ANNUAL STATEMENT

OF THE

of	Austin	
in the state of	Texas	

TO THE

Insurance Department

OF THE

State of Texas

FOR THE YEAR ENDED

December 31, 2016



ANNUAL STATEMENT

For the Year Ended December 31, 2016 OF THE CONDITION AND AFFAIRS OF THE

AL STATEMENT

	Texas FAIR P	lan Association	it it
NAIC Group Code 4766			D Number 43-f982873
(Current Period)	(Prior Period)		10 1002070
Organized under the Laws ofTexas		State of Domicile or Port of Entry Text	as
Country of Domicile US	TH.	10	
Incorporated/Organized	December 31, 2002	Commenced Business	December 31, 2002
Statutory Home Office 5700 S. Mopac, Bld			
Main Administrative Office 5700 S. Mo	Valence and A	(City or	Town, State, Country and Zip Code)
Austin, TX,	US 78749	(Street and Number) 512-899-4900	3
A			one Number)
Mail Address PO Box 99080			
Primary Location of Books and Records	5700 S. Mopac, Bldg A	Austin, TX, US 78749	512-899-4900
Internet Web Site Address http://www.texas		(City or Town, State, Country and	Zip Code) (Area Code) (Telephone Number)
	C X	512,800,4088	
	(Name)		one Number) (Extension)
afulkerson@	gtwia.org	i in the second the se	512-899-4952
	(E-Mail Address)	ICERS	(Fax Number)
	OITI	IOLINO	
	Edward Jar	mes Sherlock	
	Name	Title	
	<u>in</u>	Vice Chairman	3 0
3. John William Po	olak	General Manager	
	Vice Presid	lents of TEPA	
Name			TIALES
David Scott Williams			
Juanita Deloris Lester #		**************************************	
		ochimici Taylor Amistrong #	VP Communications&Legislative Affairs
<u> </u>			
		·	
	TFPA Govern	ning Committee	
Wendy Mueller	Debbie King	St part suppose	Georgia Butherford Noblett
Timothy Lawrence McCarthy			
Frank Baumann, Jr #			Christina Fold
		many colonion ii	
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	2		n N
——————————————————————————————————————			
State of Texas			
0 1 7			
County of Travis ss			
The officers of this reporting entity being duly sworn.	each depose and say that they are the described	officers of said reporting entity, and that on the rep	orting period stated above all of the basein described
assets were the absolute property of the said reporti	ing entity, free and clear from any liens or claims	thereon, except as herein stated, and that this sta	tement together with related exhibits, eshedulos and
explanations therein contained, annexed or referred to	o, 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 pe	riod ended, and have been completed in accordan	nce 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	at state rules or regulations require differences in	reporting not related to accounting practices and r	procedures, according to the heat of their information
knowledge and belief, respectively. Furthermore, the s	scope of this attestation by the described officers a	also includes the related corresponding electronic filing	on with the NAIC when required that is an exact conv.
(except for formatting differences due to electronic filir	ng) of the enclosed statement. The electronic filing	may be requested by various regulators in lieu of or	in addition to the enclosed statement
	10		in addition to the enclosed statement.
	Tot.	A. C.	
(Signature)	18	ignature)	(0)
	2012		(Signature)
			70:1-11
1.	(Etti)		
General Manager	State of Dominicile or Port of Entry TESS Documber 31, 2012 Commenced Business Documber 31, 2012 (Street and Number) ST242 (Street and Number) ST242 (City or Tourn, Seles, Country and 2p Cocks) Parts Codes (City or Tourn, Seles, Country and 2p Cocks) Parts Codes Parts Codes (City or Tourn, Seles, Country and 2p Cocks) Parts Codes (City or Tourn, Seles, Country and 2p Cocks) Parts Codes (City or Tourn, Seles, Country and 2p Cocks) Parts Codes (City or Tourn, Seles, Country and 2p Cocks) Parts Codes (City or Tourn, Seles, Country and 2p Cocks) Parts Codes (Select and Number) (Select and N		
AMAC Company Chooking (Prime Princip (Company of Dentities) (Company of Den			(Title)
2 625°		(I)	Time
Subscribed and sworn to (or affirmed) before me this of			
	on this		
. 1 20		e e	
		a. Is this an ori	ginal filing? [X1Yes [1]No
Jung & +			March 1998 The State of the Sta
try 5 +		b. If no: 1. 5	State the amendment number
AMY LOUISA DE	, 2017, by	b. lf no: 1. § 2. [State the amendment number Date filed
AMY LOUISA BI	_ , 2017, by ERG-FERGUSON	b. lf no: 1. § 2. [State the amendment number Date filed
Notary Public, My Commis	, 2017, by	b. lf no: 1. § 2. [State the amendment number Date filed

ASSETS

-	AGGETO	Commont Voor			Dring Value
		4	Current Year		Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1.	Bonds (Schedule D)				
2.	Stocks (Schedule D):				
	2.1 Preferred stocks				
	2.2 Common stocks				
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$0 encumbrances)				
	4.2 Properties held for the production of income (less \$ 0 encumbrances)				
	4.3 Properties held for sale (less \$ 0 encumbrances)				
5.	Cash (\$ 60,581,310, Schedule E - Part 1), cash equivalents (\$ 0,				
	Schedule E - Part 2), and short-term investments (\$ 0, Schedule DA)	60,581,310		60,581,310	88,105,461
6.	Contract loans (including \$ 0 premium notes)				
	Derivatives (Schedule DB)				
8.	Other invested assets (Schedule BA)				
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets (Schedule DL)				
11.	Aggregate write-ins for invested assets				
	Subtotals, cash and invested assets (Lines 1 to 11)	60,581,310		60,581,310	88,105,461
13.	Title plants less \$ 0 charged off (for Title insurers only)				
14.	Investment income due and accrued	65,422		65,422	30,758
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	2,250,370	44,929	2,205,441	2,607,574
	15.2 Deferred premiums, agents' balances and installments booked but deferred				
	and not yet due (including \$ 0 earned but unbilled premiums)	10,444,596		10,444,596	11,946,240
	15.3 Accrued retrospective premiums (\$ 0) and contracts subject to				
	redetermination (\$ 0)				
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				
	16.2 Funds held by or deposited with reinsured companies				
	16.3 Other amounts receivable under reinsurance contracts				
17.	Amounts receivable relating to uninsured plans				
	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets (\$ 0)				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				[
24.	Health care (\$ 0) and other amounts receivable		l		[
25.	Aggregate write-ins for other-than-invested assets	284,723	284,723		
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	73,626,421	329,652	73,296,769	102,690,033
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	Total (Lines 26 and 27)	73,626,421	329,652	73,296,769	102,690,033
	· · · · · · · · · · · · · · · · · · ·				

DETAILS OF WRITE-IN LINES			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page	N L		
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
2501. Surcharge Receivable	156,140	156,140	
2502. Due from agents	128,583	128,583	
2503. Prepaid Expenses			
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	284.723	284.723	

LIABILITIES, SURPLUS AND OTHER FUNDS

		Current Year	Prior Year
1.	Losses (Part 2A, Line 35, Column 8)	18,035,329	20,409,877
2.			
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)	5 505 000	6,863,046
4.	Commissions payable, contingent commissions and other similar charges	825,712	930,615
5.	Other expenses (excluding taxes, licenses and fees)		1,272,423
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	380,363	602,429
7.1	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))		
	Net deferred tax liability		
8.			
9.	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded		
	reinsurance of \$ 21,050,000 and including warranty reserves of \$ 0		
	and accrued accident and health experience rating refunds including \$ 0	20 005 004	40,000,774
10	for medical loss ratio rebate per the Public Health Service Act)		43,239,771
	Advance premium Dividends declared and unpaid:	1,228,719	1,663,590
11.	11.1 Stockholders		
	44.0 Diffs holds		
12	Ceded reinsurance premiums payable (net of ceding commissions)	19,126,980	19,949,815
	Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)		
	Amounts withheld or retained by company for account of others		
15.		45,407	67,757
	Provision for reinsurance (including \$ 0 certified) (Schedule F, Part 8)	628,725	743,779
	Net adjustments in assets and liabilities due to foreign exchange rates		
	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates	1,260,559	1,054,610
20.			
21.			
22.			
23.	Liability for amounts held under uninsured plans		
	Capital notes \$ 0 and interest thereon \$ 0		
25.	Aggregate write-ins for liabilities	750 743	915,382
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)	88,499,901	97,713,094
27.			
28.	Total liabilities (Lines 26 and 27)	88,499,901	97,713,094
29.	Aggregate write-ins for special surplus funds		
30.	Common capital stock		
31.	•		
32.	Aggregate write-ins for other-than-special surplus funds		
33.	Surplus notes		
34.	Gross paid in and contributed surplus		
35.	Unassigned funds (surplus)	(15,203,132)	4,976,939
36.	Less treasury stock, at cost:		
	36.1 0 shares common (value included in Line 30 \$ 0)		
	36.2 0 shares preferred (value included in Line 31 \$ 0)	(45.000.400)	4.0=0.000
	Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	(15,203,132)	4,976,939
38.	Totals (Page 2, Line 28, Col. 3)	73,296,769	102,690,033
	DETAIL O OF MIDITE IN LINES		
	DETAILS OF WRITE-IN LINES		
2501.	Escheat Checks	618,794	607,169
		139,919	308,213
2502.	Due to policy holders		
2503.			
2503. 2598.	Summary of remaining write-ins for Line 25 from overflow page		
2503. 2598. 2599.		758,713	915,382
2503. 2598. 2599. 2901.	Summary of remaining write-ins for Line 25 from overflow page		915,382
2503. 2598. 2599. 2901. 2902.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)		915,382
2503. 2598. 2599. 2901. 2902. 2903.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)		915,382
2503. 2598. 2599. 2901. 2902. 2903. 2998.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) Summary of remaining write-ins for Line 29 from overflow page		915,382
2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)		915,382
2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) Summary of remaining write-ins for Line 29 from overflow page		915,382
2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999. 3201. 3202.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) Summary of remaining write-ins for Line 29 from overflow page Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		915,382
2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999. 3201. 3202. 3203.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) Summary of remaining write-ins for Line 29 from overflow page Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		915,382
2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999. 3201. 3202.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) Summary of remaining write-ins for Line 29 from overflow page		915,382

STATEMENT OF INCOME

		1	2
		Current Year	Prior Year
	LINE PRINCIPLE INCOME	Current real	FIIOI Teal
1.	UNDERWRITING INCOME Premiums earned (Part 1, Line 35, Column 4) DEDUCTIONS:	84,401,063	90,952,338
2.	Losses incurred (Part 2, Line 35, Column 7)	61,717,870	50,839,347
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		17,753,983
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)	26,418,695	24,675,091
5.	Aggregate write-ins for underwriting deductions		
6.	Total underwriting deductions (Lines 2 through 5)	104,426,732	93,268,421
7. 8.	Net income of protected cells Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(20,025,660)	(2.216.002)
0.		(20,023,009)	(2,316,083)
	INVESTMENT INCOME		
	Net investment income earned (Exhibit of Net Investment Income, Line 17)		(36,776)
10.	Net realized capital gains (losses) less capital gains tax of \$ 0 (Exhibit of Capital Gains (Losses))	53,446	(26.776)
11.	7	53,440	(36,776)
	OTHER INCOME		
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered		
40	\$ 0 amount charged off \$ 904,730)	(904,730)	
13.	Finance and service charges not included in premiums	360,519	400,503
14. 15	Aggregate write-ins for miscellaneous income Total other income (Lines 12 through 14)		1,027,301 498,621
	Net income before dividends to policyholders, after capital gains tax and before all other	(414,001)	430,021
	federal and foreign income taxes (Lines 8 + 11 + 15)	(20,386,304)	(1,854,238)
17.	Dividends to policyholders		
18.	Net income, after dividends to policyholders, after capital gains tax and before		
	all other federal and foreign income taxes (Line 16 minus Line 17)	(20,386,304)	(1,854,238)
	Federal and foreign income taxes incurred		// 0=/ 000
20.	Net income (Line 18 minus Line 19) (to Line 22)	(20,386,304)	(1,854,238)
	CAPITAL AND SURPLUS ACCOUNT		
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	4,976,939	5,978,071
22.	Net income (from Line 20)	(20,386,304)	(1,854,238)
23.	Net transfers (to) from Protected Cell accounts		
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$ 0		
25. 26.	Change in net unrealized foreign exchange capital gain (loss) Change in net deferred income tax		
	Observation and official and to (F. 12.21 of November 12.21 of Nov	04.470	79,317
28.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3) Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	115,054	773,789
29.	Change in surplus notes		
30.	Surplus (contributed to) withdrawn from protected cells		
	Cumulative effect of changes in accounting principles		
32.	Capital changes: 32.1 Paid in		
	32.1 Paid in 32.2 Transferred from surplus (Stock Dividend)		
	32.3 Transferred to surplus		
33.	Surplus adjustments:		
33.	Surplus adjustments: 33.1 Paid in		
33.	Surplus adjustments: 33.1 Paid in 33.2 Transferred to capital (Stock Dividend)		
	Surplus adjustments: 33.1 Paid in 33.2 Transferred to capital (Stock Dividend) 33.3 Transferred from capital		
34.	Surplus adjustments: 33.1 Paid in 33.2 Transferred to capital (Stock Dividend) 33.3 Transferred from capital Net remittances from or (to) Home Office		
34. 35.	Surplus adjustments: 33.1 Paid in 33.2 Transferred to capital (Stock Dividend) 33.3 Transferred from capital Net remittances from or (to) Home Office Dividends to stockholders		
34.	Surplus adjustments: 33.1 Paid in 33.2 Transferred to capital (Stock Dividend) 33.3 Transferred from capital Net remittances from or (to) Home Office Dividends to stockholders Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		
34. 35. 36.	Surplus adjustments: 33.1 Paid in 33.2 Transferred to capital (Stock Dividend) 33.3 Transferred from capital Net remittances from or (to) Home Office Dividends to stockholders Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		

	DETAILS OF WRITE-IN LINES		
0501.			
0502.	NAME		
0503.	NONE		
0598.	Summary of remaining write-ins for Line 05 from overflow page		
0599.	Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)		
1401.	Sales tax refund and other income	130,130	1,027,301
1402.			
1403.			
1498.	Summary of remaining write-ins for Line 14 from overflow page		
1499.	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	130,130	1,027,301
3701.			
3702.	NAME		
3703.	NONE		
3798.	Summary of remaining write-ins for Line 37 from overflow page		
3799.	Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)		

CASH FLOW

		1	2
	Cash from Operations	Current Year	Prior Year
1.	Premiums collected net of reinsurance	81,058,256	90,718,54
2.	Net investment income	(45,330)	(5,24
3.	Miscellaneous income	(414,081)	524,39
4.	Total (Lines 1 through 3)	80,598,845	91,237,69
5.	Benefit and loss related payments	64,092,418	49,322,14
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions		41,396,25
8.	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)		
10.	Total (Lines 5 through 9)	107,995,674	90,718,39
11.	Net cash from operations (Line 4 minus Line 10)	(27,396,829)	519,29
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds		
	12.2 Stocks		
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds		
	13.2 Stocks		
	13.3 Mortgage loans		
	13.4 Real estate		
	13.5 Other invested assets		
	13.6 Miscellaneous applications		
	13.7 Total investments acquired (Lines 13.1 to 13.6)		
14.	Net increase (decrease) in contract loans and premium notes		
15.			
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock		
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)	(127,322)	(347,03
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5		
	plus Line 16.6)	(127,322)	(347,03
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(27,524,151)	172,26
19.	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year	88,105,461	87,933,19
	19.2 End of year (Line 18 plus Line 19.1)	60,581,310	88,105,46

Note. Supplemental disclosures of cash flow information for non-cash transactions.		
20.0001		
20.0002		
20.0003		

UNDERWRITING AND INVESTMENT EXHIBIT PART 1 – PREMIUMS EARNED

		1	2	3	4
		, I			4
			Unearned	Unearned	
		Net	Premiums Dec. 31	Premiums Dec. 31	Premiums
		Premiums	Prior Year-	Current Year-	Earned
		Written per	per Col. 3,	per Col. 5	During Year
	Line of Business	Column 6, Part 1B	Last Year's Part 1	Part 1A	(Cols. 1 + 2 - 3)
1.	Fire	4,536,605	1,755,484	2,275,608	4,016,481
2.	Allied lines	22,578,869	11,342,805	10,930,165	22,991,509
3.	Farmowners multiple peril				
4.	Homeowners multiple peril	53,271,099	30,141,482	26,019,508	57,393,073
5.	Commercial multiple peril				
6.	Mortgage guaranty				
	Ocean marine				
	Inland marine				
10.	Financial guaranty				
	Medical professional liability—occurrence				
	Medical professional liability—claims-made				
	Earthquake				
	Group accident and health				
	Credit accident and health				
	(group and individual)				
15	Other accident and health				
	Workers' compensation				
	Other liability ecourrence				
	Other Patrick and design and desi				
	Excess workers' compensation				
	Products liability accurrence				
	Products liability—claims-made				
	D2 -1 (- P-1-P)				
	Commercial auto liability				
	Auto physical damage				
	Aircraft (all perils)				
	Fidelity				
	Surety				
	Burglary and theft				
	Boiler and machinery				
	Credit				
	International				
	Warranty				
31.	Reinsurance-nonproportional				
	assumed property				
32.	Reinsurance-nonproportional				
	assumed liability				
33.	Reinsurance-nonproportional				
	assumed financial lines				
34.	Aggregate write-ins for other lines				
	of business				
35.	TOTALS	80,386,573	43,239,771	39,225,281	84,401,063

	DETAILS OF WRITE-IN LINES			
3401.				
3402.				
3403.			IONE	
3498.	Sum of remaining write-ins for		NUNE	
	Line 34 from overflow page	-	••••	
3499.	Totals (Lines 3401 through 3403			
	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)			

UNDERWRITING AND INVESTMENT EXHIBIT PART 1A – RECAPITULATION OF ALL PREMIUMS

		1	2	3	4	5
		Amount Unearned (Running One Year	Amount Unearned (Running More Than	Earned	Reserve for Rate Credits and	Total Reserve for
		or Less from Date	One Year from Date	but	Retrospective	Unearned
		of Policy)	of Policy)	Unbilled	Adjustments Based	Premiums
	Line of Business	(a)	(a)	Premium	on Experience	Cols. 1 + 2 + 3 + 4
İ	Fire	2,275,608 10,930,165				2,275,608 10,930,165
l	Farmowners multiple peril					
	Homeowners multiple peril	26,019,508				26,019,508
	Commercial multiple peril	 , ,				
	Mortgage guaranty					
8.	Ocean marine					
9.	Inland marine					
10.	Financial guaranty					
11.1	Medical professional liability—occurrence					
11.2	Medical professional liablity—claims-made					
	Earthquake					
13.	Group accident and health					
	Credit accident and health					
	(group and individual)					
15.	Other accident and health					
16.	Workers' compensation					
17.1	Other liability—occurrence					
17.2	Other liability—claims-made					
17.3	Excess workers' compensation					
18.1	Products liability—occurrence					
18.2	Products liability—claims-made					
19.1,19.2	Private passenger auto liability					
19.3,19.4	Commercial auto liability					
	Auto physical damage					
22.	Aircraft (all perils)					
23.	Fidelity					
24.	Surety					
26.	Burglary and theft					
	Boiler and machinery					
	Credit					
29.	International					
	Warranty					
31.	Reinsurance-nonproportional					
	assumed property					
32.	Reinsurance-nonproportional					
	assumed liability					
33.	Reinsurance-nonproportional					
	assumed financial lines					
34.	Aggregate write-ins for other lines					
	of business					
	TOTALS	39,225,281				39,225,281
	Accrued retrospective premiums based on exp	perience				
38.	Balance (Sum of Lines 35 through 37)					39,225,281

	DETAILS OF WRITE-IN LINES			
3401.				
3402.				
3403.		$\mathbf{N}()\mathbf{N}$		
3498.	Sum of remaining write-ins for	11011		
	Sum of remaining write-ins for Line 34 from overflow page			
	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)			

