explanation:

30 Schedule H Part 1 A & H Exhibit NONE

31 Schedule H Parts 2, 3 & 4 - A & H Exh Cont NONE

32 Schedule H Part 5 Health Claims NONE

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE SOUTHERN OAK INSURANCE COMPANY
SCHEDULE P - PART 1A
HOMEOWNERS/FARMOWNERS

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported - Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (Columns 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	X X X	X X X	X X X			(1)					(1)	X X X
2. 2007	50,579	29,207	21,372	6,834	1,975	379	(5)	738	701	67	5,280	872
3. 2008	75,419	41,846	33,573	15,155	1,153	1,107	(8)	1,907	1,095	10	15,929	1,764
4. 2009	63,974	37,186	26,788	11,375		909		1,402		48	13,686	1,564
5. 2010	67,121	36,266	30,855	14,062		229		370		33	14,661	1,539
6. 2011	73,143	37,329	35,814	13,567		1,189		609		21	15,364	1,691
7. 2012	86,636	41,981	44,655	16,287		1,132		1,178		82	18,597	2,137
8. 2013	93,353	39,988	53,365	15,316		436		2,224		79	17,976	1,901
9. 2014	88,508	31,188	57,320	12,814		665		10,602		83	24,081	1,745
10. 2015	78,085	27,062	51,023	14,737		321		10,517		79	25,576	1,781
11. 2016	74,657	26,748	47,909	13,058	1,019	27		11,666	488	18	23,244	2,464
12. Totals	X X X	X X X	X X X	133,204	4,147	6,393	(13)	41,214	2,284	520	174,392	X X X

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior													
2. 2007													
3. 2008			2				(5)		1			(3)	
4. 2009													
5. 2010					18		(14)					4	1
6. 2011	14		17		24		(24)		1			32	3
7. 2012	132		18		71		(65)		17			174	15
8. 2013	444		63		116		(108)		48			562	27
9. 2014	1,697		130		303		(237)		180			2,073	48
10. 2015	2,521		412		845		(800)		316			3,295	126
11. 2016	5,117	558	4,008	348	292		240		1,058	16		9,794	424
12. Totals	9,925	558	4,651	348	1,670		(1,014)		1,621	16		15,932	644

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount		
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid	
1. Prior	X X X	X X X	X X X	X X X	X X X	X X X			X X X			
2. 2007	7,951	2,671	5,280	15.7	9.1	24.7						
3. 2008	18,166	2,240	15,926	24.1	5.4	47.4				2	(5)	
4. 2009	13,686		13,686	21.4		51.1						
5. 2010	14,665		14,665	21.8		47.5					4	
6. 2011	15,397		15,397	21.1		43.0				31	1	
7. 2012	18,771		18,771	21.7		42.0				150	24	
8. 2013	18,538		18,538	19.9		34.7				507	55	
9. 2014	26,155		26,155	29.6		45.6				1,827	246	
10. 2015	28,870		28,870	37.0		56.6				2,933	361	
11. 2016	35,467	2,429	33,037	47.5	9.1	69.0				8,220	1,574	
12. Totals	X X X	X X X	X X X	X X X	X X X	X X X			X X X		13,670	2,262

36 Schedule P - Part 1B - Private Passenger Auto Liability/Medical NONE

37 Schedule P - Part 1C - Comm. Auto/Truck Liability/Medical NONE

38 Schedule P - Part 1D - Workers' Compensation (Excl. Excess Workers' Comp.) NONE

39 Schedule P - Part 1E - Commercial Multiple Peril NONE

40 Schedule P - Part 1F Sn 1 - Medical Professional Liability - Occurrence NONE

41 Schedule P - Part 1F Sn 2 - Medical Professional Liability - Claims-Made NONE

42 Schedule P - Part 1G - Special Liab. (Ocn Mar., Aircraft, Boiler & Mchnry) NONE

43 Schedule P - Part 1H Sn 1 - Other Liability - Occurrence NONE

44 Schedule P - Part 1H Sn 2 - Other Liability - Claims-Made NONE

SCHEDULE P - PART 11

SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Columns 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior ...	X X X	X X X	X X X	625		53		22			700	X X X
2. 2015 ...	30,016	10,368	19,648	4,232		80		3,804			8,116	X X X
3. 2016 ...	26,272	9,077	17,195	3,749	385	3		2,965	153		6,180	X X X
4. Totals ...	X X X	X X X	X X X	8,606	385	137		6,791	153		14,996	X X X

