



ANNUAL STATEMENT

For the Year Ended December 31, 2016
of the Condition and Affairs of the

Prepared Insurance Company

NAIC Group Code..... 0, 0 <small>(Current Period) (Prior Period)</small>	NAIC Company Code..... 13687	Employer's ID Number..... 26-4756872
Organized under the Laws of FL	State of Domicile or Port of Entry FL	Country of Domicile US
Incorporated/Organized..... April 16, 2009	Commenced Business..... September 18, 2009	
Statutory Home Office	1715 N Westshore Blvd Suite 930..... Tampa FL US 33607 <small>(Street and Number) (City or Town, State, Country and Zip Code)</small>	
Main Administrative Office	1715 N Westshore Blvd Suite 930..... Tampa FL US..... 33607 <small>(Street and Number) (City or Town, State, Country and Zip Code)</small>	813-286-3730 <small>(Area Code) (Telephone Number)</small>
Mail Address	1715 N Westshore Blvd Suite 930..... Tampa FL US 33607 <small>(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)</small>	
Primary Location of Books and Records	1715 N Westshore Blvd Suite 930..... Tampa FL US 33607 <small>(Street and Number) (City or Town, State, Country and Zip Code)</small>	813-286-3730 <small>(Area Code) (Telephone Number)</small>
Internet Web Site Address	Prepared@preparedins.com	
Statutory Statement Contact	Jeffrey Eugene Myers <small>(Name)</small> jmyers@preparedins.com <small>(E-Mail Address)</small>	813-286-3732 <small>(Area Code) (Telephone Number) (Extension)</small> 813-286-3737 <small>(Fax Number)</small>

OFFICERS

Name	Title	Name	Title
1. Eric Lee Gobble	President, Chief Executive Officer and Chief Risk	2. Jeffrey Eugene Myers	Chief Financial Officer, Secretary, and Treasurer
3. Michael Ernest Rubio	Chief Claim Officer	4.	

OTHER

DIRECTORS OR TRUSTEES

Eric Lee Gobble	Martin Lloyd Schaffel	Panayiotis Armando Vasiloudes	Oscar Armando Garcia
Danny Correa			

State of..... Florida
County of..... Hillsborough

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

_____ (Signature) Eric Lee Gobble _____ 1. (Printed Name) President, Chief Executive Officer and Chief Risk _____ (Title)	_____ (Signature) Jeffrey Eugene Myers _____ 2. (Printed Name) Chief Financial Officer, Secretary, and Treasurer _____ (Title)	_____ (Signature) _____ 3. (Printed Name) _____ (Title)
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Subscribed and sworn to before me
This _____ day of _____ 2017

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 _____

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0 NAIC Company Code....13687

BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	655,799	743,509		339,158	14,884	14,884	440,000	873	873	25,000	129,205	12,307
2.1 Allied lines.....	2,930,080	3,352,082		1,551,373	989,251	1,238,984	692,859	174,966	184,965	116,902	590,373	56,232
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.....	57,734,874	61,204,301		28,092,028	22,699,458	25,053,011	11,119,337	3,802,584	3,969,336	1,954,269	10,671,550	1,016,374
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.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	61,320,753	65,299,892	0	29,982,559	23,703,593	26,306,879	12,252,196	3,978,423	4,155,174	2,096,171	11,391,128	1,084,913

DETAILS OF WRITE-INS

3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....0 NAIC Company Code....13687

BUSINESS IN GRAND TOTAL DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	655,799	743,509		339,158	14,884	14,884	440,000	873	873	25,000	129,205	12,307
2.1 Allied lines.....	2,930,080	3,352,082		1,551,373	989,251	1,238,984	692,859	174,966	184,965	116,902	590,373	56,232
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.....	57,920,051	61,296,447		28,185,059	22,699,458	25,053,011	11,119,337	3,802,584	3,969,336	1,954,269	10,671,550	1,016,445
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.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	61,505,930	65,392,038	0	30,075,590	23,703,593	26,306,879	12,252,196	3,978,423	4,155,174	2,096,171	11,391,128	1,084,984

DETAILS OF WRITE-INS

3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR

NAIC Group Code....0 NAIC Company Code....13687

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
2.5 Private flood.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....	185,177	92,146		93,031								71
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.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	185,177	92,146	0	93,031	0	0	0	0	0	0	0	71