⁽a) State here basis of computation used in each case Daily pro rata

UNDERWRITING AND INVESTMENT EXHIBIT PART 1B – PREMIUMS WRITTEN

		1	Reinsurand	e Assumed	Reinsurar	nce Ceded	6
			2	3	4	5	Net Premiums
		Direct		From		То	Written
		Business	From	Non-	То	Non-	Cols. 1 + 2 + 3 -
	Line of Business	(a)	Affiliates	Affiliates	Affiliates	Affiliates	4 - 5
1.	Fire	6,194,368				1,657,763	4,536,605
2.	Allied lines	33,288,788				10,709,919	22,578,869
	Farmowners multiple peril						
4.	Homeowners multiple peril					29,731,848	53,271,099
5.	Commercial multiple peril						
6.	Mortgage guaranty						
8.	Ocean marine						
9.	Inland marine						
10.	Financial guaranty						
11.1	Medical professional liabilityoccurrence						
11.2	Medical professional liabilityclaims-made						
12.	Earthquake						
13.	Group accident and health						
14.	Credit accident and health						
	(group and individual)						
15.	Other accident and health						
	Workers' compensation						
17.1	Other liability—occurrence						
	Other liability—claims-made						
	Excess workers' compensation						
	Products liability—occurrence						
18.2	Products liability—claims-made						
	Private passenger auto liability						
	Commercial auto liability						
	Auto physical damage						
	Aircraft (all perils)						
	Fidelity						
24.	Surety						
	Burglary and theft						
27.	Boiler and machinery						
	Credit						
	International						
	Warranty						
31.	Reinsurance-nonproportional						
	assumed property	xxx					
32.	Reinsurance-nonproportional						
	assumed liability	xxx					
33.	Reinsurance-nonproportional						
	assumed financial lines	XXX					
34.	Aggregate write-ins for other lines						
	of business						
35.	TOTALS	122,486,103				42,099,530	80,386,573
00.		122,100,100		<u> </u>	<u> </u>	12,000,000	30,000,010

DETAILS OF WRITE-IN LINES				
3401.				
3402.				
3403.	NIC	ZVIE		
3498. Sum of remaining write-ins for	INC			
Line 34 from overflow page				
3499. Totals (Lines 3401 through 3403				
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)				

(a)	Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X]	
	If yes: 1. The amount of such installment premiums \$ 0	
	2 Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$	0

UNDERWRITING AND INVESTMENT EXHIBIT PART 2 – LOSSES PAID AND INCURRED

		Losses Paid	Less Salvage		5	6	7	
Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1. Fire	4,103,343			4,103,343	953,764	1,322,304	3,734,803	92.98
2. Allied lines	21,357,552			21,357,552	4,555,512	4,866,590	21,046,474	91.54
Farmowners multiple peril								
4. Homeowners multiple peril	38,631,523			38,631,523	12,526,053	14,220,983	36,936,593	64.35
Commercial multiple peril								
6. Mortgage guaranty								
8. Ocean marine								
9. Inland marine								
10. Financial guaranty								
11.1 Medical professional liability—occurrence								
11.2 Medical professional liability—claims-made								
12. Earthquake								
13. Group accident and health								
14. Credit accident and health (group and individual)								
15. Other accident and health								
16. Workers' compensation								
17.1 Other liability—occurrence								
17.2 Other liability—claims-made								
17.3 Excess workers' compensation								
18.1 Products liability—occurrence								
18.2 Products liability—claims-made								
19.1,19.2 Private passenger auto liability								
19.3,19.4 Commercial auto liability								
21. Auto physical damage								
22. Aircraft (all perils)								
23. Fidelity								
24. Surety								
26. Burglary and theft								
27. Boiler and machinery								
28. Credit								
29. International								
30. Warranty								
31. Reinsurance-nonproportional assumed property								
32. Reinsurance-nonproportional assumed liability	XXX							
33. Reinsurance-nonproportional assumed financial lines	XXX							
34. Aggregate write-ins for other lines of business								
35. TOTALS	64,092,418			64,092,418	18,035,329	20,409,877	61,717,870	73.12

DETAILS OF WRITE-IN LINES				
3401.				П
3402.				
3403.				
3498. Sum of remaining write-ins for Line 34 from overflow page				
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)				

UNDERWRITING AND INVESTMENT EXHIBIT PART 2A – UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		Reporte	d Losses			Incurred But Not Reported		8	9
	1	2	3	4	5	6	7	1	
Line of Business	Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1. Fire	344,048			344,048	609,716			953,764	201,7
2. Allied lines	1,486,942			1,486,942	3,068,570			4,555,512	1,824,9
Farmowners multiple peril Homeowners multiple peril	4,932,682			4,932,682	7,593,371			12,526,053	3,568,6
Commercial multiple peril	4,932,002			4,932,002	1,595,571			12,320,033	3,300,0
Mortgage guaranty Ocean marine									
9. Inland marine									
10. Financial guaranty									
11.1 Medical professional liablity—occurrence									
11.2 Medical professional liability—claims-made									
12. Earthquake									
13. Group accident and health								(a)	
14. Credit accident and health (group and individual)								V./	
15. Other accident and health								(a)	
16. Workers' compensation							1		
17.1 Other liability—occurrence							1		
17.2 Other liability—claims-made									
17.3 Excess workers' compensation									
18.1 Products liability—occurrence									
18.2 Products liability—claims-made									
.1,19.2 Private passenger auto liability									
3,19.4 Commercial auto liability									
21. Auto physical damage									
22. Aircraft (all perils)									
23. Fidelity									
24. Surety									
26. Burglary and theft									
27. Boiler and machinery									
28. Credit									
29. International									
30. Warranty					XXX				
31. Reinsurance-nonproportional assumed property	XXX				XXX XXX				
Reinsurance-nonproportional assumed liability Reinsurance-nonproportional assumed financial lines	XXX				XXX				
					· · · · · · · · ^ ^ ^ · · · · · · ·				
34. Aggregate write-ins for other lines of business 35. TOTALS	6,763,672			6,763,672	11,271,657			18,035,329	5,595,3
	5,. 55,61L			3,: 30,01 E	,=. 1,001			.5,550,620	3,000,0

DETAILS OF WRITE-IN LINES						
3401.						
3402.						
3403.	N					
3498. Sum of remaining write-ins for Line 34 from overflow page		VIIL				
3498. Sum of remaining write-ins for Line 34 from overflow page 3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)						

⁽a) Including \$ 0 for present value of life indemnity claims.

UNDERWRITING AND INVESTMENT EXHIBIT PART 3 - EXPENSES

		1	2	3	4
		Loss Adjustment	Other Underwriting	Investment	T
		Expenses	Expenses	Expenses	Total
1.	Claim adjustment services:				
	1.1 Direct	11,395,471			11,395,471
	1.2 Reinsurance assumed				
	1.3 Reinsurance ceded				
	1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)	11,395,471			11,395,471
2.	Commission and brokerage:				
	2.1 Direct, excluding contingent		12,717,746		12,717,746
	2.2 Reinsurance assumed, excluding contingent				
	2.3 Reinsurance ceded, excluding contingent		1,354,974		1,354,974
	2.4 Contingent—direct				
	2.5 Contingent—reinsurance assumed				
	2.6 Contingent—reinsurance ceded				
	2.7 Policy and membership fees				
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 +				
	2.4 + 2.5 - 2.6 + 2.7)		11,362,772		11,362,772
3.	Allowances to manager and agents				
	Advertising		861		861
5.	Boards, bureaus and associations		290,688		290,688
6.	Surveys and underwriting reports		1,010,716		1,010,716
7.	Audit of assureds' records				
8.	Salary and related items:				
	8.1 Salaries	2,237,885	4,743,803		6,981,688
	8.2 Payroll taxes	106,820	246,155		352,975
9.	Employee relations and welfare	529,610	1,264,135		1,793,745
	Insurance	25,011	58,358		83,369
11.	Directors' fees				
12.	Travel and travel items	23,703	45,765		69,468
	Rent and rent items	146,596	342,058		488,654
	Equipment	179,744	1,065,819		1,245,563
15.	Cost or depreciation of EDP equipment and software				
16.	Printing and stationery	58,718	103,674		162,392
17.	Postage, telephone and telegraph, exchange and express	395,611	475,626		871,237
18.	Legal and auditing	81,018	487,897		568,915
19.	Totals (Lines 3 to 18)	3,784,716	10,135,555		13,920,271
20.	Taxes, licenses and fees:				
	20.1 State and local insurance taxes deducting guaranty				
	association credits of \$ 0		2,412,568		2,412,568
	20.2 Insurance department licenses and fees				
	20.3 Gross guaranty association assessments				
	20.4 All other (excluding federal and foreign income and real estate)		7,139		7,139
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)		2,419,707		2,419,707
21.	Real estate expenses				
22.	Real estate taxes				
23.	Reimbursements by uninsured plans				
	Aggregate write-ins for miscellaneous expenses	1,109,980	2,500,661	174,999	3,785,640
25.	Total expenses incurred	16,290,167	26,418,695	174,999	(a) 42,883,861
26.	Less unpaid expenses—current year	5,595,389	2,300,437		7,895,826
	Add unpaid expenses—prior year	6,863,046	2,805,467		9,668,513
	Amounts receivable relating to uninsured plans, prior year				
	Amounts receivable relating to uninsured plans, current year				
<u>30</u> .	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	17,557,824	26,923,725	174,999	44,656,548

DETAILS OF WRITE-IN LINES				
2401. IT Systems Support & Product Development	401,607	2,210,490		2,612,097
2402. Outside Professional Services	708,373	242,265		950,638
2403. Line of Credit Fees			174,999	174,999
2498. Sum of remaining write-ins for Line 24 from overflow page		47,906		47,906
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)	1.109.980	2.500.661	174.999	3.785.640

⁽a) Includes management fees of \$ 0 to affiliates and \$ 10,533,789 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
1.	U.S. Government bonds	(a)	
1.1	Bonds exempt from U.S. tax	(a)	
1.2	Other bonds (unaffiliated)	(a)	
1.3	Bonds of affiliates	(a)	
2.1	Preferred stocks (unaffiliated)	(b)	
2.11	Preferred stocks of affiliates	(b)	
2.2	Common stocks (unaffiliated)		
2.21	Common stocks of affiliates		
3.	Mortgage loans	(c)	
4.	Real estate	(d)	
5.	Contract loans		
6.	Cash, cash equivalents and short-term investments	(e) 193,781	228,445
7.	Derivative instruments	(f)	
8.	Other invested assets		
9.	Aggregate write-ins for investment income		
10.	Total gross investment income	193,781	228,44
11.	Investment expenses		(g) 174,999
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g).
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		(i)
15.	Aggregate write-ins for deductions from investment income		l
16.	Total deductions (Lines 11 through 15)		174,999
17.	Net investment income (Line 10 minus Line 16)		53,44

	DETAILS OF WRITE-IN LINES	
0901.	NAME	
0902.	NIC INIE	
0903.	INDINE	
0998.	Summary of remaining write-ins for Line 09 from overflow page	
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)	
1501.		
1502.	NANE	
1503.	NUNE	
1598.	Summary of remaining write-ins for Line 15 from overflow page	
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)	

(a)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(b)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued dividends on purchases.
(c)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(d)	Includes \$	0 for company's occupancy of its own b	ouildings; and excludes \$ 0 interes	t on encumbrances.
(e)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(f)	Includes \$	0 accrual of discount less \$	0 amortization of premium.	
(g)	Includes \$	0 investment expenses and \$	0 investment taxes, licenses and fees, excl	luding federal income taxes,
	attributable to segregate	d and Separate Accounts.		
(h)	Includes \$	0 interest on surplus notes and \$	0 interest on capital notes.	
(i)	Includes \$	0 depreciation on real estate and \$	0 depreciation on other invested asse	ets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds					
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)					
1.3	Bonds of affiliates					
1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Preferred stocks of affiliates Common stocks (unaffiliated) Common stocks of affiliates		\			
2.21	Common stocks of affiliates		7 .L			
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments					
/.	Derivative instruments					
8.	Other invested assets					
1	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)					

	DETAILS OF WRITE-IN LINES			
0901.				
0902.				
0903.				
0998.	Summary of remaining write-ins for Line 09 from overflow page			
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)			

EXHIBIT OF NONADMITTED ASSETS

		1	2	3
		Current Year		
		Total	Prior Year	Change in Total
		Nonadmitted	Total	Nonadmitted Assets
		Assets	Nonadmitted Assets	(Col. 2 - Col. 1)
1.	Bonds (Schedule D)			
	Stocks (Schedule D):			
	2.1 Preferred stocks			
	2.2 Common stocks	1		
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First lines			
	3.2 Other than first lines			
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			
	4.2 Properties held for the production of income			
	4.3 Properties held for sale			
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term			
	investments (Schedule DA)			
6.	Contract loans			
7.	Derivatives (Schedule DB)			
8.	Other invested assets (Schedule BA)			
9.	Receivables for securities			
10.	Securities lending reinvested collateral assets (Schedule DL)			
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
13.	Title plants (for Title insurers only)			
	Investment income due and accrued			
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection	44,929	70,543	25,614
	15.2 Deferred premiums, agents' balances and installments booked but deferred			
	and not yet due			
	15.3 Accrued retrospective premiums and contracts subject to redetermination			
16.	Reinsurance:			
	16.1 Amounts recoverable from reinsurers			
	16.2 Funds held by or deposited with reinsured companies			
	16.3 Other amounts receivable under reinsurance contracts			
17.	Amounts receivable relating to uninsured plans			
18.1	Current federal and foreign income tax recoverable and interest thereon			
18.2				
19.	Guaranty funds receivable or on deposit			
20.	Electronic data processing equipment and software			
21.	Furniture and equipment, including health care delivery assets			
22.	Net adjustment in assets and liabilities due to foreign exchange rates			
23.	Receivables from parent, subsidiaries and affiliates			
24.	Health care and other amounts receivable			
25.	Aggregate write-ins for other-than-invested assets	284,723	350,288	65,565
26.	Total assets excluding Separate Accounts, Segregated Accounts and			
	Protected Cell Accounts (Lines 12 to 25)	329,652	420,831	91,179
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28.	Total (Lines 26 and 27)	329,652	420,831	91,179

DETAILS OF WRITE-IN LINES			
1101.			
1102.			
1103. () (
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
2501. Surcharge Receivable	156,140	217,453	61,313
2502. Due from Agents	128,583	118,967	(9,616)
2503. Prepaid Assets		13,868	13,868
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	284,723	350,288	65,565

Note 1 - Summary of Significant Accounting Policies

A. Accounting Practices, Impact of NAIC/State Differences

The accompanying financial statements of Texas FAIR Plan Association (TFPA) have been prepared on the basis of accounting practices or permitted by the Department of Insurance of the State of Texas (TDI). Prescribed statutory accounting practices include state laws, regulations and general administrative rules applicable to all insurance companies domiciled in the State of Texas and the National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* subject to any deviations prescribed or permitted by the Texas Department of Insurance.

Reconciliations of net income and policyholders' surplus between the amounts reported in the accompanying financial statement (TX basis) and NAIC SAP follow:

	SSAP	F/S	F/S				
Description	#	Page	Line #		2016		2015
1. Net income, TX basis	XXX	XXX	XXX	(\$	20,386,304)	(\$	1,854,238)
2. Effect of TX prescribed practices					-		-
3. Effect of TX permitted practices					-		-
4. Net income, NAIC SAP basis	XXX	XXX	XXX	(\$	20,386,304)	(\$	1,854,238)

Description	SSAP #	F/S Page	F/S Line #	2016	2015
5. Policyholders' surplus, TX basis	XXX	XXX	XXX	(\$ 15,203,132)	\$ 4,976,939
6. Effect of TX prescribed practices 7. Effect of TX permitted practices	20	2	5		-
8. Policyholders' surplus, NAIC SAP basis	XXX	XXX	XXX	(\$ 15,203,132)	\$ 4,976,939

B. Use of Estimates

The preparation of financial statements requires management to make estimates and assumptions that affect the amounts reported in these financial statements and notes. Actual results could differ from these estimates.

C. Accounting Policy

Direct and ceded premiums are earned over the terms of the related policies or reinsurance contracts, respectively. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for both direct and ceded business. The Association has a minimum policy premium of \$100.

Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the company uses the following accounting policy:

- 1. Short-term investments are stated at historical cost, which approximates market value.
- 2. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports, and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amounts are adequate, the ultimate liabilities may be in excess of or less than the amounts provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- 3. The Association has a written capitalization policy. The predefined capitalization policy thresholds have not changed from the prior year.

D. Going Concern

Management has evaluated the Association's ability to continue as a going concern. There is no substantial doubt for the Association to continue as a going concern.

Note 2 - Accounting Changes and Correction of Errors

A. Material Changes in Accounting Principal

There were no changes in accounting principles.

B. Correction of Errors

Not applicable.

Note 3 - Business Combinations and Goodwill

A. Not applicable

Note 4 - Discontinued Operations

A. Not applicable

Note 5 – Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

None

B. Debt Restructuring

None

C. Reverse Mortgages

None

D. Loan-Backed Securities

None

E. Repurchase Agreements and/or Securities Lending Transactions

None

F. Real Estate

None

G. Investment in Low-Income Housing Tax Credits

None

- H. Restricted Assets
 - 1. The Association holds minimum maturity time deposits which have withdrawal provisions in that notice to withdrawal is given in advance of availability which is generally 90 days or less.

	Gross (Adı	nitted & Nonadr	nitted) Restrict	ed				Current Year				
			Current Year							Perce	entage	
	1	2	3	4	5	6	7	8	9	10	11	
Restricted Asset Category	Total General Account (G/A)	G/A Supporting S/A Restricted Assets (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase / (Decrease) (5 minus 6)	Total Non-admitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Non- admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)	
a. to m. None												
n. Other restricted assets	12,050,767				12,050,767	-	12,050,767	-	12,050,767	1.64%	1.64%	
o. Total restricted assets	12,050,767				12,050,767	-	12,050,767	-	12,050,767	1.64%	1.64%	

- (a) Subset of column 1
- (b) Subset of column 3
- (c) Column 5 divided by Asset Page, Column 1, Line 28
- (d) Column 9 divided by Asset Page, Column 3, Line 28
- 2. Detail of assets pledged as collateral not captured in other categories (reported on line m above)

None

3. Detail of other restricted assets (reported on line n above)

	Gross (Adr	nitted & Nonad	mitted) Restricte	d					Perce	Percentage	
			Current Year								
	1	2	3	4	5	6	7	8	9	10	
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase / (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross (Admitted & Non- admitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets	
Minimum Maturity Time Deposits	12,050,767				12,050,767	1	12,050,767	1	12,050,767	1.64%	
Total other restricted assets	12,050,767				12,050,767	-	12,050,767	-	12,050,767	1.64%	

- (a) Subset of column 1
- (b) Subset of column 3
- (c) Total Line for Columns 1 through 7 should equal 5H(1)n Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5H(1)n Columns 9 through 11 respectively
- 4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

None

I. Working Capital Finance Investments

None

J. Offsetting and Netting of Assets and Liabilities

None

K. Structured Notes

None

L. 5* Securities

None

Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

A. Not applicable

Note 7 – Investment Income

A. There was no due and accrued income excluded from surplus.

<u>Note 8 – Derivative Instruments</u>

A. Not applicable

Note 9 - Income Taxes

As of June 18, 2005, the Association is a tax exempt organization whose gross income is excludable under Internal Revenue Code Section 115 and is no longer required to file federal tax returns.

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

A. Nature of Relationships

On October 10, 2002, the Texas Commissioner of Insurance enacted Article 21.49A of the Texas Insurance Code implementing the creation of the Texas FAIR Plan Association. The commissioner then instructed the Texas Windstorm Insurance Association ("TWIA") to manage the Association.

B. Detail of Transactions Greater than ½% of Admitted Assets

None

C. Change in Terms of Intercompany Arrangements

None

D. Amounts Due to or from Related Parties

The Association entered into a service contract with TWIA in which the Association is to reimburse TWIA for all expenditures, professional fees, and consulting services, allocated employee time, lost investment income and other costs directly associated with the services provided by TWIA on behalf of the Association. During 2016 and 2015 the Association incurred expenses from TWIA under its contract in the amounts of \$10,533,789 and \$9,505,904 respectively. As of December 31, 2016 and 2015, the Association had outstanding expenses for which it has reimbursed TWIA in the amount of \$1,260,559 and \$1,054,610, respectively. The amounts are recognized in the statutory statements of liabilities, surplus and other funds as a payable to Texas Windstorm Insurance Association.