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior ...	621		75		145		(140)		70			771	30
2. 2015 ...	832		135		306		(247)		84			1,110	41
3. 2016 ...	1,796	397	1,312	131	65		74		308	11		3,017	100
4. Totals ...	3,249	397	1,522	131	515		(313)		463	11		4,898	171

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior ...	X X X	X X X	X X X	X X X	X X X	X X X			X X X	696	75
2. 2015 ...	9,226		9,226	30.7		47.0				967	143
3. 2016 ...	10,273	1,076	9,197	39.1	11.9	53.5				2,581	436
4. Totals ...	X X X	X X X	X X X	X X X	X X X	X X X			X X X	4,244	655

- 46 Schedule P - Part 1J - Auto Physical Damage NONE

- 47 Schedule P - Part 1K - Fidelity/Surety NONE

- 48 Schedule P - Part 1L - Other (Incl. Credit, Accident and Health) NONE

- 49 Schedule P - Part 1M - International NONE

- 50 Schedule P - Part 1N - Reins. Nonproportional Assumed Property NONE

- 51 Schedule P - Part 1O - Reins. Nonproportional Assumed Liability NONE

- 52 Schedule P - Part 1P - Reins. Nonproportional Assumed Financial Lines NONE

- 53 Schedule P - Part 1R Sn 1 - Products Liability - Occurrence NONE

- 54 Schedule P - Part 1R Sn 2 - Products Liability - Claims-Made NONE

- 55 Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty NONE

- 56 Schedule P - Part 1T - Warranty NONE

**SCHEDULE P - PART 2A
HOMEOWNERS/FAROWNERS**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	11 One Year	12 Two Year
1. Prior	167	313	483	625	783	368	389	458	522	521	(1)	63
2. 2007	3,807	5,014	4,965	5,086	5,141	5,055	5,082	5,243	5,243	5,243		
3. 2008	XXX	12,092	13,328	14,078	14,556	14,543	14,594	15,089	15,103	15,114	11	25
4. 2009	XXX	XXX	11,935	11,220	11,960	11,939	12,383	12,225	12,313	12,284	(29)	59
5. 2010	XXX	XXX	XXX	14,789	13,618	13,687	14,074	14,414	14,311	14,295	(16)	(119)
6. 2011	XXX	XXX	XXX	XXX	16,351	15,376	14,834	15,093	14,845	14,786	(59)	(307)
7. 2012	XXX	XXX	XXX	XXX	XXX	18,671	17,108	17,167	17,247	17,576	329	409
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	17,146	16,162	16,162	16,267	105	105
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,941	15,049	15,373	324	(1,568)
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19,450	18,037	(1,413)	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,817	XXX	XXX
12. TOTALS											(751)	(1,334)

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

1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XXX								
9. 2014	XXX	XXX	XXX	XXX								
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. TOTALS												

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

1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XXX								
9. 2014	XXX	XXX	XXX	XXX								
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. TOTALS												

**SCHEDULE P - PART 2D
WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XXX								
9. 2014	XXX	XXX	XXX	XXX								
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. TOTALS												

**SCHEDULE P - PART 2E
COMMERCIAL MULTIPLE PERIL**

1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XXX								
9. 2014	XXX	XXX	XXX	XXX								
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. TOTALS												

**SCHEDULE P - PART 2F - SECTION 1
MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	11 One Year	12 Two Year
1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XXX								
9. 2014	XXX	XXX	XXX	XXX								
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. TOTALS												

**SCHEDULE P - PART 2F - SECTION 2
MEDICAL PROFESSIONAL LIABILITY - CLAIMS MADE**

1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XXX								
9. 2014	XXX	XXX	XXX	XXX								
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. TOTALS												

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

1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XXX								
9. 2014	XXX	XXX	XXX	XXX								
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. TOTALS												

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

1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XXX								
9. 2014	XXX	XXX	XXX	XXX								
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. TOTALS												

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

1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XXX								
9. 2014	XXX	XXX	XXX	XXX								
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. TOTALS												

SCHEDULE P - PART 2I

SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	11 One Year	12 Two Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,912	4,280	4,108	(172)	(804)
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,882	5,338	5,338	(543)	XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,087	XXX	XXX
4. TOTALS											(715)	(804)

