



QUARTERLY STATEMENT

As of September 30, 2017
of the Condition and Affairs of the

Affinity Mutual Insurance Company

NAIC Group Code..... 0, 0	NAIC Company Code..... 16748	Employer's ID Number..... 34-4317240
(Current Period) (Prior Period)		
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Incorporated/Organized..... December 17, 1934	Commenced Business..... May 1, 1935	
Statutory Home Office	722 North Cable Road..... Lima OH US 45805-1795	
	(Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	722 North Cable Road..... Lima OH US 45805-1795	419-227-6604
	(Street and Number) (City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)
Mail Address	722 North Cable Road..... Lima OH US 45805-1795	
	(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	722 North Cable Road..... Lima OH US 45805-1795	419-227-6604
	(Street and Number) (City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)
Internet Web Site Address	www.affinity-mutual.com	
Statutory Statement Contact	Brent A. Helmke	419-227-6604
	(Name)	(Area Code) (Telephone Number) (Extension)
	bhelmke@affinity-mutual.com	419-224-4874
	(E-Mail Address)	(Fax Number)

OFFICERS

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

OTHER

Eldon M. Helmke	Chairman	David W. Seemann	Vice Chairman
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DIRECTORS OR TRUSTEES

Daniel R. Combs	David W. Seemann	Alvin J. King	Scott W. Boulis
Eldon M. Helmke	Dale N. Hirschfeld	Gary L. Luginbill	Brent R. Petersen
Dennis A. Kapcar #			

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

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

(Signature)	(Signature)	(Signature)
Jack L. Brinkman	Jack L. Brinkman	Brent A. Helmke
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
President	Secretary	Treasurer
(Title)	(Title)	(Title)

Subscribed and sworn to before me	a. Is this an original filing?	Yes [X] No []
This _____ day of _____	b. If no:	
	1. State the amendment number	
	2. Date filed	
	3. Number of pages attached	

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	2,164,659		2,164,659	2,071,795
2. Stocks:				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....	3,333,041	926	3,332,115	2,661,089
3. Mortgage loans on real estate:				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	102,912		102,912	107,168
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$....2,871,799), cash equivalents (\$.....0) and short-term investments (\$....3,131,545).....	6,003,345		6,003,345	6,891,296
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives.....			0	
8. Other invested assets.....			0	
9. Receivables for securities.....			0	25,107
10. Securities lending reinvested collateral assets.....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	11,603,957	926	11,603,031	11,756,455
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	34,358		34,358	32,770
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	293,719		293,719	291,423
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	2,254,292		2,254,292	1,888,952
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	100,697
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	17,595
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....	69,270		69,270	86,540
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	2,998		2,998	1,984
21. Furniture and equipment, including health care delivery assets (\$.....0).....	6,646	6,646	0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	24,348	0	24,348	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	14,289,587	7,572	14,282,015	14,176,414
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	14,289,587	7,572	14,282,015	14,176,414

DETAILS OF WRITE-INS

1101.			0	
1102.			0	
1103.			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Building Permanent Improvement Pre-Payment.....			0	
2502. Miscellaneous Receivable.....	24,348		24,348	
2503.			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	24,348	0	24,348	0

LIABILITIES, SURPLUS AND OTHER FUNDS

		1	2
		Current Statement Date	December 31 Prior Year
1.	Losses (current accident year \$.....545,566).....	1,221,159	1,410,373
2.	Reinsurance payable on paid losses and loss adjustment expenses.....		
3.	Loss adjustment expenses.....	336,191	347,814
4.	Commissions payable, contingent commissions and other similar charges.....	545,094	613,415
5.	Other expenses (excluding taxes, licenses and fees).....	62,795	97,356
6.	Taxes, licenses and fees (excluding federal and foreign income taxes).....	10,600	15,660
7.1	Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....		
7.2	Net deferred tax liability.....		
8.	Borrowed money \$.....0 and interest thereon \$.....0.....		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$....463,134 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	3,639,683	3,287,019
10.	Advance premium.....	14,151	17,774
11.	Dividends declared and unpaid:		
11.1	Stockholders.....		
11.2	Policyholders.....		
12.	Ceded reinsurance premiums payable (net of ceding commissions).....	323,648	311,211
13.	Funds held by company under reinsurance treaties.....		
14.	Amounts withheld or retained by company for account of others.....	1,133	
15.	Remittances and items not allocated.....		
16.	Provision for reinsurance (including \$.....0 certified).....		
17.	Net adjustments in assets and liabilities due to foreign exchange rates.....		
18.	Drafts outstanding.....		
19.	Payable to parent, subsidiaries and affiliates.....		
20.	Derivatives.....		
21.	Payable for securities.....		
22.	Payable for securities lending.....		
23.	Liability for amounts held under uninsured plans.....		
24.	Capital notes \$.....0 and interest thereon \$.....0.....		
25.	Aggregate write-ins for liabilities.....	135,510	0
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	6,289,963	6,100,623
27.	Protected cell liabilities.....		
28.	Total liabilities (Lines 26 and 27).....	6,289,963	6,100,623
29.	Aggregate write-ins for special surplus funds.....	0	0
30.	Common capital stock.....		
31.	Preferred capital stock.....		
32.	Aggregate write-ins for other than special surplus funds.....	0	0
33.	Surplus notes.....		
34.	Gross paid in and contributed surplus.....		
35.	Unassigned funds (surplus).....	7,992,052	8,075,791
36.	Less treasury stock, at cost:		
36.1	0.000 shares common (value included in Line 30 \$.....0).....		
36.2	0.000 shares preferred (value included in Line 31 \$.....0).....		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36).....	7,992,052	8,075,791
38.	Totals (Page 2, Line 28, Col. 3).....	14,282,015	14,176,414

