



ANNUAL STATEMENT

For the Year Ended December 31, 2015

of the Condition and Affairs of the

Affinity Mutual Insurance Company

NAIC Group Code..... 0, 0
(Current Period) (Prior Period)

NAIC Company Code..... 16748

Employer's ID Number..... 34-4317240

Organized under the Laws of Ohio

State of Domicile or Port of Entry Ohio

Country of Domicile US

Incorporated/Organized..... December 17, 1934

Commenced Business..... May 1, 1935

Statutory Home Office

722 North Cable Road..... Lima OH US 45805-1795
(Street and Number) (City or Town, State, Country and Zip Code)

419-227-6604

(Area Code) (Telephone Number)

Main Administrative Office

722 North Cable Road..... Lima OH US..... 45805-1795
(Street and Number) (City or Town, State, Country and Zip Code)

Mail Address

722 North Cable Road..... Lima OH US 45805-1795
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records

722 North Cable Road..... Lima OH US 45805-1795
(Street and Number) (City or Town, State, Country and Zip Code)

419-227-6604

(Area Code) (Telephone Number)

Internet Web Site Address

www.affinity-mutual.com

Statutory Statement Contact

Brent A. Helmke
(Name)
bhelmke@affinity-mutual.com
(E-Mail Address)

419-227-6604

(Area Code) (Telephone Number) (Extension)

419-224-4874

(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Jack L. Brinkman	President	2. Jack L. Brinkman	Secretary
3. Brent A. Helmke	Treasurer	4.	

Eldon M. Helmke

OTHER

David W. Seemann

Vice Chairman

DIRECTORS OR TRUSTEES

Daniel R. Combs
Scott W. Boulis
Brent R. Petersen

David W. Seemann
Eldon M. Helmke

Alvin J. King
Dale N. Hirschfeld

Fred G. Bunke
Gary L. Luginbill

State of..... Ohio
County of.... Allen

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

(Signature)
Jack L. Brinkman
1. (Printed Name)
President
(Title)

(Signature)
Jack L. Brinkman
2. (Printed Name)
Secretary
(Title)

(Signature)
Brent A. Helmke
3. (Printed Name)
Treasurer
(Title)

Subscribed and sworn to before me

This _____ day of _____ 2016

a. Is this an original filing?

Yes [X] No []

b. If no 1. State the amendment number

2. Date filed

3. Number of pages attached

Annual Statement for the year 2015 of the **Affinity Mutual 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).....	2,671,469		2,671,469	3,352,247
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	163,745		163,745	161,065
2.2 Common stocks.....	4,790,916	926	4,789,991	4,652,659
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	112,842		112,842	116,254
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$....815,925, Schedule E-Part 1), cash equivalents (\$.....0, Schedule E-Part 2) and short-term investments (\$....2,359,622, Schedule DA).....	3,175,546		3,175,546	3,974,605
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....			0	
9. Receivables for securities.....	100,144		100,144	
10. Securities lending reinvested collateral assets (Schedule DL).....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	11,014,664	926	11,013,738	12,256,829
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	44,971		44,971	48,212
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	238,348		238,348	347,617
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	1,986,555		1,986,555	2,338,273
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	38,848		38,848	313,609
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....	27,985		27,985	36,971
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	41,705
18.2 Net deferred tax asset.....	87,827		87,827	339,231
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	4,622		4,622	9,477
21. Furniture and equipment, including health care delivery assets (\$.....0).....	10,938	10,938	0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	13,454,757	11,864	13,442,893	15,731,925
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTALS (Lines 26 and 27).....	13,454,757	11,864	13,442,893	15,731,925

DETAILS OF WRITE-INS

1101.....			0	
1102.....			0	
1103.....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Building Permanent Improvement Pre-Payment.....			0	
2502.....			0	
2503.....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0	0

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8).....	1,623,358	2,051,080
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6).....		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9).....	287,243	242,822
4. Commissions payable, contingent commissions and other similar charges.....	651,757	583,100
5. Other expenses (excluding taxes, licenses and fees).....	116,037	107,760
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	3,785	16,793
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....		
7.2 Net deferred tax liability.....		
8. Borrowed money \$.....0 and interest thereon \$.....0.....		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$.....436,420 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	3,367,787	3,744,991
10. Advance premium.....	5,275	20,139
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....	320,451	392,407
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19).....		
14. Amounts withheld or retained by company for account of others.....		
15. Remittances and items not allocated.....		
16. Provision for reinsurance (including \$.....0 certified) (Schedule F, Part 8).....		
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....		
19. Payable to parent, subsidiaries and affiliates.....		
20. Derivatives.....		
21. Payable for securities.....		
22. Payable for securities lending.....		
23. Liability for amounts held under uninsured plans.....		
24. Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	6,375,694	7,159,092
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	6,375,694	7,159,092
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....		
31. Preferred capital stock.....		
32. Aggregate write-ins for other than special surplus funds.....	0	0
33. Surplus notes.....		
34. Gross paid in and contributed surplus.....		
35. Unassigned funds (surplus).....	7,067,200	8,572,833
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39).....	7,067,200	8,572,833
38. TOTALS (Page 2, Line 28, Col. 3).....	13,442,893	15,731,925

DETAILS OF WRITE-INS

2501. Line 15 from 2000 Annual Statement.....		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

Affinity Mutual Insurance Company
STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....	4,583,606	5,160,312
DEDUCTIONS		
2. Losses incurred (Part 2, Line 35, Column 7).....	1,806,600	3,858,715
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....	751,739	634,157
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2).....	2,477,362	2,596,358
5. Aggregate write-ins for underwriting deductions.....	0	0
6. Total underwriting deductions (Lines 2 through 5).....	5,035,701	7,089,230
7. Net income of protected cells.....		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7).....	(452,095)	(1,928,918)
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	188,758	241,992
10. Net realized capital gains (losses) less capital gains tax of \$.....0 (Exhibit of Capital Gains (Losses)).....	(299,076)	1,074,798
11. Net investment gain (loss) (Lines 9 + 10).....	(110,319)	1,316,790
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$....217 amount charged off \$....6,510).....	(6,293)	(5,045)
13. Finance and service charges not included in premiums.....		
14. Aggregate write-ins for miscellaneous income.....	327	2,874
15. Total other income (Lines 12 through 14).....	(5,966)	(2,171)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	(568,380)	(614,300)
17. Dividends to policyholders.....		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	(568,380)	(614,300)
19. Federal and foreign income taxes incurred.....	172	(21,952)
20. Net income (Line 18 minus Line 19) (to Line 22).....	(568,552)	(592,348)
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	8,572,833	9,814,421
22. Net income (from Line 20).....	(568,552)	(592,348)
23. Net transfers (to) from Protected Cell accounts.....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.....0.....	(688,657)	(979,525)
25. Change in net unrealized foreign exchange capital gain (loss).....		
26. Change in net deferred income tax.....	(251,404)	329,519
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3).....	2,979	766
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....		
29. Change in surplus notes.....		
30. Surplus (contributed to) withdrawn from protected cells.....		
31. Cumulative effect of changes in accounting principles.....		
32. Capital changes:		
32.1 Paid in.....		
32.2 Transferred from surplus (Stock Dividend).....		
32.3 Transferred to surplus.....		
33. Surplus adjustments:		
33.1 Paid in.....		
33.2 Transferred to capital (Stock Dividend).....		
33.3. Transferred from capital.....		
34. Net remittances from or (to) Home Office.....		
35. Dividends to stockholders.....		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....		
37. Aggregate write-ins for gains and losses in surplus.....	0	0
38. Change in surplus as regards policyholders for the year (Lines 22 through 37).....	(1,505,633)	(1,241,588)
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	7,067,200	8,572,833

DETAILS OF WRITE-INS

0501.....		
0502.....		
0503.....		
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0
1401. Lines 23 and 29 from 2000 Annual Statement.....		
1402. Miscellaneous Income.....	327	2,874
1403.....		
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	327	2,874
3701. Lines 23 and 29 from 2000 Annual Statement.....		
3702.....		
3703.....		
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0