SCHEDULE P - PART 2J

AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	NONE			XXX				
2. 2015	XXX	XXX	XXX	XXX	NONE			XXX				XXX
3. 2016	XXX	XXX	XXX	XXX	NONE			XXX	XXX		XXX	XXX
4. TOTALS					NONE							

SCHEDULE P - PART 2K

FIDELITY/SURETY

1. Prior	XXX	XXX	XXX	XXX	NONE							
2. 2015	XXX	XXX	XXX	XXX	NONE			XXX				XXX
3. 2016	XXX	XXX	XXX	XXX	NONE			XXX	XXX		XXX	XXX
4. TOTALS					NONE							

SCHEDULE P - PART 2L

OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior	XXX	XXX	XXX	XXX	NONE							
2. 2015	XXX	XXX	XXX	XXX	NONE			XXX				XXX
3. 2016	XXX	XXX	XXX	XXX	NONE			XXX	XXX		XXX	XXX
4. TOTALS					NONE							

SCHEDULE P - PART 2M

INTERNATIONAL

1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX	NONE							
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XXX								
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. TOTALS												

60 Schedule P - Part 2N - Reins. Nonproportional Assumed Property NONE

60 Schedule P - Part 2O - Reins. Nonproportional Assumed Liability NONE

60 Schedule P - Part 2P - Reins. Nonproportional Assumed Financial Lines NONE

61 Schedule P - Part 2R Sn 1 - Products Liability - Occurrence NONE

61 Schedule P - Part 2R Sn 2 - Products Liability - Claims-Made NONE

61 Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty NONE

61 Schedule P - Part 2T - Warranty NONE

**SCHEDULE P - PART 3A
HOMEOWNERS/FAROWNERS**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior	000	147	433	619	519	368	388	458	522	521		
2. 2007	2,573	4,504	4,770	4,981	5,039	5,025	5,058	5,243	5,243	5,243		
3. 2008	XXX	8,025	12,709	13,890	14,213	14,319	14,508	15,065	15,094	15,117		
4. 2009	XXX	XXX	6,692	10,270	10,994	11,452	12,033	12,058	12,286	12,284		
5. 2010	XXX	XXX	XXX	7,968	11,800	12,925	13,618	14,129	14,285	14,291		
6. 2011	XXX	XXX	XXX	XXX	8,104	12,633	13,374	14,050	14,713	14,755		
7. 2012	XXX	XXX	XXX	XXX	XXX	10,079	14,406	16,115	16,888	17,419		
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	9,144	13,285	15,220	15,752		
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,642	12,485	13,479		
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,498	15,058		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,066		

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

1. Prior	000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

1. Prior	000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

1. Prior	000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

**SCHEDULE P - PART 3E
COMMERCIAL MULTIPLE PERIL**

1. Prior	000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016			
1. Prior	000												
2. 2007													
3. 2008	XXX												
4. 2009	XXX	XXX											
5. 2010	XXX	XXX	XXX										
6. 2011	XXX	XXX	XXX	XXX									
7. 2012	XXX	XXX	XXX	XXX	X								
8. 2013	XXX	XXX	XXX	XXX	X								
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

**SCHEDULE P - PART 3F SECTION 2
MEDICAL PROFESSIONAL LIABILITY - CLAIMS MADE**

1. Prior	000												
2. 2007													
3. 2008	XXX												
4. 2009	XXX	XXX											
5. 2010	XXX	XXX	XXX										
6. 2011	XXX	XXX	XXX	XXX									
7. 2012	XXX	XXX	XXX	XXX	X								
8. 2013	XXX	XXX	XXX	XXX	X								
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

**SCHEDULE P - PART 3G
SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

1. Prior	000										XXX	XXX
2. 2007											XXX	XXX
3. 2008	XXX										XXX	XXX
4. 2009	XXX	XXX									XXX	XXX
5. 2010	XXX	XXX	XXX								XXX	XXX
6. 2011	XXX	XXX	XXX	XXX							XXX	XXX
7. 2012	XXX	XXX	XXX	XXX	X						XXX	XXX
8. 2013	XXX	XXX	XXX	XXX	X						XXX	XXX
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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

1. Prior	000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX	X							
8. 2013	XXX	XXX	XXX	XXX	X							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

**SCHEDULE P - PART 3H SECTION 2
OTHER LIABILITY - CLAIMS MADE**

1. Prior	000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX	X							
8. 2013	XXX	XXX	XXX	XXX	X							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE P - PART 3I

SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	2,729	3,407	XXX	XXX
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,905	4,313	XXX	XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,368	XXX	XXX

SCHEDULE P - PART 3J

AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	NONE			000				
2. 2015	XXX	XXX	XXX	XXX	NONE			XXX				
3. 2016	XXX	XXX	XXX	XXX	NONE			XXX	XXX			

SCHEDULE P - PART 3K

FIDELITY/SURETY

1. Prior	XXX	XXX	XXX	XXX	NONE			000			XXX	XXX
2. 2015	XXX	XXX	XXX	XXX	NONE			XXX			XXX	XXX
3. 2016	XXX	XXX	XXX	XXX	NONE			XXX	XXX		XXX	XXX

SCHEDULE P - PART 3L

OTHER (INCLUDING CREDIT ACCIDENT AND HEALTH)

1. Prior	XXX	XXX	XXX	XXX	NONE			000			XXX	XXX
2. 2015	XXX	XXX	XXX	XXX	NONE			XXX			XXX	XXX
3. 2016	XXX	XXX	XXX	XXX	NONE			XXX	XXX		XXX	XXX

SCHEDULE P - PART 3M

INTERNATIONAL

1. Prior	000										XXX	XXX
2. 2007											XXX	XXX
3. 2008	XXX										XXX	XXX
4. 2009	XXX	XXX									XXX	XXX
5. 2010	XXX	XXX	XXX		NONE						XXX	XXX
6. 2011	XXX	XXX	XXX	XXX							XXX	XXX
7. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

65 Schedule P - Part 3N - Reins. Nonproportional Assumed Property NONE

65 Schedule P - Part 3O - Reins. Nonproportional Assumed Liability NONE

65 Schedule P - Part 3P - Reins. Nonproportional Assumed Financial Lines NONE

66 Schedule P - Part 3R Sn 1 - Products Liability - Occurrence NONE

66 Schedule P - Part 3R Sn 2 - Products Liability - Claims-Made NONE

66 Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty NONE

66 Schedule P - Part 3T - Warranty NONE

**SCHEDULE P - PART 4A
HOMEOWNERS/FAROWNERS**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior	140	158	21		76	(96)	(67)	(14)		
2. 2007	801	457	147	93	84	(15)	(1)			
3. 2008	XXX	2,243	584	157	104	65	(62)	14		(3)
4. 2009	XXX	XXX	2,583	737	116	(119)	(68)	39	6	
5. 2010	XXX	XXX	XXX	4,257	1,051	151	85	147	5	(14)
6. 2011	XXX	XXX	XXX	XXX	3,587	1,051	(40)	51	17	(7)
7. 2012	XXX	XXX	XXX	XXX	XXX	4,656	1,413	309	38	(47)
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	4,929	689	141	(46)
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,740	278	(107)
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,343	(388)
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,901

SCHEDULE P - PART 4B

PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX							
7. 2012	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4C

COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX							
7. 2012	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4D

WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS COMPENSATION)

1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX							
7. 2012	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4E

COMMERCIAL MULTIPLE PERIL

1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX							
7. 2012	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

**SCHEDULE P - PART 4F SECTION 1
MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX							
7. 2012	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4F - SECTION 2
MEDICAL PROFESSIONAL LIABILITY - CLAIMS MADE**

1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX							
7. 2012	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4G
SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX							
7. 2012	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX							
7. 2012	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX							
7. 2012	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX							
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4I - SPECIAL PROPERTY
(FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,579	226	(65)
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,626	(112)
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,255

SCHEDULE P - PART 4J

AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	NONE			XXX			
2. 2015	XXX	XXX	XXX	XXX				XXX	XXX		
3. 2016	XXX	XXX	XXX	XXX				XXX	XXX	XXX	

SCHEDULE P - PART 4K

FIDELITY/SURETY

1. Prior	XXX	XXX	XXX	XXX	NONE			XXX			
2. 2015	XXX	XXX	XXX	XXX				XXX	XXX		
3. 2016	XXX	XXX	XXX	XXX				XXX	XXX	XXX	

SCHEDULE P - PART 4L

OTHER (INCLUDING CREDIT ACCIDENT AND HEALTH)