DETAILS OF WRITE-INS

2501.	Line 15 from 2000 Annual Statement.....		
2502.	Other Amounts Due Under Reinsurance Contracts.....	135,510	
2503.	.....		
2598.	Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	135,510	0
2901.	.....		
2902.	.....		
2903.	.....		
2998.	Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999.	Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201.	.....		
3202.	.....		
3203.	.....		
3298.	Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299.	Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$....6,488,248).....	6,072,153	6,141,517	8,227,579
1.2 Assumed..... (written \$.....0).....			
1.3 Ceded..... (written \$....2,898,378).....	2,834,947	2,881,556	3,874,675
1.4 Net..... (written \$....3,589,870).....	3,237,206	3,259,961	4,352,904
DEDUCTIONS:			
2. Losses incurred (current accident year \$....1,443,455):			
2.1 Direct.....	5,718,779	1,747,631	2,470,660
2.2 Assumed.....			
2.3 Ceded.....	4,621,136	673,531	1,249,764
2.4 Net.....	1,097,643	1,074,100	1,220,896
3. Loss adjustment expenses incurred.....	415,040	386,279	574,703
4. Other underwriting expenses incurred.....	2,020,954	1,964,232	2,641,019
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	3,533,637	3,424,610	4,436,619
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	(296,431)	(164,649)	(83,714)
INVESTMENT INCOME			
9. Net investment income earned.....	63,720	142,185	181,326
10. Net realized capital gains (losses) less capital gains tax of \$.....0.....	102,164	100,783	75,384
11. Net investment gain (loss) (Lines 9 + 10).....	165,884	242,968	256,710
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$....812 amount charged off \$....1,881).....	(1,069)	13	(381)
13. Finance and service charges not included in premiums.....			
14. Aggregate write-ins for miscellaneous income.....	3,780	220	220
15. Total other income (Lines 12 through 14).....	2,711	233	(161)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	(127,836)	78,552	172,835
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).....	(127,836)	78,552	172,835
19. Federal and foreign income taxes incurred.....			
20. Net income (Line 18 minus Line 19) (to Line 22).....	(127,836)	78,552	172,835
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year.....	8,075,791	7,067,200	7,067,200
22. Net income (from Line 20).....	(127,836)	78,552	172,835
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.....0.....	59,418	445,299	834,700
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....	(17,270)	(24,766)	(1,287)
27. Change in nonadmitted assets.....	1,948	2,176	2,344
28. Change in provision for reinsurance.....			
29. Change in surplus notes.....			
30. Surplus (contributed to) withdrawn from protected cells.....			
31. Cumulative effect of changes in accounting principles.....			
32. Capital changes:			
32.1 Paid in.....			
32.2 Transferred from surplus (Stock Dividend).....			
32.3 Transferred to surplus.....			
33. Surplus adjustments:			
33.1 Paid in.....			
33.2 Transferred to capital (Stock Dividend).....			
33.3 Transferred from capital.....			
34. Net remittances from or (to) Home Office.....			
35. Dividends to stockholders.....			
36. Change in treasury stock.....			
37. Aggregate write-ins for gains and losses in surplus.....	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37).....	(83,739)	501,261	1,008,592
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	7,992,052	7,568,461	8,075,791

DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0
1401. Lines 23 and 29 from 2000 Annual Statement.....			
1402. Miscellaneous Income.....	3,780	220	220
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	3,780	220	220
3701. Lines 23 and 29 from 2000 Annual Statement.....			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0	0

Affinity Mutual Insurance Company
CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance.....	3,231,048	3,303,643	4,319,923
2. Net investment income.....	99,433	195,868	246,619
3. Miscellaneous income.....	2,711	233	(161)
4. Total (Lines 1 through 3).....	3,333,192	3,499,743	4,566,381
5. Benefit and loss related payments.....	1,168,565	1,210,401	1,485,340
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	2,555,560	2,424,033	3,190,394
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....			
10. Total (Lines 5 through 9).....	3,724,125	3,634,435	4,675,734
11. Net cash from operations (Line 4 minus Line 10).....	(390,933)	(134,691)	(109,353)
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	890,764	830,616	1,191,450
12.2 Stocks.....	1,301,393	1,859,880	5,061,191
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....			
12.7 Miscellaneous proceeds.....	25,107	100,144	75,037
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	2,217,264	2,790,640	6,327,678
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	1,013,093	411,142	623,242
13.2 Stocks.....	1,814,418	1,657,606	1,884,316
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....			
13.7 Total investments acquired (Lines 13.1 to 13.6).....	2,827,510	2,068,748	2,507,557
14. Net increase or (decrease) in contract loans and premium notes.....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	(610,247)	721,892	3,820,120
CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....			
16.6 Other cash provided (applied).....	113,229	5,188	4,982
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	113,229	5,188	4,982
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(887,951)	592,389	3,715,749
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	6,891,295	3,175,546	3,175,546
19.2 End of period (Line 18 plus Line 19.1).....	6,003,344	3,767,935	6,891,295

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

20.0001			
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NOTES TO FINANCIAL STATEMENTS

Note 1 – Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

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

	SSAP #	F/S Page	F/S Line #	Current Period	2016
NET INCOME					
(1) Affinity Mutual Insurance Company state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ (127,836)	\$ 172,835
(2) State Prescribed Practice that is an increase/(decrease) from NAIC SAP					
(3) State Permitted Practice that is an increase/(decrease) from NAIC SAP					
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ (127,836)	\$ 172,835
SURPLUS					
(5) Affinity Mutual Insurance Company state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 7,992,052	\$ 8,075,791
(6) State Prescribed Practice that is an increase/(decrease) from NAIC SAP					
(7) State Permitted Practice that is an increase/(decrease) from NAIC SAP					
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 7,992,052	\$ 8,075,791

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

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

C. Accounting Policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of the premiums written. Such reserves are computed on a pro-rata basis.

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

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

Affinity Mutual Insurance Comany values Ohio Insurance Services, Inc. (non-insurance company subsidiary) using the equity method. The equity in Ohio Insurance Services, Inc. (\$926) is treated as a non-admitted asset. The "No Value" has been approved by the NAIC/SVO.

Affinity Mutual Insurance Company does not anticipate investment income when evaluating the need for premium deficiency reserves.

Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined.

D. Going Concern

Based upon its evaluation of relevent conditions and events, management does not have substantial doubt about Affinity Mutual Insurance Company's ability to continue as a going concern.

Note 2 – Accounting Changes and Corrections of Errors

No significant changes.

Note 3 – Business Combinations and Goodwill

None.

Note 4 – Discontinued Operations

None.

Note 5 – Investments

D. Loan-Backed Securities

As of September 30, 2017, individual investments were reviewed to determine if an other than temporary impairment should be recorded and after reviewing the investments and the corresponding NAIC guidance no impairment was applied.

NOTES TO FINANCIAL STATEMENTS

E. Repurchase Agreements and/or Securities Lending Transactions

Not applicable.

H. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted					Current Period		Percentage			
	Current Period					6	7	8	9	10	
	1	2	3	4	5					11	
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Nonadmitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
j. On deposit with states	399,734				399,734	399,899	(164)		399,734	2.863	2.865
o. Total Restricted Assets	\$ 399,734	\$	\$	\$	\$ 399,734	\$ 399,899	\$ (164)		\$ 399,734	2.863	2.865%

(c) Column 5 divided by Asset Page, Column 1, Line 28

(d) Column 9 divided by Asset Page, Column 3, Line 28

I. Working Capital Finance Investments

Not applicable.

J. Offsetting and Netting of Assets and Liabilities

Not applicable.

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

None.

Note 7 – Investment Income

No significant changes.

Note 8 – Derivative Instruments

None.

Note 9 – Income Taxes

No significant changes.

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

No significant changes

Note 11 – Debt

None.

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

A. Defined Benefit Plan - None.

Affinity Mutual Insurance Company sponsors a 401 (k) plan covering substantially all employees of the company.

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

(10) The portion of unassigned funds (surplus) represented or reduced by unrealized gains and losses is: \$(27,275)

Note 14 – Liabilities, Contingencies and Assessments

No significant changes.

Note 15 – Leases

No significant changes.

Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

None.

Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

B. Transfer and Servicing of Financial Assets

Not applicable.

C. Wash Sales

None.

NOTES TO FINANCIAL STATEMENTS

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

Not applicable.

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

None.

Note 20 – Fair Value Measurements

A.

(1) Fair Value Measurements at Reporting Date

	Level 1	Level 2	Level 3	Total
Assets at Fair Value				
Bonds- Industrial & Miscellaneous (Unaffiliated) - Issuer Obligations	\$ 69,772	\$	\$	\$ 69,772
Common Stock - Industrial & Miscellaneous	\$ 3,332,116	\$	\$	\$ 3,332,116
Common Stock - Subsidiary	\$ 926	\$	\$	\$ 926
Total	\$ 3,402,814	\$	\$	\$ 3,402,814
Liabilities at Fair Value				
N/A	\$	\$	\$	\$
Total	\$	\$	\$	\$

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

	Beginning Balance at current period	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settle-ments	Ending Balance at current period
a. Assets										
N/A	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
b. Liabilities										
N/A	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

C.