DETAILS OF WRITE-INS

3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

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

Sch. F - Pt. 1
NONE

Sch. F - Pt. 2
NONE

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable on										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Col. 15-[16+17]	19 Funds Held By Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers				
Authorized Other U.S. Unaffiliated Insurers																				
22-2005057	26921...	Everest Reinsurance Co.....	DE.....		941									392		392	454		(62)	
13-2673100	22039...	General Reinsurance Corporation.....	DE.....		321									151		151	85		66	
13-1675535	25364...	Swiss Reinsurance America Corporation.....	NY.....		9,323									9,323		9,323	5,408		3,915	
13-5616275	19453...	Transatlantic Reinsurance Company.....	NY.....		297									124		124	144		(20)	
0999999	Total Authorized Other U.S. Unaffiliated Insurers.....				10,882	0	0	0	0	0	0	0	0	9,990	0	9,990	6,091	0	3,899	0
Authorized Pools-Mandatory Pools																				
AA-9991310	00000...	Florida Hurricane Catastrophe Fund.....	FL.....		10,076									4,199		4,199			4,199	
1099999	Total Authorized Pools - Mandatory Pools.....				10,076	0	0	0	0	0	0	0	0	4,199	0	4,199	0	0	4,199	0
Authorized Other Non-U.S. Insurers																				
AA-1340125		Hannover Ruck SE (Pillar Capital).....	DEU.....		2,191					140				913		1,053	555		498	
AA-1127084		Lloyd's Syndicate No. 1084 CSL.....	GBR.....		894									373		373	431		(58)	
AA-1120157		Lloyd's Syndicate No. 1729 DUW.....	GBR.....		111									46		46	54		(8)	
AA-1128001		Lloyd's Syndicate No. 2001 AML.....	GBR.....		1,853				120					772		892	696		196	
AA-1126435		Lloyd's Syndicate No. 435 FDY.....	GBR.....		585									244		244	281		(37)	
AA-1126004		Lloyd's Syndicate No. 4444 CNP.....	GBR.....		672									280		280	292		(12)	
1299998	Total Authorized Other Non-U.S. Insurers (Under \$100,000).....				165				20					68		88	78		10	
1299999	Total Authorized Other Non-U.S. Insurers.....				6,471	0	0	0	0	280	0	0	0	2,696	0	2,976	2,387	0	589	0
1399999	Total Authorized.....				27,429	0	0	0	0	280	0	0	0	16,885	0	17,165	8,478	0	8,687	0
Unauthorized Other Non-U.S. Insurers																				
AA-1460019		Amlin AG.....	CHE.....		656					120				273		393	132		261	
AA-3191190		Hamilton Re.....	BMU.....		129									54		54	62		(8)	
AA-3191264		MARKET RE LTD 2015-2 Prepared (c/o Horeshoe Management).....	BMU.....		612									255		255			255	
AA-5320039		Peak Reinsurance Company Ltd. (Pioneer Underwriters).....	GBR.....		221									92		92	107		(15)	
AA-3194224		Poseidon Re Ltd (c/o Nephila).....	BMU.....		281									117		117			117	
2599999	Total Unauthorized Other Non-U.S. Insurers.....				1,899	0	0	0	0	120	0	0	0	791	0	911	301	0	610	0
2699999	Total Unauthorized.....				1,899	0	0	0	0	120	0	0	0	791	0	911	301	0	610	0
Certified Other Non-U.S. Insurers																				
AA-3190770		Chubb (Ace) Tempest Reinsurance Company Ltd.....	BMU.....		1,407									586		586	671		(85)	
AA-3194130		Endurance Specialty Insurance LTD.....	BMU.....		2,070									863		863	998		(135)	
AA-3190829		Markel Bermuda Ltd.....	BMU.....		565									235		235	272		(37)	
AA-3190686		Partner Re Ltd.....	BMU.....		578									241		241	274		(33)	
CR-1460023		Tokio Millennium Re AG (c/o CATco).....	CHE.....		1,515									631		631			631	
3899999	Total Certified Other Non-U.S. Insurers.....				6,135	0	0	0	0	0	0	0	0	2,556	0	2,556	2,215	0	341	0
3999999	Total Certified.....				6,135	0	0	0	0	0	0	0	0	2,556	0	2,556	2,215	0	341	0
4099999	Total Authorized, Unauthorized and Certified.....				35,463	0	0	0	0	400	0	0	0	20,232	0	20,632	10,994	0	9,638	0
9999999	Totals.....				35,463	0	0	0	0	400	0	0	0	20,232	0	20,632	10,994	0	9,638	0

SCHEDULE F - PART 3

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

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

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

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

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

1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated	
(1) Swiss Reinsurance America Corporation.....	9,323	9,323	Yes []	No [X]
(2) Florida Hurricane Catastrophe Fund.....	4,199	10,076	Yes []	No [X]
(3) Hannover Ruck SE (Pillar Capital).....	1,088	2,191	Yes []	No [X]
(4) Lloyd's Syndicate No. 2001 AML.....	922	1,853	Yes []	No [X]
(5) Endurance Specialty Insurance LTD.....	863	2,070	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						11 Total Due Cols. 5 + 10	12 Percentage Overdue Col. 10 / Col. 11	13 Percentage More Than 120 Days Overdue Col. 9 / Col. 11
				5 Current	Overdue				10 Total Overdue Cols. 6 + 7 + 8 + 9			
					6 1 to 29 Days	7 30 to 90 Days	8 91 to 120 Days	9 Over 120 Days				
NONE												