1. Prior	XXX	XXX	XXX	XXX	NONE			XXX			
2. 2015	XXX	XXX	XXX	XXX				XXX	XXX		
3. 2016	XXX	XXX	XXX	XXX				XXX	XXX	XXX	

SCHEDULE P - PART 4M

INTERNATIONAL

1. Prior											
2. 2007											
3. 2008	XXX										
4. 2009	XXX	XXX									
5. 2010	XXX	XXX	XXX		NONE						
6. 2011	XXX	XXX	XXX	XXX							
7. 2012	XXX	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

70 Schedule P - Part 4N - Reins. Nonproportional Assumed Property NONE

70 Schedule P - Part 4O - Reins. Nonproportional Assumed Liability NONE

70 Schedule P - Part 4P - Reins. Nonproportional Assumed Financial Lines NONE

71 Schedule P - Part 4R Sn 1 - Products Liability - Occurrence NONE

71 Schedule P - Part 4R Sn 2 - Products Liability - Claims-Made NONE

71 Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty NONE

71 Schedule P - Part 4T - Warranty NONE

**SCHEDULE P - PART 5A
HOMEOWNERS/FARMOWNERS**

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	206	21	23	4	2	14	2	7	1,945	
2. 2007	380	541	551	555	557	557	557	558	558	
3. 2008	XXX	832	1,036	1,050	1,053	1,059	1,063	1,069	1,071	
4. 2009	XXX	XXX	686	870	892	915	929	935	943	
5. 2010	XXX	XXX	XXX	612	810	852	871	891	900	
6. 2011	XXX	XXX	XXX	XXX	656	969	1,004	1,033	1,057	
7. 2012	XXX	XXX	XXX	XXX	XXX	968	1,265	1,350	1,376	
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	909	1,173	1,225	
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	854	1,145	
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	981	
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	33	19	13	33	27	15	12	3		
2. 2007	178	9	3	1	3	3	3			
3. 2008	XXX	215	9	7	27	16	13	2	2	
4. 2009	XXX	XXX	258	24	63	39	25	11	1	
5. 2010	XXX	XXX	XXX	262	86	58	38	7	1	1
6. 2011	XXX	XXX	XXX	XXX	458	99	77	26	5	3
7. 2012	XXX	XXX	XXX	XXX	XXX	402	152	52	30	15
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	272	80	46	27
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	306	68	48
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	310	126
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	424

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	99	25	17	15	5		1			
2. 2007	801	863	869	871	872	872	872	872	872	872
3. 2008	XXX	1,640	1,739	1,750	1,759	1,760	1,764	1,764	1,764	1,764
4. 2009	XXX	XXX	1,438	1,557	1,564	1,564	1,564	1,564	1,564	1,564
5. 2010	XXX	XXX	XXX	1,444	1,529	1,536	1,536	1,538	1,539	1,539
6. 2011	XXX	XXX	XXX	XXX	1,552	1,666	1,684	1,688	1,689	1,691
7. 2012	XXX	XXX	XXX	XXX	XXX	1,965	2,117	2,130	2,133	2,137
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	1,738	1,881	1,894	1,901
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,601	1,738	1,745
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,653	1,781
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,464

- 73 Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Sn 1 NONE

- 73 Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Sn 2 NONE

- 73 Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Sn 3 NONE

- 74 Schedule P - Part 5C - Comm. Auto/Truck Liability/Medical - Sn 1 NONE

- 74 Schedule P - Part 5C - Comm. Auto/Truck Liability/Medical - Sn 2 NONE

- 74 Schedule P - Part 5C - Comm. Auto/Truck Liability/Medical - Sn 3 NONE

- 75 Schedule P - Part 5D - Workers' Compen. (Excl. Excess Workers' Comp.) -Sn 1 NONE

- 75 Schedule P - Part 5D - Workers' Compen. (Excl. Excess Workers' Comp.) -Sn 2 NONE

- 75 Schedule P - Part 5D - Workers' Compen. (Excl. Excess Workers' Comp.) -Sn 3 NONE

- 76 Schedule P - Part 5E - Commercial Multiple Peril - Sn 1 NONE

- 76 Schedule P - Part 5E - Commercial Multiple Peril - Sn 2 NONE

- 76 Schedule P - Part 5E - Commercial Multiple Peril - Sn 3 NONE

- 77 Schedule P - Part 5F - Medical Professional Liability - Occurrence - Sn 1A . . . NONE

- 77 Schedule P - Part 5F - Medical Professional Liability - Occurrence - Sn 2A . . . NONE

- 77 Schedule P - Part 5F - Medical Professional Liability - Occurrence - Sn 3A . . . NONE