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

D.

Not Practicable to Estimate Fair Value

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

Note 21 – Other Items

None.

Note 22 – Events Subsequent

None.

Note 23 – Reinsurance

A. Unsecured Reinsurance Recoverables

Affinity Mutual Insurance Company does not have an unsecured aggregate recoverable for losses paid and unpaid including IBNR, loss adjustment expenses and the unearned premium with individual reinsurers, authorized or unauthorized, that exceed approximately 3% of policyholder surplus (\$239,762).

1. Maiden Reinsurance Corporation and Affinity Mutual Insurance Company have entered into a trust agreement. Maiden Reinsurance Corporation has agreed to collateralize payments of all amounts as of September 30, 2017 owed by Maiden Reinsurance Company to Affinity Mutual Insurance Company in connection with various Reinsurance Agreements. In conjunction with the agreement, Maiden Reinsurance Company has deposited investment grade bonds and short term investments with a cost basis of \$6,151,209 with an independent trustee. The Maiden Re recoverable is approximately \$3,440,000

B. Reinsurance Recoverable in Dispute

None.

NOTES TO FINANCIAL STATEMENTS

C. Reinsurance Assumed and Ceded

(1)

	Assumed	Reinsurance	Ceded	Reinsurance	Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates	\$	\$	\$	\$	\$	\$
b. All Other			463,134	89,153	(463,134)	(89,153)
c. Total	\$	\$	\$ 463,134	\$ 89,153	\$ (463,134)	\$ (89,153)
d. Direct Unearned Premium Reserves			\$ 410,288			

D. Uncollectible Reinsurance

Not applicable.

E. Commutation of Ceded Reinsurance

Not applicable.

F. Retroactive Reinsurance

Not applicable.

G. Reinsurance Accounted for as a Deposit

Not applicable.

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

Not applicable.

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not applicable.

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not applicable.

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

F. Risk Sharing Provisions of the Affordable Care Act

Not applicable.

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

Reserves as of December 31, 2016 were \$1.758 million. As of September 30, 2017, \$585 thousand has been paid for incurred losses and loss adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$1.042 million as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore there has been \$131 thousand favorable prior year development from Decemberer 31, 2005 to September 30, 2017. This decrease is generally the result from ongoing analysis of loss developmental trends. Original reserve estimates are increased and decreased as additional information becomes known regarding individual claims.

Note 26 – Intercompany Pooling Arrangements

Not applicable.

Note 27 – Structured Settlements

None.

Note 28 – Health Care Receivables

Not applicable.

Note 29 – Participating policies

Not applicable.

Note 30 – Premium Deficiency Reserves

No significant changes.

Note 31 – High Deductibles

Not applicable.

NOTES TO FINANCIAL STATEMENTS

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

None.

Note 33 – Asbestos/Environmental Reserves

None.

Note 34 – Subscriber Savings Accounts

Not applicable.

Note 35 – Multiple Peril Crop Insurance

Not applicable.

Note 36 – Financial Guaranty Insurance

Not applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes ☐ No ☒
- 1.2

If yes, has the report been filed with the domiciliary state?

Yes ☐ No ☐
- 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 ☒
- 2.2

If yes, date of change:
- 3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1 and 1A.

Yes ☒ No ☐
- 3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ☐ No ☒
- 3.3

If the response to 3.2 is yes, provide a brief description of those changes.

- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes ☐ No ☒
- 4.2

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

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

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?
If yes, attach an explanation.

Yes ☐ No ☐ N/A ☒
- 6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2015
- 6.2

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.

12/31/2015
- 6.3

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).

02/24/2017
- 6.4

By what department or departments?
Ohio Department of Insurance
- 6.5

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 ☒
- 6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes ☐ No ☐ N/A ☒
- 7.1

Has this 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 ☒
- 7.2

If yes, give full information:
- 8.1

Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board?

Yes ☐ No ☒
- 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 ☒
- 8.4

If the 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	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC

- 9.1

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 ☒ 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.
- 9.11

If the response to 9.1 is No, please explain:
- 9.2

Has the code of ethics for senior managers been amended?

Yes ☐ No ☒
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes ☐ No ☒
- 9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes ☐ No ☒

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$0

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes [] No [X]

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

12. Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$0

13. Amount of real estate and mortgages held in short-term investments:

\$0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes [X] No []

14.2 If yes, please complete the following:

	1 Prior Year End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$0	\$0
14.22 Preferred Stock	0	0
14.23 Common Stock	926	926
14.24 Short-Term Investments	0	0
14.25 Mortgage Loans on Real Estate	0	0
14.26 All Other	0	0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$926	\$926
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$0	\$0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes [] No [X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

Yes [] No []

If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of current statement date:

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$0

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

\$0

16.3 Total payable for securities lending reported on the liability page:

\$0

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

Yes [X] No []

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

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

17.2 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)

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

Yes [] No [X]

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

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

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

1 Name of Firm or Individual	2 Affiliation

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's assets?

Yes [] No []

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets?

Yes [] No []

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

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

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

Yes [X] No []

18.2 If no, list exceptions:

GENERAL INTERROGATORIES (continued)

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

1.

If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?

If yes, attach an explanation.

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

2.

Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?

If yes, attach an explanation.

Yes [] No [X]

3.1

Have any of the reporting entity's primary reinsurance contracts been canceled?

Yes [] No [X]

3.2

If yes, give full and complete information thereto:

4.1

Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see *Annual Statement Instructions* pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero?

Yes [] No [X]

4.2

If yes, complete the following schedule:

1	2	3	Total Discount				Discount Taken During Period			
			4	5	6	7	8	9	10	11
Line of Business	Maximu m Interest	Disc. Rate	Unpaid Losses	Unpaid LAE	IBNR	Total	Unpaid Losses	Unpaid LAE	IBNR	Total
	0.000	0.000	0	0	0	0	0	0	0	0
Total	XXX	XXX	0	0	0	0	0	0	0	0

5.1

Operating Percentages:

5.1 A&H loss percent

5.2 A&H cost containment percent

5.3 A&H expense percent excluding cost containment expenses

6.1

Do you act as a custodian for health savings accounts?

6.2

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

6.3

Do you act as an administrator for health savings accounts?

6.4

If yes, please provide the amount of funds administered as of the reporting date.

0.000%

0.000%

0.000%

Yes [] No [X]

\$ 0

Yes [] No [X]

\$ 0

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1	2	3	4	5	6	7
NAIC Company Code	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating
U.S. Insurers						
11452.....	06-0384680.....	Hartford Steam Boiler Inspection & Insurance Co.....	CT.....	Authorized.....	.....	.....