SCHEDULE F - PART 5

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domi- ciliary Juris- diction	5 Special Code	6 Reinsurance Recoverable all Items Schedule F, Part 3, Col. 15	7 Funds Held By Company Under Reinsurance Treaties	8 Letters of Credit	9 Issuing or Confirming Bank Reference Number (a)	10 Ceded Balances Payable	11 Miscellaneous Balances Payable	12 Trust Funds and Other Allowed Offset Items	13 Total Collateral and Offsets Allowed (Cols. 7+8+10 + 11 + 12 but not in Excess of Col. 6)	14 Provision for Unauthorized Reinsurance (Col. 6 minus Col. 13)	15 Recoverable Paid Losses & LAE Expenses Over 90 Days Past Due not in Dispute	16 20% of Amount in Col. 15	17 20% of Amount in Dispute Included in Col. 6	18 Provision for Overdue Reinsurance (Col. 16 plus Col. 17)	19 Total Provision for Reinsurance Ceded to Unauthorized Reinsurers (Col. 14 plus Col. 18 but not in Excess of Col. 6)
Other Non-U.S. Insurers																		
AA-1460019		Amlin AG	CHE		393		292	ILC-90056	132			393	0	0	0	0	0	0
AA-3191190		Hamilton Re	BMU		54				62			54	0	0	0	0	0	0
AA-3191264		MARKET RE LTD 2015-2 Prepared (c/o Horeshoe Management)	BMU		255					255		255	0	0	0	0	0	0
AA-5320039		Peak Reinsurance Company Ltd. (Pioneer Underwriters)	GBR		92				107			92	0	0	0	0	0	0
AA-3194224		Poseidon Re Ltd (c/o Nephila)	BMU		117					117		117	0	0	0	0	0	0
1299999		Total Other Non-U.S. Insurers			911	0	292	XXX	301	0	372	911	0	0	0	0	0	0
1399999		Total Affiliates and Others			911	0	292	XXX	301	0	372	911	0	0	0	0	0	0
9999999		Totals			911	0	292	XXX	301	0	372	911	0	0	0	0	0	0

- Amounts in dispute totaling \$.....0 are included in Column 6.
- Amounts in dispute totaling \$.....0 are excluded from Column 15.

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
0001	1		Barclays Bank PLC, UL	292

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 Collateral 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 (Cols. 12 + 13 + 14 + 16)
AA-3190770		Chubb (Ace) Tempest Reinsurance Company Ltd.	BMU.....	3	10/06/2010.	0.20	(85)		(85)	(17)					0	0.00	0.00	0	0
AA-3194130		Endurance Specialty Insurance LTD	BMU.....	3	05/31/2012.	0.20	(135)		(135)	(27)					0	0.00	0.00	0	0
AA-3190829		Markel Bermuda Ltd.....	BMU.....	3	12/31/2015.	0.20	(37)		(37)	(7)					0	0.00	0.00	0	0
AA-3190686		Partner Re Ltd.....	BMU.....	3	12/31/2015.	0.20	(33)		(33)	(7)					0	0.00	0.00	0	0
CR-1460023		Tokio Millennium Re AG (c/o CATco)	CHE.....	3	01/04/2016.	0.20	631		631	126				5,000	5,000	7.92	1.00	631	0
1299999		Total Other Non-U.S. Insurers.....					341	0	341	68	0	0	0	5,000	5,000	XXX	XXX	631	0
1399999		Total Affiliates and Others.....					341	0	341	68	0	0	0	5,000	5,000	XXX	XXX	631	0
9999999		Totals.....					341	0	341	68	0	0	0	5,000	5,000	XXX	XXX	631	0

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

Sch. F - Pt. 7
NONE

Sch. F - Pt. 8
NONE

SCHEDULE F - PART 9

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	40,907,621		40,907,621
2. Premiums and considerations (Line 15).....	2,288,202		2,288,202
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....			.0
4. Funds held by or deposited with reinsured companies (Line 16.2).....			.0
5. Other assets.....	15,066,712		15,066,712
6. Net amount recoverable from reinsurers.....		20,232,233	20,232,233
7. Protected cell assets (Line 27).....			.0
8. Totals (Line 28).....	58,262,535	20,232,233	78,494,768
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	15,302,668		15,302,668
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	172,423		172,423
11. Unearned premiums (Line 9).....	9,843,357	20,232,233	30,075,590
12. Advance premiums (Line 10).....	1,784,301		1,784,301
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			.0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....	10,994,520		10,994,520
15. Funds held by company under reinsurance treaties (Line 13).....			.0
16. Amounts withheld or retained by company for account of others (Line 14).....	65,554		65,554
17. Provision for reinsurance (Line 16).....			.0
18. Other liabilities.....	(5,516)		(5,516)
19. Total liabilities excluding protected cell business (Line 26).....	38,157,307	20,232,233	58,389,540
20. Protected cell liabilities (Line 27).....			.0
21. Surplus as regards policyholders (Line 37).....	20,105,228	XXX	20,105,228
22. Totals (Line 38).....	58,262,535	20,232,233	78,494,768

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

If yes, give full explanation:

**Sch. H - Pt. 1
NONE**

**Sch. H - Pt. 2
NONE**

**Sch. H - Pt. 3
NONE**

**Sch. H - Pt. 4
NONE**

**Sch. H - Pt. 5
NONE**

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						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported-Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX								0	XXX
2. 2007.....			0								0	
3. 2008.....			0								0	
4. 2009.....	2	43	(41)								0	
5. 2010.....	12,011	3,502	8,509	2,874		487		269		98	3,630	305
6. 2011.....	30,239	11,396	18,843	7,681	153	1,736		866		51	10,130	896
7. 2012.....	29,855	15,129	14,726	6,767		1,630		525		503	8,922	822
8. 2013.....	35,688	15,889	19,799	7,429		1,342		389		87	9,160	767
9. 2014.....	45,774	19,702	26,072	11,136		1,967		618		132	13,721	1,050
10. 2015.....	58,550	23,964	34,586	17,526		2,592		925		227	21,043	1,629
11. 2016.....	61,528	25,307	36,221	15,317		1,637		1,444		124	18,398	2,721
12. Totals.....	XXX	XXX	XXX	68,730	153	11,391	0	5,036	0	1,222	85,004	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....												0	
2. 2007.....												0	
3. 2008.....												0	
4. 2009.....												0	
5. 2010.....												0	
6. 2011.....	63				51							114	4
7. 2012.....	33				38				1			72	5
8. 2013.....	45				23							68	3
9. 2014.....	479				179				6			664	29
10. 2015.....	921				782				8			1,711	104
11. 2016.....	5,388		4,517	384	973		212		381			11,087	408
12. Totals.....	6,929	0	4,517	384	2,046	0	212	0	396	0	0	13,716	553

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX	0	0
2. 2007.....	0	0	0	0.0	0.0	0.0				0	0
3. 2008.....	0	0	0	0.0	0.0	0.0				0	0
4. 2009.....	0	0	0	0.0	0.0	0.0				0	0
5. 2010.....	3,630	0	3,630	30.2	0.0	42.7				0	0
6. 2011.....	10,397	153	10,244	34.4	1.3	54.4				63	51
7. 2012.....	8,994	0	8,994	30.1	0.0	61.1				33	39
8. 2013.....	9,228	0	9,228	25.9	0.0	46.6				45	23
9. 2014.....	14,385	0	14,385	31.4	0.0	55.2				479	185
10. 2015.....	22,754	0	22,754	38.9	0.0	65.8				921	790
11. 2016.....	29,869	384	29,485	48.5	1.5	81.4				9,521	1,566
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	11,062	2,654

Sch. P - Pt. 1B
NONE

Sch. P - Pt. 1C
NONE

Sch. P - Pt. 1D
NONE

Sch. P - Pt. 1E
NONE

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

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

Sch. P - Pt. 1G
NONE

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

Sch. P - Pt. 1H - Sn. 2
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 (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....83		.....20		.....1			.....104	.....XXX.....
2. 2015.....	.....4,533.....	.....1,376.....	.....3,157.....	.....1,125		.....167		.....65			.....1,357	.....XXX.....
3. 2016.....	.....4,107.....	.....1,706.....	.....2,401.....	.....744		.....119		.....98			.....961	.....XXX.....
4. Totals....	.....XXX.....	.....XXX.....	.....XXX.....	.....1,952	.....0	.....306	.....0	.....164	.....0	.....0	.....2,422	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	.....20				.....14							.....34	.....2
2. 2015.....	.....75				.....79				.....3			.....157	.....10
3. 2016.....	.....349		.....866	.....16	.....64		.....69		.....63			.....1,395	.....26
4. Totals....	.....444	.....0	.....866	.....16	.....157	.....0	.....69	.....0	.....66	.....0	.....0	.....1,586	.....38

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....			.....XXX.....	.....20	.....14
2. 2015.	.....1,514.....	.....0.....	.....1,514.....	.....33.4	.....0.0	.....48.0				.....75	.....82
3. 2016.	.....2,372.....	.....16.....	.....2,356.....	.....57.8	.....0.9	.....98.1				.....1,199	.....196
4. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....1,294	.....292

Sch. P - Pt. 1J
NONE

Sch. P - Pt. 1K
NONE

Sch. P - Pt. 1L
NONE

Sch. P - Pt. 1M
NONE

Sch. P - Pt. 1N
NONE

Sch. P - Pt. 1O
NONE

Sch. P - Pt. 1P
NONE

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

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

Sch. P - Pt. 1S
NONE

Sch. P - Pt. 1T
NONE

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year
1. Prior.....											.....0	.....0
2. 2007.....											.....0	.....0
3. 2008.....	XXX										.....0	.....0
4. 2009.....	XXX	XXX									.....0	.....0
5. 2010.....	XXX	XXX	XXX	3,182	3,183	3,267	3,298	3,374	3,361	3,361	.....0	.....(13)
6. 2011.....	XXX	XXX	XXX	XXX	8,294	8,474	8,799	9,161	9,305	9,378	.....73	.....217
7. 2012.....	XXX	XXX	XXX	XXX	XXX	7,333	7,939	8,431	8,415	8,468	.....53	.....37
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	7,692	8,505	8,805	8,839	.....34	.....334
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,140	12,771	13,761	.....990	.....1,621
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,292	21,821	.....529	.....XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,660	XXX	XXX
12. Totals										.....1,679	.....2,196	

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

1. Prior.....											.....0	.....0
2. 2007.....											.....0	.....0
3. 2008.....	XXX										.....0	.....0
4. 2009.....	XXX	XXX									.....0	.....0
5. 2010.....	XXX	XXX	XXX								.....0	.....0
6. 2011.....	XXX	XXX	XXX	XXX							.....0	.....0
7. 2012.....	XXX	XXX	XXX	XXX	XXX						.....0	.....0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					.....0	.....0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.....0	.....0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.....0	.....XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals										.....0	.....0	