E. Guarantees or Undertakings for Related Parties

Not applicable

F. Management, Service Contracts, Cost Sharing Arrangements

See Nature of Relationship above

G. Nature of Relationships that Could Affect Operations

None

H. Amount Deducted for Investment in Upstream Company

Not applicable

I. Detail of Investments in Affiliates Great than 10% of Admitted Assets

Not applicable

J. Write-downs for Impairment of Investments in Affiliates

Not applicable

K. Foreign Insurance Subsidiary Valued Using CARVM

Not applicable

L. Downstream Holding Company valued Using Look-Through method

Not applicable

M. All SCA Investments

Not applicable

N. Investment in Insurance SCAs

Note 11 – Debt

- A. The Association has a \$40,000,000 line of credit with a bank. There were no balances outstanding or drawn against the line of credit year to date as of December 31, 2016.
- B. Funding Agreements with Federal Home Loan Bank (FHLB)

Not applicable

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

A. Defined Benefit Plan

Not Applicable

B. Description of Investment Policies

Not Applicable

C. Fair Value Measurements of Plan Assets at Reporting Date

Not Applicable

D. Rate of Return Assumptions

Not Applicable

E. Defined Contribution Plan

Not Applicable

F. Multiemployer Plans

Not applicable

G. Consolidated/Holding Company Plans

Not applicable

H. Postemployment Benefits and Compensated Absences

The Association has no obligations to current or former employees for benefits after their employment but before their retirement other than for compensation related to earned personal time off. The liability for earned but untaken personal time off has been accrued.

I. Impact of Medicare Modernization Act on Postretirement Benefits

Not applicable

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

Not applicable

Note 14 – Contingencies

A. Capital Commitments

The Association has no commitments or continent commitments to other entities.

B. Assessments

The Association is subject to a fire assessment by the State of Texas in which the Association writes business. The assessment is premium-based and recorded at the time the premiums are written. The Association is not subject to loss-based assessments. The Association has accrued a liability for fire assessment of \$86,000 and \$97,000 in 2016 and 2015 respectively. The amounts recorded represent management's best estimates based on assessment rate information received from the State of Texas. The assets included in surcharge receivable have been fully non-admitted as of both 2016 and 2015. Policy surcharges collected were \$155,203 and \$157,551 in 2016 and 2015, respectively.

C. Gain Contingencies

D. Extra Contractual Obligation and Bad Faith Losses

None

E. Product Warranties

Not applicable

F. Joint and Several Liabilities

Not applicable

G. Other Contingencies

The Association is subject to various investigations, claims and legal proceedings covering a wide range of matters that arise in the ordinary course of business activities. Management believes that any liability that may ultimately result from the resolution of these matters in excess of the amounts provided will not have a material adverse effect on the financial position of the Association. These matters are subject to various uncertainties, and some of these matters may be resolved unfavorably to the Association.

Note 15 – Leases

A. Lessee Leasing Arrangements

Not applicable

B. Lessor Leasing Arrangements

Not applicable

Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk

Not applicable

Note 17 - Sales, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

Not applicable

Note 18 - Gain or Loss from Uninsured Plans and Uninsured Portion of Partially Insured Plans

Not applicable

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

Not applicable

Note 20 - Fair Value Measurements

A. Inputs Used for Assets and Liabilities Measured and Reported at Fair Value

Not applicable

B. Other Fair Value Disclosures

Not applicable

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

The table below reflects the fair values and admitted assets and liabilities that are financial instruments. The fair values are also categorized into the three-level fair value hierarchy. Cash, cash equivalents and short-term investments are the only financial instruments held by the Association in which carrying value and fair value are the same.

-/		ass	of	Financial	Aggregate Fair	Admitted	Level 1	Leve	<u>el 2</u>	Level	<u>3</u>
<u>Instrume</u>	<u>nt</u>				<u>Value</u>	<u>Assets</u>					
Cash, c	ash equ	ıivale	ents a	and							
short-	term in	vestr	nent	S	\$60 581 310	\$60 581 310	\$60 581 310) \$	_	\$	_

D. Items for which Not Practicable to Estimate Fair Values

Note 21 – Other Items

A. Unusual or Infrequent Items

Not applicable

B. Troubled Debt Restructuring for Debtors

Not applicable

C. Other Disclosures

None

D. Business Interruption Insurance Recoveries

Not applicable

E. State Transferable and Non-transferable Tax Credits

Not applicable

F. Subprime Mortgage Related Risk Exposure

Not applicable

G. Insurance Linked Securities

Not applicable

Note 22 - Events Subsequent

The Association has evaluated subsequent events occurring after December 31, 2016, the date of the most recent balance sheet, through February 24, 2017, the date the annual statement was issued. The Association does not believe any subsequent events have occurred that would require further disclosure or adjustment to the statutory financial statements.

Note 23 - Reinsurance

A. Unsecured Reinsurance Recoverables

The Association has unsecured reinsurance recoverables which exceed 3% of the Association's surplus with the following reinsurers as of December 31, 2016.

NAIC Code	Federal ID#	Name of Reinsurer	Amount
	AA-3194158	Allianz Risk Transfer (Bermuda) Ltd. (Nephila business)	\$ 130,505
	22-2005057	Everest Reinsurance Company	\$ 128,061
	AA-3190770	Chubb Tempest Reinsurance	\$ 121,810
	AA-1120083	Lloyd's Underwriter Syndicate No. 1910 ARE	\$ 111,266
	AA-3194139	AXIS Specialty Limited	\$ 104,007
	AA-3190339	Renaissance Reinsurance Ltd.	\$ 93,136
	AA-3190875	Hiscox Insurance Company Ltd (Bermuda)	\$ 89,055
	AA-3190870	Validus Reinsurance, Ltd.	\$ 84,987
	AA-1320031	SCOR Global P&C S.E Lirma S7300	\$ 84,987
	AA-1128001	Lloyd's Underwriter Syndicate No. 2001 AML	\$ 83,421
	AA-3194130	Endurance Speciality Ins Ltd.	\$ 78,609
	AA-3190686	Partner Reinsurance Company Ltd.	\$ 76,985
	13-5616275	Transatlantic Reinsurance Company	\$ 61,911
	47-0698507	Odyssey Reinsurance Company	\$ 49,746
	AA-1340125	Hannover Rück SE (Pillar business)	\$ 47,211
	AA-1460019	Amlin Bermuda, a branch of Amlin AG, Hamilton	\$ 46,540
	AA-1127414	Lloyd's Underwriter Syndicate No. 1414 ASC	\$ 46,383
	AA-3191289	Fidelis Insurance Bermuda Limited	\$ 43,426
	AA-3194122	DaVinci Reins thru Renaissance U/W	\$ 40,507
	AA-3194168	Aspen Bermuda Ltd.	\$ 40,470
	AA-1120102	Lloyd's Underwriter Syndicate No. 1458 RNR	\$ 38,455
	AA-3191315	XL Bermuda Ltd Formerly XL Re Ltd	\$ 34,150
	AA-3190005	Ascot Underwriting (Bermuda) Ltd	\$ 33,558
	AA-1128791	Lloyd's Underwriter Syndicate No. 2791 MAP	\$ 32,422
	AA-3190829	Markel Bermuda Limited	\$ 32,376
	AA-1126033	Lloyd's Underwriter Syndicate No. 0033 HIS	\$ 29,216
	AA-1128623	Lloyd's Underwriter Syndicate No. 2623 AFB	\$ 17,562
	AA-1128010	Lloyd's Underwriter Syndicate No. 2010 MMX	\$ 17,371
	AA-3190978	AlphaCat Reinsurance Ltd.	\$ 16,956
	AA-1120075	Lloyd's Underwriter Syndicate No. 4020 ARK	\$ 16,572
	AA-1127183	Lloyd's Underwriter Syndicate No. 1183 TAL	\$ 16,188
	AA-5320039	Pioneer Underwriting Ltd.	\$ 14,164
	AA-1120071	Lloyd's Underwriter Syndicate No. 2007 NVA	\$ 12,638
	AA-1120084	Lloyd's Underwriter Syndicate No. 1955 BAR	\$ 12,546
	AA-3194126	Arch Reinsurance, Ltd.	\$ 10,522
	AA-1460023	Tokio Millennium Re AG, Bermuda Branch (Markel CATCo-Re Aquilo business)	\$ 10,295
	AA-5324100	Pioneer Underwriting Ltd.	\$ 9,713
	AA-1126623	Lloyd's Underwriter Syndicate No. 0623 AFB	\$ 3,855
	AA-1120085	Lloyd's Underwriter Syndicate No. 1274 AUL	\$ 1,183

B. Reinsurance Recoverables in Dispute

The Association does not have reinsurance recoverables in dispute for paid losses and loss adjustment expenses that exceed 5% of policyholders' surplus from an individual reinsurer or exceed 10% of policyholders' surplus in aggregate.

Name of	Total Amount in Dispute (Including	Status of Dispute					
Reinsurer	IBNR)	Notification	Arbitration	Litigation			
	NONE						

C. Reinsurance Assumed and Ceded

1. The following table summarizes the assumed and ceded unearned premiums and related commissions equity at the end of the current year.

	Assumed		Ceded		Assumed Less Ceded	
	Unearned Premiums	Commission Equity	Unearned Premiums	Commission Equity	Unearned Premiums	Commission Equity
a. Affiliates						
b. All other			\$21,049,743	\$631,492	(\$21,049,743)	(\$631,492)
c. Totals			\$21,049,743	\$631,492	(\$21,049,743)	(\$631,492)

- 2. The amount of return commission that would have been due the reinsurers if they or the Association had cancelled the Association's excess of loss reinsurance agreement would have been approximately \$2,104,974 for the fiscal year ended December 31, 2016.
- 3. The Association does not use protected cells as an alternative to traditional reinsurance.
- D. Uncollectible Reinsurance

Not applicable

E. Commutation of Ceded Reinsurance

Not applicable

F. Retroactive Reinsurance

Not applicable

G. Reinsurance Accounted for as a Deposit

Not applicable

H. Run-off Agreements

Not applicable

I. Certified Reinsurer Downgrades or Status Subject to Revocation

Not applicable

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not applicable

Note 24 - Retrospectively Rated Contracts and Contracts Subject to Redetermination

Note 25 - Changes in Incurred Losses and Loss Adjustment Expenses

The estimated cost of loss and loss adjustment expense (LAE) attributable to insured events of prior years decreased by approximately \$400,000 during 2016 and decreased by approximately \$1.5 million during 2015. Increases and decreases of this nature occur as the result of claim settlements during the current year, and as additional information is received regarding individual claims, causing changes from the original estimates of the cost of these claims.

	2016	2015
Balance as of January 1,	27,272,923	25,477,334
Less: Reinsurance Recoverable	-	· -
Net Balance at January 1,	27,272,923	25,477,334
Incurred, net of reinsurance, related to:		
Current year	78,419,715	70,173,760
Prior years	(411,678)	(1,580,430)
Net Incurred	78,008,037	68,593,330
Paid, net of reinsurance, related to:		
Current year	(64,566,556)	(54,700,301)
Prior years	(17,083,687)	(12,097,440)
Net Paid Losses	(81,650,243)	(66,797,741)
Net Balance at December 31,	23,630,717	27,272,923
Plus: Reinsurance Recoverable	-	-
Balance at December 31,	23,630,717	27,272,923

The Company attempts to consider all significant facts and circumstances known at the time loss reserves are established. Due to the inherently uncertain process involving loss and loss adjustment expense reserve estimates, the final resolution of the ultimate liability may be different from that anticipated at the reporting date. Therefore, actual paid damages in the future may yield a material different favorable or unfavorable amount than currently reserved. While the Company believes that the estimated for loss and loss adjustment expense reserves are adequate as of December 31, 2016, there can be no assurance that the estimates and the extended period of time that it can take to settle claims may change the results of operations. The Company does not issue and retrospective rated policies, as such, the net incurred increase or decrease related to prior years did not result in any direct accrual of additional premiums.

Note 26 - Intercompany Pooling Arrangements

Not applicable

<u>Note 27 – Structured Settlements</u>

Not applicable

Note 28 – Health Care Receivables

Not applicable

Note 29 - Participating Policies

Not applicable

Note 30 – Premium Deficiency Reserves

The Association did not record a premium deficiency reserve for 2016.

Note 31 – High Deductibles

Not applicable

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

Not applicable

Note 33 – Asbestos and Environmental Reserves

Not applicable

Note 34 – Subscriber Savings Accounts

Note 35 – Multiple Peril Crop Insurance

Not applicable

Note 36 - Financial Guaranty Insurance

A. and B. Not applicable

PART 1 – COMMON INTERROGATORIES

		GENE	RAL		
1.1	Is the reporting entity a member of an Insurance Holding Compa persons, one or more of which is an insurer?	ny System consisti	ing of two or more affiliated	Yes[] No	ɔ[X]
	If yes, complete Schedule Y, Parts 1, 1A and 2.				
1.2	If yes, did the reporting entity register and file with its domiciliary Superintendent or with such regulatory official of the state of dom System, a registration statement providing disclosure substantial Association of Insurance Commissioners (NAIC) in its Model Insurand model regulations pertaining thereto, or is the reporting entity substantially similar to those required by such Act and regulation	nicile of the principally similar to the sta urance Holding Co by subject to standa	al insurer in the Holding Company andards adopted by the National Impany System Regulatory Act	Yes[] N	o[]N/A[X]
1.3	State Regulating?				
2.1	Has any change been made during the year of this statement in settlement of the reporting entity?	the charter, by-law	rs, articles of incorporation, or deed	of Yes[] No	o[X]
2.2	If yes, date of change:				
3.1	State as of what date the latest financial examination of the repo	rting entity was ma	ade or is being made.	1	12/31/2012
3.2	State the as of date that the latest financial examination report be the reporting entity. This date should be the date of the examine completed or released.		12/31/2012		
3.3	State as of what date the latest financial examination report becathe state of domicile or the reporting entity. This is the release do not the date of the examination (balance sheet date).				10/24/2014
3.4	By what department or departments? Texas Department of Insurance				
3.5	Have all financial statement adjustments within the latest financial subsequent financial statement filed with departments?	al examination repo	ort been accounted for in a	Yes[X] N	lo[] N/A []
3.6	Have all of the recommendations within the latest financial exam	ination report been	n complied with?	Yes[X] N	lo [] N/A []
4.1	During the period covered by this statement, did any agent, broke sales/service organization or any combination thereof under comreporting entity) receive credit or commissions for or control a su of business measured on direct premiums) of:	nmon control (other	r than salaried employees of the e than 20 percent of any major line	Yes[] No	o I V I
		4.11 sales of flev 4.12 renewals?	w business !	Yes[] No	
4.2	During the period covered by this statement, did any sales/service reporting entity or an affiliate, receive credit or commissions for cany major line of business measured on direct premiums) of:	-			
		4.21 sales of new 4.22 renewals?	w business?	Yes[] No Yes[] No	
5.1	Has the reporting entity been a party to a merger or consolidation	n during the period	covered by this statement?	Yes[] No	o[X]
5.2	If yes, provide the name of the entity, NAIC Company Code, and any entity that has ceased to exist as a result of the merger or co		(use two letter state abbreviation) for	r	
	1		2	3	
	Name of Entity		NAIC Company Code	State of Domicile	

6.1	Has the report if applicable) s	Y	Yes[] No[X]				
6.2	.2 If yes, give full information:						
7.1	Does any forei	gn (non-United States) person or entity directly or ind	irectly control 10% or more of the reporting	entity?	Y	es[] No[]	x]
7.2	If yes,						
	7.21 7.22	State the percentage of foreign control. State the nationality(s) of the foreign person(s)) or entity(s): or if the entity is a mutual or		_		
		1	2				
		Nationality	Type of Entity				
0.4	la tha annsa	- Later of the Lat	the Federal Process Procedo			(f - 1 N - f)	v.1
8.1	Is the company	y a subsidiary of a bank holding company regulated b	y the Federal Reserve Board?		Y	es[] No[]	X J
8.2	If response to	8.1 is yes, please identify the name of the bank holding					
8.3	Is the compan	y affiliated with one or more banks, thrifts or securities	s firms?		Y	es[]No[]	X 1
		,					,
	affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.						
	1 2 3 4		4	5	6		
		Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC
							020
9.	conduct the ar	me and address of the independent certified public ad inual audit? nson & Matza, LLP, 9500 Arboretum Blvd., Suite 120	-				
10.1	Has the insure	r been granted any exemptions to the prohibited non-	audit services provided by the certified inde	pendent			
	public account	ant requirements as allowed in Section 7H of the Ann substantially similar state law or regulation?			Y	es[] No[]	X]
10.2	If response to	10.1 is yes, provide information related to this exempt	tion:				
10.3		r been granted any exemptions related to the other reion as allowed for in Section 18A of the Model Regula		-	Y	es[]No[]	X]
10.4	If response to	10.3 is yes, provide information related to this exempt	tion:				

10.5	Has the reporting entity established an Audit Committee in compliance with the domiliciary state insurance laws?	Yes [X] No [] N/A []
10.6	If the response to 10.5 is no or n/a, please explain.	
11	What is the name address and affliction (affice/ampleyee of the reporting antity or actively/appeultant	
11.	What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial	
	opinion/certification?	
	James Colin Murphy, FCAS, MAA, 5700 S MoPac Expy, Austin, TX 78749, In-house Actuary	
12.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?	Yes[]No[X]
	12.11 Name of real estate holding company	
	12.11 Name of real estate holding company 12.12 Number of parcels involved	
	12.13 Total book/adjusted carrying value	\$
		*
12.2	If yes, provide explanation:	
40		
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:	
13 1	What changes have been made during the year in the United States manager or the United States trustees of	
10.1	the reporting entity?	
13.2	Does this statement contain all business transacted for the reporting entity through its United States Branch on	
10.2	risks wherever located?	Yes[X] No[]
13.3	Have there been any changes made to any of the trust indentures during the year?	Yes[] No[X]
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?	Yes[] No[] N/A [X]
14.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or	
	persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following	
	standards?	
	a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between	
	personal and professional relationships;	
	b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting	
	entity;	
	c. Compliance with applicable governmental laws, rules, and regulations;	
	 d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and e. Accountability for adherence to the code. 	Yes[X] No[]
	e. Accountability for adherence to the code.	165[X] 140[]
14.11	If the response to 14.1 is no, please explain:	
14 2	Has the code of ethics for senior managers been amended?	Yes[X] No[]
14.2	That the code of ethics for senior managers been amenued:	ו פיס [אן זאט [
14.21	If the response to 14.2 is yes, provide information related to amendment(s).	
	The Ethics policy revision and update was conducted as part of TFPA's standard process for reviewing association policies. The	
	amendments primarily relate to minor reorganizing of the Code of Ethics. The main subject areas updated relate to prohibited relationships, disclosures and acceptance and rejection of gifts. Please contact TFPA for further information.	