**SCHEDULE P - PART 5F
MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	X						
7. 2012	XXX	XXX	XXX	X						
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	XXX					
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	X						
7. 2012	XXX	XXX	XXX	X						
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

79	Schedule P - Part 5H - Other Liability - Occurrence - Sn 1A	NONE
79	Schedule P - Part 5H - Other Liability - Occurrence - Sn 2A	NONE
79	Schedule P - Part 5H - Other Liability - Occurrence - Sn 3A	NONE
80	Schedule P - Part 5H - Other Liability - Claims-Made - Sn 1B	NONE
80	Schedule P - Part 5H - Other Liability - Claims-Made - Sn 2B	NONE
80	Schedule P - Part 5H - Other Liability - Claims-Made - Sn 3B	NONE
81	Schedule P - Part 5R - Products Liability - Occurrence - Sn 1A	NONE
81	Schedule P - Part 5R - Products Liability - Occurrence - Sn 2A	NONE
81	Schedule P - Part 5R - Products Liability - Occurrence - Sn 3A	NONE
82	Schedule P - Part 5R - Products Liability - Claims-Made - Sn 1B	NONE
82	Schedule P - Part 5R - Products Liability - Claims-Made - Sn 2B	NONE
82	Schedule P - Part 5R - Products Liability - Claims-Made - Sn 3B	NONE
83	Schedule P - Part 5T - Warranty - Sn 1	NONE
83	Schedule P - Part 5T - Warranty - Sn 2	NONE
83	Schedule P - Part 5T - Warranty - Sn 3	NONE
84	Schedule P - Part 6C - Comm. Auto/Truck Liability/Medical - Sn 1	NONE
84	Schedule P - Part 6C - Comm. Auto/Truck Liability/Medical - Sn 2	NONE
84	Schedule P - Part 6D - Workers' Comp. (Excl. Excess Workers' Comp.) - Sn 1	NONE
84	Schedule P - Part 6D - Workers' Comp. (Excl. Excess Workers' Comp.) - Sn 2	NONE
85	Schedule P - Part 6E - Commercial Multiple Peril - Sn 1	NONE
85	Schedule P - Part 6E - Commercial Multiple Peril - Sn 2	NONE
85	Schedule P - Part 6H - Other Liability - Occurrence - Sn 1A	NONE
85	Schedule P - Part 6H - Other Liability - Occurrence - Sn 2A	NONE
86	Schedule P - Part 6H - Other Liability - Claims-Made - Sn 1B	NONE
86	Schedule P - Part 6H - Other Liability - Claims-Made - Sn 2B	NONE
86	Schedule P - Part 6M - International - Sn 1	NONE
86	Schedule P - Part 6M - International - Sn 2	NONE
87	Schedule P - Part 6N - Reins. Nonproportional Assumed Property - Sn 1	NONE
87	Schedule P - Part 6N - Reins. Nonproportional Assumed Property - Sn 2	NONE
87	Schedule P - Part 6O - Reins. Nonproportional Assumed Liability - Sn 1	NONE
87	Schedule P - Part 6O - Reins. Nonproportional Assumed Liability - Sn 2	NONE
88	Schedule P - Part 6R - Products Liability - Occurrence - Sn 1A	NONE
88	Schedule P - Part 6R - Products Liability - Occurrence - Sn 2A	NONE
88	Schedule P - Part 6R - Products Liability - Claims-Made - Sn 1B	NONE
88	Schedule P - Part 6R - Products Liability - Claims-Made - Sn 2B	NONE
89	Schedule P - Part 7A - Primary Loss Sensitive Contracts - Sn 1	NONE
89	Schedule P - Part 7A - Primary Loss Sensitive Contracts - Sn 2	NONE
89	Schedule P - Part 7A - Primary Loss Sensitive Contracts - Sn 3	NONE
90	Schedule P - Part 7A - Primary Loss Sensitive Contracts - Sn 4	NONE
90	Schedule P - Part 7A - Primary Loss Sensitive Contracts - Sn 5	NONE
91	Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Sn 1	NONE
91	Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Sn 2	NONE
91	Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Sn 3	NONE
92	Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Sn 4	NONE
92	Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Sn 5	NONE
92	Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Sn 6	NONE
92	Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Sn 7	NONE

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies, EREs provided for reasons other than DDR are not to be included.
- 1.1 Does the company issue Medical Professional Liability Claims-Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:
- 1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65?
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve?
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2?
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Yes[] No[X] 0
 \$
 Yes[] No[] N/A[X]
 Yes[] No[] N/A[X]
 Yes[] No[] N/A[X]