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

1. Prior.....											.....0	.....0
2. 2007.....											.....0	.....0
3. 2008.....	XXX										.....0	.....0
4. 2009.....	XXX	XXX									.....0	.....0
5. 2010.....	XXX	XXX	XXX								.....0	.....0
6. 2011.....	XXX	XXX	XXX	XXX							.....0	.....0
7. 2012.....	XXX	XXX	XXX	XXX	XXX						.....0	.....0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					.....0	.....0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.....0	.....0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.....0	.....XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals										.....0	.....0	

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

1. Prior.....											.....0	.....0
2. 2007.....											.....0	.....0
3. 2008.....	XXX										.....0	.....0
4. 2009.....	XXX	XXX									.....0	.....0
5. 2010.....	XXX	XXX	XXX								.....0	.....0
6. 2011.....	XXX	XXX	XXX	XXX							.....0	.....0
7. 2012.....	XXX	XXX	XXX	XXX	XXX						.....0	.....0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					.....0	.....0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.....0	.....0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.....0	.....XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals										.....0	.....0	

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....											.....0	.....0
2. 2007.....											.....0	.....0
3. 2008.....	XXX										.....0	.....0
4. 2009.....	XXX	XXX									.....0	.....0
5. 2010.....	XXX	XXX	XXX								.....0	.....0
6. 2011.....	XXX	XXX	XXX	XXX							.....0	.....0
7. 2012.....	XXX	XXX	XXX	XXX	XXX						.....0	.....0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					.....0	.....0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.....0	.....0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.....0	.....XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals										.....0	.....0	

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	2	3	4	5	6	7	8	9	10	11	12	
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	One Year	Two Year	
1. Prior												.0	.0
2. 2007												.0	.0
3. 2008	.XXX											.0	.0
4. 2009	.XXX	.XXX										.0	.0
5. 2010	.XXX	.XXX	.XXX									.0	.0
6. 2011	.XXX	.XXX	.XXX	.XXX								.0	.0
7. 2012	.XXX	.XXX	.XXX	.XXX	.XXX							.0	.0
8. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX						.0	.0
9. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0
10. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				.0	.XXX
11. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			.XXX	.XXX
12. Totals											.0	.0	

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

1. Prior												.0	.0
2. 2007												.0	.0
3. 2008	.XXX											.0	.0
4. 2009	.XXX	.XXX										.0	.0
5. 2010	.XXX	.XXX	.XXX									.0	.0
6. 2011	.XXX	.XXX	.XXX	.XXX								.0	.0
7. 2012	.XXX	.XXX	.XXX	.XXX	.XXX							.0	.0
8. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX						.0	.0
9. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0
10. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				.0	.XXX
11. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			.XXX	.XXX
12. Totals											.0	.0	

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

1. Prior												.0	.0
2. 2007												.0	.0
3. 2008	.XXX											.0	.0
4. 2009	.XXX	.XXX										.0	.0
5. 2010	.XXX	.XXX	.XXX									.0	.0
6. 2011	.XXX	.XXX	.XXX	.XXX								.0	.0
7. 2012	.XXX	.XXX	.XXX	.XXX	.XXX							.0	.0
8. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX						.0	.0
9. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0
10. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				.0	.XXX
11. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			.XXX	.XXX
12. Totals											.0	.0	

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

1. Prior												.0	.0
2. 2007												.0	.0
3. 2008	.XXX											.0	.0
4. 2009	.XXX	.XXX										.0	.0
5. 2010	.XXX	.XXX	.XXX									.0	.0
6. 2011	.XXX	.XXX	.XXX	.XXX								.0	.0
7. 2012	.XXX	.XXX	.XXX	.XXX	.XXX							.0	.0
8. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX						.0	.0
9. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0
10. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				.0	.XXX
11. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			.XXX	.XXX
12. Totals											.0	.0	

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

1. Prior												.0	.0
2. 2007												.0	.0
3. 2008	.XXX											.0	.0
4. 2009	.XXX	.XXX										.0	.0
5. 2010	.XXX	.XXX	.XXX									.0	.0
6. 2011	.XXX	.XXX	.XXX	.XXX								.0	.0
7. 2012	.XXX	.XXX	.XXX	.XXX	.XXX							.0	.0
8. 2013	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX						.0	.0
9. 2014	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.0	.0
10. 2015	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				.0	.XXX
11. 2016	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			.XXX	.XXX
12. Totals											.0	.0	

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	1,192	432	454	22	(738)
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,600	1,446	(1,154)	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,195	XXX	XXX
										4. Totals	(1,132)	(738)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
										4. Totals	0	0

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
										4. Totals	0	0

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
										4. Totals	0	0

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....											0	0
2. 2007.....											0	0
3. 2008.....	XXX										0	0
4. 2009.....	XXX	XXX									0	0
5. 2010.....	XXX	XXX	XXX								0	0
6. 2011.....	XXX	XXX	XXX	XXX							0	0
7. 2012.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals	0	0

Sch. P - Pt. 2N
NONE

Sch. P - Pt. 2O
NONE

Sch. P - Pt. 2P
NONE

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

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

Sch. P - Pt. 2S
NONE

Sch. P - Pt. 2T
NONE

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

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.....	1,296.....	2,758.....	3,030.....	3,130.....	3,341.....	3,362.....	3,361.....	193.....	112.....	
6. 2011.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	4,462.....	7,188.....	7,811.....	8,653.....	9,148.....	9,264.....	594.....	298.....	
7. 2012.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	4,174.....	6,661.....	7,730.....	8,298.....	8,397.....	548.....	269.....	
8. 2013.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	4,812.....	7,479.....	8,527.....	8,771.....	513.....	251.....	
9. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	6,569.....	11,508.....	13,103.....	695.....	326.....	
10. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	12,073.....	20,118.....	1,039.....	486.....	
11. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	16,954.....	1,305.....	1,008.....	