3 Have any provisions of the code of eth	ics been waived for any of the sp	pecified officers?	Yes[]No[X]
1 If the response to 14.3 is yes, provide	the nature of any waiver(s).		
Is the reporting entity the beneficiary o	f a Letter of Credit that is unrelate	ed to reinsurance where the issuing or	
confirming bank is not on the SVO Bar		Ç	Yes[]No[X]
2 If the response to 15.1 is yes, indicate	the American Bankers Association	on (ABA) Routing Number and the name of the	
issuing or confirming bank of the Lette	r of Credit and describe the circu	mstances in which the Letter of Credit	
is triggered.			
1	2	3	4
American	_	, and the second	
Bankers			
Association	Issuing or Confirming		
(ABA) Routing Number	Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount
	ROAF	RD OF DIRECTORS	
	DOM		
. Is the purchase or sale of all investmen	nts of the reporting entity passed	upon either by the board of directors or	
a subordinate committee thereof?			Yes[X] No[]
. Does the reporting entity keep a comp	lete permanent record of the prod	ceedings of its board of directors and all	
subordinate committees thereof?			Yes[X] No[]
Has the reporting entity an established	A procedure for disclosure to its b	oard of directors or trustees of any material	
		or responsible employees that is in conflict or	
is likely to conflict with the official dutie		or responsible employees that is in commet of	Yes[X] No[]
		FINANCIAL	
Lies this statement has a present weigh	and having of accounting other the	on Statistans Associating Principles (s.g.	
 Has this statement been prepared using Generally Accepted Accounting Princip 		an Statutory Accounting Principles (e.g.,	Voc. 1 No. (V1
Generally Accepted Accounting Fillion	nes):		Yes[]No[X]
Total amount loaned during the year (i	nclusive of Separate Accounts, e	exclusive of policy loans):	
, ,	·	To directors or other officers	\$
	20.12	To stockholders not officers	\$
	20.13	Trustees, supreme or grand (Fraternal only)	\$
.			
? Total amount of loans outstanding at the		rate Accounts, exclusive of policy loans):	•
		To directors or other officers	\$ \$
		To stockholders not officers	\$
	20.23	Trustees, supreme or grand (Fraternal only)	Φ
Were any assets reported in this state	ment subject to a contractual obli	gation to transfer to another party without the	
liability for such obligation being report	ed in the statement?		Yes[]No[X]
Niger and the second se			
2 If yes, state the amount thereof at Dec	· · · · · · · · · · · · · · · · · · ·	Destat from allows	Φ.
		Rented from others	\$
		Borrowed from others	\$
		Leased from others	\$
	21.24	Outer	Φ
Does this statement include payments	for assessments as described in	the Annual Statement Instructions other than	
guaranty fund or guaranty association			Yes[]No[X]

22.2	If answer is yes:	
	22.21 Amount paid as losses or risk adjustment	\$
	22.22 Amount paid as expenses	\$
	22.23 Other amounts paid	\$
23.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this	
	statement?	Yes[] No[X]
23.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:	\$
	INVESTMENT	
24.01	Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has	
	exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs	
	addressed in 24.03)	Yes[] No[X]
24.02	If no, give full and complete information, relating thereto: TFPA does not hold any stocks, bonds, or other securities. TFPA only holds cash bank accounts and CD's	
24 03	For security lending programs, provide a description of the program including value for collateral and amount of loaned	
24.00	securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this	
	information is also provided)	
	TFPA has no security lending program	
24.04	Does the company's security lending program meet the requirements for a conforming program as outlined in the	
	Risk-Based Capital Instructions?	Yes[] No[] N/A [X]
24.05	If answer to 24.04 is yes, report amount of collateral for conforming programs.	\$
24.06	If answer to 24.04 is no, report amount of collateral for other programs.	\$
24.07	Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the	
	counterparty at the outset of the contract?	Yes[] No[] N/A [X]
24.08	Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?	Yes[] No[] N/A [X]
24.00	boes the reporting entity non-admit when the conateral received from the counterparty rails below 100%:	res[] NO[] N/A[A]
24.09	Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending	
	Agreement (MSLA) to conduct securities lending?	Yes[] No[] N/A [X]
24.10	For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:	
	24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$
	24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$
	24.103 Total payable for securities lending reported on the liability page	\$
25.1	Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not	
	exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to	

Yes[]No[X]

a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03).

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

Subject to repurchase agreements	\$	
Subject to reverse repurchase agreements	\$	
Subject to dollar repurchase agreements	\$	
Subject to reverse dollar repurchase agreements	\$	
Placed under option agreements	\$	
Letter stock or securities restricted as to sale -		
excluding FHLB Capital Stock	\$	
FHLB Capital Stock	\$	
On deposit with states	\$	
On deposit with other regulatory bodies	\$	
Pledged as collateral - excluding collateral		
pledged to an FHLB	\$	
Pledged as collateral to FHLB - including		
assets backing funding agreements	\$	
Other	\$ 12,050,	767
	Subject to reverse repurchase agreements Subject to dollar repurchase agreements Subject to reverse dollar repurchase agreements Placed under option agreements Letter stock or securities restricted as to sale - excluding FHLB Capital Stock FHLB Capital Stock On deposit with states On deposit with other regulatory bodies Pledged as collateral - excluding collateral pledged to an FHLB Pledged as collateral to FHLB - including assets backing funding agreements	Subject to reverse repurchase agreements Subject to dollar repurchase agreements Subject to reverse dollar repurchase agreements Flaced under option agreements Letter stock or securities restricted as to sale - excluding FHLB Capital Stock FHLB Capital Stock On deposit with states On deposit with other regulatory bodies Pledged as collateral - excluding collateral pledged to an FHLB Pledged as collateral to FHLB - including assets backing funding agreements \$ Subject to reverse repurchase agreements \$ Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$ Subject to reverse repurchase agreements \$ Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$ Pledged as collateral - excluding collateral pledged to an FHLB Pledged as collateral to FHLB - including assets backing funding agreements

25.3 For category (25.26) provide the following:

Ī	1	2	3
L	Nature of Restriction	Description	Amount
Ī			
İ			
1			

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes[]No[X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.

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

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes[]No[X]

Yes[]No[X]

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

28. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial

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

or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

	1	2
	Name of Custodian(s)	Custodian's Address
ł		

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

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

 $28.03 \ \ \text{Have there been any changes, including name changes, in the custodian} (s) \ \text{identified in } 28.01 \ \text{during the current year}?$

Yes[]No[X]

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

Ī	1	2	3	4
	Old Custodian	New Custodian	Date of Change	Reason
Ī				
İ				
L				

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

1	2
Name Firm or Individual	Affiliation
John Polak	l .
Pete Gise	ı

28.059 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's assets?

Yes[]No[X]

28.059 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets?

Yes[]No[X]

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

1	2	3	4	5
	Central Registration	Legal Entity		Investment Management
Name Firm or Individual	Depository Number	Identifier (LEI) Registered With		Agreement (IMA) Filed

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D – Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes[]No[X]

29.2 If yes, complete the following schedule:

1	2	3
CUSIP # Name of Mutual Fund		Book/Adjusted Carrying Value
	<u> </u>	
29.2999 TOTAL		

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

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

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

	1	2	3	
			Excess of Statement	
			over Fair Value (-),	
	Statement (Admitted)		or Fair Value over	
	Value	Fair Value	Statement (+)	
30.1 Bonds				
30.2 Preferred stocks				
30.3 Totals				

	30.2	Preferred stocks					
	30.3	Totals					
30.4			utilized in determining the fair values: onds, long-term bonds or preferred stocks.				
31.1	Was th	ne rate used to calculate fa	ir value determined by a broker or custodian for a	any of the securities	in Schedule D?	Yes[]No[X]	
31.2	If the a	answer to 31.1 is yes, does	the reporting entity have a copy of the broker's of	or custodian's			
	pricing	policy (hard copy or electr	ronic copy) for all brokers or custodians used as	a pricing source?		Yes[]No[X]	
			be the reporting entity's process for determining of fair value for Schedule D:	a reliable pricing			
	Have a		f the Purposes and Procedures Manual of the NA	NC Investment Ana	lysis Office been	Yes[]No[X]	
32.2		ist exceptions: FPA had nothing to file with	the SVO				
			ОТН	IER			
33.1	Amour	nt of payments to trade ass	ociations, service organizations and statistical or	Rating Bureaus, if	any?	\$	163,805
33.2	List the	e name of the organization	and the amount paid if any such payment repres	ented 25% or more	of the		
	total pa		ons, service organizations and statistical or rating				
			1		2		
			Name		Amount Paid		
		Insurance Services	Office Inc	\$		3,683	
				\$			
34.1	Amour	nt of payments for legal exp	penses, if any?			\$	223,706
34.2			amount paid if any such payment represented 25 ing the period covered by this statement.	5% or more of the to	otal		
			1		2		
			Name		Amount Paid		
		Sneed, Vine & Perry		\$	76,	292	

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments

of government, if any?

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

1	2
Name	Amount Paid
	\$
	\$
	\$

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any direct	ct Medicare Sup	plement Insurance in force?		Yes [] No [X]
1.2 If yes, indicate premium earned on U.S	. business only.			\$
1.3 What portion of Item (1.2) is not reporte 1.31 Reason for excluding	ed on the Medica	re Supplement Insurance Experienc	e Exhibit?	\$
1.4 Indicate amount of earned premium attr 1.5 Indicate total incurred claims on all Med			d in Item (1.2) above.	\$ \$
1.6 Individual policies:	Most	current three years:		
	1.61	Total premium earned		\$
	1.62 1.63	Total incurred claims Number of covered lives		\$
	All yea	ars prior to most current three years	:	
	1.64	Total premium earned		\$
	1.65	Total incurred claims		\$
1.7 Group policies:	1.66	Number of covered lives		
The Group politice.	Most	current three years:		
	1.71	Total premium earned		\$
	1.72	Total incurred claims		\$
	1.73	Number of covered lives		
	•	ars prior to most current three years		¢
	1.74 1.75	Total premium earned Total incurred claims		\$
	1.76	Number of covered lives		*
2. Health Test:			1 2	
	0.4	B : N :	Current Year Prior Year	
	2.1 2.2	Premium Numerator Premium Denominator	\$\$ \$\$ \$84,401,063 \$90,952,338	
	2.2	Premium Ratio (2.1 / 2.2)	ΨΨΨΨ	
	2.4	Reserve Numerator	\$	
	2.5	Reserve Denominator	\$ 62,855,998 \$ 70,512,694	
	2.6	Reserve Ratio (2.4 / 2.5)		
3.1 Does the reporting entity issue both par	rticipating and no	on-participating policies?		Yes[]No[X]
3.2 If yes, state the amount of calendar year	ar premiums writt	en on:		
	3.21	Participating policies		\$
	3.22	Non-participating policies		\$
4. For Mutual reporting entities and Recipi	rocal Exchanges	only:		
4.1 Does the reporting entity issue assessa	ble policies?			Yes[]No[X]
4.2 Does the reporting entity issue non-ass	essable policies	?		Yes[]No[X]
4.3 If assessable policies are issued, what	is the extent of the	ne contingent liability of the policyho	lders?	%
4.4 Total amount of assessments paid or or				\$
5. For Reciprocal Exchanges Only:		0 7	3	·
5.1 Does the exchange appoint local agent	s?			Yes[]No[X]
5.2 If yes, is the commission paid:	.			100[]110[X]
3.2 If yes, is the confinission paid.	F 04	Out of Attornay to the foot common	a. E. a. a.	V [1N - [V 1N /A [1
	5.21	Out of Attorney's-in-fact compensa		Yes [] No [X] N/A []
	5.22	As a direct expense of the exchan	ge	Yes[]No[X]N/A[]
5.3 What expenses of the Exchange are no	•	•		
5.4 Has any Attorney-in-fact compensation	, contingent on fo	ulfillment of certain conditions, been	deferred?	Yes[]No[X]
5.5 If yes, give full information				
6.1 What provision has this reporting entity compensation contract issued without li	made to protect	itself from an excessive loss in the		
6.1 What provision has this reporting entity	made to protect	itself from an excessive loss in the		

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

6.2	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process: TFPA estimates its probably maximum loss using the AIR Touchstone and RMS RiskLink software models, modeling the risk of Hurricane and other wind hazards. The PML is comprised of residental property exposure in and around the Houston, Texas greater metropolitan area.	
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss? The XOL agreement provides the Assn. with two layers of coverage and one underlying layer totaling \$490M xs of \$10M. The \$30M xs \$10M underlying layer does not respond until the second event. The Assn. also has a RPP reinsurance coverage with a limit of \$36M to provide recoveries of reinstatement premium due the reinsurers incurred in conjunction with the first two layers of reinsurance coverage.	
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	Yes [X] No []
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss	
7.1	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?	Yes[]No[X]
7.2	If yes, indicate the number of reinsurance contracts containing such provisions.	
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes[]No[X]
8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes[]No[X]
8.2	If yes, give full information	
9.11	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results: (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term; (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; (c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party; (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or	
	(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.	Yes [X] No []
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where: (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.	Yes [X] No []
9.3	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income; (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.	
9.4	Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either: (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	Yes [] No [X]
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.	
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:	Vec C. INC. EVI
	(a) The entity does not utilize reinsurance; or,(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation	Yes[]No[X]
	supplement; or (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an	Yes[]No[X]
	attestation supplement.	Yes[]No[X]

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

			assumed risks from another entity would have been requ	•	-		erve equal	Yes []No[]N/A[X]
		e reporting entity g give full informatio	uaranteed policies issued by n	any other entity and no	w in force:			Yes [] No [X]
			orded accrued retrospective liabilities recorded for:	premiums on insurance	contracts on Line 15.3	of the asset schedule, F	Page 2, state the		
	amoun	t or corresponding		11 Unpaid losses				\$	
			12.	12 Unpaid underwriting	expenses (including lo	ss adjustment expense	s)	\$	
12.2	Of the a	amount on Line 15	5.3, Page 2, state the amoun	t that is secured by lette	rs of credit, collateral a	nd other funds?		\$	
			erwrites commercial insuran s covering unpaid premiums		s' compensation, are p	remium notes or promis	sory notes	Yes []No[]N/A[X]
12.4	If yes, p	provide the range	of interest rates charged und	ler such notes during the	e period covered by this	statement:			
		_		41 From 42 To					% %
	promiss	sory notes taken b	lateral and other funds recei by a reporting entity or to sectible features of commercial p	ure any of the reporting				Yes [] No [X]
12.6	If yes, s	state the amount t	hereof at December 31 of cu						
				61 Letters of Credit62 Collateral and other	funds			\$ \$	
12 1	Lorgon	t not aggragate on	nount insured in any one risk	(ovaludina workora' oor	mnonaction):			¢	1,900,000
	-							Ψ	1,300,000
		ny reinsurance co tement provision?	ntract considered in the calc	ulation of this amount in	clude an aggregate limi	t of recovery without als	so including a	Yes [] No [X]
			surance contracts (excluding igatory contracts) considered			ing facultative programs	s, automatic		
14.1	Is the c	ompany a cedant	in a multiple cedant reinsura	nce contract?				Yes [] No [X]
14.2	If yes, p	olease describe th	e method of allocating and re	ecording reinsurance an	nong the cedants:				
14.3	If the a		es, are the methods describe	ed in item 14.2 entirely o	ontained in the respecti	ve multiple cedant reins	surance	Yes [] No []
14 4	If the a	nswer to 14 3 is no	o, are all the methods descri	hed in 14.2 entirely cont	ained in written agreem	ents?		Yes [] No []
					aa ag. aa				1
14.5	if the a	nswer to 14.4 is no	o, piease expiain:						
15 1	Has the	reporting entity of	uaranteed any financed prei	mium accounts?				1 20V] No [X]
				mum accounts:				103 []140[X]
15.2	If yes, (give full informatio	n						
16 1	Doop th	o roporting optitu	write any warranty hydinaca					1 coV	1 No (V 1
			write any warranty business ing information for each of the		ranty coverage:			168 [] No [X]
			1	2	3	4	5		
			Direct Losses Incurred	Direct Losses Unpaid	Direct Written Premium	Direct Premium Unearned	Direct Premium Earned		
	16.11	Home	\$	\$	\$	\$ \$			
	16.12 16.13	Products Automobile	φ	\$	φ \$	\$ \$) }		
	16.14	Other*	\$	\$	\$	\$			
	* Disc	lose type of cover	age:						

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

17.1	Does the reporting entity include amounts recoverable o Schedule F $-$ Part 5.	n unauthorized reinsurance in Schedule F – Part 3 that it excludes from	Yes[]No[X]
	Incurred but not reported losses on contracts in force pri Schedule F $-$ Part 5. Provide the following information for	or to July 1, 1984, and not subsequently renewed are exempt from inclusion in or this exemption:	
	17.12 17.13 17.14	Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5 Unfunded portion of Interrogatory 17.11 Paid losses and loss adjustment expenses portion of Interrogatory 17.11 Case reserves portion of Interrogatory 17.11 Incurred but not reported portion of Interrogatory 17.11	\$\$ \$\$ \$\$
	17.16	Unearned premium portion of Interrogatory 17.11	\$
	17.17	Contingent commission portion of Interrogatory 17.11	\$
	· ·	cluded in Schedule F – Part 3 and excluded from Schedule F – Part 5, not included about Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5	ve.
	17.19	Unfunded portion of Interrogatory 17.18	\$ \$
	17.20	Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$
		Case reserves portion of Interrogatory 17.18	\$
		Incurred but not reported portion of Interrogatory 17.18 Unearned premium portion of Interrogatory 17.18	\$
		Contingent commission portion of Interrogatory 17.18	\$
18.1	Do you act as a custodian for health savings accounts?		Yes[]No[X]
18.2	If yes, please provide the amount of custodial funds held	d as of the reporting date.	\$
18.3	Do you act as an administrator for health savings account	nts?	Yes[]No[X]
18.4	If yes, please provide the balance of the funds adminste	red as of the reporting date.	\$

FIVE - YEAR HISTORICAL DATA

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

		1	2	3	4	5
		2016	2015	2014	2013	2012
	Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1.						
2.	Descriptions (Lines 4.0.0.40.04.0.00)	39,483,156	40,384,395	40,272,807	36,695,273	30,180,990
3.		83,002,947	92,494,715	92,932,744	85,987,402	72,202,203
4.			32,737,713	32,332,744	03,301,402	12,202,203
5.	Mannanartianal rainauranae linea (Linea 21, 20, 9, 22)					
	Total /l ino 25)	122,486,103	132,879,110	133,205,551	122,682,675	102,383,193
0.	Net Premiums Written (Page 8, Part 1B, Col. 6)	122,400,103	132,073,110	155,205,551	122,002,013	102,303,133
7	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
l	Preparty lines (Lines 1, 2, 0, 12, 21, 9, 26)	27,115,474	26,996,942	27,914,356	25,118,219	19,321,664
9.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	53,271,099	61,257,324	64,096,359	58,974,276	46,863,778
10.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	33,271,033	01,201,024	04,030,333	50,574,270	40,000,770
11.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
	T-t-1 (1 in - 25)	80,386,573	88,254,266	92,010,715	84,092,495	66,185,442
12.	Statement of Income (Page 4)	00,500,575	00,204,200	32,010,713	04,032,433	00,100,442
12	, ,	(20,025,669)	(2.216.002)	20,276,780	13,294,960	0 001 220
14.	Net underwriting gain (loss) (Line 8) Net investment gain (loss) (Line 11)	53,446	(2,316,083)	(74,392)	(149,789)	8,081,339
15.	T-1-1-14	(414,081)	(36,776) 498,621		84,872	1
16.	Distributed to a distributed day		490,021	(114,454)	04,072	(590,018)
l .	Federal and foreign income taxes incurred (Line 19)	(20.296.204)	(1.054.220)	20 007 024	12 220 042	7 254 160
10.	Net income (Line 20)	(20,386,304)	(1,854,238)	20,087,934	13,230,043	7,354,168
40	Balance Sheet Lines (Pages 2 and 3)	72 000 700	400 000 000	402 044 500	00 044 504	FC 707 202
19.	3,	73,296,769	102,690,033	103,014,582	80,944,521	56,707,383
20.	00.4 In severe of collection (Line 45.4)	0.005.444	0.007.574	0.050.700	CO 047	54.040
	20.1 In course of collection (Line 15.1)	2,205,441	2,607,574	2,358,708	60,017	51,812
	20.2 Deferred and not yet due (Line 15.2)	10,444,596	11,946,240	12,711,495	15,771,970	14,966,753
	20.3 Accrued retrospective premiums (Line 15.3)	00 500 400	07.740.004	07.000.540	04.000.000	00.400.470
	Total liabilities excluding protected cell business (Page 3, Line 26)	88,500,196	97,713,094	97,036,512	94,366,260	82,429,478
22.	Losses (Page 3, Line 1)	18,035,329	20,409,877	18,892,674	21,833,930	21,132,145
23.	Loss adjustment expenses (Page 3, Line 3)	5,595,388	6,863,046	6,584,660	4,045,359	4,161,216
24.	3.7,	39,225,281	43,239,771	45,937,843	43,332,325	34,582,801
i	Capital paid up (Page 3, Lines 30 & 31)				(40, 404, 700)	(05.700.005)
26.	3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	(15,203,132)	4,976,939	5,978,071	(13,421,739)	(25,722,095)
07	Cash Flow (Page 5)	(07.000.000)	540.005	00 004 045	00 000 544	0.004.070
27.	Net cash from operations (Line 11)	(27,396,829)	519,295	22,984,845	23,336,541	6,624,970
00	Risk-Based Capital Analysis	(45,000,400)	4.070.000	5 0 7 0 0 7 4	(40,404,700)	(05.700.005)
28.		(15,203,132)	1	5,978,071	(13,421,739)	1
29.		11,407,101	9,075,506	8,393,934	7,611,602	7,027,358
	Percentage Distribution of Cash, Cash Equivalents and Invested Assets					
	(Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0				•	
30.						
31.	Stocks (Lines 2.1 & 2.2)					
32.	Mortgage loans on real estate (Lines 3.1 and 3.2)					
	Real estate (Lines 4.1, 4.2 & 4.3)					
34.	* *************************************		100.0	100.0	100.0	100.0
35.						
36.	Derivatives (Line 7)					
37.						
38.						
39.	, , , , , , , , , , , , , , , , , , , ,					
40.	Aggregate write-ins for invested assets (Line 11)		400.0	400.0	400.0	100
41.	· · · · · · · · · · · · · · · · · · ·	100.0	100.0	100.0	100.0	100.0
40	Investments in Parent, Subsidiaries and Affiliates					
	Affiliated bonds, (Sch. D, Summary, Line 12, Col. 1)					
43.						
44.	Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1)					
45.	0.1.5.1. 40.				-	}
40	Col. 5, Line 10)					
46.	All all (CC) - 1					
	All other affiliated					
48.						
49.	Total investment in parent included in Lines 42 to 47 above					
50.						
	regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)					