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

		1 Active Status	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
			2 Current Year to Date	3 Prior Year to Date	4 Current Year to Date	5 Prior Year to Date	6 Current Year to Date	7 Prior Year to Date
States, Etc.								
1.	Alabama.....	AL.....N...						
2.	Alaska.....	AK.....N...						
3.	Arizona.....	AZ.....N...						
4.	Arkansas.....	AR.....N...						
5.	California.....	CA.....N...						
6.	Colorado.....	CO.....N...						
7.	Connecticut.....	CT.....N...						
8.	Delaware.....	DE.....N...						
9.	District of Columbia.....	DC.....N...						
10.	Florida.....	FL.....N...						
11.	Georgia.....	GA.....N...						
12.	Hawaii.....	HI.....N...						
13.	Idaho.....	ID.....N...						
14.	Illinois.....	IL.....N...						
15.	Indiana.....	IN.....L...	2,267,406	2,476,838	2,772,154	638,740	1,810,854	2,153,329
16.	Iowa.....	IA.....N...						
17.	Kansas.....	KS.....N...						
18.	Kentucky.....	KY.....N...						
19.	Louisiana.....	LA.....N...						
20.	Maine.....	ME.....N...						
21.	Maryland.....	MD.....N...						
22.	Massachusetts.....	MA.....N...						
23.	Michigan.....	MI.....L...	376,888	263,001	58,710	5,375	43,641	41,288
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...	3,843,954	3,657,282	3,389,838	833,420	2,736,136	2,469,015
37.	Oklahoma.....	OK.....N...						
38.	Oregon.....	OR.....N...						
39.	Pennsylvania.....	PA.....N...						
40.	Rhode Island.....	RI.....N...						
41.	South Carolina.....	SC.....N...						
42.	South Dakota.....	SD.....N...						
43.	Tennessee.....	TN.....N...						
44.	Texas.....	TX.....N...						
45.	Utah.....	UT.....N...						
46.	Vermont.....	VT.....N...						
47.	Virginia.....	VA.....N...						
48.	Washington.....	WA.....N...						
49.	West Virginia.....	WV.....N...						
50.	Wisconsin.....	WI.....N...						
51.	Wyoming.....	WY.....N...						
52.	American Samoa.....	AS.....N...						
53.	Guam.....	GU.....N...						
54.	Puerto Rico.....	PR.....N...						
55.	US Virgin Islands.....	VI.....N...						
56.	Northern Mariana Islands.....	MP.....N...						
57.	Canada.....	CAN.....N...						
58.	Aggregate Other Alien.....	OT.....XXX.	0	0	0	0	0	0
59.	Totals.....	(a).....3	6,488,248	6,397,121	6,220,702	1,477,535	4,590,631	4,663,633

DETAILS OF WRITE-INS

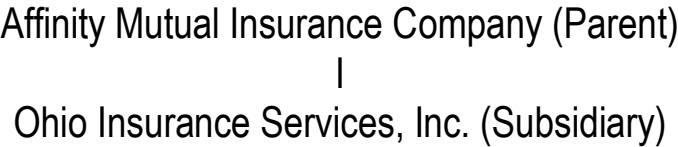
58001.	XXX.						
58002.	XXX.						
58003.	XXX.						
58998. Summary of remaining write-ins for Line 58 from overflow page....	XXX.	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above).....	XXX.	0	0	0	0	0	0

(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;
(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile see DSLI); (D) - DSLI - Domestic Surplus Lines Insurer
(DSLI) - Reporting entities authorized to write Surplus Lines in the state of domicile; (N) - None of the above - Not allowed to write business in the state.
(a) Insert the number of D and L responses except for Canada and Other Alien.

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

PART 1 – ORGANIZATIONAL CHART

Q11



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
Members															
.....		00000...	34-0961920..	.....	.....	.....	Ohio Insurance Services, Inc.....	OH.....	DS.....	Affinity Mutual Insurance Company.....	Ownership.....	100.000	Affinity Mutual Insurance Company.....	Y.....	.....

PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....	984,033	4,495,290	456.823	61.591
2. Allied lines.....	656,022	242,475	36.961	(1.492)
3. Farmowners multiple peril.....			0.000	
4. Homeowners multiple peril.....			0.000	
5. Commercial multiple peril.....	2,913,957	(105,228)	(3.611)	14.805
6. Mortgage guaranty.....			0.000	
8. Ocean marine.....			0.000	
9. Inland marine.....	308,232	261,290	84.770	32.462
10. Financial guaranty.....			0.000	
11.1. Medical professional liability - occurrence.....			0.000	
11.2. Medical professional liability - claims-made.....			0.000	
12. Earthquake.....			0.000	
13. Group accident and health.....			0.000	
14. Credit accident and health.....			0.000	
15. Other accident and health.....			0.000	
16. Workers' compensation.....			0.000	
17.1. Other liability-occurrence.....	320,073		0.000	
17.2. Other liability-claims made.....			0.000	
17.3. Excess workers' compensation.....			0.000	
18.1. Products liability-occurrence.....			0.000	
18.2. Products liability-claims made.....			0.000	
19.1, 19.2. Private passenger auto liability.....			0.000	
19.3, 19.4. Commercial auto liability.....	599,744	731,176	121.915	58.779
21. Auto physical damage.....	270,938	84,916	31.341	94.012
22. Aircraft (all perils).....			0.000	
23. Fidelity.....	7,819		0.000	
24. Surety.....	9,076		0.000	
26. Burglary and theft.....	2,257	8,859	392.529	(57.936)
27. Boiler and machinery.....			0.000	
28. Credit.....			0.000	
29. International.....			0.000	
30. Warranty.....			0.000	
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0.000	
35. Totals.....	6,072,153	5,718,779	94.180	28.456
DETAILS OF WRITE-INS				
3401.			0.000	
3402.			0.000	
3403.			0.000	
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0.000	XXX
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0.000	

PART 2 - DIRECT PREMIUMS WRITTEN

Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire.....	356,810	1,095,976	1,069,413
2. Allied lines.....	237,873	730,650	712,942
3. Farmowners multiple peril.....			
4. Homeowners multiple peril.....			
5. Commercial multiple peril.....	839,766	3,063,088	2,952,782
6. Mortgage guaranty.....			
8. Ocean marine.....			
9. Inland marine.....	80,126	339,629	317,172
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.....			
15. Other accident and health.....			
16. Workers' compensation.....			
17.1. Other liability-occurrence.....	58,420	322,323	374,303
17.2. Other liability-claims made.....			
17.3. Excess workers' compensation.....			
18.1. Products liability-occurrence.....			
18.2. Products liability-claims made.....			
19.1 19.2. Private passenger auto liability.....			
19.3 19.4. Commercial auto liability.....	115,210	613,652	642,842
21. Auto physical damage.....	62,972	300,936	306,626
22. Aircraft (all perils).....			
23. Fidelity.....	1,932	7,947	7,391
24. Surety.....	3,754	11,361	12,033
26. Burglary and theft.....	396	2,686	1,617
27. Boiler and machinery.....			
28. Credit.....			
29. International.....			
30. Warranty.....			
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0
35. Totals.....	1,757,259	6,488,248	6,397,121
DETAILS OF WRITE-INS			
3401.			
3402.			
3403.			
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

Q14

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2017 Loss and LAE Payments on Claims Reported as of Prior Year-End	2017 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2017 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year-End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year-End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols. 7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/Deficiency (Cols. 11 + 12)
1. 2014 + Prior.....	323	98	421	99		99	176		98	274	(49)	0	(49)
2. 2015.....	91	174	264	(4)		(4)	12		174	185	(82)	0	(82)
3. Subtotals 2015 + Prior.....	414	272	685	95	0	95	187	0	272	459	(131)	0	(131)
4. 2016.....	697	375	1,073	473	17	490	384	10	189	583	159	(159)	0
5. Subtotals 2016 + Prior.....	1,111	647	1,758	568	17	585	571	10	461	1,042	28	(159)	(131)
6. 2017.....	XXX	XXX	XXX	XXX	1,129	1,129	XXX	329	186	515	XXX	XXX	XXX
7. Totals.....	1,111	647	1,758	568	1,146	1,714	571	339	647	1,557	28	(159)	(131)
8. Prior Year-End's Surplus As Regards Policyholders	8,076										Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7
											1. ....2.513 %	2. ....(24.604)%	3. ....(7.466)%
											Col. 13, Line 7 Line 8		
											4. ....(1.625)%		

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	YES

Explanation:

1.