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.....	.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.....			

NONE

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.....	.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.....			

NONE

**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.....	.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.....			

NONE

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.....	.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.....			

NONE

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

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1 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.....	.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.....				

NONE

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.....	.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.....				

NONE

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.....	.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.....	.XXX.....
11. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....			.XXX.....	.XXX.....

NONE

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.....	.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.....				

NONE

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.....	.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.....				

NONE

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 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	317	420	XXX	XXX
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	540	1,292	XXX	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	863	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000				
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000			XXX	XXX
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000			XXX	XXX
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

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								XXX	XXX
6. 2011.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2012.....	XXX	XXX	XXX	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	XXX
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

**Sch. P - Pt. 3N
NONE**

**Sch. P - Pt. 3O
NONE**

**Sch. P - Pt. 3P
NONE**

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

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

**Sch. P - Pt. 3S
NONE**

**Sch. P - Pt. 3T
NONE**

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

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	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	945	46		1			
6. 2011.....	XXX	XXX	XXX	XXX	1,536	60				
7. 2012.....	XXX	XXX	XXX	XXX	XXX	682	62			
8. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	613	85		
9. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,482		
10. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,091	
11. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,345

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	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	

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	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	

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	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	

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	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	

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	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	XXX

NONE

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	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	XXX

NONE

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	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	XXX

NONE

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	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	XXX

NONE

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	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	XXX

NONE

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	2	3	4	5	6	7	8	9	10
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	894		
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,525	
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	919

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4M - INTERNATIONAL

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	

NONE

**Sch. P - Pt. 4N
NONE**

**Sch. P - Pt. 4O
NONE**

**Sch. P - Pt. 4P
NONE**

**Sch. P - Pt. 4R - Sn. 1
NONE**

**Sch. P - Pt. 4R - Sn. 2
NONE**

**Sch. P - Pt. 4S
NONE**

**Sch. P - Pt. 4T
NONE**

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 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	121	169	180	186	191	193	193
6. 2011.....	.XXX	.XXX	.XXX	.XXX	407	553	568	584	591	594
7. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	408	516	533	544	548
8. 2013.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	372	477	506	513
9. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	458	658	695
10. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	711	1,039
11. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	1,305

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	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	.86	.23	.13	.7	.2		
6. 2011.....	.XXX	.XXX	.XXX	.XXX	175	48	31	14	7	4
7. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	150	40	21	8	5
8. 2013.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	124	37	11	3
9. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	241	56	29
10. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	414	104
11. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	408

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	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	279	301	304	305	305	305	305
6. 2011.....	.XXX	.XXX	.XXX	.XXX	812	889	891	894	888	896
7. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	773	818	822	813	822
8. 2013.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	706	757	757	767
9. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	970	990	1,050
10. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	1,098	1,629
11. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	2,721

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

**Sch. P - Pt. 6E - Sn. 1
NONE**

**Sch. P - Pt. 6E - Sn. 2
NONE**

**Sch. P - Pt. 6H - Sn. 1A
NONE**

**Sch. P - Pt. 6H - Sn. 2A
NONE**

**Sch. P - Pt. 6H - Sn. 1B
NONE**

**Sch. P - Pt. 6H - Sn. 2B
NONE**

**Sch. P - Pt. 6M - Sn. 1
NONE**

**Sch. P - Pt. 6M - Sn. 2
NONE**

**Sch. P - Pt. 6N - Sn. 1
NONE**

**Sch. P - Pt. 6N - Sn. 2
NONE**

**Sch. P - Pt. 6O - Sn. 1
NONE**

**Sch. P - Pt. 6O - Sn. 2
NONE**

**Sch. P - Pt. 6R - Sn. 1A
NONE**

**Sch. P - Pt. 6R - Sn. 2A
NONE**

**Sch. P - Pt. 6R - Sn. 1B
NONE**

**Sch. P - Pt. 6R - Sn. 2B
NONE**

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 Omitted)

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/farmowners.....	13,716		0.0	24,161		0.0
2. Private passenger auto liability/medical.....			0.0			0.0
3. Commercial auto/truck liability/medical.....			0.0			0.0
4. Workers' compensation.....			0.0			0.0
5. Commercial multiple peril.....			0.0			0.0
6. Medical professional liability - occurrence.....			0.0			0.0
7. Medical professional liability - claims-made.....			0.0			0.0
8. Special liability.....			0.0			0.0
9. Other liability - occurrence.....			0.0			0.0
10. Other liability - claims-made.....			0.0			0.0
11. Special property.....	1,586		0.0	1,949		0.0
12. Auto physical damage.....			0.0			0.0
13. Fidelity/surety.....			0.0			0.0
14. Other.....			0.0			0.0
15. International.....			0.0			0.0
16. Reinsurance - nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX
19. Products liability - occurrence.....			0.0			0.0
20. Products liability - claims-made.....			0.0			0.0
21. Financial guaranty/mortgage guaranty.....			0.0			0.0
22. Warranty.....			0.0			0.0
23. Totals.....	15,302	0	0.0	26,109	0	0.0

SECTION 2

Years in Which Policies Were Issued	Incurred 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	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 3

Years in Which Policies Were Issued	Bulk and Incurred But Not Reported Reserves for Losses and Defense and Cost Containment Expenses 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	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	

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (continued)

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums 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	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	

NONE

SECTION 5

Years in Which Policies Were Issued	Net Reserve for Premium Adjustments and Accrued Retrospective Premiums 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	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	

NONE

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS

(\$000 Omitted)

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/farmowners.....	13,716		0.0	24,161		0.0
2. Private passenger auto liability/medical.....			0.0			0.0
3. Commercial auto/truck liability/medical.....			0.0			0.0
4. Workers' compensation.....			0.0			0.0
5. Commercial multiple peril.....			0.0			0.0
6. Medical professional liability - occurrence.....			0.0			0.0
7. Medical professional liability - claims-made.....			0.0			0.0
8. Special liability.....			0.0			0.0
9. Other liability - occurrence.....			0.0			0.0
10. Other liability - claims-made.....			0.0			0.0
11. Special property.....	1,586		0.0	1,949		0.0
12. Auto physical damage.....			0.0			0.0
13. Fidelity/surety.....			0.0			0.0
14. Other.....			0.0			0.0
15. International.....			0.0			0.0
16. Reinsurance - nonproportional assumed property.....			0.0			0.0
17. Reinsurance - nonproportional assumed liability.....			0.0			0.0
18. Reinsurance - nonproportional assumed financial lines.....			0.0			0.0
19. Products liability - occurrence.....			0.0			0.0
20. Products liability - claims-made.....			0.0			0.0
21. Financial guaranty/mortgage guaranty.....			0.0			0.0
22. Warranty.....			0.0			0.0
23. Totals	15,302	0	0.0	26,109	0	0.0

SECTION 2

Years in Which Policies Were Issued	Incurred 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	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 3

Years in Which Policies Were Issued	Bulk and Incurred But Not Reported Reserves for Losses and Defense and Cost Containment Expenses 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	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	

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (continued)

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums 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	.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 5

Years in Which Policies Were Issued	Net Reserve For Premium Adjustments And Accrued Retrospective Premiums 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	.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 6

Years in Which Policies Were Issued	Incurred Adjustable Commissions 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	.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 7

Years in Which Policies Were Issued	Reserves For Commission Adjustments 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	.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	

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? Yes [] No [X]
 If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions.
- 1.2 What is the total amount of the reserve for that provision (DDR reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No [X]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A [X]
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior.....	.....	.....
1.602	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.....	.....0	.....0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this statement? Yes [X] No []

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]
- If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.

Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request. Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for: (in thousands of dollars)
- 5.1 Fidelity
- 5.2 Surety
6. Claim count information is reported per claim or per claimant. (Indicate which). PER CLAIM
 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? Yes [] No [X]
- 7.2 An extended statement may be attached.

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

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

NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	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)	*
Members															
			27-1203085..				Prepared Holdings, LLC.....	DE.....	UDP.....	Investors.....	Board.....	...100.000	Prepared Holdings, LLC.....	...N.....	
			26-2938202..				Prepared Managers, LLC.....	FL.....	NIA.....	Prepared Holdings, LLC.....	Board.....	...100.000	Prepared Holdings, LLC.....	...N.....	
		13687..	26-4756872..				Prepared Insurance Company.....	FL.....	IA.....	Prepared Holdings, LLC.....	Board.....	...100.000	Prepared Holdings, LLC.....	...N.....	
			45-5333012..				Prepared Financial Service, LLC.....	FL.....	IA.....	Prepared Holdings, LLC.....	Board.....	...100.000	Prepared Holdings, LLC.....	...N.....	

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/ (Disbursements) 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)
Affiliated Transactions												
.....	27-1203085.....	Prepared Holdings, LLC.....	.....	.....(6,000,000)	.....	.....	.....(3,645,413)	.....	.....	.....	.....(9,645,413)	.....
.....	26-2938202.....	Prepared Managers, LLC.....	.....	.....	.....	.....	.....3,048,336	.....	.....	.....	.....3,048,336	.....
.....	26-4756872.....	Prepared Insurance Company.....	.....	.....6,000,000	.....	.....	.....597,077	.....	.....	.....	.....6,597,077	.....
9999999.	Control Totals.....	.....	.....0	.....0	.....0	.....0	.....0	.....0	XXX	.....0	.....0	.....0

Prepared Insurance Company SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

MARCH FILING

	Responses
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 the Management's Discussion and Analysis be filed by April 1?	YES
7. Will the Supplemental Investment Risks 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?	NO
---	----

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 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?	YES
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 partners be filed electronically with the NAIC by March 1?	YES
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?	YES
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?	YES
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 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?	YES