Annual Statement for the year 2015 of the **Affinity Mutual Insurance Company**
CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	4,580,571	5,164,931
2. Net investment income.....	269,655	328,898
3. Miscellaneous income.....	(5,966)	(2,171)
4. Total (Lines 1 through 3).....	4,844,260	5,491,658
5. Benefit and loss related payments.....	1,950,575	3,397,300
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7. Commissions, expenses paid and aggregate write-ins for deductions.....	3,123,741	3,256,122
8. Dividends paid to policyholders.....		
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	(41,533)	41,705
10. Total (Lines 5 through 9).....	5,032,783	6,695,127
11. Net cash from operations (Line 4 minus Line 10).....	(188,523)	(1,203,469)
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	1,018,095	.897,018
12.2 Stocks.....	2,409,743	5,029,996
12.3 Mortgage loans.....		
12.4 Real estate.....		
12.5 Other invested assets.....		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....		
12.7 Miscellaneous proceeds.....		
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	3,427,838	5,927,014
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	411,970	.752,710
13.2 Stocks.....	3,531,842	3,710,228
13.3 Mortgage loans.....		
13.4 Real estate.....	.2,251	9,893
13.5 Other invested assets.....		
13.6 Miscellaneous applications.....	100,144	
13.7 Total investments acquired (Lines 13.1 to 13.6).....	4,046,207	4,472,831
14. Net increase (decrease) in contract loans and premium notes.....		
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	(618,369)	1,454,183
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....		
16.2 Capital and paid in surplus, less treasury stock.....		
16.3 Borrowed funds.....		
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....		
16.5 Dividends to stockholders.....		
16.6 Other cash provided (applied).....	.7,834	1,017
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	7,834	1,017
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(799,058)	.251,730
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	3,974,604	3,722,874
19.2 End of year (Line 18 plus Line 19.1).....	3,175,546	3,974,604

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

20.0001
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Affinity Mutual 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 December 31 Prior Year- per Col. 3, Last Year's Part 1	3 Unearned Premiums December 31 Current Year- per Col. 5, Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Fire.....	593,598	589,086	604,074	578,610
2. Allied lines.....	395,962	392,494	402,715	385,740
3. Farmowners multiple peril.....				0
4. Homeowners multiple peril.....				0
5. Commercial multiple peril.....	2,083,789	1,886,769	1,624,188	2,346,370
6. Mortgage guaranty.....				0
8. Ocean marine.....				0
9. Inland marine.....	191,695	214,697	168,424	237,968
10. Financial guaranty.....				0
11.1 Medical professional liability - occurrence.....				0
11.2 Medical professional liability - claims-made.....				0
12. Earthquake.....				0
13. Group accident and health.....				0
14. Credit accident and health (group and individual).....				0
15. Other accident and health.....				0
16. Workers' compensation.....				0
17.1 Other liability - occurrence.....	18,228	10,484	11,062	17,650
17.2 Other liability - claims-made.....				0
17.3 Excess workers' compensation.....				0
18.1 Products liability - occurrence.....				0
18.2 Products liability - claims-made.....				0
19.1, 19.2 Private passenger auto liability.....				0
19.3, 19.4 Commercial auto liability.....	570,509	464,574	392,510	642,573
21. Auto physical damage.....	334,337	174,182	153,047	355,472
22. Aircraft (all perils).....				0
23. Fidelity.....	5,742	7,245	5,860	7,126
24. Surety.....	9,752	3,445	4,332	8,865
26. Burglary and theft.....	2,791	2,015	1,575	3,231
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
35. TOTALS.....	4,206,402	3,744,991	3,367,787	4,583,606

DETAILS OF WRITE-INS

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

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.....	604,074				604,074
2. Allied lines.....	402,715				402,715
3. Farmowners multiple peril.....					0
4. Homeowners multiple peril.....					0
5. Commercial multiple peril.....	1,624,188				1,624,188
6. Mortgage guaranty.....					0
8. Ocean marine.....					0
9. Inland marine.....	168,424				168,424
10. Financial guaranty.....					0
11.1 Medical professional liability - occurrence.....					0
11.2 Medical professional liability - claims-made.....					0
12. Earthquake.....					0
13. Group accident and health.....					0
14. Credit accident and health (group and individual).....					0
15. Other accident and health.....					0
16. Workers' compensation.....					0
17.1 Other liability - occurrence.....	11,062				11,062
17.2 Other liability - claims-made.....					0
17.3 Excess workers' compensation.....					0
18.1 Products liability - occurrence.....					0
18.2 Products liability - claims-made.....					0
19.1, 19.2 Private passenger auto liability.....					0
19.3, 19.4 Commercial auto liability.....	392,510				392,510
21. Auto physical damage.....	153,047				153,047
22. Aircraft (all perils).....					0
23. Fidelity.....	5,860				5,860
24. Surety.....	4,332				4,332
26. Burglary and theft.....	1,575				1,575
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.....	3,367,787	0	0	0	3,367,787
36. Accrued retrospective premiums based on experience.....					
37. Earned but unbilled premiums.....					0
38. Balance (sum of Lines 35 through 37).....					3,367,787

DETAILS OF WRITE-INS

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

(a) State here basis of computation used in each case: Monthly Pro-Rata

Affinity Mutual 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.....	1,263,670				670,072	593,598
2. Allied lines.....	842,446				446,485	395,962
3. Farmowners multiple peril.....						0
4. Homeowners multiple peril.....						0
5. Commercial multiple peril.....	3,950,017				1,866,228	2,083,789
6. Mortgage guaranty.....						0
8. Ocean marine.....						0
9. Inland marine.....	404,539				212,844	191,695
10. Financial guaranty.....						0
11.1 Medical professional liability - occurrence.....						0
11.2 Medical professional liability - claims-made.....						0
12. Earthquake.....						0
13. Group accident and health.....						0
14. Credit accident and health (group and individual).....						0
15. Other accident and health.....						0
16. Workers' compensation.....						0
17.1 Other liability - occurrence.....	477,226				458,998	18,228
17.2 Other liability - claims-made.....						0
17.3 Excess workers' compensation.....						0
18.1 Products liability - occurrence.....						0
18.2 Products liability - claims-made.....						0
19.1, 19.2 Private passenger auto liability.....						0
19.3, 19.4 Commercial auto liability.....	806,324				235,815	570,509
21. Auto physical damage.....	340,289				5,952	334,337
22. Aircraft (all perils).....						0
23. Fidelity.....	11,766				6,024	5,742
24. Surety.....	9,752					9,752
26. Burglary and theft.....	2,843				.52	2,791
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.....	8,108,872	0	0	0	3,902,470	4,206,402

DETAILS OF WRITE-INS

3401. ....						.0
3402. ....						.0
3403. ....						.0
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 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 \$.....0.

2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$.....0.

UNDERWRITING AND INVESTMENT EXHIBIT**PART 2 - LOSSES PAID AND INCURRED**

Line of 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 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire.....	20,418		19,273	1,145	103,820	25,903	79,062	13.7
2. Allied lines.....	1,292,023		1,013,025	278,997	6,820	27,047	258,770	67.1
3. Farmowners multiple peril.....				0			0	0.0
4. Homeowners multiple peril.....				0			0	0.0
5. Commercial multiple peril.....	5,756,216		4,542,482	1,213,734	906,781	1,325,776	794,739	33.9
6. Mortgage guaranty.....				0			0	0.0
8. Ocean marine.....				0			0	0.0
9. Inland marine.....	101,770		4,440	.97,330	17,950		115,280	48.4
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.....				0			0	0.0
13. Group accident and health.....				0			0	0.0
14. Credit accident and health (group and individual).....				0			0	0.0
15. Other accident and health.....				0			0	0.0
16. Workers' compensation.....				0			0	0.0
17.1 Other liability - occurrence.....				0	30,265	.28,754	1,511	8.6
17.2 Other liability - claims-made.....				0			0	0.0
17.3 Excess workers' compensation.....				0			0	0.0
18.1 Products liability - occurrence.....				0			0	0.0
18.2 Products liability - claims-made.....				0			0	0.0
19.1, 19.2 Private passenger auto liability.....				0			0	0.0
19.3, 19.4 Commercial auto liability.....	223,280			.223,280	.516,471	.549,949	.189,802	29.5
21. Auto physical damage.....	419,821		(15)	.419,836	30,478	.84,449	.365,865	102.9
22. Aircraft (all perils).....				0			0	0.0
23. Fidelity.....				0			0	0.0
24. Surety.....				0	8,773	9,202	(429)	(4.8)
26. Burglary and theft.....				0	2,000		2,000	61.9
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.....	XXX			0			0	0.0
32. Reinsurance - nonproportional assumed liability.....	XXX			0			0	0.0
33. Reinsurance - nonproportional assumed financial lines.....	XXX			0			0	0.0
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0.0
35. TOTALS.....	7,813,527	0	.5,579,205	.2,234,322	1,623,358	.2,051,080	1,806,600	39.4

DETAILS OF WRITE-INS

3401.					0		0	0.0
3402.					0		0	0.0
3403.					0		0	0.0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	XXX
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0.0

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 Excluding Incurred but not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire.....	143,700		46,700	97,000	25,939		19,119	103,820	9,446
2. Allied lines.....	125,000		125,000	0	25,939		19,119	6,820	1,447
3. Farmowners multiple peril.....				0				0	
4. Homeowners multiple peril.....				0				0	
5. Commercial multiple peril.....	1,183,663		557,979	625,684	1,185,557		904,460	906,781	144,246
6. Mortgage guaranty.....				0				0	
8. Ocean marine.....				0				0	
9. Inland marine.....	21,631		3,681	17,950				17,950	1,500
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	
13. Group accident and health.....				0				(a).....0	
14. Credit accident and health (group and individual).....				0				0	
15. Other accident and health.....				0				(a).....0	
16. Workers' compensation.....				0				0	
17.1 Other liability - occurrence.....				0	605,290		575,025	30,265	39,796
17.2 Other liability - claims-made.....				0				0	
17.3 Excess workers' compensation.....				0				0	
18.1 Products liability - occurrence.....				0				0	
18.2 Products liability - claims-made.....				0				0	
19.1, 19.2 Private passenger auto liability.....				0				0	
19.3, 19.4 Commercial auto liability.....	764,499		412,752	351,747	267,628		102,904	516,471	76,469
21. Auto physical damage.....	53,500			53,500	(23,022)			30,478	12,266
22. Aircraft (all perils).....				0				0	
23. Fidelity.....				0				0	
24. Surety.....				0	12,212		3,439	8,773	1,573
26. Burglary and theft.....	2,000			2,000				2,000	500
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.....	2,293,994	0	1,146,113	1,147,881	2,099,543	0	1,624,066	1,623,358	287,243

DETAILS OF WRITE-INS

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

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

Affinity Mutual 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.....	1,154,278			1,154,278
1.2 Reinsurance assumed.....				0
1.3 Reinsurance ceded.....	582,132			582,132
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3).....	572,146	0	0	572,146
2. Commission and brokerage:				
2.1 Direct, excluding contingent.....		990,887		990,887
2.2 Reinsurance assumed, excluding contingent.....		180,891		180,891
2.3 Reinsurance ceded, excluding contingent.....		325,224		325,224
2.5 Contingent - reinsurance assumed.....		127,985		127,985
2.7 Policy and membership fees.....				0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7).....	0	1,007,235	0	1,007,235
3. Allowances to manager and agents.....	790			790
4. Advertising.....		15,917		15,917
5. Boards, bureaus and associations.....		11,501		11,501
6. Surveys and underwriting reports.....		121,315		121,315
7. Audit of assureds' records.....				0
8. Salary and related items:				
8.1 Salaries.....	113,894	780,063	30,507	924,465
8.2 Payroll taxes.....	8,256	55,882	2,189	66,327
9. Employee relations and welfare.....	26,089	178,682	6,988	211,758
10. Insurance.....	2,344	16,055	628	19,027
11. Directors' fees.....	7,241	49,597	1,940	58,778
12. Travel and travel items.....	4,417	19,277	436	24,130
13. Rent and rent items.....	2,769	18,965	742	22,476
14. Equipment.....	4,249	29,102	1,138	34,489
15. Cost or depreciation of EDP equipment and software.....	965	6,610	259	7,834
16. Printing and stationery.....	1,666	11,408	446	13,520
17. Postage, telephone and telegraph, exchange and express.....	3,037	20,802	814	24,652
18. Legal and auditing.....	3,876	56,820	20,139	80,835
19. Totals (Lines 3 to 18).....	179,593	1,391,996	66,225	1,637,814
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$.....0.....		58,663		58,663
20.2 Insurance department licenses and fees.....		12,873		12,873
20.3 Gross guaranty association assessments.....				0
20.4 All other (excluding federal and foreign income and real estate).....				0
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4).....	0	71,536	0	71,536
21. Real estate expenses.....			15,382	15,382
22. Real estate taxes.....			6,819	6,819
23. Reimbursements by uninsured plans.....				0
24. Aggregate write-ins for miscellaneous expenses.....	0	6,595	0	6,595
25. Total expenses incurred.....	751,739	2,477,362	88,426	(a).....3,317,527
26. Less unpaid expenses - current year.....	284,977	368,693	25,437	679,106
27. Add unpaid expenses - prior year.....	249,976	294,487	22,450	566,912
28. Amounts receivable relating to uninsured plans, prior year.....				0
29. Amounts receivable relating to uninsured plans, current year.....				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29).....	716,737	2,403,156	85,439	3,205,333

DETAILS OF WRITE-INS

2401. Policyholder Meeting Expense.....		2,565		2,565
2402. Miscellaneous Expenses.....		4,031		4,031
2403.				0
2498. Summary of remaining write-ins for Line 24 from overflow page.....	0	0	0	0
2499. Totals (Lines 2401 thru 2403 plus 2498) (Line 24 above).....	0	6,595	0	6,595

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

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds.....	(a).....1,788	1,944
1.1 Bonds exempt from U.S. tax.....	(a).....	
1.2 Other bonds (unaffiliated).....	(a).....63,643	56,264
1.3 Bonds of affiliates.....	(a).....	
2.1 Preferred stocks (unaffiliated).....	(b).....9,225	9,225
2.11 Preferred stocks of affiliates.....	(b).....	
2.2 Common stocks (unaffiliated).....	.....195,830	199,812
2.21 Common stocks of affiliates.....	.....
3. Mortgage loans.....	(c).....	
4. Real estate.....	(d).....15,000	15,000
5. Contract loans.....	.....
6. Cash, cash equivalents and short-term investments.....	(e).....601	601
7. Derivative instruments.....	(f).....	
8. Other invested assets.....	.....
9. Aggregate write-ins for investment income.....	.....0	0
10. Total gross investment income.....	.....286,087	282,846
11. Investment expenses.....	.....	(g).....88,426
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).....5,663
15. Aggregate write-ins for deductions from investment income.....	.....	.....0
16. Total deductions (Lines 11 through 15).....	.....	.....94,089
17. Net investment income (Line 10 minus Line 16).....	.....	188,758

DETAILS OF WRITE-INS

0901.....	.....	.....
0902.....	.....	.....
0903.....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0
1501.....	.....	.....
1502.....	.....	.....
1503.....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page.....	.....0	.....0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above).....	.....0	.....0

(a) Includes \$....166 accrual of discount less \$....69,173 amortization of premium and less \$....1,431 paid for accrued interest on purchases.

(b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.

(c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.

(d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.

(e) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.

(f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.

(g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.

(h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.

(i) Includes \$....5,663 depreciation on real estate and \$.....0 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).....	.....5,834	.....	.....5,834	.....(11,479)	.....
1.3 Bonds of affiliates.....	.....	.....	.....0	.....	.....
2.1 Preferred stocks (unaffiliated).....	.....	.....	.....0	.....2,680	.....
2.11 Preferred stocks of affiliates.....	.....	.....	.....0	.....	.....
2.2 Common stocks (unaffiliated).....	.....(304,910)	.....	.....(304,910)	.....(679,858)	.....
2.21 Common stocks of affiliates.....	.....	.....	.....0	.....	.....
3. Mortgage loans.....	.....	.....	.....0	.....	.....
4. Real estate.....	.....	.....	.....0	.....	.....
5. Contract loans.....	.....	.....	.....0	.....	.....
6. Cash, cash equivalents and short-term investments.....	.....	.....	.....0	.....	.....
7. Derivative instruments.....	.....	.....	.....0	.....	.....
8. Other invested assets.....	.....	.....	.....0	.....	.....
9. Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10. Total capital gains (losses).....	.....(299,076)	.....0	.....(299,076)	.....(688,657)	.....0

DETAILS OF WRITE-INS

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 thru 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
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			0
2.2 Common stocks.....	926	926	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			0
3.2 Other than first liens.....			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			0
4.2 Properties held for the production of income.....			0
4.3 Properties held for sale.....			0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			0
6. Contract loans.....			0
7. Derivatives (Schedule DB).....			0
8. Other invested assets (Schedule BA).....			0
9. Receivables for securities.....			0
10. Securities lending reinvested collateral assets (Schedule DL).....			0
11. Aggregate write-ins for invested assets.....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	926	926	0
13. Title plants (for Title insurers only).....			0
14. Investment income due and accrued.....			0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....			0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			0
15.3 Accrued retrospective premiums and contracts subject to redetermination.....			0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....			0
16.2 Funds held by or deposited with reinsured companies.....			0
16.3 Other amounts receivable under reinsurance contracts.....			0
17. Amounts receivable relating to uninsured plans.....			0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0
18.2 Net deferred tax asset.....			0
19. Guaranty funds receivable or on deposit.....			0
20. Electronic data processing equipment and software.....			0
21. Furniture and equipment, including health care delivery assets.....	10,938	13,917	2,979
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0
23. Receivables from parent, subsidiaries and affiliates.....			0
24. Health care and other amounts receivable.....			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 through 25).....	11,864	14,843	2,979
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0
28. TOTALS (Lines 26 and 27).....	11,864	14,843	2,979

DETAILS OF WRITE-INS

1101.			0
1102.			0
1103.			0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0
2501. Building Permanent Improvement Pre-Payment.....			0
2502.			0
2503.			0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0

NOTES TO FINANCIAL STATEMENTS**NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN****A. Accounting Practices**

The financial statements of Affinity Mutual Insurance Company are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance. The Ohio Department of Insurance has adopted the National Association of Insurance Commissioner's (NAIC) Accounting Practices and Procedures Manual as the permitted practice for the filing of financial statements.

		State of Domicile	2015	2014
NET INCOME				
(1) Affinity Mutual Insurance Company state basis (Page 4, Line 20, Columns 1 & 2)	OH	\$	(568,552)	\$ (592,348)
(2) State Prescribed Practices that increase/decrease NAIC SAP				
(3) State Permitted Practices that increase/decrease NAIC SAP				
(4) NAIC SAP (1 – 2 – 3 = 4)	OH	\$	(568,552)	\$ (592,348)
SURPLUS				
(5) Affinity Mutual Insurance Company state basis (Page 3, line 37, Columns 1 & 2)	OH	\$	7,067,200	\$ 8,572,833
(6) State Prescribed Practices that increase/decrease NAIC SAP				
(7) State Permitted Practices that increase/decrease NAIC SAP				
(8) NAIC SAP (5 – 6 – 7 = 8)	OH	\$	7,067,200	\$ 8,572,833

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 estimated.

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 the premiums written. Such reserves are computed on a pro-rata basis.

Expenses incurred in the connection with acquiring new insurance business, including such acquisitions costs as sales commissions, are charged to operations as incurred.

Investments are stated at amortized cost or market value based on the NAIC Accounting Practice and Procedures Manual and the Purpose and Procedures Manual of the NAIC Securities Valuation Office.

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 are continually reviewed and any adjustments are reflected in the period determined.

NOTE 2 – ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

No significant change.

NOTE 3 – BUSINESS COMBINATIONS AND GOODWILL

None.

NOTE 4 – DISCONTINUED OPERATIONS

None.

NOTE 5 – INVESTMENTS**D. Loan-Backed Securities**

As of December 31, 2015, individual investments were reviewed to determine if an other than temporary impairment should be recorded and after reviewing the investments and the corresponding NAIC guidance no impairment was applied.

E. Repurchase Agreements and/or Securities Lending Transactions

N/A

H. Other Disclosures and Unusual Items**(1) Restricted Assets (Including Pledged)**

	Gross Restricted						8	Percentage		
	Current Period					6	7	Total Current Period Admitted Restricted	9	10
	1	2	3	4	5					
	Total General Account (G/A)	G/A Supporting Protected Cell Restricted Assets (a)	Total Protected Cell Restricted Assets	Protected Cell Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Period Admitted Restricted	Gross Restricted to Total Assets	Admitted Assets
j. On deposit with state	399,775				399,775	399,833	(58)	399,775		
o. Total Restricted Assets	\$ 399,775	\$	\$	\$	\$ 399,775	\$ 399,833	\$ (58)	\$ 399,775		

I. Working Capital Finance Investments

N/A

NOTES TO FINANCIAL STATEMENTS**NOTE 6 – JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES**

None.

NOTE 7 – INVESTMENT INCOME

Affinity Mutual Insurance Company has \$0 excluded investment income.

NOTE 8 – DERIVATIVE INSTRUMENTS

None.

NOTE 9 – INCOME TAXES

A. Deferred Tax Assets/(Liabilities)

1. Components of Net Deferred Tax Asset/(Liability)

	2015			2014			Change		
	1 Ordinary	2 Capital	3 (Col 1+2) Total	4 Ordinary	5 Capital	6 (Col 4+5) Total	7 (Col 1-4) Ordinary	8 (Col 2-5) Capital	9 (Col 7+8) Total
a. Gross deferred tax assets	\$ 473,215	\$ 34,000	\$ 507,215	\$ 271,898	\$ 79,131	\$ 351,029	\$ 201,317	\$ (45,131)	\$ 156,187
b. Statutory valuation allowance adjustment		405,215		405,215			405,215		405,215
c. Adjusted gross deferred tax assets (1a-1b)	68,000	34,000	102,000	271,898	79,131	351,029	(203,898)	(45,131)	(249,029)
d. Deferred tax assets nonadmitted									
e. Subtotal net admitted deferred tax asset (1c-1d)	68,000	34,000	102,000	271,898	79,131	351,029	(203,898)	(45,131)	(249,029)
f. Deferred tax liabilities	14,173		14,173	11,798		11,798	2,375		2,375
g. Net admitted deferred tax assets/(net deferred tax liability) (1e-1f)	\$ 53,827	\$ 34,000	\$ 87,827	\$ 260,100	\$ 79,131	\$ 339,231	\$ (206,273)	\$ (45,131)	\$ (251,404)

NOTES TO FINANCIAL STATEMENTS

2. Admission Calculation Components

	2015			2014			Change		
	1 Ordinary	2 Capital	3 (Col 1+2) Total	4 Ordinary	5 Capital	6 (Col 4+5) Total	7 (Col 1-4) Ordinary	8 (Col 2-5) Capital	9 (Col 7+8) Total
a. Federal income taxes paid in prior years recoverable through loss carrybacks	\$	\$	\$	\$	\$	\$	\$	\$	\$
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:	68,000	34,000	102,000	271,898	79,131	351,029	(203,898)	(45,131)	(249,029)
Adjusted gross deferred tax assets expected to be realized following the balance sheet date	68,000	34,000	102,000	271,898	79,131	351,029	(203,898)	(45,131)	(249,029)
Adjusted gross deferred tax assets allowed per limitation threshold			1,046,906			1,236,497			(189,591)
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									
d. Deferred tax assets admitted as the result of application of SSAP 101. Total (2(a)+2(b)+2(c)	\$ 68,000	\$ 34,000	\$ 102,000	\$ 271,898	\$ 79,131	\$ 351,029	\$ (203,898)	\$ (45,131)	\$ (249,029)

3. Other Admissibility Criteria

		2015	2014
a. Ratio percentage used to determine recovery period and threshold limitation amount		15.000%	15.000%
b. Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$ 6,979,373	\$ 8,243,314	

4. Impact of Tax Planning Strategies

(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.

	12/31/15			12/31/14			Change		
	1 Ordinary	2 Capital	3 Ordinary	4 Capital	5 (Col. 1-3) Ordinary	6 (Col. 2-4) Capital			
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 68,000	\$ 34,000	\$ 271,898	\$ 79,131	\$ (203,898)	\$ (45,131)			
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.0 %	0.0 %	0.0%	0.0%	0.0%	0.0%			
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 68,000	\$ 34,000	\$ 271,898	\$ 79,131	\$ (203,898)	\$ (45,131)			
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.0 %	0.0%	0.0%	0.0%	0.0%	0.0%			

(b) Does the company's tax planning strategies include the use of reinsurance? NO

NOTES TO FINANCIAL STATEMENTS

C. Current and Deferred Income Taxes

1. Current Income Tax

	1 2015	2 2014	3 (Col 1-2) Change
a. Federal	\$ 172	\$ (21,952)	\$ 22,124
b. Foreign			
c. Subtotal	\$ 172	\$ (21,952)	\$ 22,124
d. Federal income tax on net capital gains			
e. Utilization of capital loss carry-forwards			
f. Other			
g. Federal and Foreign income taxes incurred	\$ 172	\$ (21,952)	\$ 22,124

2. Deferred Tax Assets

	1 2015	2 2014	3 (Col 1-2) Change
a. Ordinary:			
1. Discounting of unpaid losses	\$ 13,606	\$ 15,869	\$ (2,263)
2. Unearned premium reserve	229,368	256,029	(26,661)
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			
11. Net operating loss carry-forward	230,241		230,241
12. Tax credit carry-forward			
13. Other (including items <5% of total ordinary tax assets)			
99. Subtotal	\$ 473,215	\$ 271,898	\$ 201,317
b. Statutory valuation allowance adjustment	405,215		405,215
c. Nonadmitted			
d. Admitted ordinary deferred tax assets (2a99-2b-2c)	\$ 68,000	\$ 271,898	\$ (203,898)
e. Capital:			
1. Investments	\$ 34,000	\$ 79,131	\$ (45,131)
2. Net capital loss carry-forward			
3. Real estate			
4. Other (including items <5% of total capital tax assets)			
99. Subtotal	\$ 34,000	\$ 79,131	\$ (45,131)
f. Statutory valuation allowance adjustment			
g. Nonadmitted			
h. Admitted capital deferred tax assets (2e99-2f-2g)	34,000	79,131	(45,131)
i. Admitted deferred tax assets (2d+2h)	\$ 102,000	\$ 351,029	\$ (249,029)

3. Deferred Tax Liabilities

	1 2015	2 2014	3 (Col 1-2) Change
a. Ordinary:			
1. Investments	\$ 6,157	\$ 4,803	\$ 1,354
2. Fixed assets	8,016	6,995	1,021
3. Deferred and uncollected premium			
4. Policyholder reserves			
5. Other (including items <5% of total ordinary tax liabilities)			
99. Subtotal	\$ 14,173	\$ 11,798	\$ 2,375
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)	\$ 14,173	\$ 11,798	\$ 2,375
4. Net Deferred Tax Assets (2i - 3c)	\$ 87,827	\$ 339,231	\$ (251,404)

E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits

At December 31, 2015, the Company has \$677,180 unused operating loss carryforwards available to offset against future taxable income.

NOTE 10 – INFORMATION CONCERNING PARENT, SUBSIDIARIES, AFFILIATES AND OTHER RELATED PARTIES

Affinity Mutual Insurance Company owns all outstanding shares of Ohio Insurance Services, Inc. This Subsidiary is valued using the equity method. The equity in Ohio Insurance Services, Inc. (\$926) is treated as a non-admitted asset.

NOTE 11 – DEBT

None.

NOTES TO FINANCIAL STATEMENTS**NOTE 12 – RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS**

A. Defined Benefit Plan

(4)	Components of net periodic benefit cost	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits per SSAP No. 11	
		2015	2014	2015	2014	2015	2014
a.	Service cost	\$ N/A	\$ N/A	\$ N/A	\$ N/A	\$ N/A	\$ N/A
b.	Interest cost	N/A	N/A	N/A	N/A	N/A	N/A
c.	Expected return on plan assets	N/A	N/A	N/A	N/A	N/A	N/A
d.	Transition asset or obligation	N/A	N/A	N/A	N/A	N/A	N/A
e.	Gains and losses	N/A	N/A	N/A	N/A	N/A	N/A
f.	Prior service cost or credit	N/A	N/A	N/A	N/A	N/A	N/A
g.	Gain or loss recognized due to a settlements curtailment	N/A	N/A	N/A	N/A	N/A	N/A
h.	Total net periodic benefit cost	\$ N/A	\$ N/A	\$ N/A	\$ N/A	\$ N/A	\$ N/A

NOTE 13 – CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS AND QUASI-REORGANIZATIONS(10) The portion of unassigned funds (surplus) represented or reduced by unrealized gains and losses is: \$(921,394)**NOTE 14 – LIABILITIES, CONTINGENCIES AND ASSESSMENTS**

No significant change.

NOTE 15 – LEASES

None.

NOTE 16 – INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK

None.

NOTE 17 – SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES

B. Transfer and Servicing of Financial Assets

N/A.

C. Wash Sales

(2) The details by NAIC designation 3 or below, or unrated of securities sold during the year ended December 31, 2015 and reacquired within 30 days of the sale date are:

Description	NAIC Designation	Number of Transactions	Book Value of Securities Sold	Cost of Securities Repurchased	Gain/(Loss)
N/A.			\$	\$	\$

NOTE 18 – GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE PORTION OF PARTIALLY INSURED PLANS

N/A.

NOTE 19 – DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD PARTY ADMINISTRATORS

None.

NOTE 20 – FAIR VALUE MEASUREMENTS

A.

(1) Fair Value Measurements at Reporting Date

Assets at Fair Value	Level 1	Level 2	Level 3	Total
Perpetual Preferred Stock - Industrial & Miscellaneous (Unaffiliated)	\$ 163,745	\$	\$	\$ 163,745
Bonds- Industrial & Miscellaneous (Unaffiliated) - Issuer Obligations	190,579			190,579
Common Stock - Industrial & Miscellaneous	4,789,991			4,789,991
Common Stock - Subsidiary	926			926
Total	\$ 5,145,241	\$	\$	\$ 5,145,241
Liabilities at Fair Value	Level 1	Level 2	Level 3	Total
N/A	\$	\$	\$	\$
Total	\$	\$	\$	\$

NOTES TO FINANCIAL STATEMENTS

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

a. Assets	Beginning Balance at 1/1/2015	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2015
N/A	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

b. Liabilities	Beginning Balance at 1/1/2015	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2015
N/A	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

C.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
N/A	\$	\$	\$	\$	\$	\$

D. Not Practicable to Estimate Fair Value

Type of Class or Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
N/A	\$	%		

NOTE 21 – OTHER ITEMS

None.

NOTE 22 – EVENTS SUBSEQUENT

None.

NOTE 23 – REINSURANCE

A. Unsecured Reinsurance Recoverables

Affinity Mutual Insurance Company has one unsecured aggregate recoverables for losses, paid and unpaid including IBNR, loss adjustment expenses and the unearned premium with individual reinsurers, authorized or unauthorized, that exceed approximately 3% of policyholder surplus (\$212,016).

1. Munich Reinsurance - America Inc (Federal ID # 13-4924125): Net Recoverable = \$308,233

2. Maiden Reinsurance Corporation and Affinity Mutual Insurance Company have entered into a trust agreement. Maiden Reinsurance Corporation has agreed to collateralize payments of all amounts as of December 31, 2015 owed by Maiden Reinsurance Company to Affinity Mutual Insurance Company in connection with various Reinsurance Agreements. In conjunction with the agreement, Maiden Reinsurance Company has deposited investment grade bonds and short term investments with a cost basis of \$3,038,889 with an independent trustee.

B. Reinsurance Recoverable in Dispute

None.

C. Reinsurance Assumed and Ceded

(1)

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates	\$	\$	\$	\$	\$	\$
b. All Other			436,420	105,074	(436,420)	(105,074)
c. Total	\$	\$	\$ 436,420	\$ 105,074	\$ (436,420)	\$ (105,074)
d. Direct Unearned Premium Reserves			\$ 3,804,208			

(2)

	Direct	Assumed	Ceded	Net
a. Contingent commission	\$	\$	\$ 27,985	\$ (27,985)
b. Sliding scale adjustments				
c. Other profit commission arrangements				
d. Total	\$	\$	\$ 27,985	\$ (27,985)

NOTE 24 – RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION

None.

NOTE 25 – CHANGE IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES

Reserves as of December 31, 2014 were \$2,294 million. As of December 31, 2015, \$1,012 million has been paid for incurred losses and loss adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$1,065 million as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore there has been \$217 thousand favorable prior year development from December 31, 2005 to December 31, 2015. This increase is generally the result from ongoing analysis of loss developmental trends. Original reserve estimates are increased and decreased as additional information becomes known regarding individual claims.

NOTES TO FINANCIAL STATEMENTS

NOTE 26 – INTERCOMPANY POOLING ARRANGEMENTS

N/A.

NOTE 27 – STRUCTURED SETTLEMENTS

None.

NOTE 28 – HEALTH CARE RECEIVABLES

N/A.

NOTE 29 – PARTICIPATING POLICIES

N/A.

NOTE 30 – PREMIUM DEFICIENCY RESERVES

1. Liability carried for premium deficiency reserve:	\$0.00
2. Date of most recent evaluation of this liability:	December 31, 2015
3. Was anticipated investment income utilized in the calculation?	NO

NOTE 31 – HIGH DEDUCTIBLES

NOTE 32 – DISCOUNTING OF LIABILITIES FOR UNPAID LOSSES OR UNPAID LOSS ADJUSTMENT EXPENSES

None.

NOTE 33 – ASBESTOS/ENVIRONMENTAL RESERVES

None.

NOTE 34 – SUBSCRIBER SAVINGS ACCOUNTS

N/A.

NOTE 35 – MULTIPLE PERIL CROP INSURANCE

None.

NOTE 36 – FINANCIAL GUARANTY INSURANCE

None.

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES****GENERAL**

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

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

1.3 State regulating? 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 [] No [X]

2.2 If yes, date of change: _____

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. _____ 12/31/2010

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. _____ 12/31/2010

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). _____ 09/02/2011

3.4 By what department or departments? Ohio Department of Insurance

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 [] No [] N/A [X]

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

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

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

1 Nationality	2 Type of Entity

8.1 Is the company a subsidiary of a bank holding company regulated with 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 the response to 8.3 is yes, please provide below 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? Lentol, Violet, Kienitz & Company, 2981 Blue Jacket Court, Lima, Ohio 45806

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 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:

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES**

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?
Oliver Wyman Actuarial Consulting (William Hansen), 325 John H. McConnell Blvd., Suite 350, Columbus, Ohio 43215

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 _____ 0
 12.12 Number of parcels involved _____ 0
 12.13 Total book/adjusted carrying value _____ \$ 0

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: _____ Yes [] No [X]

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). _____

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 subordinator 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 subordinator 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 _____ \$ 0
 20.12 To stockholders not officers _____ \$ 0
 20.13 Trustees, supreme or grand (Fraternal only) _____ \$ 0

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 _____ \$ 0
 20.22 To stockholders not officers _____ \$ 0
 20.23 Trustees, supreme or grand (Fraternal only) _____ \$ 0

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 _____ \$ 0
 21.22 Borrowed from others _____ \$ 0
 21.23 Leased from others _____ \$ 0
 21.24 Other _____ \$ 0

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 _____ \$ 0
 22.22 Amount paid as expenses _____ \$ 0
 22.23 Other amounts paid _____ \$ 0

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]
 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: _____ \$ 0

INVESTMENT

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES**

24.01 Were all of 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 [X] No []

24.02 If no, give full and complete information, relating thereto:

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

24.04 Does the company's security lending program meet the requirements for a conforming program as outlined in the *Risk-Based Capital Instructions*? Yes [] No [] N/A [X]

24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. \$ 0

24.06 If answer to 24.04 is no, report amount of collateral for other programs \$ 0

24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]

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

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

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

24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0

24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0

24.103 Total payable for securities lending reported on the liability page: \$ 0

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 current in force? (Exclude securities subject to Interrogatory 21.1 and 24.03.) Yes [X] No []

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

25.21 Subject to repurchase agreements \$ 0

25.22 Subject to reverse repurchase agreements \$ 0

25.23 Subject to dollar repurchase agreements \$ 0

25.24 Subject to reverse dollar repurchase agreements \$ 0

25.25 Placed under option agreements \$ 0

25.26 Letter stock or securities restricted as sale – excluding FHLB Capital Stock \$ 0

25.27 FHLB Capital Stock \$ 0

25.28 On deposit with states \$ 399,775

25.29 On deposit with other regulatory bodies \$ 0

25.30 Pledged as collateral – excluding collateral pledged to an FHLB \$ 0

25.31 Pledged as collateral to FHLB – including assets backing funding agreements \$ 0

25.32 Other \$ 0

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 [X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
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 [X]

27.2 If yes, state the amount thereof at December of the current year: \$ 0

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 [X] No []

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

1 Name of Custodian(s)	2 Custodian Address
Fifth Third Bank	38 Fountain Square Plaza, Cincinnati, Ohio 45263
American Enterprise Investment Services, Inc.	70400 Ameriprise Financial Center, Minneapolis, MN 55474

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 [X]

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

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

28.05 Identify all investment advisors, broker/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	2 Name(s)	3 Address
Central Registration Depository		

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]

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES**

29.2 If yes, complete the following schedule:

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

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

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holdings	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	5,031,091	5,022,929	(8,162)
30.2	Preferred Stocks	163,745	167,848	4,103
30.3	Totals	5,194,836	5,190,777	(4,059)

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

Fair Values are supplied by the NAIC Valuations of Securities Office (AVS+ system). If a security is not listed on the system, the broker and pricing service value is recorded.

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

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

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliance 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:

OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ 132,539

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
ISO Commercial Services	\$ 95,950

34.1 Amount of payments for legal expenses, if any?

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
Crabbe, Brown & James LLP	\$ 1,036

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
	\$

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?	\$	0
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.	\$	0
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	\$ 4,583,606	\$ 5,160,312
2.3	Premium Ratio (2.1/2.2)		
2.4	Reserve Numerator	\$ 0	\$ 0
2.5	Reserve Denominator	\$ 5,278,388	\$ 6,038,893
2.6	Reserve Ratio (2.4/2.5)		
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	\$ 0	
3.22	Non-participating policies	\$ 0	
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.	\$ 0	
5.	FOR RECIPROCAL EXCHANGES ONLY:		
5.1	Does the exchange appoint local agents?	Yes []	No []
5.2	If yes, is the commission paid:		
5.21	Out of Attorney's-in-fact compensation	Yes []	No []
5.22	As a direct expense of the exchange	Yes []	N/A []
5.3	What expenses of the exchange are not paid out of the compensation of the Attorney-in-fact?	Yes []	No []
5.4	Has any Attorney-in-fact compensation, contingent on fulfillments of certain conditions, been deferred?	Yes []	No []
5.5	If yes, give full information:		
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?	N/A.	
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:		
	Catastrophic Exposure Analysis was last performed in 2014 by Maiden RE. Statistical analysis (by zip code, per square mile) was used to determine what exposures exist for Tornado/Hail, Earthquake and combined Tornado/Hail and Earthquake perils.		
6.3	What provision has this reporting entity made (such as 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?		
	Affinity Mutual has purchased a property catastrophic reinsurance program from Maiden Re for protection from excessive losses.		
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	Yes [X] No []	
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss:		
7.1	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?	Yes [] No [X]	

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

7.2	If yes, indicate the number of reinsurance contracts containing such provisions.	0
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes [] No []
8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes [] No [X]
8.2	If yes, give full information	
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:	
	(a) A contract term longer than two years and the contract is 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?	
		Yes [] No [X]
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:	
	(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or	
	(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.	
		Yes [] No [X]
9.3	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:	
	(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;	
	(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and	
	(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.	
9.4	Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:	
	(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or	
	(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	
		Yes [] No [X]
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.	
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:	
	(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 reinsurance a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?	
11.1	Has the reporting entity guaranteed policies issued by any other entity and now in force?	Yes [] No [] N/A [X]
11.2	If yes, give full information	Yes [] No [X]
12.1	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the assets schedule, Page 2, state the amount of corresponding liabilities recorded for:	
12.11	Unpaid losses	\$ _____ 0
12.12	Unpaid underwriting expenses (including loss adjustment expenses)	\$ _____ 0
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?	\$ _____ 0
12.3	If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?	Yes [] No [] N/A [X]
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	\$ _____ 0
12.62	Collateral and other funds	\$ _____ 0
13.1	Largest net aggregate amount insured in any one risk (excluding workers' compensation):	\$ _____ 125,000
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.	

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

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

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

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

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

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

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

15.2 If yes, give full information

16.1 Does the reporting entity write any warranty business? Yes [] No [X]

If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home	\$ 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:

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

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

17.11 Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5	\$ 0
17.12 Unfunded portion of Interrogatory 17.11	\$ 0
17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$ 0
17.14 Case reserves portion of Interrogatory 17.11	\$ 0
17.15 Incurred but not reported portion of Interrogatory 17.11	\$ 0
17.16 Unearned premium portion of Interrogatory 17.11	\$ 0
17.17 Contingent commission portion of Interrogatory 17.11	\$ 0

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

17.18 Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5	\$ 0
17.19 Unfunded portion of Interrogatory 17.18	\$ 0
17.20 Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$ 0
17.21 Case reserves portion of Interrogatory 17.18	\$ 0
17.22 Incurred but not reported portion of Interrogatory 17.18	\$ 0
17.23 Unearned premium portion of Interrogatory 17.18	\$ 0
17.24 Contingent commission portion of Interrogatory 17.18	\$ 0

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. \$ 0

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. \$ 0

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
Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	1,283,550	1,573,845	1,573,266	1,406,884	1,282,714
2. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	2,853,787	3,258,255	3,652,167	3,159,685	2,786,972
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	3,950,017	4,427,805	4,214,232	3,723,209	3,134,284
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	21,518	23,197	25,818	27,963	25,184
5. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
6. Total (Line 35).....	8,108,872	9,283,102	9,465,483	8,317,741	7,229,154
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	588,737	786,541	731,978	590,440	499,428
8. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	1,518,382	1,769,113	2,128,057	1,997,401	1,699,241
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	2,083,789	2,415,189	2,476,813	2,254,290	1,788,621
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	15,494	15,948	25,818	27,963	25,184
11. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
12. Total (Line 35).....	4,206,402	4,986,792	5,362,666	4,870,094	4,012,473
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8).....	(452,095)	(1,928,918)	(308,380)	(824,961)	(855,585)
14. Net investment gain (loss) (Line 11).....	(110,319)	1,316,790	562,735	501,588	195,648
15. Total other income (Line 15).....	(5,966)	(2,171)	(2,653)	(1,214)	(4,438)
16. Dividends to policyholders (Line 17).....					
17. Federal and foreign income taxes incurred (Line 19).....	.172	(21,952)	9,534		(199,144)
18. Net income (Line 20).....	(568,552)	(592,348)	242,168	(324,588)	(465,231)
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3).....	13,442,893	15,731,925	16,784,264	14,776,823	14,585,733
20. Premiums and considerations (Page 2, Col. 3):					
20.1 In course of collection (Line 15.1).....	238,348	347,617	387,336	392,619	349,280
20.2 Deferred and not yet due (Line 15.2).....	1,986,555	2,338,273	2,414,323	2,147,852	1,809,552
20.3 Accrued retrospective premiums (Line 15.3).....					
21. Total liabilities excluding protected cell business (Page 3, Line 26).....	6,375,694	7,159,092	6,969,843	5,450,983	5,025,255
22. Losses (Page 3, Line 1).....	1,623,358	2,051,080	1,703,890	948,139	1,031,912
23. Loss adjustment expenses (Page 3, Line 3).....	287,243	242,822	208,960	104,975	186,993
24. Unearned premiums (Page 3, Line 9).....	3,367,787	3,744,991	3,918,511	3,452,453	3,049,302
25. Capital paid up (Page 3, Lines 30 & 31).....					
26. Surplus as regards policyholders (Page 3, Line 37).....	7,067,200	8,572,833	9,814,421	9,325,840	9,560,478
Cash Flow (Page 5)					
27. Net cash from operations (Line 11).....	(188,523)	(1,203,469)	1,634,000	(896,490)	54,917
Risk-Based Capital Analysis					
28. Total adjusted capital.....	7,067,200	8,572,833	9,814,421	9,325,840	9,560,478
29. Authorized control level risk-based capital.....	934,146	946,493	896,787	774,610	801,324
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1).....	24.3	27.4	26.6	35.5	35.6
31. Stocks (Lines 2.1 & 2.2).....	45.0	39.3	44.9	39.6	48.0
32. Mortgage loans on real estate (Lines 3.1 & 3.2).....					
33. Real estate (Lines 4.1, 4.2 & 4.3).....	1.0	.9	.8	.8	.8
34. Cash, cash equivalents and short-term investments (Line 5).....	28.8	32.4	27.7	24.1	15.6
35. Contract loans (Line 6).....					
36. Derivatives (Line 7).....					
37. Other invested assets (Line 8).....					
38. Receivable for securities (Line 9).....	.9				
39. Securities lending reinvested collateral assets (Line 10).....					
40. Aggregate write-ins for invested assets (Line 11).....					
41. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Sch. D, Summary, Line 12, Col. 1).....					
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1).....					
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1).....	926	926	926	926	926
45. Affiliated short-term investments (subtotals included in Schedule DA, Verification, Column 5, Line 10).....					
46. Affiliated mortgage loans on real estate.....					
47. All other affiliated.....					
48. Total of above lines 42 to 47.....	926	926	926	926	926
49. Total investment in parent included in Lines 42 to 47 above.....					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0).....	0.0	0.0	0.0	0.0	0.0

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2015	2 2014	3 2013	4 2012	5 2011
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24).....	.....(688,657)	.....(979,525)	.....345,942	.....83,111	.....(117,675)
52. Dividends to stockholders (Line 35).....	.....	.....	.....	.....	.....
53. Change in surplus as regards policyholders for the year (Line 38).....	.....(1,505,633)	.....(1,241,588)	.....488,581	.....(234,638)	.....(590,531)
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	.....223,280	.....306,542	.....73,371	.....69,549	.....87,923
55. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	.....1,834,032	.....3,294,846	.....1,239,163	.....2,669,002	.....659,226
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	.....5,756,216	.....8,007,629	.....3,223,019	.....4,109,073	.....2,136,067
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	.....	.....	.....	.....	.....
58. Nonproportional reinsurance lines (Lines 31, 32 & 33).....	.....	.....	.....	.....	.....
59. Total (Line 35).....	.....7,813,527	.....11,609,017	.....4,535,554	.....6,847,624	.....2,883,217
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	.....223,280	.....306,542	.....73,371	.....69,549	.....87,923
61. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	.....797,309	.....1,472,910	.....660,394	.....920,450	.....574,431
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	.....1,213,734	.....1,732,073	.....865,071	.....1,842,249	.....1,405,649
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....	.....	.....	.....	.....	.....
64. Nonproportional reinsurance lines (Lines 31, 32 & 33).....	.....	.....	.....	.....	.....
65. Total (Line 35).....	.....2,234,322	.....3,511,524	.....1,598,836	.....2,832,248	.....2,068,003
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1).....	.....100.0	.....100.0	.....100.0	.....100.0	.....100.0
67. Losses incurred (Line 2).....	.....39.4	.....74.8	.....48.1	.....61.5	.....57.3
68. Loss expenses incurred (Line 3).....	.....16.4	.....12.3	.....8.9	.....5.5	.....12.6
69. Other underwriting expenses incurred (Line 4).....	.....54.0	.....50.3	.....49.3	.....51.4	.....51.8
70. Net underwriting gain (loss) (Line 8).....	.....(9.9)	.....(37.4)	.....(6.3)	.....(18.5)	.....(21.7)
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0).....	.....59.0	.....52.1	.....45.1	.....47.2	.....51.0
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0).....	.....55.8	.....87.1	.....57.0	.....67.0	.....69.9
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).....	.....59.5	.....58.2	.....54.6	.....52.2	.....42.0
One Year Loss Development (000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11).....	.....(322)	.....434	.....(34)	.....(227)	.....(90)
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).....	.....(3.8)	.....4.4	.....(0.4)	.....(2.4)	.....(0.9)
Two Year Loss Development (000 omitted)					
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).....	.....400	.....7	.....(276)	.....(190)	.....(47)
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).....	.....4.1	.....0.1	.....(2.9)	.....(1.9)	.....(0.5)

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:

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.....								.....0.....	....XXX.....
2. 2006.....	....8,735.....	....3,866.....	....4,869.....	....3,258.....	....1,475.....	....344.....	....75.....	....340.....	....50.....	....66.....	....2,343.....	....XXX.....
3. 2007.....	....7,699.....	....3,417.....	....4,283.....	....7,754.....	....5,340.....	....82.....	....25.....	....347.....	....68.....	....148.....	....2,749.....	....XXX.....
4. 2008.....	....7,263.....	....3,331.....	....3,932.....	....2,139.....	....246.....	....47.....		....320.....	....10.....	....27.....	....2,250.....	....XXX.....
5. 2009.....	....6,757.....	....3,097.....	....3,660.....	....2,844.....	....1,285.....	....122.....	....6.....	....339.....	....32.....	....28.....	....1,982.....	....XXX.....
6. 2010.....	....6,794.....	....3,161.....	....3,633.....	....1,474.....	....189.....	....107.....	....6.....	....256.....	....4.....	....59.....	....1,638.....	....XXX.....
7. 2011.....	....7,152.....	....3,208.....	....3,943.....	....3,292.....	....1,122.....	....139.....	....5.....	....380.....	....55.....	....113.....	....2,628.....	....XXX.....
8. 2012.....	....7,847.....	....3,381.....	....4,467.....	....9,017.....	....6,182.....	....135.....	....25.....	....440.....	....83.....	....96.....	....3,302.....	....XXX.....
9. 2013.....	....8,918.....	....4,021.....	....4,897.....	....3,961.....	....1,615.....	....309.....	....62.....	....352.....	....24.....	....46.....	....2,920.....	....XXX.....
10. 2014.....	....9,466.....	....4,306.....	....5,160.....	....13,672.....	....10,922.....	....207.....	....95.....	....461.....	....91.....	....101.....	....3,233.....	....XXX.....
11. 2015.....	....8,551.....	....3,967.....	....4,584.....	....2,998.....	....1,308.....	....50.....	....11.....	....207.....	....6.....	....14.....	....1,929.....	....XXX.....
12. Totals.....	....XXX.....	....XXX.....	....XXX.....	....50,407.....	....29,684.....	....1,542.....	....311.....	....3,442.....	....423.....	....698.....	....24,973.....	....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....												.....0.....	....XXX.....
2. 2006.....	....200.....	....137.....			....30.....	....30.....						....63.....	....XXX.....
3. 2007.....												....0.....	....XXX.....
4. 2008.....	....25.....											....26.....	....XXX.....
5. 2009.....												....0.....	....XXX.....
6. 2010.....	....1.....											....1.....	....XXX.....
7. 2011.....	....35.....				....10.....							....45.....	....XXX.....
8. 2012.....	....108.....	....47.....	....140.....	....127.....	....10.....		....24.....	....21.....	....15.....	....5.....		....97.....	....XXX.....
9. 2013.....	....826.....	....605.....	....200.....	....184.....	....118.....	....100.....	....22.....	....20.....	....48.....	....22.....		....282.....	....XXX.....
10. 2014.....	....538.....	....233.....	....784.....	....644.....	....49.....	....25.....	....78.....	....56.....	....138.....	....78.....		....551.....	....XXX.....
11. 2015.....	....561.....	....125.....	....976.....	....669.....			....20.....	....18.....	....150.....	....49.....		....846.....	....XXX.....
12. Totals.....	....2,294.....	....1,146.....	....2,100.....	....1,624.....	....217.....	....155.....	....144.....	....115.....	....352.....	....154.....	....0.....	....1,911.....	....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
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....			....XXX.....	.....0.....	.....0.....
2. 2006.....	....4,173.....	....1,767.....	....2,406.....	....47.8.....	....45.7.....	....49.4.....				....63.....	.....0.....
3. 2007.....	....8,183.....	....5,433.....	....2,749.....	....106.3.....	....159.0.....	....64.2.....				....0.....	.....0.....
4. 2008.....	....2,532.....	....256.....	....2,276.....	....34.9.....	....7.7.....	....57.9.....				....25.....	....1.....
5. 2009.....	....3,305.....	....1,323.....	....1,982.....	....48.9.....	....42.7.....	....54.1.....				....0.....	.....0.....
6. 2010.....	....1,837.....	....199.....	....1,639.....	....27.0.....	....6.3.....	....45.1.....				....1.....	.....0.....
7. 2011.....	....3,856.....	....1,182.....	....2,673.....	....53.9.....	....36.9.....	....67.8.....				....35.....	....10.....
8. 2012.....	....9,888.....	....6,489.....	....3,399.....	....126.0.....	....192.0.....	....76.1.....				....74.....	....23.....
9. 2013.....	....5,835.....	....2,632.....	....3,202.....	....65.4.....	....65.5.....	....65.4.....				....238.....	....45.....
10. 2014.....	....15,928.....	....12,144.....	....3,784.....	....168.3.....	....282.0.....	....73.3.....				....445.....	....106.....
11. 2015.....	....4,961.....	....2,186.....	....2,775.....	....58.0.....	....55.1.....	....60.5.....				....743.....	....103.....
12. Totals.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....0.....	....0.....	....XXX.....	....1,623.....	....287.....

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of

Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements, which will reconcile Part 1 with Parts 2 and 4.

SCHEDULE P - PART 2 - SUMMARY

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.....	940	768	469	452	452	452	491	491	491	491	0	0
2. 2006.....	2,374	2,473	2,442	2,205	2,192	2,183	2,125	2,127	2,119	2,115	(4)	(12)
3. 2007.....	XXX.....	2,928	2,714	2,476	2,474	2,471	2,470	2,470	2,470	2,470	0	0
4. 2008.....	XXX.....	XXX.....	2,144	2,007	1,971	1,981	1,975	1,965	1,965	1,965	0	0
5. 2009.....	XXX.....	XXX.....	XXX.....	1,684	1,718	1,690	1,678	1,675	1,675	1,675	0	0
6. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	1,525	1,465	1,403	1,402	1,400	1,387	(13)	(15)
7. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,502	2,375	2,339	2,332	2,348	16	10
8. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,970	2,985	3,043	3,031	(11)	47
9. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,479	2,871	2,850	(21)	371
10. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,642	3,353	(288)	XXX.....
11. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,473	XXX.....	XXX.....
											12. Totals.....	(322).....400

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.....	530	463	452	452	452	491	491	491	491	XXX.....	XXX.....
2. 2006.....	1,241	1,732	1,899	2,003	2,043	2,048	2,050	2,052	2,054	2,053	XXX.....	XXX.....
3. 2007.....	XXX.....	1,998	2,395	2,472	2,471	2,471	2,470	2,470	2,470	2,470	XXX.....	XXX.....
4. 2008.....	XXX.....	XXX.....	1,375	1,744	1,894	1,937	1,938	1,940	1,940	1,940	XXX.....	XXX.....
5. 2009.....	XXX.....	XXX.....	XXX.....	1,157	1,506	1,623	1,675	1,675	1,675	1,675	XXX.....	XXX.....
6. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	1,049	1,322	1,398	1,398	1,399	1,386	XXX.....	XXX.....
7. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,786	2,193	2,198	2,271	2,303	XXX.....	XXX.....
8. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,313	2,670	2,911	2,944	XXX.....	XXX.....
9. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,283	2,106	2,592	XXX.....	XXX.....
10. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,565	2,862	XXX.....	XXX.....
11. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,728	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)									
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015
1. Prior.....	175	69	5							
2. 2006.....	170	118	71	11						
3. 2007.....	XXX.....	311	132	4	3					
4. 2008.....	XXX.....	XXX.....	283	71	8	3				
5. 2009.....	XXX.....	XXX.....	XXX.....	258	55	6	3			
6. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	176	90	5	4		
7. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	156	69	5	4	
8. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	216	69	9	16
9. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	238	115	18
10. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	381	162
11. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	308

Affinity Mutual Insurance Company
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1 Active Status	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Incl. in Col. 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama.....	AL N.								
2. Alaska.....	AK N.								
3. Arizona.....	AZ N.								
4. Arkansas.....	AR N.								
5. California.....	CA N.								
6. Colorado.....	CO N.								
7. Connecticut.....	CT N.								
8. Delaware.....	DE N.								
9. District of Columbia.....	DC N.								
10. Florida.....	FL N.								
11. Georgia.....	GA N.								
12. Hawaii.....	HI N.								
13. Idaho.....	ID N.								
14. Illinois.....	IL N.								
15. Indiana.....	IN L.	2,973,782	3,280,068		4,417,947	3,550,099	2,202,313		
16. Iowa.....	IA N.								
17. Kansas.....	KS N.								
18. Kentucky.....	KY N.								
19. Louisiana.....	LA N.								
20. Maine.....	ME N.								
21. Maryland.....	MD N.								
22. Massachusetts.....	MA N.								
23. Michigan.....	MI L.	435,975	425,365		48,207	(79,510)	39,566		
24. Minnesota.....	MN N.								
25. Mississippi.....	MS N.								
26. Missouri.....	MO N.								
27. Montana.....	MT N.								
28. Nebraska.....	NE N.								
29. Nevada.....	NV N.								
30. New Hampshire.....	NH N.								
31. New Jersey.....	NJ N.								
32. New Mexico.....	NM N.								
33. New York.....	NY N.								
34. North Carolina.....	NC N.								
35. North Dakota.....	ND N.								
36. Ohio.....	OH L.	4,699,115	4,845,391		3,347,372	1,777,858	2,151,658		
37. Oklahoma.....	OK N.								
38. Oregon.....	OR N.								
39. Pennsylvania.....	PA N.								
40. Rhode Island.....	RI N.								
41. South Carolina.....	SC N.								
42. South Dakota.....	SD N.								
43. Tennessee.....	TN N.								
44. Texas.....	TX N.								
45. Utah.....	UT N.								
46. Vermont.....	VT N.								
47. Virginia.....	VA N.								
48. Washington.....	WA N.								
49. West Virginia.....	WV N.								
50. Wisconsin.....	WI N.								
51. Wyoming.....	WY N.								
52. American Samoa.....	AS N.								
53. Guam.....	GU N.								
54. Puerto Rico.....	PR N.								
55. US Virgin Islands.....	VI N.								
56. Northern Mariana Islands.....	MP N.								
57. Canada.....	CAN N.								
58. Aggregate Other Alien.....	OT XXX	0	0	0	0	0	0	0	0
59. Totals.....	(a) 3	8,108,872	8,550,824	0	7,813,527	5,248,447	4,393,537	0	0

DETAILS OF WRITE-INS

58001.....	XXX								
58002.....	XXX								
58003.....	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0

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

(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.

The primary method of allocation of premiums by state is the physical location of the risk.

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

PART 1 – ORGANIZATIONAL CHART

Affinity Mutual Insurance Company (Parent)
|
Ohio Insurance Services, Inc. (Subsidiary)

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