



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2015
OF THE CONDITION AND AFFAIRS OF THE

MICO Insurance Company

NAIC Group Code 0291 0291 NAIC Company Code 40932 Employer's ID Number 31-1022150
(Current) (Prior)

Organized under the Laws of Ohio, State of Domicile or Port of Entry OH
Country of Domicile United States of America

Incorporated/Organized 11/30/1981 Commenced Business 12/03/1981

Statutory Home Office 471 East Broad Street, Columbus , OH, US 43215
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office _____ 471 East Broad Street
Columbus , OH, US 43215 _____, _____ 614-225-8211
(City or Town, State, Country and Zip Code) (Street and Number) (Area Code) (Telephone Number)

Mail Address 471 East Broad Street, Columbus, OH, US 43215
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records _____ 471 East Broad Street
(Street and Number)
Columbus , OH, US 43215 _____, 614-225-8211
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address _____ MotoristsGroup.com

Statutory Statement Contact Joel B. Kratzer, 614-225-8327
(Name) (Area Code) (Telephone Number)
Accounting@MotoristsGroup.com, 614-225-8330
(E-mail Address) (FAX Number)

OFFICERS

President & CEO David Lynn Kaufman Treasurer & CFO Susan Elizabeth Haack
Secretary Anne Bridges King

OTHER

DIRECTORS OR TRUSTEES

DIRECTORS OR TRUSTEES
Susan Elizabeth Haack
David Lynn Kaufman

State of Ohio SS: _____
County of Franklin _____

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

David L. Kaufman
Chief Executive Officer

Anne B. King
Secretary

Susan E. Haack
Treasurer

Subscribed and sworn to before me this
17th day of February, 2016

a. Is this an original filing?

b. If no,

1. State the amendment number.....
2. Date filed
3. Number of pages attached

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO 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)	8,983,375		8,983,375	9,831,372
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks	1,784,287		1,784,287	2,030,617
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens				
3.2 Other than first liens				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances)				
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$(50,000) , Schedule E - Part 1), cash equivalents (\$0 , Schedule E - Part 2) and short-term investments (\$516,633 , Schedule DA)	466,633		466,633	499,551
6. Contract loans (including \$ premium notes)				
7. Derivatives (Schedule DB)				
8. Other invested assets (Schedule BA)	651,967		651,967	725,991
9. Receivable for securities				9
10. Securities lending reinvested collateral assets (Schedule DL)				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	11,886,262		11,886,262	13,087,540
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	58,453		58,453	62,645
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection				
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)	3,406		3,406	
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	2,305		2,305	6,609
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon				4,102
18.2 Net deferred tax asset				
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software				
21. Furniture and equipment, including health care delivery assets (\$)				
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates	1,783		1,783	1,700
24. Health care (\$) and other amounts receivable				
25. Aggregate write-ins for other than invested assets	2,141		2,141	123
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	11,954,351	3,406	11,950,945	13,162,719
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	11,954,351	3,406	11,950,945	13,162,719
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)				
2501. Pooled general expenses receivable	2,141		2,141	123
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	2,141		2,141	123

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)		
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)		
4. Commissions payable, contingent commissions and other similar charges		
5. Other expenses (excluding taxes, licenses and fees)	6,187	6,621
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1 Current federal and foreign income taxes (including \$ 3,309 on realized capital gains (losses))	26,730	
7.2 Net deferred tax liability	53,182	122,081
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)		
10. Advance premium		
11. Dividends declared and unpaid:		
11.1 Stockholders	1,172,729	1,281,951
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	175	(347)
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)	35	35
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated	11,185	11,322
16. Provision for reinsurance (including \$ 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	2,336	8,293
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities	1,000	4,773
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	1,273,560	1,434,728
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	1,273,560	1,434,728
29. Aggregate write-ins for special surplus funds		
30. Common capital stock	2,252,000	2,252,000
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus	1,126,000	1,126,000
35. Unassigned funds (surplus)	7,299,385	8,349,991
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		
36.2 shares preferred (value included in Line 31 \$)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	10,677,385	11,727,991
38. TOTALS (Page 2, Line 28, Col. 3)	11,950,945	13,162,719
DETAILS OF WRITE-INS		
2501. Escheatable funds	1,000	4,773
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	1,000	4,773
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)		
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 thru 3203 plus 3298)(Line 32 above)		

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....		
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7).....		
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....		
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2).....		
5. Aggregate write-ins for underwriting deductions.....		
6. Total underwriting deductions (Lines 2 through 5).....		
7. Net income of protected cells.....		
8. Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7).....		
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	289,185	259,350
10. Net realized capital gains or (losses) less capital gains tax of \$ 67,697 (Exhibit of Capital Gains (Losses)).....	(188,450)	282,800
11. Net investment gain (loss) (Lines 9 + 10).....	100,735	542,150
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$).....		
13. Finance and service charges not included in premiums.....		
14. Aggregate write-ins for miscellaneous income.....	(1)	(30)
15. Total other income (Lines 12 through 14).....	(1)	(30)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	100,735	542,120
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).....	100,735	542,120
19. Federal and foreign income taxes incurred.....	63,974	63,789
20. Net income (Line 18 minus Line 19)(to Line 22).....	36,761	478,331
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	11,727,991	12,824,528
22. Net income (from Line 20).....	36,761	478,331
23. Net transfers (to) from Protected Cell accounts.....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ (72,903).....	88,668	(299,814)
25. Change in net unrealized foreign exchange capital gain (loss).....		
26. Change in net deferred income tax.....	(4,004)	(1,988)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3).....	699	8,885
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....		0
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.....		(1,172,729)
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....		(1,281,951)
37. Aggregate write-ins for gains and losses in surplus.....		
38. Change in surplus as regards policyholders for the year (Lines 22 through 37).....	(1,050,606)	(1,096,537)
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	10,677,385	11,727,991
DETAILS OF WRITE-INS		
0501.		
0502.		
0503.		
0598. Summary of remaining write-ins for Line 5 from overflow page.....		
0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above).....		
1401. Miscellaneous service fees.....		(25)
1402. Miscellaneous income or expense.....		(1)
1403.		(5)
1498. Summary of remaining write-ins for Line 14 from overflow page.....		
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above).....		(1)
3701.		
3702.		
3703.		
3798. Summary of remaining write-ins for Line 37 from overflow page.....		
3799. Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above).....		(30)

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	1,220	2,435
2. Net investment income	338,709	366,726
3. Miscellaneous income	(1)	(30)
4. Total (Lines 1 through 3)	339,928	369,131
5. Benefit and loss related payments	(4,304)	(23,430)
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	2,018	(11,645)
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$	64,145	100,839
10. Total (Lines 5 through 9)	98,553	184,880
11. Net cash from operations (Line 4 minus Line 10)	241,375	184,251
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	1,823,437	2,670,671
12.2 Stocks	525,377	1,603,481
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets	75,000	100,000
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7 Miscellaneous proceeds	89	1,312
12.8 Total investment proceeds (Lines 12.1 to 12.7)	2,423,903	4,375,464
13. Cost of investments acquired (long-term only):		
13.1 Bonds	961,630	2,081,107
13.2 Stocks	369,667	856,387
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets	75,000	
13.6 Miscellaneous applications		
13.7 Total investments acquired (Lines 13.1 to 13.6)	1,406,297	2,937,494
14. Net increase (decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	1,017,606	1,437,970
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	1,281,951	1,338,251
16.6 Other cash provided (applied)	(9,948)	10,563
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(1,291,899)	(1,327,688)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(32,918)	294,533
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	499,551	205,018
19.2 End of period (Line 18 plus Line 19.1)	466,633	499,551