The data for this supplement is not required to be filed.
2.

The data for this supplement is not required to be filed.
3.

The data for this supplement is not required to be filed.
4.

Bar Code:



Affinity Mutual Insurance Company
Overflow Page for Write-Ins

NONE

Affinity Mutual Insurance Company

SCHEDULE A - VERIFICATION

Real Estate

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	107,168	112,842
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Current year change in encumbrances.....		
4. Total gain (loss) on disposals.....		
5. Deduct amounts received on disposals.....		
6. Total foreign exchange change in book/adjusted carrying value.....		
7. Deduct current year's other-than-temporary impairment recognized.....		
8. Deduct current year's depreciation.....	4,256	5,674
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....	102,912	107,168
10. Deduct total nonadmitted amounts.....		
11. Statement value at end of current period (Line 9 minus Line 10).....	102,912	107,168

SCHEDULE B - VERIFICATION

Mortgage Loans

	1	2
	Year to Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....		
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and mortgage interest points and commitment fees.....		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....		
10. Deduct current year's other-than-temporary impairment recognized.....		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Total valuation allowance.....		
13. Subtotal (Line 11 plus Line 12).....	0	0
14. Deduct total nonadmitted amounts.....		
15. Statement value at end of current period (Line 13 minus Line 14).....	0	0

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....		
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and depreciation.....		
9. Total foreign exchange change in book/adjusted carrying value.....		
10. Deduct current year's other-than-temporary impairment recognized.....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	0	0

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	4,733,809	7,626,131
2. Cost of bonds and stocks acquired.....	2,827,510	2,507,557
3. Accrual of discount.....	3	163
4. Unrealized valuation increase (decrease).....	59,418	834,700
5. Total gain (loss) on disposals.....	102,164	75,384
6. Deduct consideration for bonds and stocks disposed of.....	2,192,157	6,252,641
7. Deduct amortization of premium.....	33,049	57,486
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	5,497,700	4,733,809
11. Deduct total nonadmitted amounts.....	926	926
12. Statement value at end of current period (Line 10 minus Line 11).....	5,496,774	4,732,884

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

	1	2	3	4	5	6	7	8
NAIC Designation	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a).....	4,565,298	290,700	550,746	(9,183)	4,543,124	4,565,298	4,296,069	5,773,967
2. NAIC 2 (a).....	665,604	340,707	75,000	(948)	771,475	665,604	930,363	968,270
3. NAIC 3 (a).....	17,234			72	77,101	17,234	17,306	56,526
4. NAIC 4 (a).....	5,031		5,000	(31)	5,064	5,031	0	
5. NAIC 5 (a).....	53,040			(574)	52,644	53,040	52,466	75,375
6. NAIC 6 (a).....							0	
7. Total Bonds.....	5,306,207	631,407	630,746	(10,664)	5,449,409	5,306,207	5,296,205	6,874,138
PREFERRED STOCK								
8. NAIC 1.....							0	
9. NAIC 2.....							0	
10. NAIC 3.....							0	
11. NAIC 4.....							0	
12. NAIC 5.....							0	
13. NAIC 6.....							0	
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	5,306,207	631,407	630,746	(10,664)	5,449,409	5,306,207	5,296,205	6,874,138

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:
NAIC 1 \$.....3,131,545; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

QSI02

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999.....	3,131,545	XXX.....	3,131,545	7,018	260

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	4,802,342	2,359,622
2. Cost of short-term investments acquired.....	29,203	4,706,052
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....	1,700,000	
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		2,263,331
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	3,131,545	4,802,342
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	3,131,545	4,802,342

SCHEDULE DB - PART A - VERIFICATION

Options, Caps, Floors, Collars, Swaps and Forwards

1.	Book/adjusted carrying value, December 31, prior year (Line 9, prior year)	
2.	Cost paid/(consideration received) on additions	
3.	Unrealized valuation increase/(decrease)	
4.	Total gain (loss) on termination recognized	
5.	Considerations received/(paid) on terminations	
6.	Amortization	
7.	Adjustment to the book/adjusted carrying value of hedge item	
8.	Total foreign exchange change in book/adjusted carrying value	
9.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 - 5 + 6 + 7 + 8)	0
10.	Deduct nonadmitted assets	
11.	Statement value at end of current period (Line 9 minus Line 10)	0

NONE

SCHEDULE DB - PART B - VERIFICATION

Futures Contracts

1.	Book/adjusted carrying value, December 31, prior year (Line 6, prior year)	
2.	Cumulative cash change (Section 1, Broker Name/Net Cash Deposits Footnote - Cumulative Cash Change column)	
3.1	Add:	
	Change in variation margin on open contracts - Highly Effective Hedges:	
3.11	Section 1, Column 15, current year to date minus	
3.12	Section 1, Column 15, prior year	0
	Change in variation margin on open contracts - All Other:	
3.13	Section 1, Column 18, current year to date minus	
3.14	Section 1, Column 18, prior year	00
3.2	Add:	
	Change in adjustment to basis of hedged item:	
3.21	Section 1, Column 17, current year to date minus	
3.22	Section 1, Column 17, prior year	0
	Change in amount recognized:	
3.23	Section 1, Column 19, current year to date minus	
3.24	Section 1, Column 19, prior year	00
3.3	Subtotal (Line 3.1 minus Line 3.2)	0
4.1	Cumulative variation margin on terminated contracts during the year	
4.2	Less:	
4.21	Amount used to adjust basis of hedged item	
4.22	Amount recognized	0
4.3	Subtotal (Line 4.1 minus Line 4.2)	0
5.	Dispositions gains (losses) on contracts terminated in prior year:	
5.1	Total gain (loss) recognized for terminations in prior year	
5.2	Total gain (loss) adjusted into the hedged item(s) for the terminations in prior year	
6.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3.3 - 4.3 - 5.1 - 5.2)	0
7.	Deduct nonadmitted assets	
8.	Statement value at end of current period (Line 6 minus Line 7)	0

NONE

SCHEDULE DB - PART C - SECTION 1

Replication (Synthetic Asset) Transactions Open as of Current Statement Date

Replication (Synthetic) Asset Transactions								Components of the Replication (Synthetic Asset) Transactions								
1	2	3	4	5	6	7	8	Derivative Instrument(s) Open			Cash Instrument(s) Held					
								9	10	11	12	13	14	15	16	
		NAIC Designational or Other Description	Notional Amount	Book/Adjusted Carrying Value	Fair Value	Effective Date	Maturity Date		Book/Adjusted Carrying Value	Fair Value	CUSIP			NAIC Designational or Other Description	Book/Adjusted Carrying Value	Fair Value
Number	Description	Description	Amount	Carrying Value	Value	Date	Date	Description	Carrying Value	Value	CUSIP	Description	Description	Description	Carrying Value	Value