FIVE - YEAR HISTORICAL DATA

(Continued)

		1	2	3	4	5
		2016	2015	2014	2013	2012
	Capital and Surplus Accounts (Page 4)					
51.	Net unrealized capital gains (losses) (Line 24)					
52. 53.	Dividends to stockholders (Line 35) Change in surplus as regards policyholders for the year (Line 38)	(20,180,071)	(1,001,132)	19,399,812	12,300,354	8,137,974
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
E.1						
54. 55.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	25,460,895	17,726,018	10,643,562	9,912,215	9,665,807
56.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	38,631,523	31,596,126	23,147,365	19,293,924	21,498,774
57.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
58.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59.	Total (Line 35)	64,092,418	49,322,144	33,790,927	29,206,139	31,164,58
	Net Losses Paid (Page 9, Part 2, Col. 4)					
	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)		47.700.040	40.040.500		0.005.00
61. 62.	Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	25,460,895 38,631,523	17,726,018 31,596,126	10,643,562 23,147,365	9,912,215	9,665,80
63.	All attacklings (Lines C 40 42 44 45 02 04 00 00 20 8 24)	30,031,323	31,390,120	23,147,303	19,293,924	21,490,77
64.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65.	Total (Line 35)	64,092,418	49,322,144	33,790,927	29,206,139	31,164,58
	Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66.	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100
67.	Losses incurred (Line 2)	73.1	55.9	34.5	39.7	50.
68.	Loss expenses incurred (Line 3)	19.3	19.5	15.9	12.6	(0.
69.	Other underwriting expenses incurred (Line 4)	31.3	27.1	26.9	30.0	35.
70.	Net underwriting gain (loss) (Line 8)	(23.7)	(2.5)	22.7	17.6	14.
	Other Percentages					
71.	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15	20.4	07.4		00.0	24
72	divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0 Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3	33.4	27.4	26.3	26.8	31.
12.	divided by Page 4, Line 1 x 100.0)	92.4	75.4	50.4	52.3	50.
73.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35					
	divided by Page 3, Line 37, Col. 1 x 100.0)	(528.8)	1773.3	1539.1	(626.5)	(257.
	One Year Loss Development (000 omitted)					
74.	Development in estimated losses and loss expenses incurred prior to current					
	year (Schedule P, Part 2-Summary, Line 12, Col. 11)	(1,092)	(3,457)	(8,125)	(7,957)	(7,55
75.	Percent of development of losses and loss expenses incurred to policyholders'					
	surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)	(21.9)	(57.8)	60.5	30.9	22.
	Two Year Loss Development (000 omitted)					
76	Development in estimated losses and loss expenses incurred 2 years before					
، ن	the current year and prior year (Schedule P, Part 2-Summary, Line 12,					
	Col. 12)	(5,598)	(8,883)	(8,846)	(9,407)	7,99
77.	Percent of development of losses and loss expenses incurred to reported					
	policyholders' surplus of second prior year end (Line 76 above divided					
	by Page 4, Line 21, Col. 2 x 100.0)	(93.6)	66.2	34.4	27.8	(45.

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

No [X]



EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)
BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2016

AIC Group Code 4766		114 1 1 5 1	POSINESS IN	THE STATE OF TEX			_	_		NAIC Company Code		
	Gross Premiums, Including Policy a Return Premiums and Premium		3	4	5	б	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
l. Fire	6,194,368	5,960,963		3,104,490	4,103,343	3,734,804	953,764				643,162	122,3
.1 Allied Lines	33,288,788	33,924,472		16,285,124	21,357,552	21,046,474	4,555,512				3,456,379	657,6
.2 Multiple Peril Crop .3 Federal Flood												
.4 Private Crop												
2.5 Private Flood												
Farmowners Multiple Peril												
Homeowners Multiple Peril	83,002,947	87,877,426		40,885,410	38,631,523	36,936,593	12,526,053			1	8,618,204	1,639,7
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)								l	I			
Mortgage Guaranty												
8. Ocean Marine												
Inland Marine Financial Guaranty												
Initial Guaranty Medical Professional Liability												
12. Earthquake												
13. Group Accident and Health (b)												
14. Credit A & H (Group and Individual)										1		
5.1 Collectively Renewable A & H (b)										1		
5.2 Non-Cancelable A & H (b)									I			
5.3 Guaranteed Renewable A & H (b)												
5.4 Non-Renewable for Stated Reasons Only (b)												
5.5 Other Accident Only 5.6 Medicare Title XVIII Exempt from State Taxes or Fees												
15.6 Medicare Title XVIII Exempt from State Taxes of Fees												
15.8 Federal Employees Health Benefits Plan Premium (b)												
16. Workers' Compensation												
7.1 Other Liability - Occurrence										1		
7.2 Other Liability - Claims-Made									l			
7.3 Excess Workers' Compensation												
18. Products Liability												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
9.2 Other Private Passenger Auto Liability 9.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
1.2 Commercial Auto Physical Damage										1		
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery 28. Credit												
30. Warranty												
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTALS (a)	122,486,103	127,762,861		60,275,024	64,092,418	61,717,871	18,035,329				12,717,745	2,419,7
DETAILS OF WRITE-INS												
401.	[<u></u> <u> </u>	<u></u>				[1		
402.								1				
403.				ION								
498. Summary of remaining write-ins for Line 34 from overflow page									1			
499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 360,519

(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 .

NAIC Group Code

4766

1154320164305910

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

BUSINESS IN THE STATE OF TOTAL DURING THE YEAR 2016

NAIC Company Code

Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken Direct Dividends Paid Direct Losses Direct Defense Direct Defense Direct Defense Direct Direct or Credited to Unearned Paid and Cost and Cost and Cost Taxes. Commissions Premiums Premiums Policyholders on Premium (deductina Direct Losses Direct Losses Containment Containment Containment and Brokerage Licenses Written Earned Direct Business Reserves salvage) Incurred Unpaid Expense Paid Expense Incurred Expense Unpaid Expenses and Fees 3,104,490 3,734,804 5,960,963 4,103,343 2.1 Allied lines 33,288,788 33,924,472 16,285,124 21,357,552 21,046,474 4.555.512 3,456,379 657,618 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 5.1 Commercial Multiple Peril (Non-Liability Portion) 5.2 Commercial Multiple Peril (Liability Portion) Mortgage Guaranty 8. Ocean Marine 9. Inland Marine 10. Financial Guaranty 11. Medical Professional Liability 12. Earthquake 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 (b) 16. Workers' Compensation 17.1 Other Liability - Occurrence 17.2 Other Liability - Claims-Made 17.3 Excess Workers' Compensation 18. Products Liability 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 Burglary and Theft 27. Boiler and Machinery 28. Credit 30. Warranty 34. Aggregate Write-Ins for Other Lines of Business 35. TOTALS (a) 122,486,103 127,762,861 60,275,024 64,092,418 61,717,871 18,035,329 2,419,706 **DETAILS OF WRITE-INS** 3402. 3403. Summary of remaining write-ins for Line 34 from overflow page 3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)

(a) Finance and service charges not included in Lines 1 to 35 \$ 360,51

(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.

NONE Schedule F - Part 1 Assumed Reinsurance

NONE Schedule F - Part 2 Premium Portfolio

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

1	2	3	4	5	6				Reins	surance Recovera	able On				Reinsuran	ce Pavable	18	19
· ·	-					7	8	9	10	11	12	13	14	15	16	17	.0	
																	Net Amount	Funds Held
																	Recoverable	by
																Other	From	Company
	NAIC	Name			Reinsurance			Known	Known	IBNR	IBNR			Cols. 7	Ceded	Amounts	Reinsurers	Under
ID	Company	of	Domiciliary		Premiums	Paid	Paid	Case Loss	Case LAE	Loss	LAE	Unearned	Contingent	through 14	Balances	Due to	Cols. 15 -	Reinsurance
Number	Code	Reinsurer	Jurisdiction	Special Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	Commissions	Totals	Payable	Reinsurers	[16 + 17]	Treaties
	1													1				
22-2005057	26921	Everest Reinsurance Company	DE		2,777					1		1,383	1	1,383	1,260		123	1
47-0698507	23680	Odyssey Reinsurance Company	СТ		1,110					1		555	1	555	505		50	1
13-5616275	19453	Transatlantic Reinsurance Company	NY		1,370		[[1		685	1	685	623		62	
	1																	
0999998	Total Authorized	- Other U.S. Unaffiliated Insurers (Under \$100	0,000)															
0999999	T. I.A. II I				5.257							0.000		2.623	0.000		235	
0999999	Total Authorized	- Other U.S. Unaffiliated Insurers			5,257							2,623		2,623	2,388		235	
AA-3194168		Aspen Bermuda Ltd.	BMU		904							452		452				
AA-3194139	0	AXIS Specialty Limited	BMU		2,323							1,162		1,162	1,058		104	
AA-3194122	0	DaVinci Reins thru Renaissance U/W	BMU		2,323							452		452	/11		/1	
AA-3194130	0	Endurance Speciality Ins Ltd.	BMU		1 710							855		855	776		70	
AA-1340125	0	Hannover Rück SE (Pillar business)	DEU		921							461		461	413		48	
AA-1126033	0	Lloyd's Underwriter Syndicate No. 0033 HIS			652							326		326	297		29	
AA-1126623	0	Lloyd's Underwriter Syndicate No. 0623 AFB			86							43		43	39		4	
AA-1127183	0	Lloyd's Underwriter Syndicate No. 1183 TAL			362							181		181	165		16	
AA-1120085	0	Lloyd's Underwriter Syndicate No. 1274 AUL			25							13		13	11			1
AA-1127414	0	Lloyd's Underwriter Syndicate No. 1414 ASC			1 031							515		515	469		46	1
AA-1120102	0	Lloyd's Underwriter Syndicate No. 1458 RNF			842							421		421	383		38	1
AA-1120083	0	Lloyd's Underwriter Syndicate No. 1910 ARE			2.331							1,166		1.166	1.054		112	1
AA-1120084	0	Lloyd's Underwriter Syndicate No. 1955 BAR			280							140		140	128		12	1
AA-1128001	0	Lloyd's Underwriter Syndicate No. 2001 AML			1.793							897		897	813		84	1
AA-1120071	0	Lloyd's Underwriter Syndicate No. 2007 NVA			274						1	137		137	124		13	1
AA-1128010	0	Lloyd's Underwriter Syndicate No. 2010 MM			387						1	193		193	176		17	1
AA-1128623	0	Lloyd's Underwriter Syndicate No. 2623 AFB			391							196		196	178		18	
AA-1128791	0	Lloyd's Underwriter Syndicate No. 2791 MAF			722							361		361	329		32	1
AA-1120075	0	Lloyd's Underwriter Syndicate No. 4020 ARK			336							168		168	152		16	1
AA-3190829	0	Markel Bermuda Limited	BMU		723							362		362	329		33	
AA-3190686	0	Partner Reinsurance Company Ltd.	BMU		1.716						1	858		858	781		77	1

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		2		3
	Name of Reinsurer		Commission Rate		Ceded Premium
1)					
2)					
3)		<u> </u>			
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	2	3	4
Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
1) Allianz Risk Transfer (Bermuda) Ltd. (Nephila busi	1,418	2,836	Yes [] No [X]
2) AXIS Specialty Limited	1,162	2,323	Yes[]No[X]
3) Chubb Tempest Reinsurance Ltd. Formerly ACE T	1,345_	2,690	Yes[]No[X]
4) Everest Reinsurance Company	1,387_	2,774	Yes[]No[X]
5) Lloyd's Underwriter Syndicate No. 1910 ARE	1,166	2,331	Yes [] No [X]

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

1	2	3	4	5	6				Reins	surance Recovera	able On				Reinsurar	nce Payable	18	19
						7	8	9	10	11	12	13	14	15	16	17		
																	Net Amount	Funds Held
																	Recoverable	by
																Other	From	Company
	NAIC	Name			Reinsurance			Known	Known	IBNR	IBNR			Cols. 7	Ceded	Amounts	Reinsurers	Under
l ID	Company	of	Domiciliary		Premiums	Paid	Paid	Case Loss	Case LAE	Loss	LAE	Unearned	Contingent	through 14	Balances	Due to	Cols. 15 –	Reinsurance
Number	Code	Reinsurer	Jurisdiction	Special Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	Commissions	Totals	Payable	Reinsurers	[16 + 17]	Treaties
AA-3190339	0	Renaissance Reinsurance Ltd.	. BMU		2,078							1,039		1,039	946		93	
AA-3190870	0	Validus Reinsurance, Ltd.	. BMU		1,898							949		949	864		85	
1299998	Total Authorized	- Other Non-U.S. Insurers# (Under \$100,000)																
1299999	Total Authorized	- Other Non-U.S. Insurers#			22.688							11,347		11,347	10,307		1.040	
					,,,,,,							,		,	,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1399999	Total Authorized	- Total Authorized	1		27,945							13,970		13,970	12,695		1,275	
AA-3194158	0	Allianz Risk Transfer (Bermuda) Ltd. (Nephila	.		2,836							1.418		1.418	1.288		130	
AA-3190978	0	AlphaCat Reinsurance Ltd.	BMU		311							156		156	139		17	
AA-1460019	0	Amlin Bermuda, a branch of Amlin AG, Hamil			1,040							520		520	473		47	
AA-3194126	0	Arch Reinsurance, Ltd.	BMU		235							118		118	107		11	
AA-3190005	0	Ascot Underwriting (Bermuda) Ltd o/b/o Amer			748							374		374	341		33	
AA-3190770	0	Chubb Tempest Reinsurance Ltd. Formerly A		1	2,690			1	1	1		1,345		1,345	1,223		122	
AA-3191289	0	Fidelis Insurance Bermuda Limited	BMU		967			1	1			484		484	440		44	
AA-3190875	0	Hiscox Insurance Company Ltd (Bermuda)	BMU		1,947			1				974		974	884		90	
AA-5320039	0	Pioneer Underwriting Ltd. obo Peak Reinsura	HKG		316			1				158		158	144		14	
AA-5324100	0	Pioneer Underwriting Ltd. obo Taiping Reinsu	HKG	1	217		1	1			1	108		108	99		9	
AA-1320031	0	SCOR Global P&C S.E Lirma S7300	FRA		1,898			1				949		949	864		85	
AA-1460023	0	Tokio Millennium Re AG, Bermuda Branch (M	/ CHE		189			1				95		95	84		11	
AA-3191315	0	XL Bermuda Ltd Formerly XL Re Ltd	BMU		761							381		381	346		35	
2599998	Total Unauthorize	 ed - Other non-U.S. Insurers# (under \$100,000))															
	- Star Gridation2	Care non c.c. moureren (under \$100,000																
2599999	Total Unauthoriz	ed - Other non-U.S. Insurers#			14,155							7,080		7,080	6,432		648	
2699999	Total Unauthorize	 ed - Total Unauthorized			14,155							7,080		7,080	6,432		648	
					,							,,,,,		,,,,,	-, -			
4099999	Total Authorized	Unauthorized and Certified			42,100							21,050		21,050	19,127		1,923	

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	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1)			
2)			
3)			
4)			
5)			<u> </u>

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	2	3	4
Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
1) Allianz Risk Transfer (Bermuda) Ltd. (Nephila busi	1,418	2,836	Yes[]No[X]
2) AXIS Specialty Limited	1,162	2,323	Yes [] No [X]
Chubb Tempest Reinsurance Ltd. Formerly ACE T	1,345_	2,690	Yes [] No [X]
4) Everest Reinsurance Company	1,387	2,774	Yes [] No [X]
5) Lloyd's Underwriter Syndicate No. 1910 ARE	1,166	2,331	Yes[]No[X]

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

1	2	3	4	5	6				Reins	surance Recovera	able On				Reinsurar	nce Payable	18	19
		-				7	8	9	10	11	12	13	14	15	16	17	1	
																Other	Net Amount Recoverable From	Funds Held by Company
	NAIC	Name			Reinsurance			Known	Known	IBNR	IBNR			Cols. 7	Ceded	Amounts	Reinsurers	Under
ID	Company	of	Domiciliary		Premiums	Paid	Paid	Case Loss	Case LAE	Loss	LAE	Unearned	Contingent	through 14	Balances	Due to	Cols. 15 –	Reinsurance
Number	Code	Reinsurer	Jurisdiction	Special Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	Commissions	Totals	Payable	Reinsurers	[16 + 17]	Treaties
				1	l		1	1	1	1	1	1	l	1	1	1	1	1
							1			1	1	1		1	1	1	1	1
9999999	Totals	•	•	•	42,100							21,050		21,050	19,127		1,923	

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 2
Name of Reinsurer Commission Rate

3	
Ceded Premium	
	_
	_
	_
	3 Ceded Premium

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	2	3	4
Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
1) Allianz Risk Transfer (Bermuda) Ltd. (Nephila busi	1,418	2,836	Yes [] No [X]
2) AXIS Specialty Limited	1,162	2,323	Yes[]No[X]
3) Chubb Tempest Reinsurance Ltd. Formerly ACE T	1,345	2,690	Yes[]No[X]
4) Everest Reinsurance Company	1,387	2,774	Yes[]No[X]
5) Lloyd's Underwriter Syndicate No. 1910 ARE	1,166	2,331	Yes[]No[X]

NONE Schedule F - Part 4 Aging of Ceded Reinsurance

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
	_	· ·		· ·		•	· ·					Total						
												Collateral and		Recoverable		20% of		Total Provision for
					Reinsurance							Offsets Allowed	Provision for	Paid Losses		Amount		Reinsurance Ceded
					Recoverable	Funds Held		Issuing or				(Cols. 7 + 8 + 10	Unauthorized	_& LAE		in	Provision for	to Unauthorized
	NAIC					By Company		Confirming		"	Trust Funds	+ 11 + 12 but	Reinsurance	Expenses	00.0/	Dispute	Overdue	Reinsurers
l ID	Com-	Name of	Domiciliary	Cassial	Schedule F	Under	l attara of	Bank	Ceded Balances	Miscellaneou Balances	and Other Allowed	not in	(Col. 6	Over 90 Days past Due not		Included	Reinsurance (Col. 16 plus	(Col. 14 plus Col. 18 but not in
Number	pany Code	Reinsurer	Jurisdiction	Special Code	Part 3, Col. 15	Reinsurance Treaties	Letters of Credit	Reference Number (a)	Payable	Payable	Offset Items	Excess of Col. 6)	minus Col. 13)	in Dispute	Amount in Col. 15	in Column 6	Col. 16 plus	Excess of Col. 6)
Number	Code	Reliisulei	Julisuiction	Code	COI. 13	Heaties	Credit	Number (a)	rayable	rayable	Oliset itellis	Coi. 0)	COI. 13)	III Dispute	COI. 13	Columnio	COI 17)	LXCess of Col. 0)
AA-3194158	0	Allianz Risk Transfer (Bermuda) Ltd. (Nephila	BMU		1,418				1,288			1,288	130			1		130
AA-3190978		AlphaCat Reinsurance Ltd.	BMU		156			1	139	1	3,216	156				1	1	
AA-1460019	0	Amlin Bermuda, a branch of Amlin AG, Hamilt	CHE		520			1	473	1	1	473	47			1	I	47
AA-3194126		Arch Reinsurance, Ltd.	BMU		118			1	107			107	11					11
AA-3190005		Ascot Underwriting (Bermuda) Ltd o/b/o Amer	BMU		374				341			341	33					33
AA-3190770		Chubb Tempest Reinsurance Ltd. Formerly A	BMU		1,345				1,223			1,223	122					122
AA-3191289		Fidelis Insurance Bermuda Limited	BMU		484				440			440	44					44
AA-3190875		Hiscox Insurance Company Ltd (Bermuda)	BMU		974				884			884	90					90
AA-5320039		Pioneer Underwriting Ltd. obo Peak Reinsura	HKG		158				144			144	14					14
AA-5324100 AA-1320031	0	Pioneer Underwriting Ltd. obo Taiping Reinsu SCOR Global P&C S.E Lirma S7300	HKG FRA		949				864			864	9					9
AA-1460023		Tokio Millennium Re AG, Bermuda Branch (M			94				85			85						
AA-3191315		XL Bermuda Ltd Formerly XL Re Ltd	BMU		381				346			346	35					35
7.4.1.0.10.10.10.		7.E Somiada Edi Tomony 7.E.T.o Edi																
1299999	Total Other	er Non-U.S. Insurers #			7,079			XXX	6,433		3,216	6,450	629					629
1399999	Total Affili	iates and Others			7.079			XXX	6.433		3,216	6.450	629					629
1000000	Total 7 till	ato and others	T		1,010			, AAA	0,100		0,210	0,400	023					023
																1		
								1		1						1	1	
	I							I	l	[I					I	I	
								1										
1																	1	
								1										
								1										
								1									1	
9999999	Totals				7,079			XXX	6,433		3,216	6,450	629					629

Amounts in dispute totaling \$
 Amounts in dispute totaling \$

⁰ are included in Column 6.