Years in which premiums were earned and losses were incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior
1.602 2007
1.603 2008
1.604 2009
1.605 2010
1.606 2011
1.607 2012
1.608 2013
1.609 2014
1.610 2015
1.611 2016
1.612 TOTALS

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement?
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement?
4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on page 10? If Yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request. Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

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

5. What were the net premiums in force at the end of the year for: (in thousands of dollars)

5.1 Fidelity \$ 0
 5.2 Surety \$ 0

6. Claim count information is reported per claim or per claimant (Indicate which).

6.1 per claim
 6.2 per claimant ✓

If not the same in all years, explain in Interrogatory 7.

- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses?
- 7.2 An extended statement may be attached.

Yes[] No[X]

SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

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

NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Y/N)	*
.....	12247	02-0733996	.....	.....	.....	Southern Oak Insurance Company	.. FL ..	... IA ...	Southern Oak Holding Company	Ownership .....	..... 100.0	Southern Oak Holding Company .....	..... N .....	.....
.....	00000	56-2480776	.....	.....	.....	Southern Oak Management Company .....	.. FL ..	... IA ...	Southern Oak Holding Company	Ownership .....	..... 100.0	Southern Oak Holding Company .....	..... N .....	.....
.....	00000	11-3726883	.....	.....	.....	Southern Oak Holding Company ..	.. FL ..	... IA ...	Tony Loughman	Management .....	.....	Tony Loughman .....	..... N .....	.....
.....	00000	.....	.....	.....	.....	Eichel/Eichel II	BMU	... OTH ..	Tony Loughman	Management .....	.....	Tony Loughman .....	..... N .....	.....

Asterisk	Explanation
0000001

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/(Disburse- ments) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
.. 12247 ..	.. 02-0733996 ..	SOUTHERN OAK INS CO					(28,206,222)				(28,206,222)	
	.. 56-2480776 ..	SOUTHERN OAK MANAGEMENT CO					28,206,222				28,206,222	
	.. 11-3726883 ..	SOUTHERN OAK HOLDING CO										
9999999 Control Totals									X X X			

Schedule Y Part 2 Explanation:

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Response

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING

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

APRIL FILING

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

MAY FILING

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

JUNE FILING

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

AUGUST FILING

- | | |
|---|-----|
| 11. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? | Yes |
|---|-----|

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

MARCH FILING

- | | |
|--|-----|
| 12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? | No |
| 13. Will the Financial Guaranty Insurance Exhibit be filed by March 1? | No |
| 14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? | No |
| 15. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1? | No |
| 16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? | No |
| 17. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1? | No |
| 18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? | No |
| 19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | No |
| 20. Will the Confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)? | Yes |
| 21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1? | Yes |
| 22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1? | No |
| 23. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1? | No |
| 24. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | No |
| 25. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? | No |
| 26. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? | No |
| 27. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? | No |
| 28. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution contracts be filed with the state of domicile and the NAIC by March 1? | No |

APRIL FILING

- | | |
|--|----|
| 29. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? | No |
| 30. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? | No |
| 31. Will the Accident and Health Policy Experience Exhibit be filed by April 1? | No |
| 32. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? | No |
| 33. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? | No |
| 34. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1? | No |

AUGUST FILING

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

Explanations:

Bar Codes:

Statement (Annual, quarterly and combined)



Schedule SIS



Financial Guaranty Insurance Exhibit



Medicare Supplement Insurance Experience Exhibit



Supplement A to Schedule T



Trusteed Surplus Statement



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES (continued)

Premiums Attributed to Protected Cells Exhibit



Reinsurance Summary Supplemental Filing



Medicare Part D Coverage Supplement



Exceptions to the Reinsurance Attestation Supplement



Bail Bond Supplement



Director and Officer Supplement



Approval for Relief related to five-year rotation for lead Audit Partner



Approval for Relief related to one-year cooling off period for inde. CPA



Approval for Relief related to Require. for Audit Committees



Reinsurance Counterparty Reporting Exception



Credit Insurance Exhibit



LTC Supplemental Interrogatories



Accident and Health Policy Experience Exhibit



Supplemental Health Care Exhibit



Supplemental Health Care Exhibit's Expense Allocation Report



Cybersecurity and Identity Theft Insurance Coverage Supplement



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