QSI05

NONE

SCHEDULE DB - PART C - SECTION 2

Reconciliation (Synthetic Asset) Transactions Open

	First Quarter		Second Quarter		Third Quarter		Fourth Quarter		Year-To-Date	
	1	2	3	4	5	6	7	8	9	10
	Number of Positions	Total Replication (Synthetic Asset) Transactions Statement Value	Number of Positions	Total Replication (Synthetic Asset) Transactions Statement Value	Number of Positions	Total Replication (Synthetic Asset) Transactions Statement Value	Number of Positions	Total Replication (Synthetic Asset) Transactions Statement Value	Number of Positions	Total Replication (Synthetic Asset) Transactions Statement Value
1. Beginning Inventory.....			0	0	0	0	0	0	0	0
2. Add: Opened or acquired transactions.....									0	0
3. Add: Increases in replication (synthetic asset) transactions statement value.....	XXX		XXX		XXX		XXX		XXX	0
4. Less: Closed or disposed of transactions.....									0	0
5. Less: Positions disposed of for failing effectiveness criteria.....									0	0
6. Less: Decreases in replication (synthetic asset) transactions statement value.....	XXX		XXX		XXX		XXX		XXX	0
7. Ending Inventory.....	0	0	0	0	0	0	0	0	0	0

NONE

SCHEDULE DB - VERIFICATION

Verification of Book/Adjusted Carrying Value, Fair Value and Potential Exposure of all Open Derivative Contracts

Book/Adjusted Carrying Value Check

1.	Part A, Section 1, Column 14.....	_____	
2.	Part B, Section 1, Column 15 plus Part B, Section 1 Footnote - Total Ending Cash Balance.....	_____	
3.	Total (Line 1 plus Line 2).....	_____	0
4.	Part D, Section 1, Column 5.....	_____	
5.	Part D, Section 1, Column 6.....	_____	
6.	Total (Line 3 minus Line 4 minus Line 5).....	_____	0

Fair Value Check

7.	Part A, Section 1, Column 16.....	_____	
8.	Part B, Section 1, Column 13.....	_____	
9.	Total (Line 7 plus Line 8).....	_____	0
10.	Part D, Section 1, Column 8.....	_____	
11.	Part D, Section 1, Column 9.....	_____	
12.	Total (Line 9 minus Line 10 minus Line 11).....	_____	0

Potential Exposure Check

13.	Part A, Section 1, Column 21.....	_____	
14.	Part B, Section 1, Column 20.....	_____	
15.	Part D, Section 1, Column 11.....	_____	
16.	Total (Line 13 plus Line 14 minus Line 15).....	_____	0

NONE

SCHEDULE E- VERIFICATION

Cash Equivalents

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	
2. Cost of cash equivalents acquired.....		
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....		
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/ adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	0	0
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	0	0

NONE

SCHEDULE A - PART 2

Showing all Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	Location		4	5	6	7	8	9
	2	3						
Description of Property	City	State	Date Acquired	Name of Vendor	Actual Cost at Time of Acquisition	Amount of Encumbrances	Book/Adjusted Carrying Value Less Encumbrances	Additional Investment Made After Acquisition

NONE

QE01

SCHEDULE A - PART 3

Showing all Real Estate DISPOSED During the Quarter, Including Payments During the Final Year on "Sales Under Contract "

1	Location		4	5	6	7	8	Change in Book/Adjusted Carrying Value Less Encumbrances					14	15	16	17	18	19	20
	2	3						9	10	11	12	13							
Description of Property	City	State	Disposal Date	Name of Purchaser	Actual Cost	Expended for Additions, Permanent Improvements and Changes in Encumbrances	Book/Adjusted Carrying Value Less Encumbrances Prior Year	Current Year's Depreciation	Current Year's Other-Than-Temporary Impairment Recognized	Current Year's Change in Encumbrances	Total Change in B./A.C.V. (11 - 9 - 10)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value Less Encumbrances on Disposal	Amounts Received During Year	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Gross Income Earned Less Interest Incurred on Encumbrances	Taxes, Repairs, and Expenses Incurred

NONE

SCHEDULE B - PART 2

Showing all Mortgage Loans ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	Location		4	5	6	7	8	9
	2	3						
Loan Number	City	State	Loan Type	Date Acquired	Rate of Interest	Actual Cost at Time of Acquisition	Additional Investment Made After Acquisition	Value of Land and Buildings

NONE

SCHEDULE B - PART 3

Showing all Mortgage Loans DISPOSED, Transferred or Repaid During the Current Quarter

1	Location		4	5	6	7	Change in Book Value/Recorded Investment						14	15	16	17	18
	2	3					8	9	10	11	12	13					
Loan Number	City	State	Loan Type	Date Acquired	Disposal Date	Book Value/Recorded Investment Excluding Accrued Interest Prior Year	Unrealized Valuation Increase (Decrease)	Current Year's (Amortization) / Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Capitalized Deferred Interest and Other	Total Change in Book Value (8 + 9 - 10 + 11)	Total Foreign Exchange Change in Book Value	Book Value / Recorded Investment Excluding Accrued Interest on Disposal	Consideration	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal

NONE

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	2	Location		5	6	7	8	9	10	11	12	13
		3	4									
CUSIP Identification	Name or Description	City	State	Name of Vendor or General Partner	NAIC Designation	Date Originally Acquired	Type and Strategy	Actual Cost at Time of Acquisition	Additional Investment Made after Acquisition	Amount of Encumbrances	Commitment for Additional Investment	Percentage of Ownership

NONE

QE03

SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

1	2	Location		5	6	7	8	Changes in Book/Adjusted Carrying Value						15	16	17	18	19	20
		3	4					9	10	11	12	13	14						
CUSIP Identification	Name or Description	City	State	Name of Purchaser or Nature of Disposal	Date Originally Acquired	Disposal Date	Book/Adjusted Carrying Value Less Encumbrances, Prior Year	Unrealized Valuation Increase (Decrease)	Current Year's (Depreciation) or (Amortization) / Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Capitalized Deferred Interest and Other	Total Change in B./A.C.V. (9+10-11+12)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value Less Encumbrances on Disposal	Consideration	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Investment Income

