



## PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

**ANNUAL STATEMENT  
For the Year Ended December 31, 2015  
OF THE CONDITION AND AFFAIRS OF THE  
GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

NAIC Group Code	00267 (Current Period)	00267 (Prior Period)	NAIC Company Code	11982	Employer's ID Number	42-1610213
Organized under the Laws of		Ohio	, State of Domicile or Port of Entry		Ohio	
Country of Domicile		United States				
Incorporated/Organized	04/01/2004		Commenced Business	05/21/2004		
Statutory Home Office	671 South High Street (Street and Number)		, Columbus, OH, US 43206-1014		(City or Town, State, Country and Zip Code)	
Main Administrative Office	671 South High Street (Street and Number)		Columbus, OH, US 43206-1014		614-445-2900 (Area Code) (Telephone Number)	
Mail Address	671 South High Street, P.O. Box 1218 (Street and Number or P.O. Box)		, Columbus, OH, US 43216-1218		(City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	671 South High Street (Street and Number)		Columbus, OH, US 43206-1014		614-445-2900 (Area Code) (Telephone Number)	
Internet Web Site Address	www.grangeinsurance.com					
Statutory Statement Contact	David Sidney Ackermann (Name)		614-445-2900 (Area Code) (Telephone Number) (Extension)			
	ackermannnd@grangeinsurance.com (E-Mail Address)		614-449-3757 (Fax Number)			

## OFFICERS

Name	Title	Name	Title
JOHN (NMN) AMMENDOLA	PRESIDENT & CEO	LAVAWN DEE COLEMAN	EVP & SECRETARY
JOHN PAUL MCCAFFREY	EVP & CFO		

## OTHER OFFICERS

JOHN CHRISTOPHER MONTGOMERY, VP - INVESTMENTS, DIRECTORS OR TRUSTEES

## **DIRECTORS OR TRUSTEES**

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ROBERT ENLOW HOYT      JOHN PAUL MCCAFFREY      MARY MARNETTE PERRY      MELVIN GEORGE PYE JR  
THOMAS SIMRALL STEWART      DAVID CHARLES WETMORE      CHRISTIANNA (NMN) WOOD

State of ..... Ohio .....  
County of ..... Franklin .....

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

JOHN (NMN) AMMENDOLA  
PRESIDENT & CEO

LAVAWN DEE COLEMAN  
EVP & SECRETARY

JOHN PAUL MCCAFFREY  
EVP & CFO

a. Is this an original filing? Yes [  ] No [  ]  
b. If no:  
1. State the amendment number \_\_\_\_\_  
2. Date filed \_\_\_\_\_  
3. Number of pages attached \_\_\_\_\_

Subscribed and sworn to before me  
this 22nd day of February, 2016

Teresa J. Burchwell, Notary Public  
April 28, 2017

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**ASSETS**

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	57,618,944		57,618,944	51,648,648
2. Stocks (Schedule D):				
2.1 Preferred stocks .....	0		0	0
2.2 Common stocks .....	0		0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....			0	0
3.2 Other than first liens .....			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ ..... encumbrances).....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ ..... encumbrances) .....			0	0
5. Cash (\$ ..... 1,497,098 , Schedule E-Part 1), cash equivalents (\$ ..... 0 , Schedule E-Part 2) and short-term investments (\$ ..... 0 , Schedule DA).....	1,497,098		1,497,098	607,851
6. Contract loans (including \$ ..... premium notes).....			0	0
7. Derivatives (Schedule DB).....	0		0	0
8. Other invested assets (Schedule BA).....	0		0	0
9. Receivables for securities .....	.875		.875	2,063
10. Securities lending reinvested collateral assets (Schedule DL).....	917,622		917,622	917,005
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	60,034,539	0	60,034,539	53,175,567
13. Title plants less \$ ..... charged off (for Title insurers only).....			0	0
14. Investment income due and accrued .....	583,213		583,213	529,469
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	4,772,330	28,332	4,743,998	4,757,507
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... 14,821 earned but unbilled premiums).....	15,562	741	14,821	10,316
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....			0	0
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....			0	0
18.2 Net deferred tax asset.....	779,635		779,635	810,825
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software.....			0	0
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	566,317		566,317	905,594
24. Health care (\$ ..... ) and other amounts receivable.....			0	0
25. Aggregate write-ins for other-than-invested assets .....	15,614	0	15,614	13,579
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	66,767,210	29,073	66,738,137	60,202,857
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	0
28. Total (Lines 26 and 27) .....	66,767,210	29,073	66,738,137	60,202,857
<b>DETAILS OF WRITE-INS</b>				
1101. ....			0	0
1102. ....			0	0
1103. ....			0	0
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) .....	0	0	0	0
2501. Equities in Pools.....	15,614		15,614	13,579
2502. ....			0	0
2503. ....			0	0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	15,614	0	15,614	13,579

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	10,609,483	9,216,033
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	0	0
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	2,871,087	2,610,631
4. Commissions payable, contingent commissions and other similar charges	405,378	371,956
5. Other expenses (excluding taxes, licenses and fees)	644,296	668,354
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	266,959	280,130
7.1 Current federal and foreign income taxes (including \$ 2,200 on realized capital gains (losses))	1,974,001	1,734,905
7.2 Net deferred tax liability	0	0
8. Borrowed money \$ and interest thereon \$	0	0
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 90,683,252 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)	9,594,767	9,653,618
10. Advance premium	1,715,508	1,433,611
11. Dividends declared and unpaid:		
11.1 Stockholders	0	0
11.2 Policyholders	39,984	26,803
12. Ceded reinsurance premiums payable (net of ceding commissions)	0	0
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)	0	0
14. Amounts withheld or retained by company for account of others	0	0
15. Remittances and items not allocated	0	0
16. Provision for reinsurance (including \$ certified) (Schedule F, Part 8)	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates	0	0
18. Drafts outstanding	0	0
19. Payable to parent, subsidiaries and affiliates	0	0
20. Derivatives	0	0
21. Payable for securities	0	0
22. Payable for securities lending	917,622	917,005
23. Liability for amounts held under uninsured plans	0	0
24. Capital notes \$ and interest thereon \$	0	0
25. Aggregate write-ins for liabilities	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	29,039,084	26,913,045
27. Protected cell liabilities	0	0
28. Total liabilities (Lines 26 and 27)	29,039,084	26,913,045
29. Aggregate write-ins for special surplus funds	0	0
30. Common capital stock	2,000,000	2,000,000
31. Preferred capital stock	0	0
32. Aggregate write-ins for other-than-special surplus funds	0	0
33. Surplus notes	0	0
34. Gross paid in and contributed surplus	13,000,000	13,000,000
35. Unassigned funds (surplus)	22,699,053	18,289,812
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$ )	0	0
36.2 shares preferred (value included in Line 31 \$ )	0	0
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	37,699,053	33,289,812
38. Totals (Page 2, Line 28, Col. 3)	66,738,137	60,202,857
<b>DETAILS OF WRITE-INS</b>		
2501.	0	0
2502.	0	0
2503.	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	0	0
2901.	0	0
2902.	0	0
2903.	0	0
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0
3201.	0	0
3202.	0	0
3203.	0	0
3298. Summary of remaining write-ins for Line 32 from overflow page	0	0
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)	0	0

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**STATEMENT OF INCOME**

	1 Current Year	2 Prior Year
<b>UNDERWRITING INCOME</b>		
1. Premiums earned (Part 1, Line 35, Column 4) .....	24,506,767	23,630,623
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7) .....	14,039,631	13,584,445
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1) .....	2,904,341	2,705,133
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2) .....	7,489,831	7,381,420
5. Aggregate write-ins for underwriting deductions .....	0	0
6. Total underwriting deductions (Lines 2 through 5) .....	24,433,802	23,670,998
7. Net income of protected cells .....	72,965	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7) .....	72,965	(40,375)
<b>INVESTMENT INCOME</b>		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17) .....	1,732,196	1,526,805
10. Net realized capital gains (losses) less capital gains tax of \$ 2,200 (Exhibit of Capital Gains (Losses)) .....	4,085	(1,282)
11. Net investment gain (loss) (Lines 9 + 10) .....	1,736,281	1,525,523
<b>OTHER INCOME</b>		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ 2,108 amount charged off \$ 144,824) .....	(142,716)	(130,005)
13. Finance and service charges not included in premiums .....	4,702,687	4,469,466
14. Aggregate write-ins for miscellaneous income .....	101,000	82,761
15. Total other income (Lines 12 through 14) .....	4,660,971	4,422,222
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15) .....	6,470,217	5,907,369
17. Dividends to policyholders .....	65,975	65,800
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) .....	6,404,242	5,841,569
19. Federal and foreign income taxes incurred .....	1,971,801	1,735,595
20. Net income (Line 18 minus Line 19) (to Line 22) .....	4,432,441	4,105,974
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2) .....	33,289,812	29,212,991
22. Net income (from Line 20) .....	4,432,441	4,105,974
23. Net transfers (to) from Protected Cell accounts .....	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ .....	0	0
25. Change in net unrealized foreign exchange capital gain (loss) .....	0	0
26. Change in net deferred income tax .....	(31,190)	(85,780)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3) .....	7,990	56,626
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1) .....	0	0
29. Change in surplus notes .....	0	0
30. Surplus (contributed to) withdrawn from protected cells .....	0	0
31. Cumulative effect of changes in accounting principles .....	0	0
32. Capital changes:		
32.1 Paid in .....	0	0
32.2 Transferred from surplus (Stock Dividend) .....	0	0
32.3 Transferred to surplus .....	0	0
33. Surplus adjustments:		
33.1 Paid in .....	0	0
33.2 Transferred to capital (Stock Dividend) .....	0	0
33.3 Transferred from capital .....	0	0
34. Net remittances from or (to) Home Office .....	0	0
35. Dividends to stockholders .....	0	0
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1) .....	0	0
37. Aggregate write-ins for gains and losses in surplus .....	0	0
38. Change in surplus as regards policyholders for the year (Lines 22 through 37) .....	4,409,241	4,076,820
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37) .....	37,699,053	33,289,812
<b>DETAILS OF WRITE-INS</b>		
0501. .....	0	0
0502. .....	0	0
0503. .....	0	0
0598. Summary of remaining write-ins for Line 5 from overflow page .....	0	0
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above) .....	0	0
1401. Miscellaneous Income .....	101,000	82,761
1402. .....		
1403. .....		
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above) .....	101,000	82,761
3701. .....		
3702. .....		
3703. .....		
3798. Summary of remaining write-ins for Line 37 from overflow page .....	0	0
3799. Totals (Lines 3701 through 3703 plus 3798) (Line 37 above) .....	0	0

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**CASH FLOW**

		1 Current Year	2 Prior Year
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance .....		24,746,807	24,274,375
2. Net investment income .....		1,979,934	1,806,966
3. Miscellaneous income .....		4,660,971	4,422,222
4. Total (Lines 1 through 3) .....		31,387,712	30,503,564
5. Benefit and loss related payments .....		12,646,181	12,770,598
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....		0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....		10,137,523	10,121,962
8. Dividends paid to policyholders .....		52,794	58,898
9. Federal and foreign income taxes paid (recovered) net of \$ 2,200 tax on capital gains (losses) .....		1,734,905	1,723,070
10. Total (Lines 5 through 9) .....		24,571,403	24,674,528
11. Net cash from operations (Line 4 minus Line 10) .....		6,816,309	5,829,036
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....		9,438,641	6,600,970
12.2 Stocks .....		0	0
12.3 Mortgage loans .....		0	0
12.4 Real estate .....		0	0
12.5 Other invested assets .....		0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....		0	0
12.7 Miscellaneous proceeds .....		1,188	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....		9,439,829	6,600,970
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....		15,704,135	12,919,142
13.2 Stocks .....		0	0
13.3 Mortgage loans .....		0	0
13.4 Real estate .....		0	0
13.5 Other invested assets .....		0	0
13.6 Miscellaneous applications .....		0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....		15,704,135	12,919,142
14. Net increase (decrease) in contract loans and premium notes .....		0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....		(6,264,306)	(6,318,172)
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....		0	0
16.2 Capital and paid in surplus, less treasury stock .....		0	0
16.3 Borrowed funds .....		0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....		0	0
16.5 Dividends to stockholders .....		0	0
16.6 Other cash provided (applied) .....		337,243	156,448
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....		337,243	156,448
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....		889,246	(332,688)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year .....		607,851	940,539
19.2 End of year (Line 18 plus Line 19.1) .....		1,497,098	607,851

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 1 - PREMIUMS EARNED**

Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Fire	346,900	190,571	190,467	347,004
2. Allied lines	184,711	103,555	102,098	186,168
3. Farmowners multiple peril	381,427	205,872	192,531	394,768
4. Homeowners multiple peril	5,408,057	2,974,106	2,960,971	5,421,192
5. Commercial multiple peril	2,426,428	1,170,979	1,177,341	2,420,066
6. Mortgage guaranty	0	0	0	0
8. Ocean marine	0	0	0	0
9. Inland marine	166,483	88,104	88,248	166,338
10. Financial guaranty	0	0	0	0
11.1 Medical professional liability-occurrence	0	0	0	0
11.2 Medical professional liability-claims-made	0	0	0	0
12. Earthquake	44,920	25,987	24,437	46,470
13. Group accident and health	632	0	0	632
14. Credit accident and health (group and individual)	0	0	0	0
15. Other accident and health	0	0	0	0
16. Workers' compensation	751,927	322,138	316,932	757,132
17.1 Other liability-occurrence	309,336	194,805	182,109	322,032
17.2 Other liability-claims-made	5,922	25	1,958	3,989
17.3 Excess workers' compensation	0	0	0	0
18.1 Products liability-occurrence	369	548	237	681
18.2 Products liability-claims-made	0	0	0	0
19.1,19.2 Private passenger auto liability	6,600,916	1,707,827	1,779,380	6,529,363
19.3,19.4 Commercial auto liability	1,893,795	1,013,271	834,894	2,072,172
21. Auto physical damage	5,925,762	1,655,695	1,743,048	5,838,408
22. Aircraft (all perils)	0	0	0	0
23. Fidelity	0	0	0	0
24. Surety	.26	0	0	.26
26. Burglary and theft	.306	.135	.114	.327
27. Boiler and machinery	0	0	0	0
28. Credit	0	0	0	0
29. International	0	0	0	0
30. Warranty	0	0	0	0
31. Reinsurance-nonproportional assumed property	0	0	0	0
32. Reinsurance-nonproportional assumed liability	0	0	0	0
33. Reinsurance-nonproportional assumed financial lines	0	0	0	0
34. Aggregate write-ins for other lines of business	0	0	0	0
35. TOTALS	24,447,916	9,653,618	9,594,767	24,506,767
<b>DETAILS OF WRITE-INS</b>				
3401.	0	0	0	0
3402.	0	0	0	0
3403.	0	0	0	0
3498. Sum. of remaining write-ins for Line 34 from overflow page	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0	0

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 1A - RECAPITULATION OF ALL PREMIUMS**

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned but Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1. Fire .....	190,467				190,467
2. Allied lines .....	102,098				102,098
3. Farmowners multiple peril .....	192,531				192,531
4. Homeowners multiple peril .....	2,960,971				2,960,971
5. Commercial multiple peril .....	1,177,341				1,177,341
6. Mortgage guaranty .....					0
8. Ocean marine .....					0
9. Inland marine .....	88,248				88,248
10. Financial guaranty .....					0
11.1 Medical professional liability-occurrence .....					0
11.2 Medical professional liability-claims-made .....					0
12. Earthquake .....	24,437				24,437
13. Group accident and health .....					0
14. Credit accident and health (group and individual) .....					0
15. Other accident and health .....					0
16. Workers' compensation .....	316,932				316,932
17.1 Other liability-occurrence .....	182,109				182,109
17.2 Other liability-claims-made .....	1,958				1,958
17.3 Excess workers' compensation .....					0
18.1 Products liability-occurrence .....	237				237
18.2 Products liability-claims-made .....					0
19.1,19.2 Private passenger auto liability .....	1,779,380				1,779,380
19.3,19.4 Commercial auto liability .....	834,894				834,894
21. Auto physical damage .....	1,743,048				1,743,048
22. Aircraft (all perils) .....					0
23. Fidelity .....					0
24. Surety .....					0
26. Burglary and theft .....	114				114
27. Boiler and machinery .....					0
28. Credit .....					0
29. International .....					0
30. Warranty .....					0
31. Reinsurance-nonproportional assumed property .....					0
32. Reinsurance-nonproportional assumed liability .....					0
33. Reinsurance-nonproportional assumed financial lines .....					0
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0
35. TOTALS .....	9,594,767	0	0	0	9,594,767
36. Accrued retrospective premiums based on experience .....					
37. Earned but unbilled premiums .....					
38. Balance (Sum of Lines 35 through 37) .....					9,594,767
<b>DETAILS OF WRITE-INS</b>					
3401. ....					0
3402. ....					0
3403. ....					0
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above) .....	0	0	0	0	0

(a) State here basis of computation used in each case.

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 1B - PREMIUMS WRITTEN**

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1 + 2 + 3 - 4 - 5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire .....		346,900	90,730	90,730		346,900
2. Allied lines .....		184,711	31,587	31,587		184,711
3. Farmowners multiple peril .....		381,427				381,427
4. Homeowners multiple peril .....	87,001,246	5,408,057	253,684	83,832,112	3,422,818	5,408,057
5. Commercial multiple peril .....		2,426,428				2,426,428
6. Mortgage guaranty .....						0
8. Ocean marine .....						0
9. Inland marine .....	2,409,886	166,483		2,307,912	101,974	166,483
10. Financial guaranty .....						0
11.1 Medical professional liability-occurrence .....						0
11.2 Medical professional liability-claims-made .....						0
12. Earthquake .....	544,224	44,920		520,972	23,252	44,920
13. Group accident and health .....		632				632
14. Credit accident and health (group and individual) .....						0
15. Other accident and health .....						0
16. Workers' compensation .....		751,927				751,927
17.1 Other liability-occurrence .....	2,070,765	309,336		2,070,765		309,336
17.2 Other liability-claims-made .....		5,922				5,922
17.3 Excess workers' compensation .....						0
18.1 Products liability-occurrence .....		369				369
18.2 Products liability-claims-made .....						0
19.1, 19.2 Private passenger auto liability .....	92,715,033	6,600,916		92,446,892	268,141	6,600,916
19.3, 19.4 Commercial auto liability .....		1,893,795				1,893,795
21. Auto physical damage .....	72,483,183	5,925,762		71,986,209	496,973	5,925,762
22. Aircraft (all perils) .....						0
23. Fidelity .....						0
24. Surety .....		26				26
26. Burglary and theft .....		306				306
27. Boiler and machinery .....						0
28. Credit .....						0
29. International .....						0
30. Warranty .....						0
31. Reinsurance-nonproportional assumed property .....	XXX					0
32. Reinsurance-nonproportional assumed liability .....	XXX					0
33. Reinsurance-nonproportional assumed financial lines .....	XXX					0
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0	0
35. TOTALS .....	257,224,336	24,447,916	376,001	253,287,179	4,313,158	24,447,916
<b>DETAILS OF WRITE-INS</b>						
3401. ....						0
3402. ....						0
3403. ....						0
3498. Sum. of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above) .....	0	0	0	0	0	0

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

If yes: 1. The amount of such installment premiums \$ .....

2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$ .....

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2 - LOSSES PAID AND INCURRED**

Line of Business	Direct Business	Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A, Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
		1 Reinsurance Assumed	2 Reinsurance Recovered	3 Net Payments (Cols. 1 + 2 - 3)	4				
1. Fire .....		170,820	39,441	131,379		24,611	24,214	131,777	38.0
2. Allied lines .....		57,922	12,448	45,474		22,829	31,858	36,444	19.6
3. Farmowners multiple peril .....		137,517		137,517		.69,514	.60,455	.146,575	.37.1
4. Homeowners multiple peril .....	..32,085,359	2,410,636	32,196,420	2,299,575		552,406	605,012	2,246,968	41.4
5. Commercial multiple peril .....		1,140,943		1,140,943		1,590,781	1,615,112	1,116,612	46.1
6. Mortgage guaranty .....				0		0	0	0	0.0
8. Ocean marine .....				0		0	0	0	0.0
9. Inland marine .....	675,784	.69,144	675,784	.69,144		16,273	25,516	.59,901	.36.0
10. Financial guaranty .....				0		0	0	0	0.0
11.1 Medical professional liability-occurrence .....				0		0	0	0	0.0
11.2 Medical professional liability-claims-made .....				0		0	0	0	0.0
12. Earthquake .....				0		0	0	0	0.0
13. Group accident and health .....		.229		.229		.400	15,091	..(14,462)	(2,288.8)
14. Credit accident and health (group and individual) .....				0		0	0	0	0.0
15. Other accident and health .....				0		0	0	0	0.0
16. Workers' compensation .....		342,890		342,890		735,245	731,770	.346,365	45.7
17.1 Other liability-occurrence .....	294,250	187,271	294,250	187,271		463,774	387,756	.263,289	.81.8
17.2 Other liability-claims-made .....		(5,604)		(5,604)		7,885	.5,273	(2,992)	(75.0)
17.3 Excess workers' compensation .....				0		0	0	0	0.0
18.1 Products liability-occurrence .....		.148		.148		.988	.1,310	..(175)	(25.7)
18.2 Products liability-claims-made .....				0		0	0	0	0.0
19.1,19.2 Private passenger auto liability .....	.50,909,918	3,900,243	.50,909,918	3,900,243		4,221,311	3,848,410	.4,273,144	.65.4
19.3,19.4 Commercial auto liability .....		1,091,652		1,091,652		2,901,403	1,862,686	.2,130,369	102.8
21. Auto physical damage .....	.43,813,703	.3,305,318	.43,813,703	.3,305,318		2,022	.1,528	.3,305,813	.56.6
22. Aircraft (all perils) .....		2		2		.10	.10	2	0.0
23. Fidelity .....				0		0	0	0	0.0
24. Surety .....				0		.13	.17	..(3)	(12.5)
26. Burglary and theft .....				0		.18	.14	.4	.1.3
27. Boiler and machinery .....				0		0	0	0	0.0
28. Credit .....				0		0	0	0	0.0
29. International .....				0		0	0	0	0.0
30. Warranty .....				0		0	0	0	0.0
31. Reinsurance-nonproportional assumed property .....	XXX			0		0	0	0	0.0
32. Reinsurance-nonproportional assumed liability .....	XXX			0		0	0	0	0.0
33. Reinsurance-nonproportional assumed financial lines .....	XXX			0		0	0	0	0.0
34. Aggregate write-ins for other lines of business .....	0	0	0	0		0	0	0	0.0
35. TOTALS .....	127,779,014	12,809,131	127,941,963	12,646,181		10,609,483	9,216,033	14,039,631	57.3
<b>DETAILS OF WRITE-INS</b>									
3401. ....				0		0	0	0	0.0
3402. ....				0		0	0	0	0.0
3403. ....				0		0	0	0	0.0
3498. Sum. of remaining write-ins for Line 34 from overflow page .....	0	0	0	0		0	0	0	0.0
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above) .....	0	0	0	0		0	0	0	0.0

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES**

Line of Business	Reported Losses				Incurred But Not Reported			8	9
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire .....		13,254	1,640	11,614		18,050	5,052	24,611	11,148
2. Allied lines .....		17,711	1,853	15,857		7,426	455	22,829	7,447
3. Farmowners multiple peril .....		42,044		42,044		27,470		69,514	22,797
4. Homeowners multiple peril .....	6,897,557	388,225	6,928,709	357,073	2,501,094	211,718	2,517,479	552,406	220,480
5. Commercial multiple peril .....		782,975		782,975		807,805		1,590,781	810,781
6. Mortgage guaranty .....				0				0	
8. Ocean marine .....				0				0	
9. Inland marine .....	137,629	12,387	137,629	12,387	.44,025	3,886	44,025	.16,273	4,585
10. Financial guaranty .....				0				0	
11.1 Medical professional liability-occurrence .....				0				0	
11.2 Medical professional liability-claims-made .....				0				0	
12. Earthquake .....				0		0		0	(14)
13. Group accident and health .....		400		400				(a) 400	44
14. Credit accident and health (group and individual) .....				0				0	
15. Other accident and health .....				0				(a) 0	
16. Workers' compensation .....		411,014		411,014		324,231		735,245	146,302
17.1 Other liability-occurrence .....	16,762	219,674	16,762	219,674	1,617,986	244,100	1,617,986	463,774	21,644
17.2 Other liability-claims-made .....		5,809		5,809		2,076		7,885	1,601
17.3 Excess workers' compensation .....				0				0	
18.1 Products liability-occurrence .....		636		636		352		.988	465
18.2 Products liability-claims-made .....				0				0	
19.1,19.2 Private passenger auto liability .....	38,213,765	2,991,907	38,213,765	2,991,907	17,135,524	1,229,403	17,135,524	4,221,311	1,062,537
19.3,19.4 Commercial auto liability .....		1,530,161		1,530,161		1,371,242		2,901,403	405,695
21. Auto physical damage .....	(2,776,618)	(176,763)	(2,776,618)	(176,763)	1,715,548	178,785	1,715,548	2,022	155,572
22. Aircraft (all perils) .....		10		10				10	
23. Fidelity .....				0				0	
24. Surety .....		13		13				13	
26. Burglary and theft .....				0		18		18	
27. Boiler and machinery .....				0				0	
28. Credit .....				0				0	
29. International .....				0				0	
30. Warranty .....				0				0	
31. Reinsurance-nonproportional assumed property .....	XXX			0	XXX			0	
32. Reinsurance-nonproportional assumed liability .....	XXX			0	XXX			0	
33. Reinsurance-nonproportional assumed financial lines .....	XXX			0	XXX			0	
34. Aggregate write-ins for other lines of business .....	0	.0	0	0	0	0	0	0	.0
35. TOTALS .....	42,489,094	6,239,458	42,523,740	6,204,812	23,014,177	4,426,562	23,036,069	10,609,483	2,871,087
<b>DETAILS OF WRITE-INS</b>									
3401. ....					0			0	
3402. ....					0			0	
3403. ....					0			0	
3498. Sum. of remaining write-ins for Line 34 from overflow page .....	0	.0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above) .....	0	0	0	0	0	0	0	0	0

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

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 3 - EXPENSES**

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1. Claim adjustment services:				
1.1 Direct .....	5,882,448	0	0	5,882,448
1.2 Reinsurance assumed .....	966,931	0	0	966,931
1.3 Reinsurance ceded .....	5,882,448	0	0	5,882,448
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3) .....	966,931	0	0	966,931
2. Commission and brokerage:				
2.1 Direct, excluding contingent .....	37,746,317	0	0	37,746,317
2.2 Reinsurance assumed, excluding contingent .....	3,619,992	0	0	3,619,992
2.3 Reinsurance ceded, excluding contingent .....	37,746,317	0	0	37,746,317
2.4 Contingent-direct .....	4,396,152	0	0	4,396,152
2.5 Contingent-reinsurance assumed .....	417,511	0	0	417,511
2.6 Contingent-reinsurance ceded .....	4,396,152	0	0	4,396,152
2.7 Policy and membership fees .....	0	0	0	0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7) .....	0	4,037,503	0	4,037,503
3. Allowances to manager and agents .....	370	66,865	0	67,235
4. Advertising .....	198	40,292	0	40,490
5. Boards, bureaus and associations .....	17,791	44,520	139	62,450
6. Surveys and underwriting reports .....	0	212,716	0	212,716
7. Audit of assureds' records .....	0	9,459	0	9,459
8. Salary and related items:				
8.1 Salaries .....	1,059,374	1,267,123	26,679	2,353,176
8.2 Payroll taxes .....	72,722	99,524	3,032	175,278
9. Employee relations and welfare .....	316,168	356,173	13,754	686,096
10. Insurance .....	16,337	17,089	3,296	36,722
11. Directors' fees .....	11,416	16,145	410	27,971
12. Travel and travel items .....	46,122	49,136	1,078	96,336
13. Rent and rent items .....	48,979	10,935	137,920	197,835
14. Equipment .....	48,337	84,731	0	133,069
15. Cost or depreciation of EDP equipment and software .....	20,208	59,257	0	79,465
16. Printing and stationery .....	7,985	21,249	386	29,620
17. Postage, telephone and telegraph, exchange and express .....	47,419	155,466	5,231	208,116
18. Legal and auditing .....	6,780	16,512	232	23,525
19. Totals (Lines 3 to 18) .....	1,720,207	2,527,193	192,156	4,439,557
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ .....	0	518,776	0	518,776
20.2 Insurance department licenses and fees .....	0	31,832	0	31,832
20.3 Gross guaranty association assessments .....	0	1,109	0	1,109
20.4 All other (excluding federal and foreign income and real estate) .....	0	6,254	0	6,254
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4) .....	0	557,971	0	557,971
21. Real estate expenses .....	0	0	0	0
22. Real estate taxes .....	0	0	0	0
23. Reimbursements by uninsured plans .....	0	0	0	0
24. Aggregate write-ins for miscellaneous expenses .....	217,202	367,164	57,971	642,338
25. Total expenses incurred .....	2,904,341	7,489,831	250,128	(a) 10,644,299
26. Less unpaid expenses-current year .....	2,871,087	1,314,410	2,223	4,187,720
27. Add unpaid expenses-prior year .....	2,610,631	1,318,217	2,223	3,931,071
28. Amounts receivable relating to uninsured plans, prior year .....	0	0	0	0
29. Amounts receivable relating to uninsured plans, current year .....	0	0	0	0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29) .....	2,643,885	7,493,638	250,128	10,387,650
<b>DETAILS OF WRITE-INS</b>				
2401. Software Expense .....	90,605	137,747	7,788	236,140
2402. Miscellaneous Expense .....	71,843	153,910	47,652	273,404
2403. Donations .....	9,913	12,515	318	22,745
2498. Summary of remaining write-ins for Line 24 from overflow page .....	44,842	62,993	2,214	110,049
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above) .....	217,202	367,164	57,971	642,338

(a) Includes management fees of \$ 5,081,895 to affiliates and \$ to non-affiliates.

## EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds .....	(a) 267,314	259,223
1.1 Bonds exempt from U.S. tax .....	(a) 788,953	806,255
1.2 Other bonds (unaffiliated) .....	(a) 870,988	915,522
1.3 Bonds of affiliates .....	(a) 0	0
2.1 Preferred stocks (unaffiliated) .....	(b) 0	0
2.11 Preferred stocks of affiliates .....	(b) 0	0
2.2 Common stocks (unaffiliated) .....	0	0
2.21 Common stocks of affiliates .....	0	0
3. Mortgage loans .....	(c) .....	.....
4. Real estate .....	(d) .....	.....
5. Contract loans .....	.....	.....
6. Cash, cash equivalents and short-term investments .....	(e) .....	.....
7. Derivative instruments .....	(f) .....	.....
8. Other invested assets .....	.....	.....
9. Aggregate write-ins for investment income .....	1,324	1,324
10. Total gross investment income .....	1,928,579	1,982,324
11. Investment expenses .....	(g) 250,128	.....
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 .....	0	0
16. Total deductions (Lines 11 through 15) .....	250,128	250,128
17. Net investment income (Line 10 minus Line 16) .....	1,732,196	1,732,196
<b>DETAILS OF WRITE-INS</b>		
0901. Securities Lending Income .....	1,325	1,325
0902. Miscellaneous Income .....	(1)	(1)
0903. .....	0	0
0998. Summary of remaining write-ins for Line 9 from overflow page .....	0	0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above) .....	1,324	1,324
1501. .....	.....	.....
1502. .....	.....	.....
1503. .....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page .....	0	0
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15 above) .....	0	0

(a) Includes \$ 132,636 accrual of discount less \$ 434,119 amortization of premium and less \$ 60,440 paid for accrued interest on purchases.  
 (b) Includes \$ ..... accrual of discount less \$ ..... 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 \$ ..... paid for accrued interest on purchases.  
 (d) Includes \$ ..... for company's occupancy of its own buildings; and excludes \$ ..... interest on encumbrances.  
 (e) Includes \$ ..... accrual of discount less \$ ..... amortization of premium and less \$ ..... paid for accrued interest on purchases.  
 (f) Includes \$ ..... accrual of discount less \$ ..... amortization of premium.  
 (g) Includes \$ ..... investment expenses and \$ ..... investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.  
 (h) Includes \$ ..... interest on surplus notes and \$ ..... interest on capital notes.  
 (i) Includes \$ ..... depreciation on real estate and \$ ..... depreciation on other invested assets.

## EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 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 .....	.....	.....	0	.....	.....
1.1 Bonds exempt from U.S. tax .....	.....	.....	0	.....	.....
1.2 Other bonds (unaffiliated) .....	6,285	.....	6,285	.....	.....
1.3 Bonds of affiliates .....	0	0	0	0	0
2.1 Preferred stocks (unaffiliated) .....	0	0	0	0	0
2.11 Preferred stocks of affiliates .....	0	0	0	0	0
2.2 Common stocks (unaffiliated) .....	0	0	0	0	0
2.21 Common stocks of affiliates .....	0	0	0	0	0
3. Mortgage loans .....	0	0	0	0	0
4. Real estate .....	0	0	0	0	0
5. Contract loans .....	.....	.....	.....	.....	.....
6. Cash, cash equivalents and short-term investments .....	.....	.....	0	0	0
7. Derivative instruments .....	.....	.....	0	0	0
8. Other invested assets .....	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses) .....	0	0	0	0	0
10. Total capital gains (losses) .....	6,285	0	6,285	0	0
<b>DETAILS OF WRITE-INS</b>			.....	.....	.....
0901. .....	.....	.....	0	.....	.....
0902. .....	.....	.....	0	.....	.....
0903. .....	.....	.....	0	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page .....	0	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above) .....	0	0	0	0	0

## EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks .....	0	0	0
2.2 Common stocks .....	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....	0	0	0
3.2 Other than first liens .....	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....	0	0	0
4.2 Properties held for the production of income.....	0	0	0
4.3 Properties held for sale .....	0	0	0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....	0	0	0
6. Contract loans .....	0	0	0
7. Derivatives (Schedule DB).....	0	0	0
8. Other invested assets (Schedule BA) .....	0	0	0
9. Receivables for securities .....	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL).....	0	0	0
11. Aggregate write-ins for invested assets .....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	0	0	0
13. Title plants (for Title insurers only).....	0	0	0
14. Investment income due and accrued .....	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....	28,332	36,612	8,280
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....	741	451	(290)
15.3 Accrued retrospective premiums and contracts subject to redetermination .....	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....	0	0	0
16.2 Funds held by or deposited with reinsured companies .....	0	0	0
16.3 Other amounts receivable under reinsurance contracts .....	0	0	0
17. Amounts receivable relating to uninsured plans .....	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....	0	0	0
18.2 Net deferred tax asset.....	0	0	0
19. Guaranty funds receivable or on deposit .....	0	0	0
20. Electronic data processing equipment and software.....	0	0	0
21. Furniture and equipment, including health care delivery assets.....	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....	0	0	0
23. Receivables from parent, subsidiaries and affiliates .....	0	0	0
24. Health care and other amounts receivable.....	0	0	0
25. Aggregate write-ins for other-than-invested assets .....	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	29,073	37,063	7,990
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
28. Total (Lines 26 and 27).....	29,073	37,063	7,990
<b>DETAILS OF WRITE-INS</b>			
1101. ....			
1102. ....			
1103. ....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) .....	0	0	0
2501. ....			
2502. ....			
2503. ....			
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	0	0	0

# ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

## NOTES TO FINANCIAL STATEMENTS

### 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

#### A. Accounting Practices:

Grange Property & Casualty Insurance Company (the Company) prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by The Ohio Department of Insurance (the Department). The Department requires that insurance companies domiciled in the State of Ohio prepare their statutory basis financial statements in accordance with the NAIC Accounting Practices and Procedures Manual subject to any deviations prescribed or permitted by the Department. The Company does not employ accounting practices that depart from the NAIC Accounting Practices and Procedures Manual.

A reconciliation of the Company's net income and surplus between NAIC SAP and practices prescribed and permitted by the State of Ohio is shown below.

	State of Domicile	2015	2014
<b>NET INCOME</b>			
(1) Grange Property & Casualty Insurance Company state basis (Page 4, Line 20, Columns 1 & 2)	Ohio	\$ 4,432,441	\$ 4,105,974
(2) State Prescribed Practices that increase/(decrease) NAIC SAP	Ohio	0	0
(3) State Permitted Practices that increase/(decrease) NAIC SAP	Ohio	0	0
(4) NAIC SAP (1-2-3=4)	Ohio	<u>\$ 4,432,441</u>	<u>\$ 4,105,974</u>
<b>SURPLUS</b>			
(5) Grange Property & Casualty Insurance Company state basis (Page 3, Line 37, Columns 1 & 2)	Ohio	\$ 37,699,053	\$ 33,289,812
(6) State Prescribed Practices that increase/(decrease) NAIC SAP	Ohio	0	0
(7) State Permitted Practices that increase/(decrease) NAIC SAP	Ohio	0	0
(8) NAIC SAP (5-6-7=8)	Ohio	<u>\$ 37,699,053</u>	<u>\$ 33,289,812</u>

#### B. Use of Estimates in the Preparation of the Financial Statements:

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

#### C. Accounting Policy:

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by daily pro rata methods for direct business and are based on reports received from ceding companies for reinsurance.

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

In addition, the Company uses the following accounting policies:

1. Short-term investments are stated at amortized cost, which approximates fair value.
2. Bonds not backed by other loans are stated at amortized cost using the scientific method.
3. The Company has no investments in common stocks.
4. The Company has no investments in preferred stocks.
5. The Company has no investments in mortgage loans.
6. Loan-backed securities are stated at either amortized cost or the lower or amortized cost or fair market value. The retrospective adjustment method is used to value all securities except for interest only securities or securities where the yield had become negative, those are valued using the prospective method.
7. The Company has no investment in subsidiaries, controlled and affiliated entities.
8. The Company has no investments in joint ventures, partnerships and limited liability companies.
9. The Company has no investments in derivative instruments.
10. The Company does not anticipate investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53, Property-Casualty Contracts - Premiums.
11. 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 amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period determined.
12. The Company has not modified its capitalization policy from the prior period.
13. The Company does not have pharmaceutical rebate receivables.

#### D. Going Concern: None

#### 2. ACCOUNTING CHANGES AND CORRECTION OF ERRORS: NONE

#### 3. BUSINESS COMBINATIONS AND GOODWILL: NONE

#### 4. DISCONTINUED OPERATIONS: NONE

#### 5. INVESTMENTS:

##### A. Mortgage Loans, including Mezzanine Real Estate Loans: None

##### B. Debt Restructuring: None

##### C. Reverse Mortgages: None

##### D. Loan-Backed Securities:

1. Prepayment assumptions for single class and multi-class mortgage-backed/asset-backed securities were obtained from Hub Data and Bloomberg. These assumptions are consistent with the current interest rate and economic environment.
2. The Company has not recognized any other than temporary impairments on its loan-backed securities.
3. The Company has not recognized any other than temporary impairments on its loan-backed securities.
4. All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

# ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

## NOTES TO FINANCIAL STATEMENTS

a. Aggregate Amount of Unrealized Losses:

1. Less than 12 Months	(69,006)
2. 12 Months or Longer	(17,432)

b. The Aggregate Related Fair Value of Securities with Unrealized Losses:

1. Less than 12 Months	4,760,354
2. 12 Months or Longer	420,063

5. According to SSAP 43R, the best estimate of future cash flows using the appropriate discount rate was calculated for each affected security, with other-than-temporary impairments realized to the extent that present value was less than amortized cost. Securities held with an intent to sell were other-than-temporarily impaired to current fair value. Securities with a present value greater than amortized cost were not other-than-temporarily impaired.

E. Repurchase Agreements and/or Securities Lending Transactions:

1. For securities lending agreements, the Company requires a minimum of 102% and 105% of the fair value of the domestic and foreign securities loaned at the outset of the contract as collateral. Cash collateral received is invested in short-term investments and the offsetting collateral liability is included in Collateral From Lending Activities. The fair value of the collateral at December 31, 2015 is \$917,621.

2. The Company has no pledged assets as collateral for securities lending transactions.

3. Collateral Received

a. Aggregate Amount Collateral Received

1. The Company has no repurchase agreements as collateral.

2. Securities lending collateral received:

	Fair Value
Open	917,623
30 Days or Less	0
31 to 60 Days	0
61 to 90 Days	0
Greater than 90 Days	0
Sub-Total	917,623
Securities Received	0
Total Collateral Received	<u>917,623</u>

3. The Company has no dollar repurchase agreements as collateral received.

b. The Company has not sold or re-pledged any collateral.

c. Securities lending sources and uses of that collateral: The Company receives primarily cash collateral in an amount in excess of the fair value of the securities lent. The Company reinvests the cash collateral into higher yielding short term securities than the collateral received.

4. The Company has no “one-line” reported collateral.

5. Collateral Reinvestment

a. Aggregate Amount Collateral Reinvested

1. The Company has no repurchase agreements as collateral.

2. Securities Lending

	Amortized Cost	Fair Value
Open	0	0
30 Days or Less	621,575	621,576
31 to 60 Days	276,311	276,311
61 to 90 Days	19,736	19,735
Greater than 90 Days	0	0
Sub-Total	917,622	917,621
Securities Received	0	0
Total Collateral Reinvested	<u>917,622</u>	<u>917,621</u>

3. The Company has no dollar repurchase agreements as collateral.

b. The maturity dates of the liabilities matches the invested assets.

6. The Company has no collateral that is not permitted by contract.

7. The Company has no collateral that extends beyond one year from December 31, 2015.

F. Real Estate: None

G. Low Income Housing Tax Credits: None

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE  
GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

## **NOTES TO FINANCIAL STATEMENTS**

#### H. Restricted Assets:

	Gross Restricted							8	Percentage		
	Current Year					6	7		9	10	
	1	2	3	4	5						
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 Restricted to Total Assets	Admitted Restricted to Total Admitted Assets	
a. Subject to contractual obligation for which liability is not shown											
b. Collateral held under security lending agreements	917,622				917,622	917,005	617	917,622	1.4%	1.4%	
c. Subject to repurchase agreements											
d. Subject to reverse repurchase agreements											
e. Subject to dollar repurchase agreements											
f. Subject to dollar reverse repurchase agreements											
g. Placed under option contracts											
h. Letter stock or securities restricted as to sale											
i. FHLB capital Stock											
j. On deposit with states	1,731,941				1,731,941	1,737,335	(5,394)	1,731,941	2.6%	2.6%	
k. On deposit with other regulatory bodies											
l. Pledged as collateral to FHLB											
m. Pledged as collateral not captured in other categories											
n. Other restricted assets											
o. Total Restricted Assets	2,649,563				2,649,563	2,654,340	(4,777)	2,649,563	4.0%	4.0%	

## I. Working Capital Finance Investments: None

J. Offsetting and Netting of Assets and Liabilities: None

## K. Structured Notes:

Structured notes as defined per the Purposes and Procedures Manual of the NAIC Investment Analysis Office at December 31, 2015:

CUSIP Identification	Actual Cost	Fair Value	Book/Adjusted Carrying Value	Mortgage-Referenced Security (YES/NO)
3130A6SP3	499,500	498,325	500,329	No
313380XL6	458,125	481,055	467,057	No
3135G0XN8	749,438	746,250	750,476	No
3136G1AF6	482,750	500,025	494,613	No
3136G1KX6	748,500	750,015	749,721	No
78012KFG7	250,000	249,815	250,000	No
<b>TOTAL</b>	<b>3,188,313</b>	<b>3,225,485</b>	<b>3,212,196</b>	

#### 6. JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES: NONE

**7. INVESTMENT INCOME: NONE**

## 8. DERIVATIVE INSTRUMENTS: NONE

# ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

## NOTES TO FINANCIAL STATEMENTS

### 9. FEDERAL INCOME TAXES:

A. The components of the net deferred tax asset/(liability) at December 31 are as follows:

1.

	12/31/2015		
	(1) Ordinary	(2) Capital	(3) (Col 1+2) Total
(a) Gross Deferred Tax Assets	\$ ..... 963,752	\$ ..... 963,752	\$ ..... 963,752
(b) Statutory Valuation Allowance Adjustments	\$ ..... 963,752	\$ ..... 963,752	\$ ..... 963,752
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ ..... 963,752	\$ ..... 963,752	\$ ..... 963,752
(d) Deferred Tax Assets Nonadmitted	\$ ..... 963,752	\$ ..... 963,752	\$ ..... 963,752
(e) Subtotal Net Admitted Deferred Tax Asset (1c -1d )	\$ ..... 963,752	\$ ..... 963,752	\$ ..... 963,752
(f) Deferred Tax Liabilities	\$ ..... 184,117	\$ ..... 184,117	\$ ..... 184,117
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ ..... 779,635	\$ ..... 779,635	\$ ..... 779,635

	12/31/2014		
	(4) Ordinary	(5) Capital	(6) (Col 4+5) Total
(a) Gross Deferred Tax Assets	\$ ..... 952,445	\$ ..... 952,445	\$ ..... 952,445
(b) Statutory Valuation Allowance Adjustments	\$ ..... 952,445	\$ ..... 952,445	\$ ..... 952,445
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ ..... 952,445	\$ ..... 952,445	\$ ..... 952,445
(d) Deferred Tax Assets Nonadmitted	\$ ..... 952,445	\$ ..... 952,445	\$ ..... 952,445
(e) Subtotal Net Admitted Deferred Tax Asset (1c -1d )	\$ ..... 952,445	\$ ..... 952,445	\$ ..... 952,445
(f) Deferred Tax Liabilities	\$ ..... 141,620	\$ ..... 141,620	\$ ..... 141,620
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ ..... 810,825	\$ ..... 810,825	\$ ..... 810,825

	Change		
	(7) (Col 1-4) Ordinary	(8) (Col 2-5) Capital	(9) (Col 7+8) Total
(a) Gross Deferred Tax Assets	\$ ..... 11,307	\$ ..... 11,307	\$ ..... 11,307
(b) Statutory Valuation Allowance Adjustments	\$ ..... 11,307	\$ ..... 11,307	\$ ..... 11,307
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ ..... 11,307	\$ ..... 11,307	\$ ..... 11,307
(d) Deferred Tax Assets Nonadmitted	\$ ..... 11,307	\$ ..... 11,307	\$ ..... 11,307
(e) Subtotal Net Admitted Deferred Tax Asset (1c -1d )	\$ ..... 11,307	\$ ..... 11,307	\$ ..... 11,307
(f) Deferred Tax Liabilities	\$ ..... 42,497	\$ ..... 42,497	\$ ..... 42,497
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ ..... (31,190)	\$ ..... (31,190)	\$ ..... (31,190)

2.

	12/31/2015		
	(1) Ordinary	(2) Capital	(3) (Col 1+2) Total
	<u>XXX</u>	<u>XXX</u>	\$ ..... 4,266,690
	\$ ..... 780,710	\$ ..... 780,710	\$ ..... 780,710
	\$ ..... 34,761	\$ ..... 34,761	\$ ..... 34,761
	\$ ..... 34,761	\$ ..... 34,761	\$ ..... 34,761
	\$ ..... 148,281	\$ ..... 148,281	\$ ..... 148,281
	\$ ..... 963,752	\$ ..... 963,752	\$ ..... 963,752

Admission Calculation Components SSAP No. 101

(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.	\$ ..... 780,710	\$ ..... 780,710
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$ ..... 34,761	\$ ..... 34,761
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$ ..... 34,761	\$ ..... 34,761
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	\$ ..... 42,497	\$ ..... 42,497
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$ ..... (31,190)	\$ ..... (31,190)
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101.	\$ ..... 148,281	\$ ..... 148,281
Total (2(a) + 2(b) + 2(c))	\$ ..... 963,752	\$ ..... 963,752

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE  
GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**NOTES TO FINANCIAL STATEMENTS**

12/31/2014		
(4)	(5)	(6)
Ordinary	Capital	(Col 4+5) Total

(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.	\$ ..... 787,753	\$ ..... 787,753
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$ ..... 34,840	\$ ..... 34,840
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$ ..... 34,840	\$ ..... 34,840
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	<u>XXX</u>	<u>XXX</u>
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$ ..... 129,852	\$ ..... 129,852
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101.	\$ ..... 952,445	\$ ..... 952,445
Total (2(a) + 2(b) + 2(c))		

Change		
(7)	(8)	(9)
(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total

(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.	\$ ..... (7,043)	\$ ..... (7,043)
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$ ..... (79)	\$ ..... (79)
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$ ..... (79)	\$ ..... (79)
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	<u>XXX</u>	<u>XXX</u>
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$ ..... 18,429	\$ ..... 18,429
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101.	\$ ..... 11,307	\$ ..... 11,307
Total (2(a) + 2(b) + 2(c))		

3.

2015	2014
..... 1,917,900	..... 1,863,000
\$ .... 36,892,581.000	\$ .... 28,444,597.000

4.

12/31/2015		
(1)	(2)	
Ordinary	Capital	
<b>Impact of Tax-Planning Strategies</b>		
(a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.		
1. Adjusted Gross DTAs Amount From Note 9A1(c)	..... 963,752	
2. Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies		
3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)	..... 963,752	
4. Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies		

12/31/2014		
(3)	(4)	
Ordinary	Capital	
<b>(a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.</b>		
1. Adjusted Gross DTAs Amount From Note 9A1(c)	..... 952,445	
2. Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies		
3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)	..... 952,445	
4. Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies		

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE  
GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**NOTES TO FINANCIAL STATEMENTS**

Change	
(5)	(6)
(Col 1-3)	(Col 2-4)

(a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.

1. Adjusted Gross DTAs Amount From Note 9A1(c)	.....11,307 .....
2. Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies	.....
3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)	.....11,307 .....
4. Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies	.....

(b) Does the Company's tax-planning strategies include the use of reinsurance? Yes..... No.....X.....

C. Current income taxes incurred consist of the following major components:

(1)	(2)	(3)
12/31/2015	12/31/2014	(Col 1-2) Change

1. Current Income Tax

(a) Federal	\$ .....1,980,154	\$ .....1,828,590	\$ .....151,564
(b) Foreign	\$ .....	\$ .....	\$ .....
(c) Subtotal	\$ .....1,980,154	\$ .....1,828,590	\$ .....151,564
(d) Federal income tax on net capital gains	\$ .....2,200	\$ .....(690)	\$ .....2,890
(e) Utilization of capital loss carry-forwards	\$ .....	\$ .....	\$ .....
(f) Other	\$ .....(8,353)	\$ .....(92,995)	\$ .....84,642
(g) Federal and foreign income taxes incurred	\$ .....1,974,001	\$ .....1,734,905	\$ .....239,096

2. Deferred Tax Assets:

(a) Ordinary

(1) Discounting of unpaid losses	\$ .....161,858	\$ .....163,367	\$ .....(1,509)
(2) Unearned premium reserve	\$ .....791,719	\$ .....776,106	\$ .....15,613
(3) Policyholder reserves	\$ .....	\$ .....	\$ .....
(4) Investments	\$ .....	\$ .....	\$ .....
(5) Deferred acquisition costs	\$ .....	\$ .....	\$ .....
(6) Policyholder dividends accrual	\$ .....	\$ .....	\$ .....
(7) Fixed assets	\$ .....	\$ .....	\$ .....
(8) Compensation and benefits accrual	\$ .....	\$ .....	\$ .....
(9) Pension accrual	\$ .....	\$ .....	\$ .....
(10) Receivables - nonadmitted	\$ .....10,175	\$ .....12,972	\$ .....(2,797)
(11) Net operating loss carry-forward	\$ .....	\$ .....	\$ .....
(12) Tax credit carry-forward	\$ .....	\$ .....	\$ .....
(13) Other (including items <5% of total ordinary tax assets)	\$ .....963,752	\$ .....952,445	\$ .....11,307
(99) Subtotal	\$ .....963,752	\$ .....952,445	\$ .....11,307

(b) Statutory valuation allowance adjustment

(c) Nonadmitted	\$ .....\$ .....	\$ .....
-----------------	------------------	----------

(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)

\$ .....963,752	\$ .....952,445	\$ .....11,307
-----------------	-----------------	----------------

(e) Capital:

(1) Investments	\$ .....\$ .....	\$ .....
(2) Net capital loss carry-forward	\$ .....\$ .....	\$ .....
(3) Real estate	\$ .....\$ .....	\$ .....
(4) Other (including items <5% of total capital tax assets)	\$ .....\$ .....	\$ .....
(99) Subtotal	\$ .....\$ .....	\$ .....

(f) Statutory valuation allowance adjustment

(g) Nonadmitted	\$ .....\$ .....	\$ .....
-----------------	------------------	----------

(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)

\$ .....\$ .....	\$ .....
------------------	----------

(i) Admitted deferred tax assets (2d + 2h)

\$ .....963,752	\$ .....952,445	\$ .....11,307
-----------------	-----------------	----------------

3. Deferred Tax Liabilities:

(a) Ordinary

(1) Investments	\$ .....68,543	\$ .....41,718	\$ .....26,825
(2) Fixed assets	\$ .....\$ .....	\$ .....	\$ .....
(3) Deferred and uncollected premium	\$ .....111,259	\$ .....94,432	\$ .....16,827
(4) Policyholder reserves	\$ .....4,315	\$ .....5,470	\$ .....(1,155)
(5) Other (including items <5% of total ordinary tax liabilities)	\$ .....\$ .....	\$ .....	\$ .....
(99) Subtotal	\$ .....184,117	\$ .....141,620	\$ .....42,497

# ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

## NOTES TO FINANCIAL STATEMENTS

(b) Capital:

(1) Investments	\$ .....	\$ .....	\$ .....
(2) Real estate	\$ .....	\$ .....	\$ .....
(3) Other (including items <5% of total capital tax liabilities)	\$ .....	\$ .....	\$ .....
(99) Subtotal	\$ .....	\$ .....	\$ .....
(c) Deferred tax liabilities (3a99 + 3b99)	\$ ..... 184,117	\$ ..... 141,620	\$ ..... 42,497
4. Net deferred tax assets/liabilities (2i - 3c)	\$ ..... 779,635	\$ ..... 810,825	\$ ..... (31,190)

D. Reconciliation of federal income tax rate to actual effective rate:

The provision for federal income taxed incurred is different from that which would be obtained by applying the statutory federal income tax rate to income before taxes. The significant items causing this difference are as follows:

	Amount	Tax Effect	Effective Tax Rate
1. Description:			
(a) Income Before Taxes	\$ 6,406,442	\$ 2,242,255	35.00%
(b) Tax-Exempt Interest	\$ (806,255)	\$ (282,189)	-4.40%
(c) Dividends Received Deduction	\$ 0	\$ 0	0.00%
(d) Proration	\$ 120,938	\$ 42,328	0.66%
(e) Meals & Entertainment	\$ 0	\$ 0	0.00%
(f) Statutory Valuation Allowance	\$ 0	\$ 0	0.00%
(g) Pension (unfunded liability and prepaid)	\$ 0	\$ 0	0.00%
(h) Change in Nonadmitted Assets	\$ 7,990	\$ 2,797	0.04%
(i) Other, Including Prior Year True-up	\$ 0	\$ 0	0.00%
Total	\$ 5,729,115	\$ 2,005,190	31.30%
2. Description:			
(a) Federal Income Tax Incurred [Expense/(Benefit)]	\$ 1,971,801	\$ 1,971,801	30.78%
(b) Tax on Capital Gains/(Losses)	\$ 2,200	\$ 2,200	0.03%
(c) Change in Net Deferred Income Tax [Charge/(Benefit)]	\$ 31,190	\$ 31,190	0.49%
Total	\$ 2,005,190	\$ 2,005,190	31.30%

E. Carryforwards, recoverable taxes, and IRC S6603 deposits:

1. At December 31, 2015, the Company had net operating loss carry forwards of:	\$ ..... 0
At December 31, 2015, the Company had capital loss carry forwards of:	\$ ..... 0
At December 31, 2015, the Company had AMT credit carry forwards, which do not expire, in the amount of:	\$ ..... 0

2. The following is income tax expense that is available for recoupment in the event of future net losses:

Year	Ordinary	Capital	Total
2013	\$ 0	\$ 0	\$ 0
2014	\$ 1,820,236	\$ (690)	\$ 1,819,546
2015	\$ 1,980,154	\$ 2,200	\$ 1,982,354
Total	\$ 3,800,390	\$ 1,510	\$ 3,801,900

3. Deposits admitted under IRC S6603:

NONE

F. The Company's federal income tax return is consolidated with the following entities:

1. Grange Mutual Casualty Company
2. The method of allocation among companies is subject to a written agreement, approved by the Board of Directors, whereby allocation is made primarily on a separate company basis with current credit for losses.

G. Federal or foreign income tax loss contingencies:

The Company does not have any income tax loss contingencies.

# ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

## NOTES TO FINANCIAL STATEMENTS

### 10. INFORMATION CONCERNING PARENT, SUBSIDIARIES AND AFFILIATES:

#### A. Relationship with Parent, Subsidiaries and Affiliates:

The Company is a 100% owned subsidiary of Grange Mutual Casualty Company (GMCC), an insurance company domiciled in the State of Ohio and a member of the Grange Mutual Casualty Group.

#### B. Descriptions of transactions with Parent, Subsidiaries and Affiliates: None

#### C. Amounts of transactions with Parent, Subsidiaries and Affiliates: None

#### D. Amounts Due From or To Related Parties:

At December 31, 2015, the Company reported \$0.6 million as amounts due from GMCC. The terms of the settlement require that these amounts be settled within 45 days.

#### E. Guarantees or Contingencies for Related Parties: None

#### F. Description of material management or service contracts:

The Company maintains a service agreement with GMCC, whereby GMCC provides service for the Company and makes available all services necessary to support its business operations. These services include all necessary financial, actuarial, audit, accounting, tax, information technology, records management and legal and compliance services, other than those provided by third party service providers.

#### G. Nature of the control relationship:

The Company participates in a pooling reinsurance agreement detailed in Note 26.

#### H. Amount Deducted for Investment in Upstream Company: None

#### I. Investments in Affiliates Greater than 10% of Admitted Assets: None

#### J. The Company did not recognize any impairment write down for investments in Subsidiary, Controlled or Affiliated Companies during the periods reported.

#### K. The Company does not have investments in a foreign insurance subsidiary.

#### L. The Company does not have investments in a Downstream Noninsurance Company.

### 11. DEBT: NONE

### 12. RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS:

All employees are employed by GMCC and participate in the pension and other benefit plans of GMCC. Annual costs are shared via the pooling arrangement.

### 13. CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS AND QUASI-REORGANIZATIONS:

#### 1. The Company has 1,000 shares authorized, 1,000 shares issued and 1,000 shares outstanding. All shares are Class A shares.

#### 2. The Company has no preferred stock outstanding.

#### 3. The Company doesn't pay dividends to its policyholders. Dividends recorded in these financial statements were paid by other companies within the Grange Mutual Casualty Group.

#### 4. No dividends were paid by the Company.

#### 5. The Company doesn't pay dividends to its policyholders.

#### 6. There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.

#### 7. No advances to surplus were made.

#### 8. No amounts of stock were held by the Company.

#### 9. No special surplus funds are held.

#### 10. The Company has no unrealized gains.

#### 11. The Company has no surplus notes.

#### 12. There has not been a restatement due to prior quasi-reorganizations.

#### 13. There has been no quasi-reorganization in the past 10 years.

### 14. CONTINGENCIES:

#### A. Contingent Commitments: None

#### B. Assessments:

Guaranty Fund Assessments are recorded by the parent, GMCC.

#### C. Gain Contingencies: None

#### D. Claims Related Extra Contractual Obligations and Bad Faith Losses Stemming from Lawsuits: None

#### E. Product Warranties: None

# ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

## NOTES TO FINANCIAL STATEMENTS

### F. All Other Contingencies:

Various lawsuits against the Company have arisen in the course of the Company's business. Contingent liabilities arising from litigation, income taxes and other matters are not considered material in relation to the financial position of the Company.

### 15. LEASES: NONE

### 16. INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATION OF CREDIT RISK: NONE

### 17. TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES:

#### A. Transfers of Receivables Reported as Sales: None

#### B. Transfer and Servicing of Financial Assets

##### 1. Loaned Securities:

The Company participates in a securities lending program with JPMorgan Chase Bank as lending agent. Securities on loan as of 12/31/2015 were fixed income bonds, totaling \$0.9M. Collateral received from lending activities is maintained in accordance to the securities lending agreement, whereby the collateral requirement shall be an amount equal to 102% of the then current market value of the relevant loaned securities where securities and collateral are denominated in the same currency, and 105% for all other securities. The Company's lending agent, JPMorgan Chase Bank, reinvests the cash collateral according to investment guidelines outlined in the securities lending agreement and is reported on-balance sheet. Collateral received in the form of securities are restricted and off-balance sheet. The Company is not able to sell or reinvest the securities received as collateral and according to the MLSA, the borrower bears all the risk associated with said securities.

##### 2. Servicing Assets and Servicing Liabilities: None

##### 3. Servicing Assets and Servicing Liabilities Measured at Fair Value: None

##### 4. Securitizations, Asset-backed Financing Agreements and Similar Transfers with Continued Involvement: None

##### 5. Assets Accounted for as Secured Borrowing: None

##### 6. Receivables with Recourse: None

##### 7. Securities Underlying Repurchase and Reverse Repurchase Agreements: None

#### C. Wash Sales: None

### 18. GAINS OR LOSS TO THE REPORTING ENTITY FROM UNINSURED A&H PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS: NONE

### 19. DIRECT PREMIUM WRITTEN / PRODUCED BY MANAGING GENERAL AGENTS / THIRD PARTY ADMINISTRATORS: NONE

### 20. FAIR VALUE MEASUREMENTS:

#### A. All assets and liabilities of the Company are measured and reported at cost or amortized cost in accordance with footnote 1 above.

##### 1. Fair Value Hierarchy: None

##### 2. Level Three Fair Value Reconciliation: None

##### 3. Level Three Transfers In/Out: None

##### 4. Reported Fair Value of Investments within Level 2 and Level 3: According to statutory accounting rules, fixed income securities with a rating of NAIC 1 or 2 are reported at amortized cost. Securities with a rating of NAIC 3 thru 6, or non-investment grade ratings, are measured and reported at the lower of amortized cost or fair value on the statement of financial position. As of December 31, 2015, the Company did not have any bonds rated NAIC 3 thru 6, and therefore did not report any securities at fair value.

##### 5. Derivative Assets and Liabilities: The Company does not have derivative assets and liabilities.

#### B. Other Fair Value Disclosures: None

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Not Practicable (CV)
Bonds	58,978,135	57,618,944	6,888,494	52,089,641	0	0
Common Stock	0	0	0	0	0	0
Perpetual Preferred	0	0	0	0	0	0
Other Invested Asset	0	0	0	0	0	0
Money Market	0	0	0	0	0	0
<b>TOTAL</b>	<b>58,978,135</b>	<b>57,618,944</b>	<b>6,888,494</b>	<b>52,089,641</b>	<b>0</b>	<b>0</b>

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

### 21. OTHER ITEMS:

#### A. Extraordinary Items: None

#### B. Troubled Debt Restructuring: None

#### C. Other Disclosures: None

#### D. Business Interruption Insurance Recoveries: None

#### E. State Transferable and Non-transferable Tax Credits: None

# ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

## NOTES TO FINANCIAL STATEMENTS

### F. Subprime Mortgage Related Risk Exposure

#### 1. Management Definition of Exposure to Subprime Mortgage Related Risk:

Management defines “subprime” mortgage loans as mortgage loans that are originated with an inherently higher risk profile or have a loan structure that is distinctly different from that of traditional mortgage loans. Management considers the following factors in determining whether or not a mortgage represents a subprime risk: borrowers with low credit ratings (FICO score); unconventionally high initial loan-to-value ratios (LTVs); unconventionally structured loans (option pay adjustable rate mortgages or negative amortizing loans); unconventionally high interest rates; and less than conventional documentation of the borrower’s income and/or assets.

#### 2. The Company has no direct exposure through investments in subprime mortgage loans

#### 3. Estimated Direct Exposure to Subprime Mortgage Risk Through Other Investments.

Management considers the Company's holdings in securities with underlying subprime exposure to be minimal. The majority of residential mortgage backed securities (RMBS) in the portfolio are issued by government-sponsored enterprises (GSEs). The Company did not own securities with collateral that contain subprime characteristics based on low credit (FICO scores less than 620) and/or high LTVs. The Company's bond portfolio does not include any positions in collateralized debt obligations (CDOs) on a direct basis. On a quarterly basis, management reviews all loan-backed and structured securities with an unrealized loss position according to SSAP 43-R. The best estimate of future cash flows using the appropriate discount rate is calculated for each affected security. To assist in this effort, a brokerage firm provides forward-looking assumptions for default rates, voluntary prepayment speeds, and loss severities on a majority of the securities governed by SSAP 43R. The outcomes of this process assure that anticipated cash flows will not be less than the carrying value subsequent to other-than-temporary impairments. As of December 31, 2015 management estimates there were no unrealized losses present due to subprime mortgage exposure.

	Actual Cost	Book/Adjusted Carrying Value (excluding interest)	Fair Value	Other Than Temporary Impairment Losses Recognized
a. Residential mortgage-backed securities	0	0	0	0
b. Commercial mortgage-backed securities	0	0	0	0
c. Collateralized debt obligations	0	0	0	0
d. Structured securities	0	0	0	0
e. Equity investment in SCAs *	0	0	0	0
f. Other assets	0	0	0	0
g. Total	0	0	0	0

#### 1. The Company does not write Mortgage Guaranty or Financial Guaranty insurance coverage.

### 22. EVENTS SUBSEQUENT:

There have been no events, which have occurred subsequent to the filing of this statement, which have a material effect upon the financial condition of the Company.

Assessments relating to Section 9010 of the Federal Affordable Care Act:

The Company does not write business subject to Section 9010 of the Federal Affordable Care Act.

### 23. REINSURANCE:

#### A. Unsecured Reinsurance Recoverables:

None exceed 3% of Surplus

#### B. Reinsurance Recoverable in Dispute: None

#### C. Reinsurance Assumed and Ceded:

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium	Commission	Premium	Commission	Premium	Commission
	Reserve	Equity	Reserve	Equity	Reserve	Equity
a. Affiliates	9,594,767	1,727,058	90,646,139	16,316,305	(81,051,372)	(14,589,247)
b. All Other	193,981	34,917	37,113	6,680	156,868	28,236
c. TOTAL	<u>9,788,748</u>	<u>1,761,975</u>	<u>90,683,252</u>	<u>16,322,985</u>	<u>(80,894,504)</u>	<u>(14,561,011)</u>
d. Direct unearned Premium Reserve			<u>90,489,271</u>			
2. Contingent Commission			4,396,152	417,511	4,396,152	417,511

#### D. Uncollectible Reinsurance: None

#### E. Commutation of Ceded Reinsurance: None

#### F. Retroactive Reinsurance: None

#### G. Reinsurance Accounted For as a Deposit: None

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

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

### 24. RETROSPECTIVELY RATED CONTRACTS & CONTRACTS SUBJECT TO REDETERMINATION: NONE

# ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

## NOTES TO FINANCIAL STATEMENTS

### 25. CHANGES IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES:

Reserves for incurred losses and loss adjustment expenses attributable to insured events of prior years has increased (decreased) by \$(0.022) million from \$18.065 million in 2014 to \$18.043 million in 2015 as a result of re-estimation of unpaid losses and loss adjustment expenses principally on private passenger auto liability and homeowners lines of insurance. This increase (decrease) is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. Included in this increase (decrease), the Company experienced \$0 million of unfavorable (favorable) prior year loss development on retrospectively rated policies. However, since the business to which it relates is subject to premium adjustments, there was no significant impact on surplus.

LOSSES AND LAE	2015	2014
BALANCE JANUARY 1	18,064,543	17,991,251
LESS REINSURANCE RECOVERABLES	6,237,879	7,078,313
NET BALANCE JANUARY 1	<u>11,826,664</u>	<u>10,912,938</u>
INCURRED RELATED TO:		
CURRENT YEAR	16,966,373	16,516,967
PRIOR YEAR	(22,402)	(227,388)
TOTAL INCURRED	<u>16,943,971</u>	<u>16,289,579</u>
PAID RELATED TO:		
CURRENT YEAR	10,021,445	10,465,798
PRIOR YEAR	5,268,620	4,910,055
TOTAL PAID	<u>15,290,065</u>	<u>15,375,853</u>
NET BALANCE AT DECEMBER 31	13,480,570	11,826,664
PLUS REINSURANCE RECOVERABLES	5,711,739	6,237,879
BALANCE AT DECEMBER 31	<u>19,192,309</u>	<u>18,064,543</u>

### 26. INTERCOMPANY POOLING AGREEMENTS:

	Pool	
	NAIC #	Share
Lead Company:	Grange Mutual Casualty Company	14060
Affiliates:	Trustgard Insurance Company	40118
	Grange Indemnity Insurance Company	10322
	Grange Insurance Company of Michigan	11136
	Grange Property & Casualty Insurance Company	11982
	Integrity Mutual Insurance Company	14303
	Integrity Property & Casualty Insurance Company	12986
		84.0%
		3.5%
		4.0%
		2.5%
		2.0%
		3.3%
		0.7%

All lines of business are subject to the pooling agreement, with no exceptions. All members of the pool are parties to all reinsurance treaties entered into by the group with non-affiliated reinsurers. There are no discrepancies between the reinsurance schedules of the lead company and the reinsurance schedules of the other participants.

### 27. STRUCTURED SETTLEMENTS:

All unassigned structure settlements where the claimant is the payee have amortized values, by company, less than 1% of the Company's surplus.

### 28. HEALTH CARE RECEIVABLES: NONE

### 29. PARTICIPATING POLICIES: NONE

### 30. PREMIUM DEFICIENCY RESERVES:

1. Liability carried for Premium Deficiency Reserves is zero.
2. Date of the most recent evaluation of this liability was 12/31/2015.
3. Anticipated investment income was not utilized in this calculation.

### 31. HIGH DEDUCTIBLES: NONE

### 32. DISCOUNTING OF LIABILITIES FOR UNPAID LOSSES OR UNPAID LOSS ADJUSTMENT EXPENSES: NONE

### 33. ASBESTOS/ENVIRONMENTAL RESERVES: NONE

### 34. SUBSCRIBER SAVINGS ACCOUNTS: NOT APPLICABLE

### 35. MULTIPLE PERIL CROP INSURANCE: NONE

### 36. FINANCIAL GUARANTY INSURANCE: NONE

### 37. CATASTROPHIC PLANNING:

The Company utilizes a variety of catastrophe mitigation techniques including exposure management, catastrophe modeling, transfer of risk via reinsurance and claims staff preparation. Exposure management includes active management of exposures and loss potentials such as monitoring of changes in insured values, peril avoidance, pricing actions and/or agency realignments. The Company primarily relies on two probabilistic catastrophe models to identify PML and TVaR estimates on an annual basis. A deterministic model augments this effort. The Company has a comprehensive catastrophic reinsurance program in place and we currently purchase coverage well in excess of our 250+ year event outcome. The Company places an emphasis on settlement of claims by Company personnel and these associates receive ongoing training on property claims practices.

## GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES

## GENERAL

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [ X ] No [ ]  
If yes, complete Schedule Y, Parts 1, 1A and 2.

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [ X ] No [ ] N/A [ ]

1.3 State Regulating? Ohio.....

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [ X ] No [ ]  
2.2 If yes, date of change: .....09/30/2015

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .....12/31/2014

3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .....12/31/2014

3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .....11/24/2015

3.4 By what department or departments? Ohio.....

3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [ ] No [ ] N/A [ X ]  
3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [ X ] No [ ] N/A [ ]

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of: 4.11 sales of new business? Yes [ ] No [ X ]  
4.12 renewals? Yes [ ] No [ X ]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of: 4.21 sales of new business? Yes [ ] No [ X ]  
4.22 renewals? Yes [ ] No [ X ]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [ ] No [ X ]  
5.2 If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation. Yes [ ] No [ X ]

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

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [ ] No [ X ]  
6.2 If yes, give full information .....

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [ ] No [ X ]  
7.2 If yes,  
7.21 State the percentage of foreign control .....  
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact). .....  
.....

1 Nationality	2 Type of Entity
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**GENERAL INTERROGATORIES**

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [ ] No [ X ]

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

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [ ] No [ X ]

8.4 If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any 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 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
PricewaterhouseCoopers LLP, Columbus, Ohio.....

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [ ] No [ X ]

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

10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [ ] No [ X ]

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

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [ X ] No [ ] N/A [ ]

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

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?  
Kenneth Lin, FCAS, MAAA, Officer of the Reporting Entity.....

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [ ] No [ X ]

12.11 Name of real estate holding company.....

12.12 Number of parcels involved.....

12.13 Total book/adjusted carrying value \$.....

12.2 If yes, provide explanation

13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

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

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [ ] No [ ]

13.3 Have there been any changes made to any of the trust indentures during the year? Yes [ ] No [ ]

13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [ ] No [ ] N/A [ ]

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [ X ] No [ ]

a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

c. Compliance with applicable governmental laws, rules and regulations;

d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

e. Accountability for adherence to the code.

14.11 If the response to 14.1 is no, please explain:

14.2 Has the code of ethics for senior managers been amended? Yes [ ] No [ X ]

14.21 If the response to 14.2 is yes, provide information related to amendment(s)

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [ ] No [ X ]

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

## GENERAL INTERROGATORIES

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [ ] No [ X ]

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

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

## BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [ X ] No [ ]

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [ X ] No [ ]

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes [ X ] No [ ]

## FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [ ] No [ X ]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans): 20.11 To directors or other officers \$.....  
20.12 To stockholders not officers \$.....  
20.13 Trustees, supreme or grand (Fraternal only) \$.....

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans): 20.21 To directors or other officers \$.....  
20.22 To stockholders not officers \$.....  
20.23 Trustees, supreme or grand (Fraternal only) \$.....

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [ ] No [ X ]

21.2 If yes, state the amount thereof at December 31 of the current year: 21.21 Rented from others \$.....  
21.22 Borrowed from others \$.....  
21.23 Leased from others \$.....  
21.24 Other \$.....

22.1 Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments? 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 [ X ] No [ ]

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$..... 566,317

## 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  
On deposit in custodial account.....

24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)  
See Notes to Financial Statement Number 17.....

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 [ X ] No [ ] NA [ ]

24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. \$..... 917,622

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 [ X ] No [ ] NA [ ]

24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [ X ] No [ ] NA [ ]

24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes [ X ] No [ ] NA [ ]

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	\$..... 917,621
24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$..... 917,622
24.103 Total payable for securities lending reported on the liability page	\$..... 917,622

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**GENERAL INTERROGATORIES**

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03).

Yes [  ] No [  ]

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

25.21 Subject to repurchase agreements	\$.....
25.22 Subject to reverse repurchase agreements	\$.....
25.23 Subject to dollar repurchase agreements	\$.....
25.24 Subject to reverse dollar repurchase agreements	\$.....
25.25 Placed under option agreements	\$.....
25.26 Letter stock or securities restricted as to sale – excluding FHLB Capital Stock	\$.....
25.27 FHLB Capital Stock	\$.....
25.28 On deposit with states	\$..... 1,731,941
25.29 On deposit with other regulatory bodies	\$.....
25.30 Pledged as collateral – excluding collateral pledged to an FHLB	\$.....
25.31 Pledged as collateral to FHLB – including assets backing funding agreements	\$.....
25.32 Other	\$.....

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

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

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [  ] No [  ] N/A [  ] If no, attach a description with this statement.

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

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

28. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping agreements of the NAIC *Financial Condition Examiners Handbook*? Yes [  ] No [  ]

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

1 Name of Custodian(s)	2 Custodian's Address
JP Morgan Chase Bank, N.A.....	4 Chase Metrotech Center, Floor 16, Brooklyn, NY 11245.....

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

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

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

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

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

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**GENERAL INTERROGATORIES**

28.05 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository Number(s)	2 Name	3 Address
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

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

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
.....	.....	.....
.....	.....	.....
.....	.....	.....
29.2999 TOTAL		0

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

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

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds.....	57,618,944	58,978,135	1,359,191
30.2 Preferred Stocks.....	0	0	0
30.3 Totals	57,618,944	58,978,135	1,359,191

30.4 Describe the sources or methods utilized in determining the fair values:

Fair Values obtained primarily from Hub Data, Inc., otherwise fair values from custodian statements are used.....

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?

Yes [ X ] No [ ]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?

Yes [ X ] No [ ]

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

32.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed?

Yes [ X ] No [ ]

32.2 If no, list exceptions:

## GENERAL INTERROGATORIES

## OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ ..... 0

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

1 Name	2 Amount Paid
.....	\$.....
.....	\$.....
.....	\$.....
.....	\$.....

34.1 Amount of payments for legal expenses, if any? \$ ..... 0

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

1 Name	2 Amount Paid
.....	\$.....
.....	\$.....
.....	\$.....
.....	\$.....

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ ..... 0

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 Name	2 Amount Paid
.....	\$.....
.....	\$.....
.....	\$.....
.....	\$.....

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**GENERAL INTERROGATORIES**  
**PART 2 - PROPERTY & CASUALTY INTERROGATORIES**

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? ..... Yes [ ] No [ X ]

1.2 If yes, indicate premium earned on U. S. business only. ..... \$ ..... 0

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

1.31 Reason for excluding

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

1.5 Indicate total incurred claims on all Medicare Supplement insurance. ..... \$ ..... 0

1.6 Individual policies:

Most current three years:

1.61 Total premium earned ..... \$ ..... 0

1.62 Total incurred claims ..... \$ ..... 0

1.63 Number of covered lives ..... 0

All years prior to most current three years:

1.64 Total premium earned ..... \$ ..... 0

1.65 Total incurred claims ..... \$ ..... 0

1.66 Number of covered lives ..... 0

1.7 Group policies:

Most current three years:

1.71 Total premium earned ..... \$ ..... 0

1.72 Total incurred claims ..... \$ ..... 0

1.73 Number of covered lives ..... 0

All years prior to most current three years:

1.74 Total premium earned ..... \$ ..... 0

1.75 Total incurred claims ..... \$ ..... 0

1.76 Number of covered lives ..... 0

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator	\$ ..... 0	\$ ..... 0
2.2 Premium Denominator	\$ ..... 24,506,767	\$ ..... 23,630,623
2.3 Premium Ratio (2.1/2.2)	.....0.000	.....0.000
2.4 Reserve Numerator	\$ ..... 444	\$ ..... 15,135
2.5 Reserve Denominator	\$ ..... 23,075,336	\$ ..... 21,480,281
2.6 Reserve Ratio (2.4/2.5)	.....0.000	.....0.001

3.1 Does the reporting entity issue both participating and non-participating policies? ..... Yes [ ] No [ X ]

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

3.21 Participating policies ..... \$ .....

3.22 Non-participating policies ..... \$ .....

4. For Mutual reporting entities and Reciprocal Exchanges only:

4.1 Does the reporting entity issue assessable policies? ..... Yes [ ] No [ X ]

4.2 Does the reporting entity issue non-assessable policies? ..... Yes [ X ] No [ ]

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

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

5. For Reciprocal Exchanges Only:

5.1 Does the exchange appoint local agents? ..... Yes [ ] No [ X ]

5.2 If yes, is the commission paid:

5.21 Out of Attorney's-in-fact compensation ..... Yes [ ] No [ ] N/A [X]

5.22 As a direct expense of the exchange ..... Yes [ ] No [ ] N/A [X]

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

5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? ..... Yes [ ] No [ X ]

5.5 If yes, give full information

**GENERAL INTERROGATORIES**  
**PART 2 - PROPERTY & CASUALTY INTERROGATORIES**

6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss:  
Purchased statutory workers' compensation reinsurance.....

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:  
See Notes to Financial Statement Number 37.....

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?  
See Notes to Financial Statement Number 37.....

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?.....

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)?.....

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)?.....

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?.....

8.2 If yes, give full information.....

9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:  
(a) A contract term longer than two years and the contract is noncancelable 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.....

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.....

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?.....

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

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

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

Yes [ X ] No [ ]

Yes [ ] No [ X ]

Yes [ ] No [ ]

Yes [ ] No [ X ]

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

## GENERAL INTERROGATORIES

### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force:..... Yes [ ] No [ X ]  
 11.2 If yes, give full information

12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:  
 12.11 Unpaid losses..... \$.....  
 12.12 Unpaid underwriting expenses (including loss adjustment expenses)..... \$.....

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

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

12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:  
 12.41 From..... %.....  
 12.42 To..... %.....

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

12.6 If yes, state the amount thereof at December 31 of current year:  
 12.61 Letters of Credit..... \$.....  
 12.62 Collateral and other funds..... \$.....

13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation):..... \$..... 2,000,000  
 13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?..... Yes [ ] No [ X ]  
 13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount..... 1

14.1 Is the company a cedant in a multiple cedant reinsurance contract?..... Yes [ X ] No [ ]  
 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:  
 See Notes to Financial Statement Number 26. Catastrophe Excess Loss Agreement allocated based on percentage of participation.....

14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?..... Yes [ X ] No [ ]  
 14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?..... Yes [ ] No [ ]  
 14.5 If the answer to 14.4 is no, please explain:.....

15.1 Has the reporting entity guaranteed any financed premium accounts?..... Yes [ ] No [ X ]  
 15.2 If yes, give full information

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

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home	\$ .....0	\$ .....0	\$ .....0	\$ .....0	\$ .....0
16.12 Products	\$ .....0	\$ .....0	\$ .....0	\$ .....0	\$ .....0
16.13 Automobile	\$ .....0	\$ .....0	\$ .....0	\$ .....0	\$ .....0
16.14 Other*	\$ .....0	\$ .....0	\$ .....0	\$ .....0	\$ .....0

\* Disclose type of coverage:

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY****GENERAL INTERROGATORIES**  
**PART 2 - PROPERTY & CASUALTY INTERROGATORIES**

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F – Part 3 that it excludes from Schedule F – Part 5..... Yes [ ] No [ X ]

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

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

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

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

18.1 Do you act as a custodian for health savings accounts?..... Yes [ ] No [ X ]  
18.2 If yes, please provide the amount of custodial funds held as of the reporting date. .... \$.....  
18.3 Do you act as an administrator for health savings accounts?..... Yes [ ] No [ X ]  
18.4 If yes, please provide the balance of the funds administered 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 2015	2 2014	3 2013	4 2012	5 2011
<b>Gross Premiums Written</b> (Page 8, Part 1B, Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....	104,348,062	94,180,819	75,800,844	55,443,402	42,056,576
2. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	82,228,691	70,637,734	54,117,815	35,910,124	25,213,354
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	95,470,842	84,787,890	72,763,523	59,963,079	48,181,161
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....	657	1,457	1,942	2,203	2,115
5. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....	0	0	0	0	0
6. Total (Line 35) .....	282,048,253	249,607,899	202,684,124	151,318,807	115,453,206
<b>Net Premiums Written</b> (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....	9,562,265	9,777,311	9,266,177	8,739,404	8,591,774
8. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	6,669,082	6,437,049	6,002,969	5,529,692	5,521,167
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	8,215,912	8,099,277	7,525,096	6,888,862	6,453,795
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....	657	1,457	1,942	2,203	2,115
11. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....	0	0	0	0	0
12. Total (Line 35) .....	24,447,916	24,315,094	22,796,183	21,160,161	20,568,851
<b>Statement of Income</b> (Page 4)					
13. Net underwriting gain (loss) (Line 8) .....	72,965	(40,375)	(2,937)	(250,418)	(364,998)
14. Net investment gain (loss) (Line 11) .....	1,736,281	1,525,523	1,450,666	1,299,892	1,460,000
15. Total other income (Line 15) .....	4,660,971	4,422,222	3,761,116	2,921,955	2,278,164
16. Dividends to policyholders (Line 17) .....	65,975	65,800	64,788	62,975	61,076
17. Federal and foreign income taxes incurred (Line 19) .....	1,971,801	1,735,595	1,700,186	1,169,971	866,924
18. Net income (Line 20) .....	4,432,441	4,105,974	3,443,872	2,738,483	2,445,166
<b>Balance Sheet Lines</b> (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3) .....	66,738,137	60,202,857	54,373,386	48,908,215	43,534,548
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1) .....	4,743,998	4,757,507	4,329,604	3,900,934	3,674,483
20.2 Deferred and not yet due (Line 15.2) .....	14,821	10,316	7,216	(4,467)	(3,758)
20.3 Accrued retrospective premiums (Line 15.3) .....	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26) .....	29,039,084	26,913,045	25,160,395	23,187,297	20,559,622
22. Losses (Page 3, Line 1) .....	10,609,483	9,216,033	8,402,185	7,803,552	7,893,634
23. Loss adjustment expenses (Page 3, Line 3) .....	2,871,087	2,610,631	2,510,753	2,336,294	2,258,927
24. Unearned premiums (Page 3, Line 9) .....	9,594,767	9,653,618	8,969,146	8,284,075	7,817,546
25. Capital paid up (Page 3, Lines 30 & 31) .....	2,000,000	2,000,000	2,000,000	2,000,000	2,000,000
26. Surplus as regards policyholders (Page 3, Line 37) .....	37,699,053	33,289,812	29,212,991	25,720,918	22,974,926
<b>Cash Flow</b> (Page 5)					
27. Net cash from operations (Line 11) .....	6,816,309	5,829,036	6,415,920	3,529,294	1,896,224
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital .....	37,699,053	33,289,812	29,212,991	25,720,918	22,974,926
29. Authorized control level risk-based capital .....	2,018,778	1,903,456	1,657,824	1,535,840	1,530,954
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b>					
(Page 2, Col. 3)(Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1) .....	96.0	97.1	95.8	92.8	93.5
31. Stocks (Lines 2.1 & 2.2) .....	0.0	0.0	0.0	0.0	0.0
32. Mortgage loans on real estate (Lines 3.1 and 3.2) .....	0.0	0.0	0.0	0.0	0.0
33. Real estate (Lines 4.1, 4.2 & 4.3) .....	0.0	0.0	0.0	0.0	0.0
34. Cash, cash equivalents and short-term investments (Line 5) .....	2.5	1.1	2.0	1.7	4.9
35. Contract loans (Line 6) .....	0.0	0.0	0.0	0.0	0.0
36. Derivatives (Line 7) .....	0.0	0.0	0.0	0.0	0.0
37. Other invested assets (Line 8) .....	0.0	0.0	0.0	0.0	0.0
38. Receivables for securities (Line 9) .....	0.0	0.0	0.0	0.0	0.0
39. Securities lending reinvested collateral assets (Line 10) .....	1.5	1.7	2.2	5.5	1.6
40. Aggregate write-ins for invested assets (Line 11) .....	0.0	0.0	0.0	0.0	0.0
41. Cash, cash equivalents and invested assets (Line 12) .....	100.0	100.0	100.0	100.0	100.0
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
42. Affiliated bonds, (Sch. D, Summary, Line 12, Col. 1) .....	0	0	0	0	0
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1) .....	0	0	0	0	0
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1) .....	0	0	0	0	0
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10) .....	0	0	0	0	0
46. Affiliated mortgage loans on real estate .....		0	0	0	0
47. All other affiliated .....		0	0	0	0
48. Total of above Lines 42 to 47 .....	0	0	0	0	0
49. Total Investment in parent included in Lines 42 to 47 above .....		0	0	0	0
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0) .....	0.0	0.0	0.0	0.0	0.0

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**FIVE-YEAR HISTORICAL DATA**

**(Continued)**

	1 2015	2 2014	3 2013	4 2012	5 2011
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24) .....	0	0	0	0	(50,266)
52. Dividends to stockholders (Line 35) .....	0	0	0	0	0
53. Change in surplus as regards policyholders for the year (Line 38) .....	4,409,241	4,076,820	3,492,074	2,745,992	2,345,281
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....	56,720,768	46,171,506	34,208,947	26,399,099	25,606,922
55. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	48,092,692	40,565,010	30,716,021	21,156,773	14,244,824
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	35,774,456	34,695,558	35,179,550	44,619,080	43,589,438
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....	229	1,332	3,148	3,984	3,698
58. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....	0	0	0	0	0
59. Total (Line 35) .....	140,588,144	121,433,407	100,107,666	92,178,937	83,444,882
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....	5,516,600	5,207,609	4,667,973	4,543,272	5,014,716
61. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	3,551,315	3,528,856	3,204,655	3,114,575	3,373,290
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	3,578,036	4,032,802	3,714,279	4,433,268	4,339,205
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....	229	1,332	3,148	3,984	3,698
64. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....	0	0	0	0	0
65. Total (Line 35) .....	12,646,181	12,770,598	11,590,054	12,095,099	12,730,909
<b>Operating Percentages (Page 4)</b> (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1) .....	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2) .....	57.3	57.5	55.1	58.0	60.1
68. Loss expenses incurred (Line 3) .....	11.9	11.4	11.8	11.0	10.4
69. Other underwriting expenses incurred (Line 4) .....	30.6	31.2	33.1	32.2	31.3
70. Net underwriting gain (loss) (Line 8) .....	0.3	(0.2)	0.0	(1.2)	(1.7)
<b>Other Percentages</b>					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0) .....	11.6	12.2	15.6	17.7	20.6
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0) .....	69.1	68.9	66.9	69.0	70.5
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) .....	64.9	73.0	78.0	82.3	89.5
<b>One Year Loss Development (000 omitted)</b>					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) .....	413	234	(101)	(546)	(905)
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) .....	1.2	0.8	(0.4)	(2.4)	(4.4)
<b>Two Year Loss Development (000 omitted)</b>					
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) .....	436	174	(523)	(1,040)	(1,030)
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) .....	1.5	0.7	(2.3)	(5.0)	(5.6)

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

Yes  No

If no, please explain

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

**SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES**  
**SCHEDULE P - PART 1 - SUMMARY**

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	.50	.32	.17	6	1	.0	.7	.31	XXX	
2. 2006	21,869	.906	20,963	11,370	517	.430	2	1,783	.0	.582	13,065	XXX	
3. 2007	22,719	.774	21,945	12,566	524	.441	4	1,694	.0	.680	14,173	XXX	
4. 2008	22,449	1,038	21,411	14,263	1,619	.484	21	1,830	.1	.647	14,934	XXX	
5. 2009	23,134	1,167	21,967	13,590	386	.434	2	1,833	.0	.715	15,469	XXX	
6. 2010	23,548	1,140	22,409	13,913	423	.452	0	1,937	.0	.789	15,877	XXX	
7. 2011	14,656	1,103	13,553	14,497	1,899	.494	8	1,892	.0	.707	14,976	XXX	
8. 2012	21,855	1,161	20,694	12,466	593	.399	5	1,760	.1	.664	14,028	XXX	
9. 2013	23,187	1,075	22,111	11,379	296	.327	6	1,861	.1	.667	13,264	XXX	
10. 2014	24,650	1,020	23,631	11,112	100	.198	1	1,974	.2	.691	13,181	XXX	
11. 2015	25,430	923	24,507	8,322	65	.78	0	1,689	3	.412	10,021	XXX	
12. Totals	XXX	XXX	XXX	123,528	6,452	3,755	55	18,252	8	6,561	139,020	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.	2,327	2,269	8	.0	1	3	.0	.0	.3	0	.0	.67	XXX
2.	.277	.251	6	.0	.0	0	.11	.0	.2	0	.2	.45	XXX
3.	.731	.713	7	.0	.0	0	.17	.0	.2	0	.4	.44	XXX
4.	.165	.109	9	.0	.0	0	.22	.0	.4	0	.6	.90	XXX
5.	.78	.22	12	.0	.0	0	.34	.0	.6	0	.9	.109	XXX
6.	.653	.568	.25	.0	.0	0	.51	.0	.7	0	.13	.167	XXX
7.	.673	.433	.57	.0	.0	0	.83	.0	.13	0	.19	.394	XXX
8.	.825	.442	131	16	.0	0	.160	.0	.27	0	.30	.683	XXX
9.	1,368	.352	389	.35	.0	0	.295	.0	.69	0	.53	.1,735	XXX
10.	1,680	100	1,047	.67	.0	0	.501	.0	.139	0	.109	.3,201	XXX
11.	3,540	233	2,313	102	1	0	.682	0	.744	0	.376	6,945	XXX
12.	12,316	5,492	4,005	219	3	3	1,856	0	1,015	0	619	13,481	XXX

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Direct and Assumed	Ceded	
1.	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	.65	.1
2.	13,881	.770	13,110	.63.5	.85.0	.62.5	.0	.0	.2.0	.32	.13
3.	15,457	1,241	14,216	.68.0	.160.3	.64.8	.0	.0	.2.0	.25	.19
4.	16,776	1,751	15,025	.74.7	.168.7	.70.2	.0	.0	.2.0	.65	.25
5.	15,987	.409	15,578	.69.1	.35.0	.70.9	.0	.0	.2.0	.68	.40
6.	17,036	.992	16,045	.72.3	.87.0	.71.6	.0	.0	.2.0	.109	.58
7.	17,710	2,340	15,370	.120.8	.212.1	.113.4	.0	.0	.2.0	.298	.97
8.	15,768	1,057	14,711	.72.1	.91.0	.71.1	.0	.0	.2.0	.497	.186
9.	15,688	.689	14,999	.67.7	.64.1	.67.8	.0	.0	.2.0	1,371	.364
10.	16,651	.269	16,382	.67.5	.26.4	.69.3	.0	.0	.2.0	2,561	.640
11.	17,368	402	16,966	.68.3	.43.6	.69.2	0	0	.2.0	5,518	1,427
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	10,609	2,871

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.

**ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

**SCHEDULE P - PART 2 - SUMMARY**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015	11 One Year	12 Two Year
1. Prior	4,824	4,511	4,275	4,156	4,059	4,079	4,093	4,104	4,138	4,144	7	41
2. 2006	12,103	11,641	11,512	11,395	11,343	11,320	11,318	11,310	11,312	11,325	13	15
3. 2007	XXX	12,956	12,780	12,646	12,559	12,516	12,546	12,505	12,515	12,521	.6	15
4. 2008	XXX	XXX	13,299	13,385	13,324	13,143	13,172	13,161	13,192	13,193	.0	32
5. 2009	XXX	XXX	XXX	14,251	13,968	13,746	13,742	13,724	13,712	13,739	.27	15
6. 2010	XXX	XXX	XXX	XXX	14,679	14,222	14,020	14,066	14,106	14,101	(5)	35
7. 2011	XXX	XXX	XXX	XXX	XXX	13,714	13,302	13,347	13,451	13,466	14	119
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX	13,032	12,908	12,973	12,924	(48)	17
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	12,924	12,883	13,070	187	146	
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14,059	14,271	212	XXX
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14,536	XXX	XXX	
										12. Totals	413	436

**SCHEDULE P - PART 3 - SUMMARY**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015		
1. Prior	000	1,992	3,032	3,510	3,723	3,838	3,914	3,962	4,051	4,081	XXX	XXX
2. 2006	7,252	9,505	10,432	10,917	11,126	11,218	11,245	11,254	11,278	11,282	XXX	XXX
3. 2007	XXX	8,153	10,461	11,486	12,097	12,258	12,365	12,429	12,467	12,479	XXX	XXX
4. 2008	XXX	XXX	8,603	11,251	12,120	12,641	12,825	13,001	13,058	13,106	XXX	XXX
5. 2009	XXX	XXX	XXX	9,142	11,849	12,721	13,205	13,481	13,573	13,637	XXX	XXX
6. 2010	XXX	XXX	XXX	XXX	9,443	11,913	12,816	13,462	13,825	13,941	XXX	XXX
7. 2011	XXX	XXX	XXX	XXX	XXX	8,913	11,181	12,067	12,762	13,085	XXX	XXX
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX	8,494	10,623	11,557	12,268	XXX	XXX
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	7,906	10,218	11,404	XXX	XXX	
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,759	11,209	XXX	XXX
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,335	XXX	XXX	

**SCHEDULE P - PART 4 - SUMMARY**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										10 2015
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014		
1. Prior	1,276	1,002	.513	.272	108	.48	.34	.20	.11		8
2. 2006	1,819	1,064	.502	.207	87	.41	.32	.16	.14		18
3. 2007	XXX	2,262	1,086	475	196	.84	.59	.27	.23		24
4. 2008	XXX	XXX	2,188	997	418	173	.99	.40	.33		30
5. 2009	XXX	XXX	XXX	2,340	1,050	414	164	.91	.56		46
6. 2010	XXX	XXX	XXX	XXX	2,428	.956	419	.177	.114		76
7. 2011	XXX	XXX	XXX	XXX	XXX	2,194	.870	.428	.232		141
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX	2,166	.1,018	.530		275
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,166	.1,131		649
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,476		1,482
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		2,893

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

**SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

Allocated By States And Territories

States, etc.	Active Status	1	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken	4	5	6	7	8	9
		2 Direct Premiums Written	3 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Losses Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Finance and Service Charges Not Included in Premiums	Direct Premium Written for Federal Purchasing Groups (Included in Col. 2)
1. Alabama	AL	N	0	0	0	0	0	0	0
2. Alaska	AK	N	0	0	0	0	0	0	0
3. Arizona	AZ	N	0	0	0	0	0	0	0
4. Arkansas	AR	N	0	0	0	0	0	0	0
5. California	CA	N	0	0	0	0	0	0	0
6. Colorado	CO	N	0	0	0	0	0	0	0
7. Connecticut	CT	N	0	0	0	0	0	0	0
8. Delaware	DE	N	0	0	0	0	0	0	0
9. Dist. Columbia	DC	N	0	0	0	0	0	0	0
10. Florida	FL	N	0	0	0	0	0	0	0
11. Georgia	GA	L	30,010,364	29,927,128	0	18,030,601	22,456,251	12,271,092	702,665
12. Hawaii	HI	N	0	0	0	0	0	0	0
13. Idaho	ID	N	0	0	0	0	0	0	0
14. Illinois	IL	L	0	0	0	0	0	0	0
15. Indiana	IN	L	543,815	61,008	0	0	525	525	.931
16. Iowa	IA	N	0	0	0	0	0	0	0
17. Kansas	KS	N	0	0	0	0	0	0	0
18. Kentucky	KY	L	31,310,228	28,884,496	0	15,550,377	15,438,778	9,471,956	408,716
19. Louisiana	LA	N	0	0	0	0	0	0	0
20. Maine	ME	N	0	0	0	0	0	0	0
21. Maryland	MD	N	0	0	0	0	0	0	0
22. Massachusetts	MA	N	0	0	0	0	0	0	0
23. Michigan	MI	N	0	0	0	0	0	0	0
24. Minnesota	MN	N	0	0	0	0	0	0	0
25. Mississippi	MS	N	0	0	0	0	0	0	0
26. Missouri	MO	N	0	0	0	0	0	0	0
27. Montana	MT	N	0	0	0	0	0	0	0
28. Nebraska	NE	N	0	0	0	0	0	0	0
29. Nevada	NV	N	0	0	0	0	0	0	0
30. New Hampshire	NH	N	0	0	0	0	0	0	0
31. New Jersey	NJ	N	0	0	0	0	0	0	0
32. New Mexico	NM	N	0	0	0	0	0	0	0
33. New York	NY	N	0	0	0	0	0	0	0
34. No. Carolina	NC	N	0	0	0	0	0	0	0
35. No. Dakota	ND	N	0	0	0	0	0	0	0
36. Ohio	OH	L	195,359,929	188,853,399	0	94,198,035	107,071,879	43,759,698	3,590,375
37. Oklahoma	OK	N	0	0	0	0	0	0	0
38. Oregon	OR	N	0	0	0	0	0	0	0
39. Pennsylvania	PA	N	0	0	0	0	0	0	0
40. Rhode Island	RI	N	0	0	0	0	0	0	0
41. So. Carolina	SC	N	0	0	0	0	0	0	0
42. So. Dakota	SD	N	0	0	0	0	0	0	0
43. Tennessee	TN	L	0	0	0	0	0	0	0
44. Texas	TX	N	0	0	0	0	0	0	0
45. Utah	UT	N	0	0	0	0	0	0	0
46. Vermont	VT	N	0	0	0	0	0	0	0
47. Virginia	VA	N	0	0	0	0	0	0	0
48. Washington	WA	N	0	0	0	0	0	0	0
49. West Virginia	WV	N	0	0	0	0	0	0	0
50. Wisconsin	WI	N	0	0	0	0	0	0	0
51. Wyoming	WY	N	0	0	0	0	0	0	0
52. American Samoa	AS	N	0	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0	0
54. Puerto Rico	PR	N	0	0	0	0	0	0	0
55. U.S. Virgin Islands	VI	N	0	0	0	0	0	0	0
56. Northern Mariana Islands	MP	N	0	0	0	0	0	0	0
57. Canada	CAN	N	0	0	0	0	0	0	0
58. Aggregate other alien	OT	XXX	0	0	0	0	0	0	0
59. Totals	(a)	6	257,224,336	247,726,031	0	127,779,014	144,967,432	65,503,271	4,702,687

**DETAILS OF WRITE-INS**

58001. XXX.

58002. XXX.

58003. XXX.

58998. Sum. of remaining write-ins for Line 58 from overflow page XXX. 0 .0 .0 .0 .0 .0 .0 .0 .0 .0

58999. Totals (Lines 58001 through 58003 + 58998) (Line 58 above) XXX. 0 0 0 0 0 0 0 0 0 0

(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.

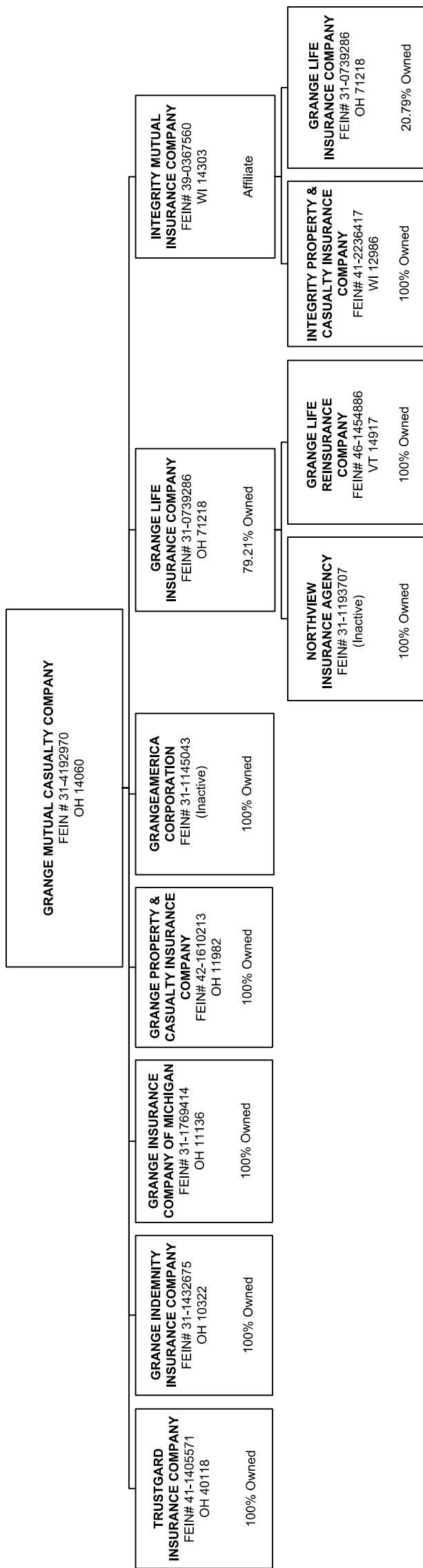
**Explanation of basis of allocation of premiums by states, etc.**

Location of the risk.

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

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

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