⁰ are excluded from Column 15.

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
			NONE	

NONE Schedule F - Part 6 - Section 1

NONE Schedule F - Part 6 - Section 2

NONE Schedule F - Part 7

Provision for Overdue Reinsurance as of December 31, Current Year

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Reinsurance Recoverable All Items	5 Funds Held By Company Under Reinsurance Treaties	6 Letters of Credit	7 Ceded Balances Payable	8 Other Miscellaneous Balances	9 Other Allowed Offset Items	10 Sum of Cols. 5 through 9 but not in Excess of Col. 4	11 Col. 4 Minus Col. 10	12 Greater of Col. 11 or Schedule F - Part 4 Cols. 8 + 9
		·									
]	1							
				1							
					NON						
						1					
		· · · · · · · · · · · · · · · · · · ·									
]								
]								
	l										
9999999	Totals	<u> </u>									
						1. Total 2. Line 1 x .20 3. Schedule F-Part 7 C	ol. 11				

1.	Total	
2	Line 1	

- Scriedule F-Fait / Col. 11
 Provision for Overdue Authorized Reinsurance (Lines 2 + 3)
- 5. Provision for Reinsurance Ceded to Unauthorized Reinsurers (Schedule F-Part 5, Col. 19 x 1000)
- 6. Provision for Reinsurance Ceded to Certified Reinsurers (Schedule F Part 6, Section 1, Col. 21 x 1000)
- 7. Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Schedule F Part 6, Section 2, Col. 15 x 1000)
- 8. Provision for Reinsurance (sum Lines 4 + 5 + 6 + 7) (Enter this amount on Page 3, Line 16)

629,000

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

		1	2	3
		As Reported	Restatement	Restated
		(Net of Ceded)	Adjustments	(Gross of Ceded)
ASSE	TS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)	60,581,310		60,581,310
2.	Premiums and considerations (Line 15)	12,650,037		12,650,037
3.	Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)			
4.	Funds held by or deposited with reinsured companies (Line 16.2)			
5.	Other assets			65,422
6.	Net amount recoverable from reinsurers		1,294,038	1,294,038
7.				
8.	Totals (Line 28)	73,296,769	1,294,038	74,590,807
LIABIL	.ITIES (Page 3)			
9.	Losses and loss adjustment expenses (Lines 1 through 3)	23,630,717		23,630,717
10.	Taxes, expenses, and other obligations (Lines 4 through 8)	2,594,800		2,594,800
11.			21,049,743	60,275,024
12.		4 000 740		1,228,719
13.	Dividends declared and unpaid (Line 11.1 and 11.2)			
14.		19,126,980	(19,126,980)	
15.	Funds held by company under reinsurance treaties (Line 13)			
16.	Amounts withheld or retained by company for account of others (Line 14)			
17.		1	(628,725)	
18.		0.004.070		2,064,679
19.	Total liabilities excluding protected cell business (Line 26)		1,294,038	89,793,939
20.	Protected cell liabilities (Line 27)			
21.	, , , , , , , , , , , , , , , , , , , ,	(15,203,132)	XXX	(15,203,132)
22.	Totals (Line 38)	73,296,769	1,294,038	74,590,807

If yes, give full explanation:

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance

or pooling arrangements? Yes [] No [X]

NONE Schedule H - Part 1

NONE Schedule H - Part 2, 3 and 4

NONE Schedule H - Part 5

SCHEDULE P – ANALYSIS OF LOSSES AND LOSS EXPENSES SCHEDULE P – PART 1 – SUMMARY

(\$000 omitted)

	Pr	emiums Earne	ed			Lo	ss and Loss E	xpense Payme	nts			12
Years in	1	2	3			Defense	and Cost	Adju	sting	10	11	
Which				Loss Pa	yments	Containmen	t Payments	and Other	Payments			Number of
Premiums				4	5	6	7	8	9		Total	Claims
Were										Salvage	Net Paid	Reported
Earned and	Direct			Direct		Direct		Direct		and	(Cols.	Direct
Losses Were	and		Net	and		and		and		Subrogation	4 - 5 + 6	and
Incurred	Assumed	Ceded	(Cols. 1–2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	- 7 + 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2007	67,995	15,040	52,955	18,703		45		3,785		120	22,533	XXX
3. 2008	69,720	21,357	48,363	300,244	234,511	2,072	2,072	45,853	23,417	317	88,169	XXX
4. 2009	60,884	32,748	28,136	22,052				3,598		177	25,650	XXX
5. 2010	67,214	26,309	40,905	16,493				2,663		46	19,156	XXX
6. 2011	78,866	31,803	47,063	23,749				4,349		60	28,098	XXX
7. 2012	92,027	35,147	56,880	30,659				9,641		64	40,300	XXX
8. 2013	112,737	37,394	75,343	28,793				10,193		78	38,986	XXX
9. 2014	129,302	39,896	89,406	33,952				11,325		144	45,277	XXX
10. 2015	133,859	42,907	90,952	51,330				15,816		408	67,146	XXX
11. 2016	127,762	43,361	84,401	51,685				12,881		92	64,566	XXX
12. Totals	XXX	XXX	XXX	577,660	234,511	2,117	2,072	120,104	23,417	1,506	439,881	XXX

		Losses	Unpaid		Defen	se and Cost (Containment U	Jnpaid	Adjusti	ing and	23	24	25
	Case I	Basis	Bulk +	IBNR	Case	Basis	Bulk +	IBNR	Other	Unpaid			Number of
	13	14	15	16	17	18	19	20	21	22		Total Net	Claims
											Salvage	Losses	Outstanding
	Direct		Direct		Direct		Direct		Direct		and	and	Direct
	and		and		and		and		and		Subrogation	Expenses	and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1. Prior													XXX
2. 2007	4											4	XXX
3. 2008			69						10			79	XXX
4. 2009			34						6			40	XXX
5. 2010			46						9			55	XXX
6. 2011			79						27			106	XXX
7. 2012	229		152						222			603	XXX
8. 2013	198		375						325			898	XXX
9. 2014	752		958						817			2,527	XXX
10. 2015	1,422	l	2,593		l	l	l	[1,451	l	[5,466	XXX
11. 2016	4,159		6,966						2,728			13,853	XXX
12. Totals	6,764		11,272						5,595			23,631	XXX

		To	otal Losses and	ı	Loss and L	oss Expense P	ercentage			34	Net Bala	nce Sheet
		Loss	Expenses Incu	rred	(Incurr	ed/Premiums Ea	arned)	Nontabula	ar Discount	Inter-	Reserves A	fter Discount
		26	27	28	29	30	31	32	33	Company	35	36
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.	2007	22,537		22,537	33.145		42.559				4	
3.	2008	348,248	260,000	88,248	499.495	1217.399	182.470				69	10
4.	2009	25,690		25,690	42.195		91.307				34	(
5.	2010	19,211		19,211	28.582		46.965				46	(
6.	2011	28,204		28,204	35.762		59.928				79	27
7.	2012	40,903		40,903	44.447		71.911				381	222
8.	2013	39,884		39,884	35.378		52.937				573	325
9.	2014	47,804		47,804	36.971		53.468				1,710	817
10.	2015	72,612		72,612	54.245		79.836		1		4,015	1,45
11.	2016	78,419		78,419	61.379		92.912				11,125	2,728
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX			xxx	18,036	5,595

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

SCHEDULE P - PART 2 - SUMMARY

	INCUR	RED NET LOS	SES AND DEF	ENSE AND C	OST CONTAIN	MENT EXPEN	SES REPORT	ED AT YEAR E	ND (\$000 OM	ITTED)	DEVEL	OPMENT
Years in	1	2	3	4	5	6	7	8	9	10	11	12
Which												
Losses Were											One	Two
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Year	Year
1. Prior	3,000	2,284	2,269	2,668	2,487	1,946	1,941	1,487	1,487	1,487		
2. 2007	19,500	19,887	19,387	19,481	18,907	18,779	18,789	18,793	18,752	18,752		(41)
3. 2008	XXX	63,380	62,243	56,075	71,442	69,132	67,810	65,846	65,806	65,802	(4)	(44)
4. 2009	XXX	XXX	23,722	21,800	21,928	22,337	22,251	22,162	22,109	22,086	(23)	(76)
5. 2010	XXX	XXX	XXX	20,724	17,050	16,552	16,461	16,654	16,561	16,539	(22)	(115)
6. 2011	XXX	XXX	XXX	XXX	28,959	24,468	24,114	24,076	23,904	23,828	(76)	(248)
7. 2012	XXX	XXX	XXX	XXX	XXX	36,188	30,079	31,538	31,702	31,040	(662)	(498)
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	37,865	30,629	30,106	29,366	(740)	(1,263)
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38,975	36,276	35,662	(614)	(3,313)
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	54,296	55,345	1,049	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62,810	XXX	XXX
									12. Totals		(1,092)	(5,598)

SCHEDULE P - PART 3 - SUMMARY

	CUMULAT	VE PAID NET	LOSSES AND	DEFENSE AN	D COST CON	TAINMENT EX	PENSES REP	ORTED AT YE	AR END (\$000	OMITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Payment	Payment
1. Prior	000	873	1,230	1,481	1,484	1,484	1,495	1,487	1,487	1,487	XXX	XXX
2. 2007	15,003	18,150	18,323	18,612	18,594	18,624	18,623	18,748	18,748	18,748	XXX	XXX
3. 2008	XXX	62,922	63,804	50,888	61,256	65,151	65,865	65,744	65,739	65,733	XXX	XXX
4. 2009	XXX	XXX	14,693	19,841	21,116	21,966	22,038	22,052	22,052	22,052	XXX	XXX
5. 2010	XXX	XXX	XXX	12,459	15,886	16,027	16,087	16,477	16,493	16,493	XXX	XXX
6. 2011	XXX	XXX	XXX	XXX	18,769	22,731	23,103	23,655	23,731	23,749	XXX	XXX
7. 2012	XXX	XXX	XXX	XXX	XXX	22,287	27,464	28,870	29,427	30,659	XXX	XXX
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	22,801	27,577	28,274	28,793	XXX	XXX
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26,657	32,770	33,952	XXX	XXX
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41,868	51,330	XXX	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51,685	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

	BULK A	AND IBNR RESER	RVES ON NET LC	SSES AND DEF	ENSE AND COST	CONTAINMENT	EXPENSES REF	PORTED AT YEA	R END (\$000 OM	ITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	1,585	843	710	506	401	364	348			
2. 2007	6,579	653	411	201	151	151	112	41		
3. 2008	XXX	19,159	7,647	314	5,346	2,389	1,757	98	62	6
4. 2009	XXX	XXX	4,660	508	276	237	191	109	57	3
5. 2010	XXX	XXX	XXX	5,559	713	313	224	177	68	4
6. 2011	XXX	XXX	XXX	XXX	7,466	923	432	341	167	7
7. 2012	XXX	XXX	XXX	XXX	XXX	9,191	1,086	423	229	15
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	12,592	1,231	556	37
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,416	1,739	95
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,741	2,59
11. 2016	xxx	xxx	xxx	xxx	xxx	XXX	XXX	xxx	xxx	6,966

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

(\$000 omitted)

	Pr	emiums Earne	ed			Los	ss and Loss E	xpense Payme	ents			12
Years in	1	2	3			Defense	and Cost	Adju	sting	10	11	
Which				Loss Pa	yments	Containmer	t Payments	and Other	Payments			Number of
Premiums				4	5	6	7	8	9		Total	Claims
Were										Salvage	Net Paid	Reported
Earned and	Direct			Direct		Direct		Direct		and	(Cols.	Direct
Losses Were	and		Net	and		and		and		Subrogation	4 - 5 + 6	and
Incurred	Assumed	Ceded	(Cols. 1–2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	- 7 + 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2007	54,593	12,103	42,490	13,994		45		3,211		69	17,250	3,159
3. 2008	55,037	16,859	38,178	237,983	182,617	2,072	2,072	35,315	17,687	222	72,994	20,494
4. 2009	45,302	24,367	20,935	16,918				2,894		77	19,812	2,711
5. 2010	48,358	19,083	29,275	13,571				2,114		17	15,685	2,299
6. 2011	56,042	22,943	33,099	19,089				3,304		26	22,393	2,934
7. 2012	64,771	24,792	39,979	19,554				5,869		62	25,423	3,811
8. 2013	79,685	26,176	53,509	19,494				6,905		21	26,399	4,115
9. 2014	90,161	27,927	62,234	23,185				7,324		111	30,509	3,834
10. 2015	93,338	30,035	63,303	32,630				7,784		381	40,414	5,971
11. 2016	87,877	30,484	57,393	30,018				7,321		46	37,339	5,821
12. Totals	XXX	XXX	XXX	426,436	182,617	2,117	2,072	82,041	17,687	1,032	308,218	XXX

	1		Losses	Unpaid		Defens	se and Cost (Containment	Unpaid	Adjust	ing and	23	24	25
		Case	Basis	Bulk +	· IBNR	Case	Basis	Bulk +	- IBNR	Other	Unpaid			Number of
		13	14	15	16	17	18	19	20	21	22		Total Net	Claims
												Salvage	Losses	Outstanding
		Direct		Direct		Direct		Direct		Direct		and	and	Direct
		and		and		and		and		and		Subrogation	Expenses	and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior													
2.	2007	4											4	2
3.	2008			57						8			65	2
4.	2009			23						4			27	
5.	2010			31						6			37	3
6.	2011			53						20			73	27
7.	2012	107		102						127			336	229
8.	2013	70		252						152			474	178
9.	2014	577		644						574			1,795	204
10.	2015	1,076		1,744						919			3,739	87
11.	2016	3,099		4,686						1,758			9,543	448
12.	Totals	4,933		7,592						3,568			16,093	1,180

		T	otal Losses and	d	Loss and L	oss Expense F	Percentage			34	Net Bala	ince Sheet
		Loss	Expenses Incu	ırred	(Incurr	ed/Premiums E	arned)	Nontabula	r Discount	Inter-	Reserves A	After Discount
		26	27	28	29	30	31	32	33	Company	35	36
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.	2007	17,254		17,254	31.605		40.607				4	[
3.	2008	275,435	202,376	73,059	500.454	1200.403	191.364				57	8
4.	2009	19,839		19,839	43.793		94.765				23	4
5.	2010	15,722		15,722	32.512		53.705				31	6
6.	2011	22,466		22,466	40.088		67.875				53	20
7.	2012	25,759		25,759	39.769		64.431				209	127
8.	2013	26,873		26,873	33.724		50.221				322	152
9.	2014	32,304		32,304	35.829		51.907				1,221	574
10.	2015	44,153		44,153	47.304		69.749				2,820	919
11.	2016	46,882		46,882	53.350		81.686				7,785	1,758
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	12,525	3,568

NONE Schedule P - Part 1B Private Passenger

NONE Schedule P - Part 1C Commercial Auto

NONE Schedule P - Part 1D Workers Compensation

NONE Schedule P - Part 1E Commercial Multiple Peril

NONE Schedule P - Part 1F - Section 1 Med. Prof. Liab. Occurence

NONE Schedule P - Part 1F - Section 2 Med. Prof. Liab. Claims-Made

NONE Schedule P - Part 1G Special Liability

NONE Schedule P - Part 1H - Section 1 Other Liab. Occurence

NONE Schedule P - Part 1H - Section 2 Other Liab. Claims-Made

SCHEDULE P – PART 1I – SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

(\$000 omitted)

	Pr	emiums Earn	ed			Lo	ss and Loss E	xpense Payme	ents			12
Years in	1	2	3			Defense	and Cost	Adju	sting	10	11	
Which				Loss Pa	ayments	Containmer	nt Payments	and Other	Payments			Number of
Premiums				4	5	6	7	8	9		Total	Claims
Were										Salvage	Net Paid	Reported
Earned and	Direct			Direct		Direct		Direct		and	(Cols.	Direct
Losses Were	and		Net	and		and		and		Subrogation	4 - 5 + 6	and
Incurred	Assumed	Ceded	(Cols. 1–2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	- 7 + 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX	644				342			986	XXX
2. 2015	40,521	12,872	27,649	18,700				8,032		27	26,732	XXX
3. 2016	39,885	12,877	27,008	21,667				5,560		46	27,227	XXX
4. Totals	XXX	XXX	XXX	41,011				13,934		73	54,945	XXX

		Losses	Unpaid		Defens	se and Cost (Containment I	Unpaid	Adjusti	ng and	23	24	25
	Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	· IBNR	Other I	Unpaid			Number of
	13	14	15	16	17	18	19	20	21	22		Total Net	Claims
											Salvage	Losses	Outstanding
	Direct		Direct		Direct		Direct		Direct		and	and	Direct
	and		and		and		and		and		Subrogation	Expenses	and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1. Prior	425		551						525			1,501	26
2. 2015	346		849						532			1,727	21
3. 2016	1,060		2,280						970			4,310	133
4. Totals	1,831		3,680						2,027			7,538	180

	Т	otal Losses an	d	Loss and I	Loss Expense F	Percentage			34	Net Bala	nce Sheet
	Loss	Expenses Inci	urred	(Incurr	ed/Premiums E	arned)	Nontabula	r Discount	Inter-	Reserves A	fter Discount
	26	27	28	29	30	31	32	33	Company	35	36
	Direct			Direct					Pooling		Loss
	and			and				Loss	Participation	Losses	Expenses
	Assumed	Ceded	Net	Assumed Ceded		Net	Loss	Expense	Percentage	Unpaid	Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	976	525
2. 2015	28,459		28,459	70.233		102.930				1,195	532
3. 2016	31,537		31,537	79.070		116.769				3,340	970
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	5,511	2,027

NONE Schedule P - Part 1J Auto Physical Damage

NONE Schedule P - Part 1K Fidelity/Surety

NONE Schedule P - Part 1L Other

NONE Schedule P - Part 1M International

NONE Schedule P - Part 1N Nonproportional Assumed Prop.

NONE Schedule P - Part 10 Nonproportional Assumed Liab.

NONE Schedule P - Part 1P Nonproportional Assumed Fin. Lines

NONE Schedule P - Part 1R - Section 1 Prod. Liab. Occurence

NONE Schedule P - Part 1R - Section 2 Prod. Liab. Claims-Made

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

NONE Schedule P - Part 1T - Warranty

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in	INCURRE	D NET LOSS	ES AND DEFE	NSE AND CO	ST CONTAIN	MENT EXPEN	ISES REPOR	TED AT YEAF	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Year	Year
1. Prior	2,643	2,067	2,095	2,375	2,225	1,783	1,782	1,415	1,415	1,415		
2. 2007	20,178	14,593	14,126	14,612	14,136	14,032	14,052	14,071	14,043	14,043		(28)
3. 2008	XXX	53,544	48,205	48,659	60,068	58,074	57,129	55,450	55,421	55,423	2	(27)
4. 2009	XXX	XXX	18,384	16,615	16,693	17,115	17,069	16,993	16,956	16,941	(15)	(52)
5. 2010	XXX	XXX	XXX	16,849	13,908	13,598	13,499	13,691	13,616	13,602	(14)	(89)
6. 2011	XXX	XXX	XXX	XXX	23,097	19,749	19,453	19,327	19,197	19,142	(55)	(185)
7. 2012	XXX	XXX	XXX	XXX	XXX	24,869	19,541	19,920	20,003	19,763	(240)	(157)
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	26,457	20,519	20,279	19,816	(463)	(703)
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26,525	24,813	24,406	(407)	(2,119)
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35,126	35,450	324	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	37,803	XXX	XXX
		•					•	12. Totals			(868)	(3,360)

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

Years in	INCURRE	D NET LOSS	ES AND DEFI	ENSE AND CO	OST CONTAIN	IMENT EXPE	NSES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Year	Year
1. Prior												
2. 2007												
3. 2008	XXX	1										
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX			NRIL					
7. 2012	XXX	XXX	XXX	XXX	XXX		JINE					
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				XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

Years in	INCURRE	D NET LOSS	ES AND DEF	ENSE AND CO	OST CONTAIN	IMENT EXPE	ISES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Year	Year
1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX					L				
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX	XXX) IN F					
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				XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
					•	•		12. Totals				

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

Years in	INCURRE	D NET LOSS	ES AND DEFI	ENSE AND CO	OST CONTAIN	IMENT EXPE	ISES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Year	Year
1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX						L				
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX) IN F					
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				XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
				•		-		12. Totals	•			

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

Years in	INCURRE	D NET LOSS	ES AND DEFI	ENSE AND CO	ST CONTAIN	IMENT EXPEN	ISES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Year	Year
1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX) NI H					
7. 2012	XXX	XXX	XXX	XXX	XXX							
8. 2013	XXX	XXX	XXX	XXX	XXX	$-x\overline{x}x$						
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE Schedule P - Part 2F - Sec. 1 and 2, 2G, 2H Sec. 1 and 2

SCHEDULE P – PART 2I – SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in	INCURRE	D NET LOSS	ES AND DEF	ENSE AND CO	OST CONTAIN	IMENT EXPE	NSES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Year	Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,033	4,744	3,795	(949)	(2,238
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19,170	19,895	725	XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25,007	XXX	XXX
								4 Totals			(224)	(2.238

SCHEDULE P – PART 2J – AUTO PHYSICAL DAMAGE

Years in	INCURRE	D NET LOSS	ES AND DEFE	ENSE AND CO	OST CONTAIN	MENT EXPEN	ISES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Year	Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XIX	XXX					
2. 2015	XXX	XXX	XXX	XXX	XXX			XXX				XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
								4 Totals				

SCHEDULE P - PART 2K - FIDELITY, SURETY

Years in	INCURRE	D NET LOSS	ES AND DEF	ENSE AND CO	OST CONTAIN	MENT EXPE	ISES REPOR	TED AT YEAR	R END (\$000 (OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Year	Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XIX	XXX					
2. 2015	XXX	XXX	XXX	XXX	XXX			XXX				XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	xxx	XXX	XXX		XXX	XXX
								4. Totals				

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

Years in	INCURRE	D NET LOSS	ES AND DEFE	ENSE AND CO	OST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2007	2008	2009	2015	2016	Year	Year					
1. Prior	XXX	XXX	XXX	XXX	XXX	XIX	XXX	-				
2. 2015	XXX	XXX	XXX	XXX	XXX		JAKE	XXX				XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
								4. Totals				

SCHEDULE P - PART 2M - INTERNATIONAL

Years in	INCURRE	D NET LOSS	ES AND DEF	ENSE AND CO	ST CONTAIN	IMENT EXPE	NSES REPOR	TED AT YEAR	R END (\$000 (OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Year	Year
1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX			NIC						
6. 2011	XXX	XXX	XXX	XXX		N() N F					
7. 2012	XXX	XXX	XXX	XXX	XXX	146						
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				XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
		•	•	•		•		12. Totals	•	•		

NONE Schedule P - Part 2N, 2O, 2P

NONE Schedule P - Part 2R Sec. 1 and 2, 2S, 2T

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

		CUMUL	ATIVE PAID NE	T LOSSES AN	D DEFENSE AN	ND COST CON	TAINMENT EXF	ENSES REPOR	RTED AT YEAR	END (\$000 ON	(ITTED)	11	12
Y	ears in	1	2	3	4	5	6	7	8	9	10	Number of	Number of
	Which											Claims	Claims Closed
Los	ses Were											Closed With	Without Loss
l li	ncurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Loss Payment	Payment
1.	Prior	000	846	1,204	1,409	1,412	1,412	1,423	1,415	1,415	1,415		
2.	2007	10,953	13,496	13,663	13,900	13,885	13,915	13,914	14,039	14,039	14,039	1,892	1,265
3.	2008	XXX	48,199	50,084	57,517	51,545	54,905	55,498	55,377	55,372	55,366	17,447	3,045
4.	2009	XXX	XXX	10,792	15,012	16,030	16,832	16,904	16,918	16,918	16,918	1,756	955
5.	2010	XXX	XXX	XXX	10,212	12,988	13,122	13,181	13,571	13,571	13,571	1,309	987
6.	2011	XXX	XXX	XXX	XXX	15,176	18,275	18,620	19,016	19,080	19,089	1,810	1,097
7.	2012	XXX	XXX	XXX	XXX	XXX	14,138	17,452	18,489	18,829	19,554	1,998	1,584
8.	2013	XXX	XXX	XXX	XXX	XXX	XXX	14,926	18,542	19,010	19,494	2,151	1,786
9.	2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,684	22,096	23,185	1,892	1,738
10.	2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26,317	32,630	3,227	2,657
11.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30,018	3,045	2,328

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

	CUMUL	ATIVE PAID N	ET LOSSES AN	D DEFENSE A	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	R END (\$000 ON	(ITTED)	11	12
Years in	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Which											Claims	Claims Closed
Losses Were											Closed With	Without Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Loss Payment	Payment
1. Prior	000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX			7 1 1					
7. 2012	XXX	XXX	XXX	XXX	XXX	INC	JINI					
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 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

		CUMUL	ATIVE PAID N	ET LOSSES AN	D DEFENSE A	ND COST CON	TAINMENT EXF	PENSES REPO	RTED AT YEAR	R END (\$000 ON	/ITTED)	11	12
Υ	ears in	1	2	3	4	5	6	7	8	9	10	Number of	Number of
1	Which											Claims	Claims Closed
Los	ses Were											Closed With	Without Loss
Ir	ncurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Loss Payment	Payment
1.	Prior	000											
2.	2007		1	1						1			
3.	2008	XXX	1										
4.	2009	XXX	XXX										
5.	2010	XXX	XXX	XXX				L	L				
6.	2011	XXX	XXX	XXX	XXX					I			
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	I			
11.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

	CUMUL	ATIVE PAID NE	ET LOSSES AN	D DEFENSE A	ND COST CON	TAINMENT EXF	PENSES REPO	RTED AT YEAR	R END (\$000 ON	/ITTED)	11	12
Years in	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Which											Claims	Claims Closed
Losses Were											Closed With	Without Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Loss Payment	Payment
1. Prior	000											
2. 2007												
3. 2008	XXX								I			
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	1	l	l	l
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

	CUMUL	ATIVE PAID N	T LOSSES AN	D DEFENSE AN	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	R END (\$000 ON	(ITTED)	11	12
Years in	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Which											Claims	Claims Closed
Losses Were											Closed With	Without Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Loss Payment	Payment
1. Prior	000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX		N						
7. 2012	XXX	XXX	XXX	XXX	XXX	146	/111					
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 Sec. 1 and 2, 3G, 3H Sec. 1 and 2

SCHEDULE P – PART 3I – SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

	CUMUI	ATIVE PAID N	ET LOSSES AN	ID DEFENSE A	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	END (\$000 ON	IITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	2,175	2,819	XXX	XXX
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,551	18,700	XXX	XXX
3. 2016	XXX	XXX	XXX	xxx	XXX	XXX	XXX	XXX	XXX	21,667	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

	CUMUI	LATIVE PAID N	ET LOSSES AN	ID DEFENSE AI	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	R END (\$000 OM	(ITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	X . X	000				
2. 2015	XXX	XXX	XXX	XXX	XXX	. XX	JMt	XXX				
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3K - FIDELITY/SURETY

	CUMU	LATIVE PAID N	ET LOSSES AN	ND DEFENSE AI	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	END (\$000 OM	(ITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	. XXX	. 000			XXX	XXX
2. 2015	XXX	XXX	XXX	XXX	XXX	. X X) N :	XXX			XXX	XXX
3. 2016	xxx	XXX	xxx	xxx	xxx	XXX	, XXX L	XXX	xxx		XXX	xxx

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

	CUMUI	LATIVE PAID N	ET LOSSES AN	ID DEFENSE A	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	END (\$000 OM	(ITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	X. X. I.	000			XXX	XXX
2. 2015	XXX	XXX	XXX	XXX	XXX	A XX) N F	XXX			XXX	XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		xxx	xxx

SCHEDULE P - PART 3M - INTERNATIONAL

	CUMUI	LATIVE PAID N	ET LOSSES AN	D DEFENSE A	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	R END (\$000 ON	(ITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Payment	Payment
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			. N.I.	N. N. I. F				XXX	XXX
6. 2011	XXX	XXX	XXX	XXX		. N.()N				XXX	XXX
7. 2012	XXX	XXX	XXX	XXX	XXX	116					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 3N, 3O, 3P

NONE Schedule P - Part 3R Sec. 1 and 2, 3S, 3T

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

	BULK ANI	D IBNR RESERV	ES ON NET LOS	SSES AND DEFE	ENSE AND COST	CONTAINMEN	T EXPENSES RE	PORTED AT YE	EAR END (\$000 (OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	1,234	656	562	401	300	273	261			
2. 2007	5,120	508	325	159	113	113	84	28		
3. 2008	XXX	14,904	5,974	144	4,403	1,964	1,443	69	44	57
4. 2009	XXX	XXX	3,685	402	207	149	143	74	38	23
5. 2010	XXX	XXX	XXX	4,396	536	264	168	120	45	31
6. 2011	XXX	XXX	XXX	XXX	5,603	693	324	231	111	53
7. 2012	XXX	XXX	XXX	XXX	XXX	6,896	815	287	152	102
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	9,449	835	369	252
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,709	1,153	644
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,133	1,744
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,686

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

	BULK ANI	D IBNR RESERV	ES ON NET LOS	SSES AND DEFE	NSE AND COST	CONTAINMEN	T EXPENSES RE	PORTED AT YE	AR END (\$000 (OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in Which Losses Were										
Incurred	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	$\mathbf{X}^{\prime}\mathbf{X}$					
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

	BULK AN	D IBNR RESERV	ES ON NET LO	SSES AND DEFI	ENSE AND COS	T CONTAINMEN	T EXPENSES RE	PORTED AT YE	AR END (\$000)	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in Which Losses Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior										
2. 2007	1				1	1				
3. 2008	XXX				1	1				
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX		1					
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XXX	XXX	X					
8. 2013	XXX	XXX	XXX	XXX	XXX	· XXX				
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P – PART 4D – WORKERS' COMPENSATION (EXLCUDING EXCESS WORKERS' COMPENSATION)

	BULK AN	D IBNR RESERV	ES ON NET LOS	SSES AND DEFE	ENSE AND COST	T CONTAINMEN	T EXPENSES RE	EPORTED AT YE	EAR END (\$000 (OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in Which Losses Were										
Incurred	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	

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

	BULK AN	D IBNR RESER\	ES ON NET LO	SSES AND DEFI	ENSE AND COS	T CONTAINMEN	T EXPENSES RE	PORTED AT YE	AR END (\$000 (OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in Which Losses Were Incurred	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	X X				1	
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX			1	
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1	
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE Schedule P - Part 4F Sec. 1 and 2, 4G, 4H Sec. 1 and 2

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

	BULK AN	D IBNR RESERV	ES ON NET LO	SSES AND DEFE	ENSE AND COS	T CONTAINMEN	T EXPENSES RE	EPORTED AT YE	AR END (\$000 (OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,483	966	551
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,608	849
3. 2016	xxx	xxx	XXX	xxx	xxx	XXX	XXX	xxx	XXX	2,280

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

	BULK AN	D IBNR RESERV	ES ON NET LO	SSES AND DEFE	ENSE AND COST	T CONTAINMEN	T EXPENSES RE	EPORTED AT YE	EAR END (\$000 (OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	XXX	XXX	XXX	XXX	XIX	- XXK	XXX			
2. 2015	XXX	XXX	XXX	XXX)	XXX	XXX		
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4K - FIDELITY/SURETY

	BULK AN	D IBNR RESERV	ES ON NET LOS	SSES AND DEFE	ENSE AND COST	CONTAINMEN	T EXPENSES RE	EPORTED AT YE	AR END (\$000 (OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2015	XXX	XXX	XXX	XXX		X X	XXX	XXX		
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

	BULK AN	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		
Years in												
Which												
Losses Were												
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016		
1. Prior	XXX	XXX	XXX	XXX	XIX	. XXX	XXX					
2. 2015	XXX	XXX	XXX	XXX		NX T	XXX	XXX				
3. 2016	XXX	XXX	XXX	XXX	xxx	XXX	XXX	XXX	xxx			

SCHEDULE P - PART 4M - INTERNATIONAL

	BULK AN	ID IBNR RESER\	/ES ON NET LO	SSES AND DEF	ENSE AND COS	T CONTAINMEN	T EXPENSES RI	EPORTED AT YE	EAR END (\$000 (OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in Which Losses Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	2001	2000	2000	2010	2011	2012	2010	2011	2010	2010
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX		NIA					
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 4N, 4O, 4P

NONE Schedule P - Part 4R Sec. 1 and 2, 4S, 4T

SCHEDULE P – PART 5A – HOMEOWNERS/FARMOWNERS SECTION 1

Years in		CUMUI	LATIVE NUMBE	R OF CLAIMS CI	LOSED WITH LO	SS PAYMENT D	DIRECT AND ASS	SUMED AT YEAR	R END	
Which	1	2	3	4	5	6	7	8	9	10
Premiums										
Were Earned										
and Losses										
Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	785	268	558	94	4	4		9		
2. 2007	996	1,342	1,798	1,856	1,884	1,888	1,888	1,891	1,891	1,892
3. 2008	XXX	7,276	8,375	16,439	16,690	17,014	17,039	17,445	17,446	17,447
4. 2009	XXX	XXX	894	1,595	1,724	1,742	1,750	1,756	1,756	1,756
5. 2010	XXX	XXX	XXX	886	1,232	1,300	1,304	1,306	1,309	1,309
6. 2011	XXX	XXX	XXX	XXX	1,144	1,756	1,786	1,799	1,807	1,810
7. 2012	XXX	XXX	XXX	XXX	XXX	1,506	1,901	1,959	1,977	1,998
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	1,665	2,081	2,120	2,151
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,492	1,841	1,892
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,683	3,227
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,045

SECTION 2

Y	ears in	rs in NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
١	Which	1	2	3	4	5	6	7	8	9	10
Pr	emiums										
Wer	re Earned										
and	d Losses										
Wer	e Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1.	Prior	760	3	3	22	16	12	12			
2.	2007	244	27	27	39	10	5	6	3	3	2
3.	2008	XXX	4,815	4,815	1,004	775	444	414	5	4	2
4.	2009	XXX	XXX		150	32	18		1	1	
5.	2010	XXX	XXX	XXX	369	71	10	7.	6	3	3
6.	2011	XXX	XXX	XXX	XXX	578	53	38	32	29	27
7.	2012	XXX	XXX	XXX	XXX	XXX	539	284	265	248	229
8.	2013	XXX	XXX	XXX	XXX	XXX	XXX	467	225	207	178
9.	2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	349	240	204
10.	2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	391	87
11.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	448

SECTION 3

Years in	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
Which	1	2	3	4	5	6	7	8	9	10
Premiums										
Were Earned										
and Losses										
Were Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	171	177	283	47	2	5				
2. 2007	2,341	2,896	3,012	3,155	3,156	3,157	3,159	3,159	3,159	3,159
3. 2008	XXX	4,039	4,116	20,456	20,481	20,491	20,493	20,493	20,494	20,494
4. 2009	XXX	XXX	263	2,673	2,703	2,709	2,710	2,711	2,711	2,711
5. 2010	XXX	XXX	XXX	2,086	2,277	2,293	2,294	2,298	2,299	2,299
6. 2011	XXX	XXX	XXX	XXX	2,669	2,901	2,919	2,928	2,933	2,934
7. 2012	XXX	XXX	XXX	XXX	XXX	3,423	3,765	3,805	3,809	3,811
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	3,727	4,076	4,107	4,115
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,412	3,810	3,834
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,431	5,971
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,821

NONE Schedule P - Part 5B - Section 1-3

NONE Schedule P - Part 5C - Section 1-3

NONE Schedule P - Part 5D - Section 1-3

NONE Schedule P - Part 5E - Section 1-3

NONE Schedule P - Part 5F - Section 1A-3A

NONE Schedule P - Part 5F - Section 1B-3B

NONE Schedule P - Part 5H - Section 1A-3A

NONE Schedule P - Part 5H - Section 1B-3B

NONE Schedule P - Part 5R - Section 1A-3A

NONE Schedule P - Part 5R - Section 1B-3B

NONE Schedule P - Part 5T - Warranty

NONE Schedule P - Part 6C Sec. 1 and 2, 6D Sec. 1 and 2

NONE Schedule P - Part 6E Sec. 1 and 2, 6H Sec. 1A and 2A

NONE Schedule P - Part 6H Sec. 1B and 2B, 6M Sec. 1B and 2B

NONE Schedule P - Part 6N Sec. 1 and 2, 60 Sec. 1 and 2

NONE Schedule P - Part 6R Sec. 1A, 2A and 1B, 2B

NONE Schedule P - Part 7A

NONE Schedule P - Part 7A (Continued)

NONE Schedule P - Part 7B

NONE Schedule P - Part 7B (Continued)

COLIEDULE DINTEDDOCATORICO

1.	SCHEDU		
		ting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) policies. EREs provided for reasons other than DDR are not to be included.	
1.1	Does the company issue Medical Professional Liability Claims Mac endorsement, or "ERE") benefits in the event of Death, Disability,	de insurance policies that provide tail (also known as an extended reporting 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 I	blank. If the answer to question 1.1 is "yes", please answer the following questions	S:
.2	What is the total amount of the reserve for that provision (DDR Res	serve), as reported, explicitly or not, elsewhere in this statement (in dollars)?	\$
.3	Does the company report any DDR reserve as Unearned Premium	Reserve per SSAP #65?	Yes[]No[X]
.4	Does the company report any DDR reserve as loss or loss adjustment	nent expense reserve?	Yes[]No[X]
.5	If the company reports DDR reserve as Unearned Premium Reserve at 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines	ve, does that amount match the figure on the Underwriting and Investment Exhibit, s 11.1 plus 11.2?	Yes[] No[] N/A[)
.6	If the company reports DDR reserve as loss or loss adjustment expreserves are reported in Schedule P:	pense reserve, please complete the following table corresponding to where these	
		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	Years in Which Premiums Were Earned and Losses Were Incurred	1 2 Section 1: Occurrence Section 2: Claims-Made	
	1.601 Prior 1.602 2007 1.603 2008	COURT I COURT IN THE COURT IN T	
	1.604 2009 1.605 2010 1.606 2011		
	1.607 2012 1.608 2013 1.609 2014		
	1.609 2014 1.610 2015 1.611 2016 1.612 Totals		
	January 1, 1998. This change in definition applies to both paid and Containment" and "Adjusting and Other") reported in compliance w	therefore, unallocated loss adjustment expenses (ULAE) was changed effective dupaid expenses. Are these expenses (now reported as "Defense and Cost with these definitions in this statement? De allocated to the years in which the losses were incurred based on the number	Yes [X] No[]
٠.		allocating Adjusting and Other expense between companies in a group or a pool,	
	the Adjusting and Other expense should be allocated in the same partial Adjusting and Other expense assumed should be reported according reinsurers, or in those situations where suitable claim count informations.	percentage used for the loss amounts and the claim counts. For reinsurers, ing to the reinsurance contract. For Adjusting and Other expense incurred by ation is not available, Adjusting and Other expense should be allocated by a progressory. A below. As they are reported in this Statement?	Voo IV I No I I
4.	the Adjusting and Other expense should be allocated in the same particles and Other expense assumed should be reported according reinsurers, or in those situations where suitable claim count information reasonable method determined by the company and described in least or the same particles are suitable claim.	ng to the reinsurance contract. For Adjusting and Other expense incurred by ation is not available, Adjusting and Other expense should be allocated by a	Yes [X] No [] Yes [] No [X]
4.	the Adjusting and Other expense should be allocated in the same padjusting and Other expense assumed should be reported according reinsurers, or in those situations where suitable claim count information reasonable method determined by the company and described in Indoor Do any lines in Schedule P include reserves that are reported grost net of such discounts on Page 10?	ng to the reinsurance contract. For Adjusting and Other expense incurred by ation is not available, Adjusting and Other expense should be allocated by a nterrogatory 7, below. Are they so reported in this Statement?	
4.	the Adjusting and Other expense should be allocated in the same partial Adjusting and Other expense assumed should be reported according reinsurers, or in those situations where suitable claim count information reasonable method determined by the company and described in Indianal Do any lines in Schedule P include reserves that are reported grost net of such discounts on Page 10? If yes, proper disclosure must be made in the Notes to Financial Strin Schedule P - Part 1, Columns 32 and 33.	ng to the reinsurance contract. For Adjusting and Other expense incurred by ation is not available, Adjusting and Other expense should be allocated by a interrogatory 7, below. Are they so reported in this Statement? s of any discount to present value of future payments, and that are reported	
4.	the Adjusting and Other expense should be allocated in the same of Adjusting and Other expense assumed should be reported according reinsurers, or in those situations where suitable claim count information reasonable method determined by the company and described in Indianal Do any lines in Schedule P include reserves that are reported grost net of such discounts on Page 10? If yes, proper disclosure must be made in the Notes to Financial St in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. V	ng to the reinsurance contract. For Adjusting and Other expense incurred by ation is not available, Adjusting and Other expense should be allocated by a interrogatory 7, below. Are they so reported in this Statement? Is of any discount to present value of future payments, and that are reported externents, as specified in the Instructions. Also, the discounts must be reported. Work papers relating to discount calculations must be available for examination.	
	the Adjusting and Other expense should be allocated in the same particles and Other expense assumed should be reported according reinsurers, or in those situations where suitable claim count information reasonable method determined by the company and described in Indianal Do any lines in Schedule P include reserves that are reported grost net of such discounts on Page 10? If yes, proper disclosure must be made in the Notes to Financial Strain Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Via upon request.	ng to the reinsurance contract. For Adjusting and Other expense incurred by ation is not available, Adjusting and Other expense should be allocated by a interrogatory 7, below. Are they so reported in this Statement? Is of any discount to present value of future payments, and that are reported externents, as specified in the Instructions. Also, the discounts must be reported. Work papers relating to discount calculations must be available for examination.	
5.	the Adjusting and Other expense should be allocated in the same of Adjusting and Other expense assumed should be reported according reinsurers, or in those situations where suitable claim count information reasonable method determined by the company and described in It. Do any lines in Schedule P include reserves that are reported gross net of such discounts on Page 10? If yes, proper disclosure must be made in the Notes to Financial Strin Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Volument request. Discounting is allowed only if expressly permitted by the state insurance where the net premiums in force at the end of the year for:	ng to the reinsurance contract. For Adjusting and Other expense incurred by ation is not available, Adjusting and Other expense should be allocated by a interrogatory 7, below. Are they so reported in this Statement? Is of any discount to present value of future payments, and that are reported statements, as specified in the Instructions. Also, the discounts must be reported. Work papers relating to discount calculations must be available for examination rance department to which this Annual Statement is being filed. 5.1 Fidelity 5.2 Surety	
5.	the Adjusting and Other expense should be allocated in the same of Adjusting and Other expense assumed should be reported according reinsurers, or in those situations where suitable claim count information reasonable method determined by the company and described in Indianal Do any lines in Schedule P include reserves that are reported gross net of such discounts on Page 10? If yes, proper disclosure must be made in the Notes to Financial St in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Vicinity upon request. Discounting is allowed only if expressly permitted by the state insurance what were the net premiums in force at the end of the year for: (in thousands of dollars)	ng to the reinsurance contract. For Adjusting and Other expense incurred by ation is not available, Adjusting and Other expense should be allocated by a interrogatory 7, below. Are they so reported in this Statement? Is of any discount to present value of future payments, and that are reported statements, as specified in the Instructions. Also, the discounts must be reported. Work papers relating to discount calculations must be available for examination rance department to which this Annual Statement is being filed. 5.1 Fidelity 5.2 Surety	Yes[] No[X] \$ \$

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated By States and Territories

		1	and Members Return Premium	hip Fees Less as and Premiums Not Taken	4 Dividends Paid or Credited to Policyholders	5 Direct Losses Paid	6 Direct	7 Direct	8 Finance and Service Charges Not	9 Direct Premium Written for Federal Purchasing
	States, Etc.	Active Status	Direct Premiums Written	Direct Premiums Earned	on Direct Business	(Deducting Salvage)	Losses	Losses Unpaid	Included in Premiums	Groups (Included in Col. 2)
1	· · · · · · · · · · · · · · · · · · ·		vviilleii	Lameu	Dusilless	Salvage)	ilicuited	Oripaid	Fremiums	111 (01. 2)
2.	Alabama AL Alaska AK	N								
3.	Arizona AZ	N N								
4.	Arkansas AR	N								
5.	California CA	N								
6.	Colorado CO	N								
7.	Connecticut CT	. N								
8.	Delaware DE	. N								
9.	District of Columbia DC Florida FL	N N								
11.	Georgia GA	N N								
	Hawaii HI	N N								
13.		N								
14.	Illinois IL	N								
15.	Indiana IN	N								
16.	lowaIA	. N								
17.		N .								
1	Kentucky KY	. N								
	Louisiana LA Maine ME	. N								
	Maryland MD	N								
	Massachusetts MA	N N								
•	Michigan MI	N								
1	Minnesota MN	N								
25.	Mississippi MS	N								
26.	Missouri MO	N								
27.	Montana	N								
28.	Nebraska NE	N								
29.		. N								
1	New Hampshire NH	N								
32.	New Jersey NJ New Mexico NM	N N								
	New York NY	N N								
	North Carolina NC	N								
	North Dakota ND	N								
36.	Ohio OH	N								
37.	Oklahoma OK	. N								
1	Oregon OR	. N								
1	Pennsylvania PA	. N								
40.	Rhode Island RI South Carolina SC	N N								
41.	South Dakota SD	N N								
43.	Tennessee TN	N N								
44.	Texas TX	L	122,486,103	127,762,861		64,092,418	61,717,871	18,035,329	360,519	
45.	Utah UT	N								
46.	Vermont VT	N								
47.	Virginia VA	N								
48.	Washington WA	. N								
49.	West Virginia WV	N.								
50. 51	Wisconsin WI Wyoming WY	N N								
52.	American Samoa AS	N N								
53.	Guam GU	N N								
54.	Puerto Rico PR	N N								
55.	U.S. Virgin Islands VI	N								
56.	Northern Mariana Islands MP	N								
57.	Canada CAN	N.								
1	Aggregate Other Alien OT	XXX	400 400 400	407 700 00:		04.000.445	04 747 07:	40.00= 00=	000 515	
59.	Totals	(a) 1	122,486,103	127,762,861		64,092,418	61,717,871	18,035,329	360,519	
	DETAILS OF WRITE-INS									
58001.		xxx								
58002.		XXX								
58003.		XXX				NE				
58998.	Summary of remaining write-ins									
F0000	for Line 58 from overflow page	XXX								
58999.	Totals (Lines 58001 through	y v v								
L	58003 plus 58998) (Line 58 above)	XXX	l						l	

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines In the state; (N) None of the above - Not allowed to write business in the state.

	exa	as I	FA	IR	Pla	an .	As	soc	iat	ion	on	ıly	wri	te	s p	oli	cie	es i	in -	Ге	xas	S.																		ate															
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NONE Schedule T - Part 2

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

Texas Windstorm Insurance Association

Fed ID 74-6189303

NAIC 30040

Texas FAIR Plan Association

Fed ID 43-1982873

NAIC 11543

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 Com- pany 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)	*
4766 4766		11543 30040	43-1982873 74-6189303				Texas FAIR Plan Association Texas Windstorm Insurance Association	TEX TEX	CON	UNAFFLIATED UNAFFLIATED	SERVICE CONTRACT SERVICE CONTRACT			N	
															1

Asterik	Explanation
	NIANE
	$N(\cdot)N=$

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)
11543 30040	43-1982873 74-6189303	Texas FAIR Plan Association Texas Windstorm Insurance Association					(10,533,789) 10,533,789				(10,533,789) 10,533,789	
1												
9999999	Control Totals								XXX			

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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?	See Explanation
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
	APRIL FILING	
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6.	Will Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment 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?	See Explanation
	JUNE FILING	
	Will an audited financial report be filed by June 1?	See Explanation
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	See Explanation
	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
type code	following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does no 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 will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and painting the interrogatory questions.	report and a bar
	MARCH FILING	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO 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 Supplemental A to Schedule T (Medical Professional Liablity 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 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 partner be filed electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
27.	Will an approval from the reporting entity's state of domicle for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
28.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution contracts be filed with the state of domicile and the NAIC by March 1?	NO
	APRIL FILING	
29.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
30.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
31.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
32.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
33.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO NO
34.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	NO
	AUGUST FILING	
35.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO

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Explanation:

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Explanation 2:	No employees of Texas FAIR Plan Association. All employees are of the Texas Windstorm Insurance Association.
Explanation 8:	Not Applicable.
Explanation 9:	Texas FAIR Plan Association is not required to file until June 30.
Explanation 3.	Texas FAIN Flati Association is not required to life until surie 30.
Explanation 10:	Texas FAIR Plan Association is not required to file until June 30.
Explanation 13:	Not Applicable.
Explanation 14:	Not Applicable.
Explanation 14.	THOU TABLES CO.
Explanation 15:	Not Applicable.
Explanation 16:	Not Applicable.
Explanation 17:	Not Applicable.
Explanation 19:	Not Applicable.
,	Netroppineadic
Fundamentian 00:	Net Applicable
Explanation 22:	Not Applicable.
Explanation 23:	Not Applicable.
Explanation 24:	Not Applicable.
Explanation 25:	Not Applicable.
Explanation 26:	Not Applicable.
·	
Explanation 27:	Not Applicable.
Explanation 21.	Not Applicable.
Explanation 28:	Not Applicable.
Explanation 29:	Not Applicable.
Explanation 30:	Not Applicable.
Explanation 31:	Not Applicable.
,	
Evalenation 20:	Net Analizable
Explanation 32:	Not Applicable.
Explanation 33:	Not Applicable.
Explanation 34:	Not Applicable.
Bar Code:	

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES





























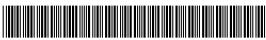




















OVERFLOW PAGE FOR WRITE-INS

Page 11 - Continuation

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
REMAINING WRITE-INS AGGREGATED AT LINE 24	Loss Adjustment	Other Underwriting	Investment	
FOR OTHER LINES OF BUSINESS	Expenses	Expenses	Expenses	Total
2404. Disaster Recovery Expense		47,906		47,906
2497. Totals (Lines 2404 through 2496)				
(Page 11, Line 24)		47,906		47,906

SUMMARY INVESTMENT SCHEDULE

		Gross Inve			Admitted Assets a	•	
		1	2	3	4 Securities Lending Reinvested Collateral	5 Total (Col. 3 + 4)	6
	Investment Categories	Amount	Percentage	Amount	Amount	Amount	Percentage
1. Bond	ds:	-				-	
	U.S. treasury securities U.S. government agency obligations (excluding mortgage-backed securities):						
	1.21 Issued by U.S. government agencies 1.22 Issued by U.S. government sponsored agencies						
1.3	Non-U.S. government (including Canada, excluding mortgage-backed securities)						
1.4	Securities issued by states, territories, and possessions						
	and political subdivisions in the U.S.:						
	1.41 States, territories and possessions general obligations						
	1.42 Political subdivisions of states, territories and possessions and political subdivisions general obligations						
	1.43 Revenue and assessment obligations						
	1.44 Industrial development and similar obligations						
1.5	Mortgage-backed securities (includes residential and commercial MBS):						
	1.51 Pass-through securities:						
	1.511 Issued or guaranteed by GNMA						
	1.512 Issued or guaranteed by FNMA and FHLMC 1.513 All other						
	1.52 CMOs and REMICs:						
	1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA						
	1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-						
	backed securities issued or guaranteed by agencies shown in Line 1.521						
2 Otha	1.523 All other						
2. Otne 2.1	r debt and other fixed income securities (excluding short term): Unaffiliated domestic securities (includes credit tenant loans and hybrid securities)						
2.2							
2.3	Affiliated securities						
3. Equi	ty interests:						
3.1	Investments in mutual funds						
3.2	Preferred stocks:						
	3.21 Affiliated 3.22 Unaffiliated						
3.3	23.22 Unaffiliated Publicly traded equity securities (excluding preferred stocks):						
	3.31 Affiliated						
	3.32 Unaffiliated						
3.4	Other equity securities:						
	3.41 Affiliated						
3.5	3.42 Unaffiliated Other equity interests including tangible personal property under lease:						
0.0	3.51 Affiliated						
	3.52 Unaffiliated						
	gage loans:						
4.1	Construction and land development						
4.2	Agricultural						
4.3 4.4	Single family residential properties						
4.5	Multifamily residential properties Commercial loans						
4.6	Mezzanine real estate loans						
5. Real	estate investments:						
	Property occupied by company						
5.2	Property held for production of income (including \$ 0 of property						
	acquired in satisfaction of debt)						
5.3	Property held for sale (including \$ 0 property acquired in satisfaction of debt)						
6. Cont	satisfaction of debt) ract loans						
	ratives						
	sivables for securities						
9. Secu	urities Lending (Line 10, Asset Page reinvested collateral)				XXX	X X X	XXX
	n, cash equivalents and short-term investments	60,581,310	100.00	60,581,310		60,581,310	100.00
	r invested assets	00 504 045	100.00	00 504 046		00 504 040	100.00
ız. Tota	invested assets	60,581,310	100.00	60,581,310	<u> </u>	60,581,310	100.00

NONE Schedule A and B Verification

NONE Schedule BA and D Verification

NONE Schedule D - Summary

NONE Schedule D - Part 1A - Sect 1 (3 pgs)

NONE Schedule D - Part 1A - Sect 2 (2 pgs)

NONE Schedule DA Verification

NONE Schedule DB - Part A and B Verification

NONE Schedule DB - Part C - Section 1

NONE Schedule DB - Part C - Section 2

NONE Schedule DB - Verification

NONE Schedule E Verification

NONE Schedule A - Part 1

NONE Schedule A - Part 2

NONE Schedule A - Part 3

NONE Schedule B - Part 1

NONE Schedule B - Part 2

NONE Schedule B - Part 3

NONE Schedule BA - Part 1

NONE Schedule BA - Part 2

NONE Schedule BA - Part 3

NONE Schedule D - Part 1

NONE Schedule D - Part 2 - Section 1

NONE Schedule D - Part 2 - Section 2

NONE Schedule D - Part 3

NONE Schedule D - Part 4

NONE Schedule D - Part 5

NONE Schedule D - Part 6 - Section 1 and 2

NONE Schedule DA - Part 1

NONE Schedule DB - Part A - Section 1

NONE Schedule DB - Part A - Section 2

NONE Schedule DB - Part B - Section 1

NONE Schedule DB - Part B - Section 2

NONE Schedule DB - Part D - Section 1

NONE Schedule DB - Part D - Section 2

NONE Schedule DL - Part 1

NONE Schedule DL - Part 2

SCHEDULE E - PART 1 - CASH

1 Depository		2 Code	3 Rate of Interest	4 Amount of Interest Received During Year	5 Amount of Interest Accrued December 31 of Current Year	6 Balance	7
OPEN DEPOSITORIES							
Bank of America, N.A Certificate of Deposit	Austin, TX Due March 21, 2016		0.350	14,156		1,777,710	
Bank of America, N.A Certificate of Deposit	Due September 6, 2016		0.450				
Bank of America, N.A Certificate of Deposit	Due March 6, 2017 Due December 5, 2016		0.870 0.550		16,820	6,000,000	
Bank of America, N.A Certificate of Deposit Bank of America, N.A Certificate of Deposit	Due June 5, 2017		0.550	8,250	2,961	5,000,000	
Bank of America, N.A Certificate of Deposit	Due February 21, 2017		0.870		15,467	5,000,000	
Citibank, N.A Certificate of Deposit	Dallas, TX Due July 15, 2016		0.200	986		86,330	
Citibank, N.A MMTD	Dallas, TX	0	0.490	50,767		12,050,767	
Citibank, N.A MMDA	Dallas, TX		0.150	6,234		1,953	
JP Morgan Chase Bank, N.A. JP Morgan Chase Bank, N.A Certificate of Deposit	San Antonio, TX Due May 23, 2016		0.400	8,336		10,585,915	
JP Morgan Chase Bank, N.A Certificate of Deposit	Due June 23, 2016		0.440	11,042			
JP Morgan Chase Bank, N.A Certificate of Deposit	Due July 23, 2016 Due October 23, 2016		0.470	13,732			
JP Morgan Chase Bank, N.A Certificate of Deposit JP Morgan Chase Bank, N.A Certificate of Deposit	Due October 23, 2016 Due April 23, 2017		0.400		6,638	5,020,106	
JP Morgan Chase Bank, N.A Certificate of Deposit	Due January 23, 2017		0.480		10,763	5,013,732	
JP Morgan Chase Bank, N.A MMDA Wells Fargo Certificate of Deposit	San Antonio, TX Due April 18, 2016		0.210 0.200	1,722 10,030		1,614	
Wells Fargo Certificate of Deposit	Due April 30, 2016		0.200				
Wells Fargo Certificate of Deposit	Due May 18, 2016		0.100	855			
Wells Fargo Certificate of Deposit Wells Fargo Certificate of Deposit	Due May 30, 2016 Due June 17, 2016		0.100 0.100	452 822			
Wells Fargo Certificate of Deposit	Due November 17, 2016		0.350	7,345			
Wells Fargo Certificate of Deposit	Due May 17, 2017		0.540		3,317	5,025,073	
Wells Fargo Certificate of Deposit Wells Fargo Certificate of Deposit	Due August 17, 2016 Due February 17, 2017		0.200 0.500	1,672	9,456	5,018,110	
0199998 Deposits in (0) depositories not exceed the allowable limit in any one d (See Instructions) - open depositories		XXX	XXX				XXX
0199999 Totals - Open Depositories		XXX	XXX	193,781	65,422	60,581,310	XXX
SUSPENDED DEPOSITOR	RIES						
0299998 Deposits in (0) depositories not exceed the allowable limit in any one d (See Instructions) - suspended depositorie	epository	xxx	XXX				XXX
0299999 Totals - Suspended Depositories		XXX	XXX				
0399999 Total Cash on Deposit							XXX
		XXX	XXX	193,781	65,422	60,581,310	XXX
0499999 Cash in Company's Office		XXX		193,781 X X X	65,422 X X X	60,581,310	
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office			XXX	,	,	60,581,310	XXX
0499999 Cash in Company's Office 0599999 Total Cash			XXX	,	,	60,581,310	XXX

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

1. January	75,429,180	4. April	64,849,282	7. July	56,608,760	10. October	55,975,515
2. February	75,635,757	5. May	63,946,470	8. August	59,678,559	11. November	58,521,861
3. March	75,534,089	6. June	64.566.428	9. September	62.166.918	12. December	60.581.310

NONE Schedule E - Part 2

NONE Schedule E - Part 3

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