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

Underwriting and Investment Exhibit - Part 1 - Premiums Earned

N O N E

Underwriting and Investment Exhibit - Part 1A - Recapitulation of all Premiums

N O N E

Underwriting and Investment Exhibit - Part 1B - Premiums Written

N O N E

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	8
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire								
2. Allied lines								
3. Farmowners multiple peril								
4. Homeowners multiple peril								
5. Commercial multiple peril								
6. Mortgage guaranty								
8. Ocean marine								
9. Inland marine								
10. Financial guaranty								
11.1 Medical professional liability - occurrence								
11.2 Medical professional liability - claims-made								
12. Earthquake								
13. Group accident and health								
14. Credit accident and health (group and individual)								
15. Other accident and health								
16. Workers' compensation								
17.1 Other liability - occurrence								
17.2 Other liability - claims-made								
17.3 Excess workers' compensation								
18.1 Products liability - occurrence								
18.2 Products liability - claims-made								
19.1, 19.2 Private passenger auto liability				(17,343)				
19.3, 19.4 Commercial auto liability					(17,343)			
21. Auto physical damage				(1,675)				
22. Aircraft (all perils)					(1,675)			
23. Fidelity								
24. Surety								
26. Burglary and theft								
27. Boiler and machinery								
28. Credit								
29. International								
30. Warranty								
31. Reinsurance - nonproportional assumed property			XXX					
32. Reinsurance - nonproportional assumed liability			XXX					
33. Reinsurance - nonproportional assumed financial lines			XXX					
34. Aggregate write-ins for other lines of business								
35. TOTALS				(19,018)				
DETAILS OF WRITE-INS								
3401.								
3402.								
3403.								
3498. Summary of remaining write-ins for Line 34 from overflow page								
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)								

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8	9
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire									
2. Allied lines									
3. Farmowners multiple peril									
4. Homeowners multiple peril									
5. Commercial multiple peril									
6. Mortgage guaranty									
8. Ocean marine									
9. Inland marine									
10. Financial guaranty									
11.1 Medical professional liability - occurrence									
11.2 Medical professional liability - claims-made									
12. Earthquake									
13. Group accident and health								(a)	
14. Credit accident and health (group and individual)								(a)	
15. Other accident and health									
16. Workers' compensation									
17.1 Other liability - occurrence									
17.2 Other liability - claims-made									
17.3 Excess workers' compensation									
18.1 Products liability - occurrence									
18.2 Products liability - claims-made									
19.1, 19.2 Private passenger auto liability	47,838			47,838			3,880		3,880
19.3, 19.4 Commercial auto liability									
21. Auto physical damage									
22. Aircraft (all perils)									
23. Fidelity									
24. Surety									
26. Burglary and theft									
27. Boiler and machinery									
28. Credit									
29. International									
30. Warranty									
31. Reinsurance - nonproportional assumed property	XXX					XXX			
32. Reinsurance - nonproportional assumed liability	XXX					XXX			
33. Reinsurance - nonproportional assumed financial lines	XXX					XXX			
34. Aggregate write-ins for other lines of business									
35. TOTALS	47,838			47,838			3,880		3,880
DETAILS OF WRITE-INS									
3401.									
3402.									
3403.									
3498. Summary of remaining write-ins for Line 34 from overflow page									
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)									

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

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO 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	15,921			15,921
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	15,921			15,921
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)				
2. Commission and brokerage:				
2.1 Direct excluding contingent				
2.2 Reinsurance assumed, excluding contingent				
2.3 Reinsurance ceded, excluding contingent				
2.4 Contingent - direct				
2.5 Contingent - reinsurance assumed				
2.6 Contingent - reinsurance ceded				
2.7 Policy and membership fees				
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)				
3. Allowances to managers and agents				
4. Advertising				
5. Boards, bureaus and associations				
6. Surveys and underwriting reports				
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries			239	239
8.2 Payroll taxes			19	19
9. Employee relations and welfare			97	97
10. Insurance			26	26
11. Directors' fees				
12. Travel and travel items				
13. Rent and rent items			25	25
14. Equipment			944	944
15. Cost or depreciation of EDP equipment and software				
16. Printing and stationery			147	147
17. Postage, telephone and telegraph, exchange and express3	.3
18. Legal and auditing			25,130	25,130
19. Totals (Lines 3 to 18)			26,630	26,630
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$				
20.2 Insurance department licenses and fees				
20.3 Gross guaranty association assessments				
20.4 All other (excluding federal and foreign income and real estate)				
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
21. Real estate expenses				
22. Real estate taxes				
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses				
25. Total expenses incurred			26,630	(a) 26,630
26. Less unpaid expenses - current year				
27. Add unpaid expenses - prior year			6,621	6,621
28. Amounts receivable relating to uninsured plans, prior year				
29. Amounts receivable relating to uninsured plans, current year				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)			33,251	33,251
DETAILS OF WRITE-INS				
2401.				
2402.				
2403.				
2498. Summary of remaining write-ins for Line 24 from overflow page				
2499. Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above)				

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

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) 10,486	7,468
1.1 Bonds exempt from U.S. tax	(a)	(a)
1.2 Other bonds (unaffiliated)	(a) 229,136	226,494
1.3 Bonds of affiliates	(a)	(b)
2.1 Preferred stocks (unaffiliated)	(b)	(b)
2.11 Preferred stocks of affiliates	(b)	78,983
2.2 Common stocks (unaffiliated)	(c)	81,109
2.21 Common stocks of affiliates	(d)	(d)
3. Mortgage loans	(e) 333	408
4. Real estate	(f)	(f)
5. Contract loans	(g)	(g)
6. Cash, cash equivalents and short-term investments	(h)	(h)
7. Derivative instruments	(i)	(i)
8. Other invested assets	58	334
9. Aggregate write-ins for investment income	318,996	315,815
10. Total gross investment income		
11. Investment expenses	(g) 26,630	(g)
12. Investment taxes, licenses and fees, excluding federal income taxes	(g)	(h)
13. Interest expense	(h)	(i)
14. Depreciation on real estate and other invested assets		
15. Aggregate write-ins for deductions from investment income		
16. Total deductions (Lines 11 through 15)	26,630	26,630
17. Net investment income (Line 10 minus Line 16)	289,185	289,185
DETAILS OF WRITE-INS		
0901. Security lending income	58	334
0902.		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page		
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	58	334
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)	58	334

- (a) Includes \$ 3,918 accrual of discount less \$ 49,684 amortization of premium and less \$ 1,140 paid for accrued interest on purchases.
- (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
- (c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ 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 \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds	26,867		26,867	2,304	2,304
1.1 Bonds exempt from U.S. tax					
1.2 Other bonds (unaffiliated)	30,404		30,404		
1.3 Bonds of affiliates					
2.1 Preferred stocks (unaffiliated)					
2.11 Preferred stocks of affiliates					
2.2 Common stocks (unaffiliated)	110,179	(10,209)	99,970	(190,590)	(190,590)
2.21 Common stocks of affiliates					
3. Mortgage loans					
4. Real estate					
5. Contract loans					
6. Cash, cash equivalents and short-term investments					
7. Derivative instruments					
8. Other invested assets		(278,074)	(278,074)	204,050	204,050
9. Aggregate write-ins for capital gains (losses)	80		80		
10. Total capital gains (losses)	167,530	(288,283)	(120,753)	15,765	15,765
DETAILS OF WRITE-INS					
0901. Litigation proceeds	80		80		
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page					
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	80		80		

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EXHIBIT OF NON-ADMITTED 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)			
2. Stocks (Schedule D):			
2.1 Preferred stocks			
2.2 Common stocks			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			
3.2 Other than first liens			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			
4.2 Properties held for the production of income			
4.3 Properties held for sale			
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			
6. Contract loans			
7. Derivatives (Schedule DB)			
8. Other invested assets (Schedule BA)			
9. Receivables for securities			
10. Securities lending reinvested collateral assets (Schedule DL)			
11. Aggregate write-ins for invested assets			
12. Subtotals, cash and invested assets (Lines 1 to 11)			
13. Title plants (for Title insurers only)			
14. Investment income due and accrued			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection			
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due	3,406	4,105	699
15.3 Accrued retrospective premiums and contracts subject to redetermination			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			
16.2 Funds held by or deposited with reinsured companies			
16.3 Other amounts receivable under reinsurance contracts			
17. Amounts receivable relating to uninsured plans			
18.1 Current federal and foreign income tax recoverable and interest thereon			
18.2 Net deferred tax asset			
19. Guaranty funds receivable or on deposit			
20. Electronic data processing equipment and software			
21. Furniture and equipment, including health care delivery assets			
22. Net adjustment in assets and liabilities due to foreign exchange rates			
23. Receivables from parent, subsidiaries and affiliates			
24. Health care and other amounts receivable			
25. Aggregate write-ins for other than invested assets			
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	3,406	4,105	699
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28. Total (Lines 26 and 27)	3,406	4,105	699
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)			
2501.			
2502.			
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)			

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies

A. Accounting Practices

This statement has been completed in accordance with the accounting practices and procedures prescribed or permitted by the National Association of Insurance Commissioners (NAIC) and the State of Ohio. A reconciliation of the company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Ohio is shown below:

	State of Domicile	State of	
		2015	2014
Net Income			
(1) MICO Insurance Company state basis	OH	36,761	478,331
(2) State Prescribed Practices that increase/(decrease) NAIC SAP	OH	-	-
(3) State Permitted Practices that increase/(decrease) NAIC SAP	OH	-	-
(4) NAIC SAP	OH	36,761	478,331
Surplus			
(5) MICO Insurance Company state basis	OH	10,677,385	11,727,991
(6) State Prescribed Practices that increase/(decrease) NAIC SAP	OH	-	-
(7) State Permitted Practices that increase/(decrease) NAIC SAP	OH	-	-
(8) NAIC SAP	OH	10,677,385	11,727,991

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

The preparation of financial statements in conformity with Statutory Accounting Principles as described in the *NAIC Annual Statement Instructions* and the *Accounting Practices and Procedures Manual* requires that management make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of the premiums written. Such reserves are computed using the daily method for direct business and are based on reports received from ceding companies and/or pools for assumed business.

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

In addition, the company uses the following accounting policies:

- 1) Short-term investments are stated at amortized cost.
- 2) Bonds not backed by other loans are stated at amortized cost using the scientific amortization method.
- 3) Common stocks are valued at market.
- 4) Preferred stocks are stated in accordance with the guidance provided in SSAP No. 32: Investments in Preferred Stock.
- 5) The company does not have any mortgage loans.
- 6) Loan-backed securities are stated in accordance with the guidance provided in SSAP No. 43R: Loan-backed and Structured Securities. The retrospective adjustment method is used to value these securities.
- 7) The company does not have any investments in subsidiaries or affiliates.
- 8) The company has investments in limited liability partnerships and limited liability companies. In accordance with SSAP No. 48: Joint Ventures, Partnerships and Limited Liability Companies, the investments are recorded using the equity method of accounting based on the underlying audited U.S. GAAP equity values of the holdings.
- 9) The company does not hold any derivative securities.
- 10) The company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53: Property/Casualty Contracts – Premiums.
- 11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount based on past experience for losses incurred but not reported (IBNR). Such liabilities are necessarily based on assumptions and estimates. While management believes the amounts are adequate, the ultimate liabilities may be in excess of or less than the amounts provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- 12) The company modified its capitalization policy to include internal effort costs for two select categories; Computer Software Developed or Modified for Internal Use and Website Development.
- 13) The company does not have any pharmaceutical rebate receivables to report.

2. Accounting Changes and Corrections of Errors

The company did not record any material changes in accounting principles or corrections of errors during the periods reported.

3. Business Combinations and Goodwill

The company did not have any business combination or goodwill transactions during the periods reported.

4. Discontinued Operations

The company did not discontinue any of its operations during the periods reported.

5. Investments

A. The company did not have any mortgage loans or mezzanine real estate loans during the periods reported.

B. The company was not involved in any debt restructuring during the periods reported.

C. The company did not have any reverse mortgages during the periods reported.

D. Loan-Backed Securities

- 1) Prepayment assumptions for mortgage-backed/loan-backed and structured securities were obtained from market data vendors or broker dealer values.
- 2) The company did not hold any loan-backed securities with other-than-temporary recognized losses.
- 3) The company did not hold any loan-backed securities with current year other-than-temporary recognized losses.
- 4) The financial impact of the company's impaired securities (fair value is less than cost or amortized cost) for which other-than-temporary impairments have not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains) is listed below:

a. The aggregate amount of unrealized losses:

1. Less than 12 months	10,531
2. 12 months or longer	9,521

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
NOTES TO FINANCIAL STATEMENTS

b. The aggregate related fair value of securities with unrealized losses:

1. Less than 12 months	1,046,498
2. 12 months or longer	712,099

5) The company performed an analysis of loan-backed securities and determined that exposure to credit risk was not a factor and did not warrant any other-than-temporary impairments.

E. The company did not have any repurchase agreements or relevant securities lending transactions during the periods reported.

F. The company did not have any investments in real estate during the periods reported.

G. The company did not have any investments in low-income housing tax credit properties during the periods reported.

H. Restricted Assets

1) The company held restricted assets as listed below:

Restricted Asset Category	Gross Restricted					6	7	8	Percentage				
	Current Year								Total	Gross Restricted to Total Admitted Assets			
	1	2	3	4	5								
	Total General Account (G/A)	Supporting Protected Cell Account Activity (a)	Protected Cell Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (Col 1+3)				Total Current Year	Gross Restricted to Total Admitted Assets			
a. Subject to contractual obligation for which liability is not shown	-	-	-	-	-	-	-	-	-	-			
b. Collateral held under security lending agreements	-	-	-	-	-	-	-	-	-	-			
c. Subject to repurchase agreements	-	-	-	-	-	-	-	-	-	-			
d. Subject to reverse repurchase agreements	-	-	-	-	-	-	-	-	-	-			
e. Subject to dollar repurchase agreements	-	-	-	-	-	-	-	-	-	-			
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-	-	-	-	-			
g. Placed under option contracts	-	-	-	-	-	-	-	-	-	-			
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	-	-	-	-	-	-	-	-	-	-			
i. FHLB capital stock	-	-	-	-	-	-	-	-	-	-			
j. On deposit with states	1,523,774	-	-	-	1,523,774	1,531,933	(8,159)	1,523,774	12.75%	12.75%			
k. On deposit with other regulatory bodies	-	-	-	-	-	-	-	-	-	-			
l. Pledged as collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-	-	-	-	-			
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-	-	-	-	-			
n. Other restricted assets	-	-	-	-	-	-	-	-	-	-			
o. Total Restricted Assets	1,523,774	-	-	-	-	1,523,774	1,531,933	(8,159)	1,523,774	12.75%			

2) The company did not have any assets pledged as collateral not captured in other categories.

3) The company did not have any other restricted assets.

I. The company was not involved in any Working Capital Finance Investments during the periods reported.

J. As of December 31, 2015, the company was not involved in any Offsetting and Netting of Assets and Liabilities during the periods reported.

K. The company held structured notes as listed below:

CUSIP Identification	Actual Cost	Fair Value	Book/Adjusted Carrying Value	Mortgage-Referenced Security (YES/NO)
0258M0DN6	50,098	49,741	50,051	NO
037833AN0	50,000	49,958	50,000	NO
25152RWZ2	50,000	49,680	50,000	NO
46623EJZ3	50,314	49,968	50,147	NO
774341AD3	50,208	49,908	50,078	NO
912828PP9	984,899	896,729	968,781	NO
912828QD5	553,500	536,664	554,993	NO
92936CAJ8	201,994	219,756	201,046	YES
94974BGC8	50,000	49,727	50,000	NO
Total	2,041,013	1,952,129	2,025,096	XXX

6. Joint Ventures, Partnerships and Limited Liability Companies

A. The company did not have any investments in joint ventures, partnerships, or limited liability companies that exceeded 10% of admitted assets during the periods reported.

B. The company recognized an other-than-temporary impairment write-down on the following LLC investment. The fair value was obtained from statements and performance disclosures provided by the investment manager.

	Impairment	Fair Value
BlackRock Enhanced Commodity Municipal Fund, LLC	278,074	296,926

7. Investment Income

A. The company did not exclude any due and accrued investment income from surplus during the periods reported.

B. The total amount excluded was \$0.

8. Derivative Instruments

The company did not own derivative financial instruments during the periods reported.