AUGUST FILING

35. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES
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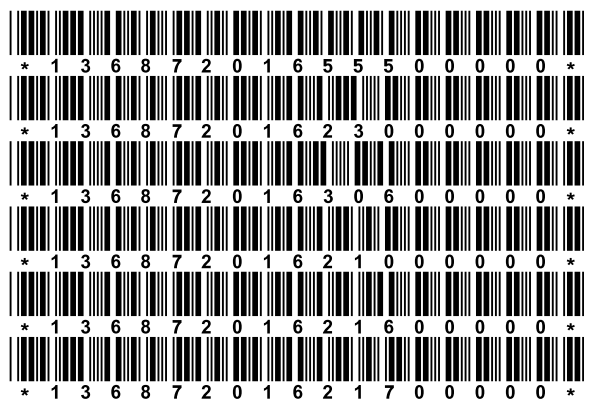
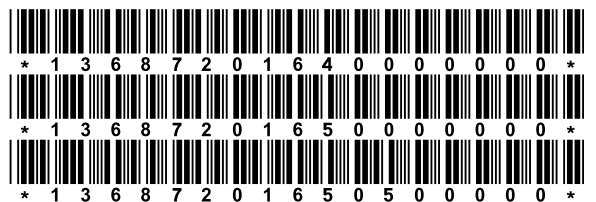
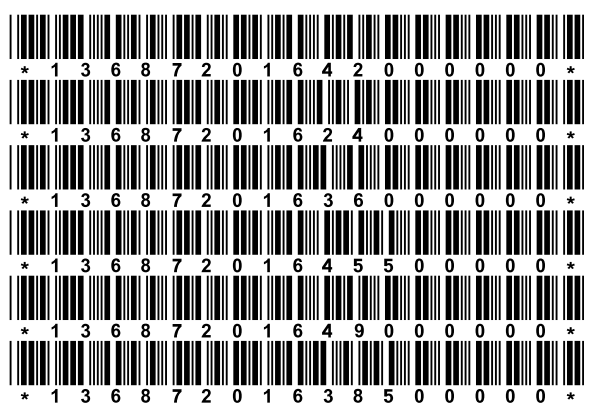
Annual Statement for the year 2016 of the **Prepared Insurance Company**
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

EXPLANATIONS:

BAR CODE:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8. The data for this supplement is not required to be filed.
- 9.
- 10.
- 11.
- 12. The data for this supplement is not required to be filed.
- 13. The data for this supplement is not required to be filed.
- 14. The data for this supplement is not required to be filed.
- 15. The data for this supplement is not required to be filed.
- 16. The data for this supplement is not required to be filed.
- 17. The data for this supplement is not required to be filed.
- 18.
- 19. The data for this supplement is not required to be filed.
- 20.
- 21.
- 22. The data for this supplement is not required to be filed.
- 23. The data for this supplement is not required to be filed.
- 24. The data for this supplement is not required to be filed.
- 25.
- 26.
- 27.
- 28. The data for this supplement is not required to be filed.
- 29. The data for this supplement is not required to be filed.
- 30. The data for this supplement is not required to be filed.
- 31. The data for this supplement is not required to be filed.
- 32. The data for this supplement is not required to be filed.
- 33. The data for this supplement is not required to be filed.
- 34.
- 35.



**Overflow Page
NONE**

**Overflow Page
NONE**



REINSURANCE SUMMARY SUPPLEMENTAL FILING FOR GENERAL INTERROGATORY 9 (PART 2)

FOR THE YEAR ENDED DECEMBER 31, 2016

To Be Filed by March 1

NAIC Group Code: 0

NAIC Company Code: 13687....

	(A) Financial Impact		
	1	2	3
	As Reported	Interrogatory 9 Reinsurance Effect	Restated Without Interrogatory 9 Reinsurance
A01. Assets.....	58,262,535		58,262,535
A02. Liabilities.....	38,157,307		38,157,307
A03. Surplus as regards to policyholders.....	20,105,228		20,105,228
A04. Income before taxes.....	(5,989,093)		(5,989,093)

B. Summary of Reinsurance Contract Terms

C. Management's Objectives

D. If the response to General Interrogatory 9.4 (Part 2 Property & Casualty Interrogatories) is yes, explain below why the contracts are treated differently for GAAP and SAP.



DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

For the Year Ended December 31, 2016

(To be File by March 1)

NAIC Group Code.....0

NAIC Company Code.....13687

Company Name: Prepared Insurance Company

If the reporting entity writes any director and officer (D&O) business, please provide the following:

1. Monoline Policies	Direct Premiums		Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
	1 Written	2 Earned	3 Paid	4 Incurred	5 Paid	6 Incurred	7 Claims Made	8 Occurrence

2. Commercial Multiple Peril (CMP) Packaged Policies

2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy? Yes [] No [X]

2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated?..... Yes [] No [X]

2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for the D&O liability coverage in CMP packaged policies:

2.31 Amount quantified: _____

2.32 Amount estimated using reasonable assumptions: _____

2.4 If the answer to question 2.1 is yes, please provide the following:

Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1	2	3	4	5	6
Paid	Paid + Change in Case Reserves	Paid	Paid + Change in Case Reserves	Claims Made	Occurrence
.....00000.0000.000

2016 ALPHABETICAL INDEX -- PROPERTY & CASUALTY ANNUAL STATEMENT BLANK

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