NONE

SCHEDULE D - PART 3

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

1	2		3	4	5	6	7	8	9	10	
CUSIP Identification		Description		Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
Bonds - Industrial and Miscellaneous											
00206R	CY	6	AT&T Inc Global Note.....		07/20/2017.....	Ameriprise Financial Services, Inc.....		27,093	25,000	469	2FE.....
031162	BU	3	Amgen Inc Sr. Note.....		07/20/2017.....	Ameriprise Financial Services, Inc.....		25,384	25,000	96	2FE.....
46625H	HS	2	JPMorgan Chase & Co Note.....		07/20/2017.....	Ameriprise Financial Services, Inc.....		26,849	25,000	9	1FE.....
485134	BL	3	Kansas City Power & Light Co Mtg Bond.....		07/20/2017.....	Ameriprise Financial Services, Inc.....		27,345	25,000	566	1FE.....
539830	AT	6	Lockheed Martin Corp Note.....		07/20/2017.....	Ameriprise Financial Services, Inc.....		26,527	25,000	207	2FE.....
65535H	AG	4	Nomura Holdings, Inc Gbl Med Term Note.....	C.....	07/20/2017.....	Ameriprise Financial Services, Inc.....		25,507	25,000	241	2FE.....
655664	AP	5	Nordstrom, Inc Note.....		07/20/2017.....	Ameriprise Financial Services, Inc.....		26,320	25,000	278	2FE.....
94974B	GR	5	Wells Fargo & Co Med Term Note.....		07/20/2017.....	Ameriprise Financial Services, Inc.....		25,561	25,000	85	1FE.....
09247X	AE	1	BlackRock Inc, Note.....		08/17/2017.....	Ameriprise Financial Services, Inc.....		27,034	25,000	250	1FE.....
172967	KB	6	Citigroup Inc Note.....		08/17/2017.....	Ameriprise Financial Services, Inc.....		25,559	25,000	213	2FE.....
53217V	AC	3	Life Techs Corp Sr Note.....		08/17/2017.....	Ameriprise Financial Services, Inc.....		27,491	25,000	713	2FE.....
61746B	DR	4	Morgan Stanley Sr Note.....		08/17/2017.....	Ameriprise Financial Services, Inc.....		25,360	25,000	48	1FE.....
761713	BE	5	Reynolds American Inc Sr Note.....		08/17/2017.....	Ameriprise Financial Services, Inc.....		25,889	25,000	158	2FE.....
871829	AX	5	Sysco Corp Sr Note.....		08/17/2017.....	Ameriprise Financial Services, Inc.....		25,602	25,000	255	2FE.....
87236Y	AA	6	TD Ameritrade Holding Corp Sr Note.....		08/17/2017.....	Ameriprise Financial Services, Inc.....		27,254	25,000	315	1FE.....
976656	CC	0	Wisonsin Electric Power Co Debenture.....		08/17/2017.....	Ameriprise Financial Services, Inc.....		26,598	25,000	198	1FE.....
009363	AR	3	Airgas Inc Note.....		09/21/2017.....	Ameriprise Financial Services, Inc.....		25,858	25,000	114	1FE.....
125896	BC	3	CMS Energy Corp Sr Note.....		09/21/2017.....	Ameriprise Financial Services, Inc.....		27,998	25,000	608	2FE.....
45866F	AC	8	Intercontinental Exchange Group Inc Sr Note.....		09/21/2017.....	Ameriprise Financial Services, Inc.....		25,763	25,000	218	1FE.....
582839	AJ	5	Mead Johnson Nutritional Co Sr Note.....		09/21/2017.....	Ameriprise Financial Services, Inc.....		25,922	25,000	271	1FE.....
685218	AC	3	Orange SA Note.....	C.....	09/21/2017.....	Ameriprise Financial Services, Inc.....		25,024	25,000	160	2FE.....
78355h	JX	8	Ryder System Inc Med Term Note.....		09/21/2017.....	Ameriprise Financial Services, Inc.....		25,414	25,000	41	2FE.....
85771P	AW	2	Statoil ASA.....	C.....	09/21/2017.....	Ameriprise Financial Services, Inc.....		25,385	25,000	214	1FE.....
92343V	BQ	6	Verizon Communications Inc Note.....		09/21/2017.....	Ameriprise Financial Services, Inc.....		26,901	25,000	31	2FE.....
3899999. Total - Bonds - Industrial and Miscellaneous.....								629,634	600,000	5,757	XXX.....
8399997. Total - Bonds - Part 3.....								629,634	600,000	5,757	XXX.....
8399999. Total - Bonds.....								629,634	600,000	5,757	XXX.....
Common Stocks - Industrial and Miscellaneous											
037612	30	6	Apollo Global Management LLC Class A.....		07/20/2017.....	Ameriprise Financial Services, Inc.....	2,000.000	56,291	XXX		L.....
311900	10	4	Fastenal Corp.....		07/20/2017.....	Ameriprise Financial Services, Inc.....	1,000.000	43,211	XXX		L.....
337932	10	7	FirstEnergy Corp.....		07/20/2017.....	Ameriprise Financial Services, Inc.....	2,000.000	62,946	XXX		L.....
477143	10	1	JetBlue Airways Corp.....		07/20/2017.....	Ameriprise Financial Services, Inc.....	2,000.000	46,916	XXX		L.....
552953	10	1	MGM Resorts Intl.....		07/20/2017.....	Ameriprise Financial Services, Inc.....	2,000.000	67,913	XXX		L.....
806857	10	8	Schlumberger LTD.....		07/20/2017.....	Ameriprise Financial Services, Inc.....	1,000.000	67,543	XXX		L.....
969904	10	1	Williams-Sonoma Inc.....		07/20/2017.....	Ameriprise Financial Services, Inc.....	1,000.000	45,414	XXX		L.....
10922N	10	3	Brighthouse Financial, Inc.....		08/07/2017.....	Ameriprise Financial Services, Inc.....	90.909	4,555	XXX		L.....
00287Y	10	9	AbbVie Inc.....		08/17/2017.....	Ameriprise Financial Services, Inc.....	1,000.000	70,783	XXX		L.....
013872	10	6	Alcoa Upstream Corp.....		08/17/2017.....	Ameriprise Financial Services, Inc.....	2,000.000	77,460	XXX		L.....
291011	10	4	Emerson Electric Corp.....		08/17/2017.....	Ameriprise Financial Services, Inc.....	1,000.000	59,433	XXX		L.....
767744	10	5	Ritchie Brothers Auctioneers Inc.....	A.....	08/17/2017.....	Ameriprise Financial Services, Inc.....	2,000.000	57,896	XXX		L.....
95040Q	10	4	Welltower Inc.....		08/17/2017.....	Ameriprise Financial Services, Inc.....	1,000.000	72,085	XXX		L.....
126408	10	3	CSX Corporation.....		09/21/2017.....	Ameriprise Financial Services, Inc.....	1,000.000	53,162	XXX		L.....
20030N	10	1	Comcast Corp - Class A.....		09/21/2017.....	Ameriprise Financial Services, Inc.....	2,000.000	75,638	XXX		L.....
337932	10	7	FirstEnergy Corp.....		09/21/2017.....	Ameriprise Financial Services, Inc.....	2,000.000	62,966	XXX		L.....
437076	10	2	Home Depot Inc.....		09/21/2017.....	Ameriprise Financial Services, Inc.....	500.000	79,659	XXX		L.....
489170	10	0	Kennametal Inc.....		09/21/2017.....	Ameriprise Financial Services, Inc.....	1,000.000	39,639	XXX		L.....

SCHEDULE D - PART 3

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
G5960L 10 3	Medtronic PLC.....	C.....	09/21/2017.....	Ameriprise Financial Services, Inc.....	1,000.000	80,532	XXX	.....	L.....
9099999.	Total - Common Stocks - Industrial and Miscellaneous.....					1,124,043	XXX	0	XXX.....
9799997.	Total - Common Stocks - Part 3.....					1,124,043	XXX	0	XXX.....
9799999.	Total - Common Stocks.....					1,124,043	XXX	0	XXX.....
9899999.	Total - Preferred and Common Stocks.....					1,124,043	XXX	0	XXX.....
9999999.	Total - Bonds, Preferred and Common Stocks.....					1,753,677	XXX	5,757	XXX.....