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
NOTES TO FINANCIAL STATEMENTS

9. Income Taxes

A. The components of the company's deferred tax assets (DTAs) and deferred tax liabilities (DTLs) and the change between the years are as follows:

	12/31/2015			12/31/2014			Change		
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
1	a Gross Deferred Tax Assets	3,138	8,610	11,748	3,682	1,918	5,600	(544)	6,692
	b Statutory Valuation Allowance Adjustment	-	-	-	-	-	-	-	-
	c Adjusted Gross Deferred Tax Assets(1a-1b)	3,138	8,610	11,748	3,682	1,918	5,600	(544)	6,692
	d Deferred Tax Assets Nonadmitted	-	-	-	-	-	-	-	-
	e Subtotal Net Deferred Tax Assets(Liabilities) (1c-1d)	3,138	8,610	11,748	3,682	1,918	5,600	(544)	6,692
	f Deferred Tax Liabilities	8,844	56,086	64,930	2,439	125,242	127,681	6,405	(69,156)
	g Net Admitted Deferred Tax Assets(Liabilities) (1e-1f)	(5,706)	(47,476)	(53,182)	1,243	(123,324)	(122,081)	(6,949)	75,848
									68,899
2	Admission Calculation Components	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital
	a Federal income taxes paid in prior years recoverable through loss carrybacks (11a)	-	4,523	4,523	-	1,373	1,373	-	3,150
	b Adjusted gross DTAs expected to be realized after application of the threshold limitations (Lesser of 11bi or 11bii below)	-	-	-	-	-	-	-	-
	1 Adjusted gross DTAs expected to be realized following the balance sheet date (11bi)	-	-	-	-	-	-	-	-
	2 Adjusted gross DTAs allowed per limitation threshold (11bii)	1,600,757	-	1,600,757	1,757,116	-	1,757,116	(156,359)	-
	c Adjusted gross DTAs offset by gross DTLs (11c)	3,138	4,087	7,225	3,682	545	4,227	(544)	3,542
	d DTAs Admitted as the result of application of SSAP No. 101 (Total 2a+2b+2c)	3,138	8,610	11,748	3,682	1,918	5,600	(544)	6,692
									6,148
3	Disclosure of ratios used for threshold limitation	2015	2014						
	a ExDTA ACL RBC % used to determine recovery period and threshold limitation amount in 2(b) above	4,246	4,085						
	b Amount of adjusted capital and surplus used to determine recovery period threshold limitation in 2(b)2 above	10,677,385	11,727,991						
4	Impact of Tax Planning Strategies On the Determination of:	12/31/2015		12/31/2014			Change		
	a Adjusted Gross DTAs in 1(c) above	3,138	8,610	3,682	1,918	(544)	6,692		
	% of Total Adjusted Gross DTAs	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Net Admitted Adjusted Gross DTAs in 1(e) above	3,138	8,610	3,682	1,918	(544)	6,692		
	% of Total Net Admitted Adjusted Gross DTAs	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?	Yes	_____	No	_____	X			

B. There were no temporary differences for which deferred tax liabilities were not recognized.

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

Current Income Tax	12/31/2015	12/31/2014	Change
Federal	63,974	63,789	185
Foreign	-	-	-
Subtotal	63,974	63,789	185
Federal income tax on net capital gains	67,697	157,815	(90,118)
Utilization of capital loss carry-forward	-	-	-
Other	-	-	-
Federal and foreign income taxes incurred	131,671	221,604	(89,933)

Deferred income tax assets and liabilities consist of the following major components:

Deferred tax assets:	12/31/2015	12/31/2014	Change
a <u>Ordinary</u>			
Discounting of unpaid losses	-	-	-
Unearned premium reserve	-	-	-
Investments	522	522	-
Policyholders dividends accruals	-	-	-
Fixed Assets	-	-	-
Compensation and benefit accruals	-	-	-
Minimum Pension Liability	-	-	-
Nonadmitted Assets	1,158	1,396	(238)
Net operating loss and contribution carry-forward	-	-	-
Foreign tax, LIHC and AMT credit carry-forward	-	-	-
Other	1,458	1,764	(306)
99 Subtotal	3,138	3,682	(544)
b Statutory Valuation Allowance adjustment	-	-	-
c Nonadmitted	-	-	-
d Admitted ordinary deferred tax assets (2a99-2b-2c)	3,138	3,682	(544)
e <u>Capital</u>			
Investments	8,610	1,918	6,692
Net capital loss carry-forward	-	-	-
99 Subtotal	8,610	1,918	6,692

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
NOTES TO FINANCIAL STATEMENTS

f	Statutory Valuation Allowance adjustment	-	-	-
g	Nonadmitted	-	-	-
h	Admitted capital deferred tax assets (2e99-2f-2g)	8,610	1,918	6,692
i	Admitted deferred tax assets (2d+2h)	11,748	5,600	6,148
a	Deferred Tax Liabilities:			
a	<u>Ordinary</u>			
Investments		8,844	2,439	6,405
Fixed Assets		-	-	-
Other		-	-	-
99	Subtotal	8,844	2,439	6,405
b	<u>Capital</u>			
Investments		56,086	125,242	(69,156)
Other		-	-	-
99	Subtotal	56,086	125,242	(69,156)
c	Deferred tax liabilities (3a99+3b99)	64,930	127,681	(62,751)
	Net deferred tax assets/liabilities (2i-3c)	(53,182)	(122,081)	68,899

- D. The company's income tax incurred and change in deferred income tax differs from the amount obtained by applying the federal statutory rate of 35% to income before income taxes as follows:

	12/31/2015	12/31/2014	Effective Tax Rate	
Current income taxes incurred	131,671	221,604		
Change in deferred income tax (without tax on unrealized gains and losses)	4,004	1,988		
Total income tax reported	<u>135,675</u>	<u>223,592</u>		
Income before taxes	168,432	699,935		
Expected income tax expense (benefit) at 35% statutory rate	58,951	244,977	35.0%	35.0%
Increase (decrease) in actual tax resulting from:				
a) Tax exempt interest net of proration	-	-	0.0%	0.0%
b) Dividends received deduction net of proration	(4,007)	(4,932)	-2.4%	-0.7%
c) Change in deferred tax benefit on nonadmitted assets	238	3,021	0.1%	0.4%
d) Low income housing and foreign tax credits	-	-	0.0%	0.0%
e) Affiliated dividends due	-	-	0.0%	0.0%
f) Recognized partnership income	69,286	(32,639)	41.1%	-4.7%
g) Retro Pooling / Prior year AIG settlement	-	-	0.0%	0.0%
h) Rate Differential	(1,684)	(6,999)	-1.0%	-1.0%
i) Treasury Inflation Protection securities	783	8,375	0.5%	1.2%
j) Nondeductible expenses	2,636	-	1.6%	0.0%
k) Change in Valuation Allowance	-	-	0.0%	0.0%
l) Provision to return adjustment	9,466	11,814	5.6%	1.7%
m) Other	6	(23)	0.0%	0.0%
Total income tax reported	<u>135,675</u>	<u>223,592</u>	<u>80.6%</u>	<u>31.9%</u>

- E. 1) As of December 31, 2015, the company did not have any operating loss, net capital loss or tax credit carry-forwards.
 2) The amounts of federal income taxes incurred that are available for recoupment in the event of future net losses are as follows:

2015 (current year)	1,508
2014 (current year - 1)	1,508
2013 (current year - 2)	1,508

- 3) The company did not have any deposits admitted under Section 6603 of the Internal Revenue Service (IRS) Code as of December 31, 2015.

- F. 1) The company's federal income tax return was consolidated with the following entities for the periods reflected:

Motorists Mutual Insurance Company
 Motorists Service Corporation
 Consumers Insurance USA, INC.
 Consumers Insurance Group, INC.

- 2) The method of allocation between the companies is subject to written agreement, approved by the Board of Directors. Allocation is based upon separate return calculations with current credit for net losses. Intercompany tax balances are settled annually when the federal income tax return is filed.

- G. As of December 31, 2015, the company did not have any federal or foreign income tax loss contingencies.

10. Information Concerning Parent, Subsidiaries and Affiliates

- A. - C. On August 31, 2014, Motorists Mutual Insurance Company purchased a 100% interest in Consumers Insurance Group, Inc. and its wholly-owned subsidiary, Consumers Insurance USA, Inc. The transaction was accounted for as a statutory purchase at a cost of \$32,371,923 with goodwill in the amount of \$17,174,689. On October 20, 2014, Motorists Mutual Insurance Company contributed \$10,000,000 of paid-in-capital to Consumers Insurance USA via Consumers Insurance Group. On December 18, 2014, Consumers Insurance USA became a participant in The Motorists Insurance Group's intercompany pooling arrangement. The integration was applied retroactively to January 1, 2014, and The Group's intercompany pooling agreement was amended accordingly. For more information on the intercompany pooling arrangement, refer to Note 26.

On December 21, 2015, the company declared a common stock dividend of \$1,172,729 to be paid January 21, 2016, to its parent, Motorists Mutual Insurance Company. On January 21, 2015, the company paid a common stock dividend to its parent totaling \$1,281,951.

On January 2, 2011, Phenix Mutual Fire Insurance Company sold its 44.8% equity interest in N.E. Corporation, the parent of Casco Indemnity Company, to Ohio Mutual Insurance Company for \$3,824,316 and realized a net capital gain of \$60,511. Per the terms of the sale agreement, Phenix deposited \$448,000 of its proceeds in an escrow account. The funds, which were nonadmitted in Phenix Mutual's financial statements, provided Ohio Mutual protection against adverse loss reserve development and other contractual obligations. The escrow account was settled on May 29, 2014. Of the \$448,000 deposit, \$347,719 was transferred to Ohio Mutual for reserve development and the balance was released to Phenix. The settlement resulted in a net realized capital loss of \$347,719, a \$448,000 reduction in nonadmitted assets, and \$139 of interest earnings, which increased surplus by \$100,420 in 2014.

- D. As of December 31, 2015, and 2014, the company reported net amounts due from/(due to) affiliates of \$(553) and \$(6,593) respectively. All amounts were settled within 60 days.
 E. The company did not have any guarantees or undertakings for the benefit of an affiliate or related party that resulted in a material contingent exposure to the company or any related parties during the periods reported.
 F. The company had an arrangement with its parent and affiliates whereby costs for common facilities and support services were shared during the periods reported.
 G. As of December 31, 2015, all outstanding shares of the company were owned by Motorists Mutual Insurance Company, an Ohio-based property/casualty insurer.
 H. The company did not own any shares, directly or indirectly, of an upstream intermediate entity or ultimate parent during the periods reported.

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NOTES TO FINANCIAL STATEMENTS

- I. The company did not have any investments in subsidiary, controlled, or affiliated entities that exceed 10% of admitted assets during the periods reported.
 - J. The company did not recognize any impairment write-downs for investments in subsidiary, controlled, or affiliated entities during the periods reported.
 - K. The company did not have any investments in foreign insurance subsidiaries during the periods reported.
 - L. The company did not have any investments in downstream non-insurance holding companies during the periods reported.
- 11. Debt**
- A. The company did not have any capital notes or other debt obligations outstanding during the periods reported.
 - B. The company did not have any Federal Home Loan Bank agreements in place during the periods reported.
- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans**
- A-D. The company did not sponsor or participate in any defined benefit plans during the periods reported.
 - E. The company did not sponsor or participate in any defined contribution plans during the periods reported.
 - F. The company did not participate in any multi-employer plans during the periods reported.
 - G. The company did not participate in any consolidated/holding company plans during the periods reported.
 - H. The company did not have any obligations for post-employment benefits or compensated absences during the periods reported.
 - I. The company did not sponsor or participate in any post-retirement benefits plans during the periods reported.
- 13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations**
- 1) As of December 31, 2015, the company had 1,000 shares authorized and 563 shares issued and outstanding.
 - 2) As of December 31, 2015, the company did not have any preferred stock outstanding.
 - 3) Without prior approval of its domiciliary commissioner, dividends to shareholders are limited by the laws of the company's state of incorporation, Ohio, to \$1,067,739, an amount that is based on restrictions relating to statutory surplus.
 - 4) On January 20, 2015, the company paid an ordinary common stock dividend of \$1,281,951 to its parent.
 - 5) Within the limitations of (3) above, there are not any restrictions placed on the portion of company profits that may be paid as ordinary dividends to stockholders.
 - 6) There were not any restrictions on the company's surplus during the periods reported.
 - 7) There were not any advances to surplus to disclose for the periods reported.
 - 8) The company did not hold any stock for special purposes during the periods reported.
 - 9) The company did not have any special surplus funds to disclose for the periods reported.
 - 10) As of December 31, 2015, the portion of unassigned funds (surplus) represented by cumulative unrealized gains (net of deferred FIT) was \$343,138.
 - 11) The company did not have any surplus debentures or similar obligations to disclose for the periods reported.
 - 12) Information concerning quasi-reorganization is not applicable.
 - 13) Information concerning quasi-reorganization is not applicable.
- 14. Liabilities, Contingencies and Assessments**
- A. Contingent Commitments
The company did not have any commitments or contingent commitments to an SCA entity, joint venture, partnership, or limited liability company during the periods reported.
 - B. Assessments
Given its 0.0% participation percentage in The Motorists Insurance Group's intercompany pooling arrangement, the company does not have any net exposure to underwriting-related assessments. For more information on the intercompany pooling arrangement, refer to Note 26.
 - C. Gain Contingencies
The company did not have any material gain contingencies to disclose for the periods reported.
 - D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits
The company did not make any direct payments to settle claims related extra contractual obligations (ECO) or bad faith claims stemming from lawsuits in the current reporting period.
 - E. Product Warranties
The company did not have any contingent liabilities associated with product warranties to disclose for the periods reported.
 - F. Joint and Several Liabilities
The company did not have any joint and several liabilities exposure to disclose for the periods reported.
 - G. All Other Contingencies
The company did not have any other contingent liabilities arising from litigation, income taxes, or other matters that were material in nature. All assets that the company considered to be impaired were valued at market prior to the closing of the company's financial records. The potential for losses associated with uncollectible receivable balances is not material to the company's financial position. Premium balances over 90 days past due are recorded as nonadmitted assets.
- 15. Leases**
- A. Leasing Arrangements
 - 1) The company leases computer-related equipment under various operating lease arrangements and has entered into various agreements for information technology-related services through December 2015. The expenses for these commitments for 2015 and 2014 were \$5,095 and \$4,277, respectively.
 - 2) The company did not have any future lease commitments during the periods reported.
 - 3) The company was not involved in sale-leaseback transactions during the periods reported.
 - B. The company did not act as a lessor in business activities or participate in leveraged leases during the periods reported.
- 16. Information About Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk**
- The company did not have any investments in financial instruments with off-balance sheet risk during the periods reported.
- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities**
- A. The company did not have any transfers of receivables reported as sales during the periods reported.
 - B. Transfer and Servicing of Financial Assets
 - 1) As of December 31, 2015, the company was not involved in any securities lending programs.
 - 2) The company did not have any servicing assets or servicing liabilities to disclose for the periods reported.
 - 3) The company did not have any servicing assets or servicing liabilities to disclose for the periods reported.
 - 4) The company did not obtain any assets or incur any liabilities due to the transfer of financial assets during the periods reported.

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
NOTES TO FINANCIAL STATEMENTS

- 5) The company did not securitize any financial assets during the periods reported.
 6) The company was not involved in any transfers of receivables during the periods reported.
 7) The company did not have any repurchase or reverse repurchase agreements during the periods reported.

C. Wash Sales

In the course of the company's asset management, there were not any securities sales and reacquisitions made within 30 days of the sale date to enhance the yield on the investment portfolio.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

The company did not serve as an Administrative Services Only (ASO) or as an Administrative Services Contract (ASC) plan administrator during the periods reported.

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

The company did not write any direct premiums through managing general agents or third party administrators during the periods reported.

20. Fair Value Measurements

A. Fair Value Hierarchy

- 1) Information regarding assets measured at fair value on a recurring basis is provided below:

Fair Value Measurements at December 31, 2015				
Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at fair value				
Perpetual Preferred Stock	-	-	-	-
Industrial and Misc	-	-	-	-
Parents, Subsidiaries and Affiliates	-	-	-	-
Total Perpetual Preferred Stocks	-	-	-	-
Bonds				
U.S. Governments	-	-	-	-
Industrial and Misc	-	-	-	-
Hybrid Securities	-	-	-	-
Parents, Subsidiaries and Affiliates	-	-	-	-
Total Bonds	-	-	-	-
Common Stock				
Industrial and Misc	1,784,287	-	-	1,784,287
Parents, Subsidiaries and Affiliates	-	-	-	-
Total Common Stocks	1,784,287	-	-	1,784,287
Other invested assets	-	-	651,967	651,967
Total assets at fair value	1,784,287	-	651,967	2,436,254
b. Liabilities at fair value				
Total liabilities at fair value	-	-	-	-

- 2) Information regarding assets measured at fair value on a recurring basis using significant unobservable inputs (Level 3) is provided below:

	Beginning balance at 01/01/2015	Transfers into Level 3	Transfers out of Level 3	Total gains or losses included in Net Income (realized)	Total gains or losses included in Surplus (unrealized)	Purchases	Issuances	Sales	Settlements	Ending balance at 12/31/2015
a. Assets										
Preferred Stock	-	-	-	-	-	-	-	-	-	-
Fixed Maturities	-	-	-	-	-	-	-	-	-	-
Common Stock	-	-	-	-	-	-	-	-	-	-
Industrial and Misc	-	-	-	-	-	-	-	-	-	-
Parents, Subsidiaries and Affiliates	-	-	-	-	-	-	-	-	-	-
Other Invested Assets	725,991	-	-	(278,074)	204,050	75,000	(75,000)	-	-	651,967
Total Assets	725,991	-	-	(278,074)	204,050	75,000	-	(75,000)	-	651,967
b. Liabilities										
Total Liabilities	-	-	-	-	-	-	-	-	-	-

- 3) The company did not recognize any transfers into or out of the Level 3 classification during the reporting period. The company's policy is to recognize transfers of this nature on the actual date of the event or change in circumstances that caused the transfer.
 4) The company valued common stocks using the equity method. Other invested assets were valued using equity statements from the respective fund managers.
 5) The company does not hold any derivative assets or liabilities.

B. The company did not have any other assets measured at fair value.

C. Fair Value Measurement

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Bonds	8,929,467	8,983,375	-	8,929,467	-	-
Common Stock	1,784,287	1,784,287	1,784,287	-	-	-
Other Invested Assets	651,967	651,967	-	-	651,967	-
	11,365,720	11,419,629	1,784,287	8,929,467	651,967	-

21. Other Items

A. Extraordinary Items

The company did not have any extraordinary items to disclose for the periods reported.

B. Troubled Debt Restructuring: Debtors

The company did not have any transactions related to troubled debt restructurings during the periods reported.

C. Other Disclosures and Unusual Items

The company elected to use rounding in the reporting of amounts in this statement.

D. Business Interruption Insurance Recoveries

There were not any business interruption insurance recoveries received during the periods reported.

E. State Transferable and Non-transferable Tax Credits

The company did not have any state transferable or non-transferable tax credits to disclose for the periods reported.

F. Subprime-Mortgage-Related Risk Exposure

The company did not hold any investments with subprime mortgage related risk exposure during the periods reported.

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
NOTES TO FINANCIAL STATEMENTS

22. Events Subsequent

There were not any events that occurred subsequent to the closing of the company's financial records that would materially impact the financial information presented.

23. Reinsurance

A. Unsecured Reinsurance Recoverables

As of December 31, 2015, the company did not have an unsecured aggregate recoverable for losses paid and unpaid (including IBNR), loss adjustment expenses, and unearned premium with a reinsurer that exceeded 3% of the company's surplus.

B. Reinsurance Recoverable in Dispute

As of December 31, 2015, the company did not have any reinsurance recoverable amounts in dispute from any one reinsurer that exceeded 5% of policyholder surplus.

C. Reinsurance Assumed and Ceded

- 1) The maximum amount of return commission that would have been due reinsurers if they or the company had cancelled all of the company's reinsurance or if the company or a receiver had cancelled all of the company's assumed contracts as of December 31, 2015, with the return of the unearned premium reserve is illustrated in the table that follows:

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates	-	-	-	-	-	-
b. All Other	-	-	-	-	-	-
c. Total	-	-	-	-	-	-

d. Direct Unearned Premium Reserve -

- 2) The company's contingent commissions associated with existing contractual arrangements are illustrated below:

	Direct	Assumed	Ceded	Net
a. Contingent Commission	-	-	-	-
b. Sliding Scale Adjustments	-	-	-	-
c. Other Profit Commission Arrangements	-	-	-	-
d. Total	-	-	-	-

- 3) Information concerning protected cells is not applicable.

D. Uncollectible Reinsurance

There were not any reinsurance balances written off as uncollectible during the year.

E. Commutation of Ceded Reinsurance

The company did not commute any ceded reinsurance balances during the year.

F. Retroactive Reinsurance

The company did not have any retroactive reinsurance contracts in place during the periods reported.

G. Reinsurance Accounted for as a Deposit

The company did not have any agreements in place that required reinsurance to be accounted for as a deposit during the periods reported.

H. Disclosures for the Transfer of Property and Casualty Run-off Agreements

The company did not enter into any special run-off agreements.

I. Certified Reinsurer Downgraded or Status Subject to Revocation

The company has never been classified as a certified reinsurer, and its records do not reflect any certified reinsurers that experienced a rating downgrade or are subject to revocation action.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

The company did not have any retrospectively rated contracts or contracts subject to redetermination in place during the periods reported.

25. Changes in Incurred Losses and Loss Adjustment Expenses

Given the company's 0.0% participation in The Motorists Insurance Group's intercompany pooling arrangement, reserves for the company's incurred losses and loss adjustment expenses attributable to insured events of prior years do not reflect any development. For more information on the intercompany pooling arrangement, refer to Note 26.

26. Intercompany Pooling Arrangements

Motorists Mutual Insurance Company (NAIC #14621) and its affiliates; Consumers Insurance USA, Inc. (NAIC #10204), Motorists Commercial Mutual Insurance Company (NAIC #13331), Iowa American Insurance Company (NAIC #31577), Iowa Mutual Insurance Company (NAIC #14338), MICO Insurance Company (NAIC #40932), Phenix Mutual Fire Insurance Company (NAIC #23175), and Wilson Mutual Insurance Company (NAIC #19950), participated in an intercompany pooling arrangement covering premiums, losses, and underwriting expenses for all lines during the year. Related finance and service charge income, agent and premium balance charge-offs, deficiency reserves, and policyholder dividends were also subject to the pooling arrangement. The participation percentages for each company were as follows: 68.5% for Motorists Mutual, 3.0% for Consumers Insurance, 18.5% for Motorists Commercial, 1.0% for Iowa American, 3.0% for Iowa Mutual, 0.0% for MICO, 3.0% for Phenix Mutual, and 3.0% for Wilson Mutual.

Each company recognized facultative and treaty reinsurance cessions with unaffiliated reinsurers prior to the administration of the intercompany pooling agreement. As the lead insurer, Motorists Mutual assumed all net premiums, losses, loss adjustment expenses, and underwriting expenses and then ceded each pool participant its share of the pool. Underwriting-related balance sheet items such as premiums receivable, installments, reinsurance assumed premium receivables and loss payables, reinsurance ceded premium payables and loss receivables, general expense receivables and payables, funds held balances, advanced premiums, and outstanding drafts were also pooled.

As of December 31, 2015, the company reported a pooling-related balance of \$4,237 receivable from Motorists Mutual Insurance Company.

27. Structured Settlements

- A. The company has purchased annuities for structured settlements under which the claimant is the payee, but for which the company is contingently liable. Details are provided below:

<u>Loss Reserves Eliminated by Annuities</u>	<u>Unrecorded Loss Contingencies</u>
15,000	15,225

- B. As of December 31, 2015, there were not any amounts in excess of 1% of the company's surplus due for annuities from any one life insurance company associated with purchased annuities for which the company did not receive a release of liability from the claimant.

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
NOTES TO FINANCIAL STATEMENTS

28. Health Care Receivables

The company did not have any health care receivables to disclose for the periods reported.

29. Participating Policies

The company did not write policies with participating contracts during the periods reported.

30. Premium Deficiency Reserves

Given its 0.0% participation in The Motorists Insurance Group's intercompany pooling arrangement, the company did not have any liabilities related to premium deficiency reserves as of December 31, 2015.

31. High Deductibles

The company did not have any unpaid claims on policies with high deductibles to disclose for the periods reported.

32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

The company did not discount loss and loss adjustment expense reserves during the periods reported.

33. Asbestos/Environmental Reserves

The company did not have any exposure to asbestos and/or environmental claims during the periods reported.

34. Subscriber Savings Accounts

Information concerning subscriber savings accounts is not applicable.

35. Multiple Peril Crop Insurance

The company did not write multiple peril crop insurance during the periods reported.

36. Financial Guaranty Insurance

The company did not write financial guaranty insurance during the periods reported.

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
GENERAL INTERROGATORIES

**PART 1 - COMMON INTERROGATORIES
 GENERAL**

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
 If yes, complete Schedule Y, Parts 1, 1A and 2
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []
- 1.3 State Regulating? Ohio
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] 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. 12/31/2013
- 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. 12/31/2013
- 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 11/07/2014
- 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 the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.
- | 1
Name of Entity | 2
NAIC Company Code | 3
State of Domicile |
|---------------------|------------------------|------------------------|
|---------------------|------------------------|------------------------|
- 6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 6.2 If yes, give full information:

- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]
- 7.2 If yes,
 7.21 State the percentage of foreign control; %
 7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).
- | 1
Nationality | 2
Type of Entity |
|------------------|---------------------|
|------------------|---------------------|

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company: _____

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

8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal 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?
 Ernst & Young, 41 South High Street, Columbus, Ohio 43215

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

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

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

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

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []
 10.6 If the response to 10.5 is no or n/a, please explain: _____

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
 Peter A. Weisenberger, FCAS, Assistant Vice President, Actuarial Services and Appointed Actuary, Motorists Mutual Insurance Company, 471 East Broad Street, 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

12.12 Number of parcels involved

12.13 Total book/adjusted carrying value

\$

12.2 If, yes provide explanation: _____

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

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

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []
 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []
 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []
 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
 (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 (c) Compliance with applicable governmental laws, rules and regulations;
 (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 (e) Accountability for adherence to the code.

14.11 If the response to 14.1 is No, please explain: _____

14.2 Has the code of ethics for senior managers been amended? Yes [] No [X]
 14.21 If the response to 14.2 is yes, provide information related to amendment(s). _____

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s). _____

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

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

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict 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 [X] No []
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 1,783

INVESTMENT

- 24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03)..... Yes [] No [X]
- 24.02 If no, give full and complete information relating thereto
Securities held on deposit with states.
- 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. \$
- 24.06 If answer to 24.04 is no, report amount of collateral for other programs. \$
- 24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]
- 24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]
- 24.09 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]

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
GENERAL INTERROGATORIES

24.10 For the reporting entity's security lending program state the amount of the following as 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 currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03). Yes [] No []

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

25.21 Subject to repurchase agreements	\$ 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 to sale - excluding FHLB Capital Stock	\$ 0
25.27 FHLB Capital Stock	\$ 0
25.28 On deposit with states	\$ 1,523,774
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 []

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

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

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

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

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

1 Name of Custodian(s)	2 Custodian's Address
BNY Mellon	500 Grant Street One Mellon Center, Suite #1035, Pittsburgh, PA 15258

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

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

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

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

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

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

1 Central Registration Depository Number(s)	2 Name	3 Address
110638	Diamond Hill Capital Management	325 John H McConnell Blvd, Suite #200, Columbus, OH 43215
105900	General Re-New England Asset Management, Inc.	74 Batterson Park Rd, Pondview Corporate Center, Farmington, CT 06032
153966	Crescent Capital Group, LP	11100 Santa Monica Blvd, Suite #2000, Los Angeles, CA 90025
38642	BNY Mellon Alternative Investment Services	101 Barclay Street, 20th Floor West, New York, NY 10286

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
GENERAL INTERROGATORIES

- 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 []

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
00769G-53-5	LSV Small Cap Value Fund	85,728
04314H-75-8	Artisan Small Cap Fund	154,705
04314H-85-7	Artisan Intl Val Fund	654,605
29.2999 - Total		895,038

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

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
LSV Small Cap Value Fund	Hancock Holding Company	1,054	09/30/2015
LSV Small Cap Value Fund	Endurance Specialty Holdings Ltd	1,037	09/30/2015
LSV Small Cap Value Fund	Apollo Commercial Real Estate Finance Inc	909	09/30/2015
LSV Small Cap Value Fund	Select Income REIT	892	09/30/2015
LSV Small Cap Value Fund	Portland General Electric Co	883	09/30/2015
Artisan Small Cap Fund	Acuity Brands Inc	8,385	09/30/2015
Artisan Small Cap Fund	DexCom Inc	8,292	09/30/2015
Artisan Small Cap Fund	AthenaHealth Inc	5,275	09/30/2015
Artisan Small Cap Fund	Ultimate Software Group Inc	5,012	09/30/2015
Artisan Small Cap Fund	Guidewire Software Inc	4,827	09/30/2015
Artisan Intl Val Fund	Compass Group PLC	31,683	09/30/2015
Artisan Intl Val Fund	UBS Group AG	28,868	09/30/2015
Artisan Intl Val Fund	Arch Capital Group Ltd	28,213	09/30/2015
Artisan Intl Val Fund	ING Groep N.V.	26,119	09/30/2015
Artisan Intl Val Fund	Royal Bank of Scotland Group (The) PLC	26,119	09/30/2015

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	9,500,008	9,446,100	(53,909)
30.2 Preferred stocks			
30.3 Totals	9,500,008	9,446,100	(53,909)

- 30.4 Describe the sources or methods utilized in determining the fair values:
Fair market values are obtained using an external pricing service, BNY Mellon; or using an external investment service, S&P.

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 []

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 reliable pricing source for purposes of disclosure of fair value for Schedule D:
.....

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [] No []

32.2 If no, list exceptions:

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
GENERAL INTERROGATORIES

OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$10,611

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
Insurance Services Office Inc.	4,227
Ohio Insurance Institute	3,446

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

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

1 Name	2 Amount Paid
.....

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

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

1 Name	2 Amount Paid
.....

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND 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.	\$
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$
1.31	Reason for excluding	
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.	\$
1.5	Indicate total incurred claims on all Medicare Supplement Insurance.	\$
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
		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
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
		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
2.	Health Test:	1 Current Year 2 Prior Year
2.1	Premium Numerator	0 0
2.2	Premium Denominator	
2.3	Premium Ratio (2.1/2.2)	0.000 0.000
2.4	Reserve Numerator	
2.5	Reserve Denominator	
2.6	Reserve Ratio (2.4/2.5)	0.000 0.000
3.1	Does the reporting entity issue both participating and non-participating policies?	Yes [] No [X]
3.2	If yes, state the amount of calendar year premiums written on:	3.21 Participating policies \$
		3.22 Non-participating policies \$
4.	For mutual reporting Entities and Reciprocal Exchanges Only:	
4.1	Does the reporting entity issue assessable policies?	Yes [] No []
4.2	Does the reporting entity issue non-assessable policies?	Yes [] No []
4.3	If assessable policies are issued, what is the extent of the contingent liability of the policyholders?	%
4.4	Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.	\$
5.	For Reciprocal Exchanges Only:	
5.1	Does the Exchange appoint local agents?	Yes [] No []
5.2	If yes, is the commission paid:	5.21 Out of Attorney's-in-fact compensation..... Yes [] No [] N/A [] 5.22 As a direct expense of the exchange..... Yes [] No [] N/A []
5.3	What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?	
5.4	Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred?	Yes [] No []
5.5	If yes, give full information	

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

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

Information concerning workers' compensation contracts is not applicable. The company has not established any workers' compensation contracts.

- 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.

Profiling and probable maximum loss (PML) analysis on the exposures of The Motorists Insurance Group is done by AON Re Services using the Risk Management Solutions (RMS) RiskLink catastrophe model. Analysis is performed for the perils of wind, hail, and earthquake. The PML arises from wind and hail. The major concentration of exposures is in Ohio. Catastrophe excess of loss reinsurance is purchased to protect against excessive loss.

- 6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?

The company has catastrophe excess of loss reinsurance to protect itself.

- 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 this 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 ratio cap, an aggregate limit or any similar provisions)?

Yes [X] No []

- 7.2 If yes, indicate the number of reinsurance contracts containing such provisions:

1

- 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 [X] 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 32 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.

Yes [] No [X]

Yes [] No [X]

Yes [] No [X]

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?

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

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force? Yes [] No [X]
- 11.2 If yes, give full information
.....
- 12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
 12.11 Unpaid losses \$
 12.12 Unpaid underwriting expenses (including loss adjustment expenses) \$
- 12.2 Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral, and other funds \$
- 12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes [] No [] 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 the current year:
 12.61 Letters of credit \$
 12.62 Collateral and other funds \$
- 13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$ 0
- 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. 2
- 14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes [X] No []
- 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:
Premiums are allocated to cedant based on experience weighted earned premiums subject to the contract. Reinsurance recoveries are distributed based on each cedant's share of the aggregate losses subject to the contract.
- 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 [X]
- 14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [X] 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
16.12 Products
16.13 Automobile
16.14 Other*

* Disclose type of coverage:
.....

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

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

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

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

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

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

18.1 Do you act as a custodian for health savings accounts? Yes [] No [X]

18.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$

18.3 Do you act as an administrator for health savings accounts? Yes [] No [X]

18.4 If yes, please provide the balance of funds administered as of the reporting date. \$

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY

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)		(360)	265,323	813,116	1,963,526
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)			81,900	257,072	598,042
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)		(360)	347,223	1,070,187	2,561,568
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)					
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12. Total (Line 35)					
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)					
14. Net investment gain or (loss) (Line 11)	100,735	542,150	653,977	691,171	740,351
15. Total other income (Line 15)	(1)	(30)	(11)	17	1,360
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	63,974	63,789	99,517	136,753	104,794
18. Net income (Line 20)	36,761	478,331	554,449	554,436	636,917
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	11,950,945	13,162,719	14,478,574	15,174,799	16,069,691
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)					324
20.2 Deferred and not yet due (Line 15.2)			6,778	168,473	377,048
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	1,273,560	1,434,728	1,654,046	1,788,053	2,086,821
22. Losses (Page 3, Line 1)					
23. Loss adjustment expenses (Page 3, Line 3)					
24. Unearned premiums (Page 3, Line 9)					
25. Capital paid up (Page 3, Lines 30 & 31)	2,252,000	2,252,000	2,252,000	2,252,000	2,252,000
26. Surplus as regards policyholders (Page 3, Line 37)	10,677,385	11,727,991	12,824,528	13,386,746	13,982,869
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	241,375	184,251	172,550	285,199	164,775
Risk-Based Capital Analysis					
28. Total adjusted capital	10,677,385	11,727,991	12,824,528	13,386,746	13,982,869
29. Authorized control level risk-based capital	251,481	287,072	372,295	393,137	368,877
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0					
30. Bonds (Line 1)	75.6	75.1	73.2	62.5	74.5
31. Stocks (Lines 2.1 & 2.2)	15.0	15.5	19.0	18.6	16.5
32. Mortgage loans on real estate (Lines 3.1 and 3.2)					
33. Real estate (Lines 4.1, 4.2 & 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)	3.9	3.8	1.4	12.0	2.8
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)	5.5	5.5	6.4	6.9	6.3
38. Receivables for securities (Line 9)		0.0	0.0	0.0	0.0
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 (Schedule D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)					
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47					
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)					

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
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)	88,668	(299,814)	220,834	206,376	(266,404)
52. Dividends to stockholders (Line 35)	(1,172,729)	(1,281,951)	(1,338,251)	(1,397,929)	(1,509,966)
53. Change in surplus as regards policyholders for the year (Line 38)	(1,050,606)	(1,096,537)	(562,218)	(596,123)	(1,119,790)
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)	(17,343)	171,778	644,697	841,569	1,472,422
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	(1,675)	(8,058)	74,071	142,175	395,573
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
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)	(19,018)	163,720	718,769	983,744	1,867,995
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)					
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
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)					
Operating Percentages (Page 4) (Line 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)					
68. Loss expenses incurred (Line 3)					
69. Other underwriting expenses incurred (Line 4)					
70. Net underwriting gain (loss) (Line 8)					
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)					
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)					
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)					
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)					
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)					
Two Year Loss Development (000 omitted)					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)					
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)					

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

Yes No

If no, please explain:

Schedule P - Part 1 - Summary

N O N E

Schedule P - Part 2 - Summary

N O N E

Schedule P - Part 3 - Summary

N O N E

Schedule P - Part 4 - Summary

N O N E

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO 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 (Included in Column 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			(1,548)		(1,548)		
16. Iowa	IA	N							
17. Kansas	KS	N							
18. Kentucky	KY	L							
19. Louisiana	LA	N							
20. Maine	ME	N							
21. Maryland	MD	N							
22. Massachusetts	MA	N							
23. Michigan	MI	N							
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			(17,970)		(39,391)	29,866	31
37. Oklahoma	OK	N							
38. Oregon	OR	N							
39. Pennsylvania	PA	L							
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	L			500		(90,229)	926	(6)
50. Wisconsin	WI	N							
51. Wyoming	WY	N							
52. American Samoa	AS	N							
53. Guam	GU	N							
54. Puerto Rico	PR	N							
55. U.S. Virgin Islands	VI	N							
56. Northern Mariana Islands	MP	N							
57. Canada	CAN	N							
58. Aggregate other alien ..	OT	XXX							
59. Totals	(a)	5			(19,018)		(130,841)	51,718	25
DETAILS OF WRITE-INS									
58001.		XXX							
58002.		XXX							
58003.		XXX							
58998. Summary of remaining write-ins for Line 58 from overflow page		XXX							
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX							

(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.

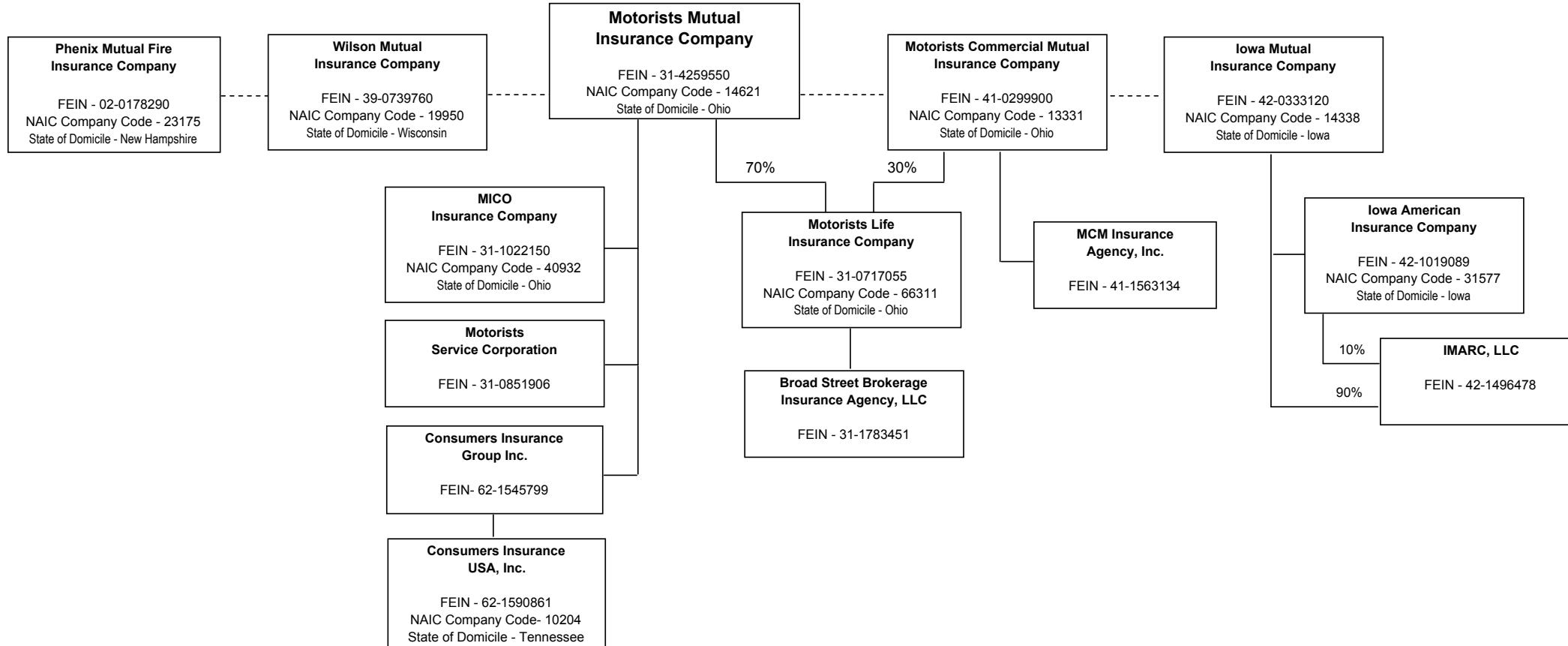
Explanation of basis of allocation of premiums by states, etc.

Premiums are assigned to state based on the principle garaging location.

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

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE MICO INSURANCE COMPANY
OVERFLOW PAGE FOR WRITE-INS

NONE

ALPHABETICAL INDEX

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