(a) For all common stock bearing NAIC market indicator "U" provide the number of such issues:.....0.

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1			2			3	4		5		6		7		8		9		10		Change in Book/Adjusted Carrying Value					16		17		18		19		20		21		22																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
							F o r e i g n	Disposal Date		Name of Purchaser		Number of Shares of Stock		Consideration		Par Value		Actual Cost		Prior Year Book/Adjusted Carrying Value		Unrealized Valuation Increase (Decrease)		Current Year's (Amortization) / Accretion		Current Year's Other-Than-Temporary Impairment Recognized		Total Change in B./A.C.V. (11+12-13)		Total Foreign Exchange Change in B./A.C.V.		Book/Adjusted Carrying Value at Disposal Date		Foreign Exchange Gain (Loss) on Disposal		Realized Gain (Loss) on Disposal		Total Gain (Loss) on Disposal		Bond Interest / Stock Dividends Received During Year		Stated Contractual Maturity Date		NAIC Designation or Market Indicator (a)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
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(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues:0.

QE05

SCHEDULE DB - PART A - SECTION 1

Showing all Options, Caps, Floors, Collars, Swaps and Forwards Open as of Current Statement Date

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
Description	Description of Item(s) Hedged, Used for Income Generation or Replicated	Schedule / Exhibit Identifier	Type(s) of Risk(s) (a)	Exchange, Counterparty or Central Clearinghouse	Trade Date	Date of Maturity or Expiration	Number of Contracts	Notional Amount	Strike Price, Rate of Index Received (Paid)	Cumulative Prior Year(s) Initial Cost of Premium (Received) Paid	Current Year Initial Cost of Premium (Received) Paid	Current Year Income	Book/Adjusted Carrying Value	C o d e	Fair Value	Unrealized Valuation Increase (Decrease)	Total Foreign Exchange Change in B./A.C.V.	Current Year's (Amortization) / Accretion	Adjustment to Carrying Value of Hedged Items	Potential Exposure	Credit Quality of Reference Entity	Hedge Effectiveness at Inception and at Year-end (b)

NONE

SCHEDULE DB - PART B - SECTION 1

Futures Contracts Open as of the Current Statement Date

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Highly Effective Hedges			18	19	20	21	22
														15	16	17					
Ticker Symbol	Number of Contracts	Notional Amount	Description	Description of Item(s) Hedged, Used for Income Generation or Replicated	Schedule / Exhibit Identifier	Type(s) of Risk(s) (a)	Date of Maturity or Expiration	Exchange	Trade Date	Transaction Price	Reporting Date Price	Fair Value	Book/Adjusted Carrying Value	Cumulative Variation Margin	Deferred Variation Margin	Change in Variation Margin Gain (Loss) Used to Adjust Basis of Hedged Item	Cumulative Variation Margin for All Other Hedges	Change in Variation Margin Gain (Loss) Recognized in Current Year	Potential Exposure	Hedge Effectiveness at Inception and at Year-end (b)	Value of One (1) Point

NONE

SCHEDULE DB - PART D - SECTION 1

Counterparty Exposure for Derivative Instruments Open as of Current Statement Date

1	2	3	4	Book Adjusted Carrying Value			Fair Value			11	12
				5	6	7	8	9	10		
Description of Exchange, Counterparty or Central Clearinghouse	Master Agreement (Y or N)	Credit Support Annex (Y or N)	Fair Value of Acceptable Collateral	Contracts with Book/Adjusted Carrying Value > 0	Contracts with Book/Adjusted Carrying Value < 0	Exposure Net of Collateral	Contracts with Fair Value > 0	Contracts with Fair Value < 0	Exposure Net of Collateral	Potential Exposure	Off-Balance Sheet Exposure
1. Offset per SSAP No. 64.....											
2. Net after right of offset per SSAP No. 64.....				0	0						

NONE

SCHEDULE DB - PART D - SECTION 2

Collateral for Derivative Instruments Open as of Current Statement Date

1	2	3	4	5	6	7	8	9
Exchange, Counterparty or Central Clearinghouse	Type of Asset Pledged	CUSIP Identification	Description	Fair Value	Par Value	Book/Adjusted Carrying Value	Maturity Date	Type of Margin (I, V or IV)

NONE

SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS
Reinvested Collateral Assets Owned Current Statement Date

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation / Market Indicator	Fair Value	Book/Adjusted Carrying Value	Maturity Date

General Interrogatories:

1. The activity for the year: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0
2. Average balance for the year: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:
NAIC 1: \$.....0 NAIC 2: \$.....0 NAIC 3: \$.....0 NAIC 4: \$.....0 NAIC 5: \$.....0 NAIC 6: \$.....0

NONE

SCHEDULE DL - PART 2
SECURITIES LENDING COLLATERAL ASSETS
Reinvested Collateral Assets Owned Current Statement Date

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation / Market Indicator	Fair Value	Book/Adjusted Carrying Value	Maturity Date

General Interrogatories:

1. The activity for the year: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0
2. Average balance for the year: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0

NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Open Depositories								
JPMorgan Chase Bank, N.A. - Checking.....	Lima, OH.....				2,040,247	2,495,759	1,439,913	XXX
JPMorgan Chase Bank, N.A. - Savings.....	Lima, OH.....	0.030	1		10,404	10,405	10,405	XXX
Banc of California, NA.....	Irvine, CA.....				207,078	11	246,258	XXX
Bank of China.....	New York, NY.....						3	XXX
The BOEA Ltd.....	New York, NY.....				6	0	246,258	XXX
Citibank, NA.....	Sioux Falls, SD.....				5		246,258	XXX
Compass Bank.....	Birmingham, AL.....						190,074	XXX
Discover Bank.....	New Castle, DE.....				246,258	246,266	246,269	XXX
SunTrust Bank.....	Atlanta, GA.....						1	XXX
Synchrony Bank.....	Draper, UT.....				246,258	26,241	246,261	XXX
0199999. Total Open Depositories.....	XXX	XXX	1	0	2,750,257	2,778,682	2,871,699	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	1	0	2,750,257	2,778,682	2,871,699	XXX
0499999. Cash in Company's Office.....	XXX	XXX	XXX	XXX	100	100	100	XXX
0599999. Total Cash.....	XXX	XXX	1	0	2,750,357	2,778,782	2,871,799	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year

NONE



DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

Year To Date For the Period Ended September 30, 2017

NAIC Group Code.....0

Company Name: Affinity Mutual Insurance Company

NAIC Company Code.....16748

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

1. Monoline Policies

1 Direct Written Premiums	2 Direct Earned Premiums	3 Direct Losses Incurred
.....		

2. Commercial Multiple Peril (CMP) Packaged Policies

- 2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy? Yes [X] No []
- 2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy
be quantified or estimated? Yes [X] No []
- 2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount
for D&O liability coverage in CMP packaged policies:
2.31 Amount quantified: \$.....3,338
2.32 Amount estimated using reasonable assumptions:
2.4 If the answer to question 2.1 is yes, provide direct losses incurred (losses paid plus change in case
reserves) for the D&O liability coverages provided in CMP packaged policies: