



24017201520100100

ANNUAL STATEMENT

For the Year Ended December 31, 2015
OF THE CONDITION AND AFFAIRS OF THE

The Beacon Mutual Insurance Company

NAIC Group Code 3490 (Current Period) 3490 (Prior Period) NAIC Company Code 24017 Employer's ID Number 05-0458697

Organized under the Laws of Rhode Island, State of Domicile or Port of Entry Rhode Island

Country of Domicile US

Incorporated/Organized July 11, 1990 Commenced Business August 12, 1992

Statutory Home Office One Beacon Centre, Warwick, RI, US 02886-1378

Main Administrative Office One Beacon Centre, Warwick, RI, US 02886-1378

Mail Address One Beacon Centre, Warwick, RI, US 02886-1378

Primary Location of Books and Records One Beacon Centre, Warwick, RI, US 02886-1378

Internet Web Site Address www.beaconmutual.com

Statutory Statement Contact Ann Lazzareschi, 401-825-2621

alazzareschi@beaconmutual.com, 401-825-2659

OFFICERS

Table with 2 columns: Name, Title. Rows include James Vincent Rosati (President & CEO), Brian Joseph Spero (EVP, COO, General Counsel, Assistant Secretary), Cynthia Lee Lawlor (Chief Financial Officer).

VICE-PRESIDENTS

Table with 4 columns: Name, Title, Name, Title. Rows include Pamela Lee Alarie, Robert Glenn DeOrsey, Rajani Mahadevan, Timothy Francis Benson, Michael Dennis Lynch.

DIRECTORS OR TRUSTEES

Table with 4 columns: Name, Title, Name, Title. Rows include Harry Robert Bacon, Raymond Christopher Coia, Richard James DeRienzo, James Vincent Rosati, Carol Elaine Saccucci, Robert A. Walsh Jr., Myrth York, Jerauld C. Adams, Linda D'Amaro Rossi.

State of Rhode Island

County of Kent

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) James Vincent Rosati, (Signature) Brian Joseph Spero, (Signature) Cynthia Lee Lawlor
(Printed Name) 1. President & CEO, 2. EVP, COO, General Counsel, Assistant Secretary, 3. Chief Financial Officer
(Title)

Subscribed and sworn to (or affirmed) before me this on this day of , 2016, by

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



24017201543022100

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR 2015

NAIC Group Code **3490**

NAIC Company Code **24017**

	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11. Medical Professional Liability												
12. Earthquake												
13. Group Accident and Health (b)												
14. Credit A & H (Group and Individual)												
15.1 Collectively Renewable A & H (b)												
15.2 Non-Cancelable A & H (b)												
15.3 Guaranteed Renewable A & H (b)												
15.4 Non-Renewable for Stated Reasons Only (b)												
15.5 Other Accident Only												
15.6 Medicare Title XVIII Exempt from State Taxes or Fees												
15.7 All Other A & H (b)												
15.8 Federal Employees Health Benefits Plan Premium (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence												14,571
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18. Products Liability												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
30. Warranty												
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTALS (a)												14,571
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

**NONE**

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
 (b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0.

19 MA



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**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR 2015

NAIC Group Code **3490**

NAIC Company Code **24017**

	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11. Medical Professional Liability												
12. Earthquake												
13. Group Accident and Health (b)												
14. Credit A & H (Group and Individual)												
15.1 Collectively Renewable A & H (b)												
15.2 Non-Cancelable A & H (b)												
15.3 Guaranteed Renewable A & H (b)												
15.4 Non-Renewable for Stated Reasons Only (b)												
15.5 Other Accident Only												
15.6 Medicare Title XVIII Exempt from State Taxes or Fees												
15.7 All Other A & H (b)												
15.8 Federal Employees Health Benefits Plan Premium (b)												
16. Workers' Compensation	130,116,506	128,810,913	2,535,043	59,534,637	76,859,403	71,081,957	143,328,872	6,032,961	6,334,874	5,122,635	12,142,713	11,358,600
17.1 Other Liability - Occurrence												
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18. Products Liability												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
30. Warranty												
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTALS (a)	130,116,506	128,810,913	2,535,043	59,534,637	76,859,403	71,081,957	143,328,872	6,032,961	6,334,874	5,122,635	12,142,713	11,358,600
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

**NONE**

(a) Finance and service charges not included in Lines 1 to 35 \$ 145,020

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0.

19 RI



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**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

BUSINESS IN THE STATE OF TOTAL DURING THE YEAR 2015

NAIC Group Code **3490**

NAIC Company Code **24017**

19 GT

	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11. Medical Professional Liability												
12. Earthquake												
13. Group Accident and Health (b)												
14. Credit A & H (Group and Individual)												
15.1 Collectively Renewable A & H (b)												
15.2 Non-Cancelable A & H (b)												
15.3 Guaranteed Renewable A & H (b)												
15.4 Non-Renewable for Stated Reasons Only (b)												
15.5 Other Accident Only												
15.6 Medicare Title XVIII Exempt from State Taxes or Fees												
15.7 All Other A & H (b)												
15.8 Federal Employees Health Benefits Plan Premium (b)												
16. Workers' Compensation	130,116,506	128,810,913	2,535,043	59,534,637	76,859,403	71,081,957	143,328,872	6,032,961	6,334,874	5,122,635	12,142,713	11,373,171
17.1 Other Liability - Occurrence												
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18. Products Liability												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
30. Warranty												
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTALS (a)	130,116,506	128,810,913	2,535,043	59,534,637	76,859,403	71,081,957	143,328,872	6,032,961	6,334,874	5,122,635	12,142,713	11,373,171
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

**NONE**

(a) Finance and service charges not included in Lines 1 to 35 \$ 145,020

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0.

### SCHEDULE F – PART 1

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 + 7							
94-1390273 13-2673100	19801 22039	Argonaut Insurance Company General Reinsurance Corporation	IL DE	6,773	10	5,843 1,495	5,843 1,505		2,015	2,851		4,107	5,363	14,201
0999998	Other U.S. Unaffiliated Insurers - Reinsurance for which total of Col 8 < \$100,000													
0999999	Total Other U.S. Unaffiliated Insurers *#			6,773	10	7,338	7,348		2,015	2,851		4,107	5,363	14,201
9999999	Totals			6,773	10	7,338	7,348		2,015	2,851		4,107	5,363	14,201

**NONE    Schedule F - Part 2 Premium Portfolio**

### SCHEDULE F – PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Cols. 15 – [16 + 17]	19 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			
13-2673100	22039	General Reinsurance Corporation	DE		6,222	296	13	27,443	204	10,867	44	84			38,951	80	38,871		
06-1430254	10348	Arch Reinsurance Company	DE		210							3		3	4	(1)			
43-0727872	15105	Safety National Casualty Corporation	MO		103							1		1	2	(1)			
06-1481194	10829	Alterra Reinsurance USA Inc.	DE		284							5		5	7	(2)			
36-6067575	24139	Old Republic General Insurance Corp	IL			5		172	1					178		178			
48-0921045	39845	Westport Insurance Corporation	MO			25		475	6					506		506			
0999998	Total Authorized - Other U.S. Unaffiliated Insurers (Under \$100,000)				173								1	1	3	(2)			
0999999	Total Authorized - Other U.S. Unaffiliated Insurers				6,992	326	13	28,090	211	10,867	44	94		39,645	96	39,549			
1399999	Total Authorized - Total Authorized				6,992	326	13	28,090	211	10,867	44	94		39,645	96	39,549			
AA-1128003	00000	Catlin UW / Lloyd's Sync 2003	GB		213							4		4	6	(2)			
AA-1129000	00000	Markel at Lloyd's, Zurich	GB		178							2		2	3	(1)			
AA-3194130	00000	Endurance Specialty Insurance, Ltd	BM		120							2		2	2				
2599998	Total Unauthorized - Other non-U.S. Insurers# (under \$100,000)				530								9	9	13	(4)			
2599999	Total Unauthorized - Other non-U.S. Insurers#				1,041								17	17	24	(7)			
2699999	Total Unauthorized - Total Unauthorized				1,041								17	17	24	(7)			
4099999	Total Authorized, Unauthorized and Certified				8,033	326	13	28,090	211	10,867	44	111		39,662	120	39,542			
9999999	Totals				8,033	326	13	28,090	211	10,867	44	111		39,662	120	39,542			

NOTE:

A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

1 Name of Reinsurer	2 Commission Rate	3 Ceded Premium
1) General Reinsurance Corporation		6,222
2) _____		
3) _____		
4) _____		
5) _____		

B. Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on-the total recoverables, Line 9999999, Column 15, the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer).

1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated
1) General Reinsurance Corporation	38,951	6,222	Yes [ ] No [ X ]
2) Westport Insurance Company	506		Yes [ ] No [ X ]
3) Old Republic General Insurance Corporation	178		Yes [ ] No [ X ]
4) Alterra Reinsurance USA	5	284	Yes [ ] No [ X ]
5) Arch Reinsurance Company	3	210	Yes [ ] No [ X ]

### SCHEDULE F – PART 4

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						11 Total Due Cols. 5 + 10	12 Percentage Overdue Col. 10 / Col. 11	13 Percentage More Than 120 Days Overdue Col. 9 / Col.11
				5 Current	Overdue							
					6 1 to 29 Days	7 30 - 90 Days	8 91 - 120 Days	9 Over 120 Days	10 Total Overdue Cols. 6 + 7 + 8 + 9			
13-2673100	22039	General Reinsurance Corporation	DE	309						309		
36-6067575	24139	Old Republic General Insurance Corp	IL	5						5		
48-0921045	39845	Westport Insurance Corporation	MO	25						25		
0999999	Total Authorized - Other U.S. Unaffiliated Insurers			339						339		
1399999	Total Authorized - Total Authorized			339						339		
4099999	Total Authorized, Unauthorized and Certified			339						339		
9999999	Totals			339						339		

### SCHEDULE F – PART 5

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Recoverable all Items Schedule F Part 3, Col. 15	Funds Held By Company Under Reinsurance Treaties	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Ceded Balances Payable	Miscellaneous Balances Payable	Trust Funds and Other Allowed Offset Items	Total Collateral and Offsets Allowed (Cols. 6 + 7 + 9 + 10 + 11 but not in Excess of Col. 5)	Provision for Unauthorized Reinsurance (Col. 5 minus Col. 12)	Recoverable Paid Losses & LAE Expenses Over 90 Days past Due not in Dispute	20 % of Amount in Col. 14	20% of Amount in Dispute Included in Column 5	Provision for Overdue Reinsurance (Col. 15 plus Col 16)	Total Provision for Reinsurance Ceded to Unauthorized Reinsurers (Col. 13 plus Col. 17 but not in Excess of Col. 5)
AA-3194130	00000	Endurance Specialty Insurance, Ltd.	BM	2				2			2						
AA-1460023	00000	Tokio Millennium Re AG	CH	2				3			2						
AA-1128987	00000	BGS Services Limited / Lloyd's Syndicate #298	GB	1				2			1						
AA-3194130	00000	IOA Re, Inc.	BM	2				3			2						
AA-1120337	00000	Aspen Insurance UK Limited	BM	1				1									
AA-1128003	00000	Catlin UW / Llyod's Syndicate 2003	GB	4				6			4						
AA-1126780	00000	Lloyd's Syndicate 0780 (ADV)	GB	1				1			1						
AA-1120084	00000	Lloyd's Syndicate 1955 (BAR)	GB	1				1			1						
AA-1126006	00000	Lloyd's Syndicate 4472 (LIB)	GB	1				1			1						
AA-1126609	00000	Lloyd's Syndicate 609 (AUW)	GB	1				1			1						
AA-1129000	00000	Markel at Lloyd's, Zurich	GB	2				3			2						
1299999	Total Other Non-U.S. Insurers #			17			X X X	24			17						
1399999	Total Affiliates and Others			17			X X X	24			17						
9999999	Totals			17			X X X	24			17						

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1. Amounts in dispute totaling \$ ..... 0 are included in Column 5.  
 2. Amounts in dispute totaling \$ ..... 0 are excluded from Column 14.

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
			<b>NONE</b>	

- NONE    Schedule F - Part 6 - Section 1**
- NONE    Schedule F - Part 6 - Section 2**
- NONE    Schedule F - Part 7**
- NONE    Schedule F - Part 8 Overdue Reinsurance**

**SCHEDULE F – PART 9**

## Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1	2	3
	As Reported (Net of Ceded)	Restatement Adjustments	Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12)	345,417,556		345,417,556
2. Premiums and considerations (Line 15)	39,828,565		39,828,565
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	339,099	(339,099)	
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	4,380,428		4,380,428
6. Net amount recoverable from reinsurers		39,542,702	39,542,702
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	389,965,648	39,203,603	429,169,251
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3)	138,410,126	39,211,898	177,622,024
10. Taxes, expenses, and other obligations (Lines 4 through 8)	21,414,076		21,414,076
11. Unearned premiums (Line 9)	64,223,166	111,444	64,334,610
12. Advance premiums (Line 10)	3,176,310		3,176,310
13. Dividends declared and unpaid (Line 11.1 and 11.2)	3,401,812		3,401,812
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)	119,739	(119,739)	
15. Funds held by company under reinsurance treaties (Line 13)			
16. Amounts withheld or retained by company for account of others (Line 14)	219,508		219,508
17. Provision for reinsurance (Line 16)			
18. Other liabilities	784,585		784,585
19. Total liabilities excluding protected cell business (Line 26)	231,749,322	39,203,603	270,952,925
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	158,216,326	X X X	158,216,326
22. Totals (Line 38)	389,965,648	39,203,603	429,169,251

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? Yes [ ] No [X]

If yes, give full explanation:

.....  
.....  
.....

- NONE    Schedule H - Part 1**
- NONE    Schedule H - Part 2, 3 and 4**
- NONE    Schedule H - Part 5**
- NONE    Schedule P - Part 1A Homeowners/Farmowners**
- NONE    Schedule P - Part 1B Private Passenger**
- NONE    Schedule P - Part 1C Commercial Auto**

**SCHEDULE P – PART 1D – WORKERS' COMPENSATION****(EXCLUDING EXCESS WORKERS' COMPENSATION)****(\$000 omitted)**

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	X X X	X X X	X X X	2,026	558	258	15	135		17	1,846	X X X
2. 2006	159,213	11,915	147,298	84,058	620	5,914	4	16,840		2,207	106,188	14,343
3. 2007	136,208	11,343	124,865	83,008	3,358	5,030	23	16,824		2,454	101,481	12,215
4. 2008	118,728	9,972	108,756	70,009	590	4,091	20	16,597		1,365	90,087	9,894
5. 2009	101,670	7,173	94,497	69,116		3,838		13,172		1,127	86,126	8,609
6. 2010	91,451	8,028	83,423	66,445	1,411	3,401	29	13,593		710	81,999	8,130
7. 2011	92,459	7,451	85,008	67,382		4,434		13,409		1,178	85,225	8,205
8. 2012	102,597	8,432	94,165	65,752	506	4,610	17	13,413		627	83,252	8,359
9. 2013	111,600	8,778	102,822	59,045		4,370		13,499		492	76,914	8,381
10. 2014	126,456	7,849	118,607	43,517		3,794		13,515		291	60,826	8,530
11. 2015	135,250	8,033	127,217	23,490		2,303		11,057		33	36,850	8,040
12. Totals	X X X	X X X	X X X	633,848	7,043	42,043	108	142,054		10,501	810,794	X X X

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	21,821	11,864	200		408	119	20		1,988			12,454	97
2. 2006	461		103		41		10		57			672	16
3. 2007	1,818		202		76		2		200			2,298	15
4. 2008	1,500		178	72	81		3		162			1,852	22
5. 2009	7,501	4,235	141	79	146	28	11		736			4,193	34
6. 2010	5,772	3,001	356	187	142	12	19		594			3,683	52
7. 2011	3,851		726	414	209		46	6	424			4,836	69
8. 2012	13,891	8,052	1,207	220	418	23	45	7	1,447			8,706	119
9. 2013	11,861	779	4,201	1,923	740	22	90	8	1,473			15,633	229
10. 2014	16,176		10,399	2,826	1,298		128	10	2,402			27,567	531
11. 2015	21,786		31,334	5,147	2,178		409	13	5,959			56,506	2,110
12. Totals	106,438	27,931	49,047	10,868	5,737	204	783	44	15,442			138,400	3,294

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	X X X	X X X	X X X	X X X	X X X	X X X			X X X	10,157	2,297
2. 2006	107,484	624	106,860	67.510	5.237	72.547				564	108
3. 2007	107,160	3,381	103,779	78.674	29.807	83.113				2,020	278
4. 2008	92,621	682	91,939	78.011	6.839	84.537				1,606	246
5. 2009	94,661	4,342	90,319	93.106	60.533	95.579				3,328	865
6. 2010	90,322	4,640	85,682	98.765	57.798	102.708				2,940	743
7. 2011	90,481	420	90,061	97.861	5.637	105.944				4,163	673
8. 2012	100,783	8,825	91,958	98.232	104.661	97.656				6,826	1,880
9. 2013	95,279	2,732	92,547	85.375	31.123	90.007				13,360	2,273
10. 2014	91,229	2,836	88,393	72.143	36.132	74.526				23,749	3,818
11. 2015	98,516	5,160	93,356	72.840	64.235	73.383				47,973	8,533
12. Totals	X X X	X X X	X X X	X X X	X X X	X X X			X X X	116,686	21,714

- NONE Schedule P - Part 1E Commercial Multiple Peril**
- NONE Schedule P - Part 1F - Section 1 Med. Prof. Liab. Occurrence**
- NONE Schedule P - Part 1F - Section 2 Med. Prof. Liab. Claims-Made**
- NONE Schedule P - Part 1G Special Liability**
- NONE Schedule P - Part 1H - Section 1 Other Liab. Occurrence**
- NONE Schedule P - Part 1H - Section 2 Other Liab. Claims-Made**
- NONE Schedule P - Part 1I Special Property**
- NONE Schedule P - Part 1J Auto Physical Damage**
- NONE Schedule P - Part 1K Fidelity/Surety**
- NONE Schedule P - Part 1L Other**
- NONE Schedule P - Part 1M International**
- NONE Schedule P - Part 1N Nonproportional Assumed Prop.**
- NONE Schedule P - Part 1O Nonproportional Assumed Liab.**
- NONE Schedule P - Part 1P Nonproportional Assumed Fin. Lines**
- NONE Schedule P - Part 1R - Section 1 Prod. Liab. Occurrence**
- NONE Schedule P - Part 1R - Section 2 Prod. Liab. Claims-Made**
- NONE Schedule P - Part 1S Financial Guaranty/Mortgage Guaranty**
- NONE Schedule P - Part 1T - Warranty**

**SCHEDULE P – PART 2A – HOMEOWNERS/FARMOWNERS**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015	11 One Year	12 Two Year
1. Prior												
2. 2006												
3. 2007	XXX											
4. 2008	XXX	XXX										
5. 2009	XXX	XXX	XXX									
6. 2010	XXX	XXX	XXX	XXX								
7. 2011	XXX	XXX	XXX	XXX	XXX							
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

**SCHEDULE P – PART 2B – PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015	11 One Year	12 Two Year
1. Prior												
2. 2006												
3. 2007	XXX											
4. 2008	XXX	XXX										
5. 2009	XXX	XXX	XXX									
6. 2010	XXX	XXX	XXX	XXX								
7. 2011	XXX	XXX	XXX	XXX	XXX							
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

**SCHEDULE P – PART 2C – COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015	11 One Year	12 Two Year
1. Prior												
2. 2006												
3. 2007	XXX											
4. 2008	XXX	XXX										
5. 2009	XXX	XXX	XXX									
6. 2010	XXX	XXX	XXX	XXX								
7. 2011	XXX	XXX	XXX	XXX	XXX							
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015	11 One Year	12 Two Year
1. Prior	141,463	121,093	110,543	102,477	94,742	94,207	92,310	89,491	86,648	86,304	(344)	(3,187)
2. 2006	113,178	105,827	104,289	97,740	94,709	94,301	91,240	90,962	89,704	89,963	259	(999)
3. 2007	XXX	107,830	102,174	94,395	92,676	89,299	86,576	86,168	88,765	86,755	(2,010)	587
4. 2008	XXX	XXX	84,231	85,750	83,289	77,607	76,653	76,486	75,744	75,180	(564)	(1,306)
5. 2009	XXX	XXX	XXX	84,563	81,644	76,090	76,042	75,567	76,211	76,411	200	844
6. 2010	XXX	XXX	XXX	XXX	76,022	70,119	71,877	71,614	71,564	71,495	(69)	(119)
7. 2011	XXX	XXX	XXX	XXX	XXX	74,526	72,740	76,045	75,607	76,228	621	183
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX	72,829	70,713	74,930	77,098	2,168	6,385
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	68,900	70,847	77,575	6,728	8,675
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	71,727	72,476	749	XXX
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	76,340	XXX	XXX
12. Totals											7,738	11,063

**SCHEDULE P – PART 2E – COMMERCIAL MULTIPLE PERIL**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015	11 One Year	12 Two Year
1. Prior												
2. 2006												
3. 2007	XXX											
4. 2008	XXX	XXX										
5. 2009	XXX	XXX	XXX									
6. 2010	XXX	XXX	XXX	XXX								
7. 2011	XXX	XXX	XXX	XXX	XXX							
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

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

**NONE**    **Schedule P - Part 2I, 2J, 2K, 2L, 2M**

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

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

### SCHEDULE P – PART 3A – HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015			
1. Prior	000												
2. 2006													
3. 2007	XXX												
4. 2008	XXX	XXX											
5. 2009	XXX	XXX	XXX										
6. 2010	XXX	XXX	XXX	XXX									
7. 2011	XXX	XXX	XXX	XXX	XXX								
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

**NONE**

### SCHEDULE P – PART 3B – PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015			
1. Prior	000												
2. 2006													
3. 2007	XXX												
4. 2008	XXX	XXX											
5. 2009	XXX	XXX	XXX										
6. 2010	XXX	XXX	XXX	XXX									
7. 2011	XXX	XXX	XXX	XXX	XXX								
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

**NONE**

### SCHEDULE P – PART 3C – COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015			
1. Prior	000												
2. 2006													
3. 2007	XXX												
4. 2008	XXX	XXX											
5. 2009	XXX	XXX	XXX										
6. 2010	XXX	XXX	XXX	XXX									
7. 2011	XXX	XXX	XXX	XXX	XXX								
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

**NONE**

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015		
1. Prior	000	31,497	50,632	59,504	64,650	68,478	70,281	71,059	74,127	75,838	137	98
2. 2006	28,745	56,546	71,459	79,497	82,937	85,162	86,024	87,532	89,143	89,348	12,420	1,907
3. 2007	XXX	27,723	54,203	65,963	72,997	76,936	81,080	82,956	82,337	84,657	10,672	1,528
4. 2008	XXX	XXX	21,739	45,872	58,896	65,943	69,309	71,688	73,256	73,490	8,642	1,230
5. 2009	XXX	XXX	XXX	22,460	44,923	58,064	65,355	69,509	71,661	72,954	7,402	1,173
6. 2010	XXX	XXX	XXX	XXX	19,837	42,857	55,129	62,826	66,311	68,406	7,197	881
7. 2011	XXX	XXX	XXX	XXX	XXX	23,047	47,788	61,476	68,165	71,816	7,291	845
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX	22,951	47,028	59,942	69,839	7,358	882
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22,356	47,655	63,415	7,320	832
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,720	47,311	6,924	1,075
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25,793	4,939	991

### SCHEDULE P – PART 3E – COMMERCIAL MULTIPLE PERIL

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015			
1. Prior	000												
2. 2006													
3. 2007	XXX												
4. 2008	XXX	XXX											
5. 2009	XXX	XXX	XXX										
6. 2010	XXX	XXX	XXX	XXX									
7. 2011	XXX	XXX	XXX	XXX	XXX								
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

**NONE**

**NONE**    **Schedule P - Part 3F Sec. 1 and 2, 3G, 3H Sec. 1 and 2**

**NONE**    **Schedule P - Part 3I, 3J, 3K, 3L, 3M**

**NONE**    **Schedule P - Part 3N, 3O, 3P**

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

**SCHEDULE P – PART 4A – HOMEOWNERS/FAROWNERS**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015
1. Prior										
2. 2006										
3. 2007	XXX									
4. 2008	XXX	XXX								
5. 2009	XXX	XXX	XXX							
6. 2010	XXX	XXX	XXX	XXX						
7. 2011	XXX	XXX	XXX	XXX						
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

**SCHEDULE P – PART 4B – PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015
1. Prior										
2. 2006										
3. 2007	XXX									
4. 2008	XXX	XXX								
5. 2009	XXX	XXX	XXX							
6. 2010	XXX	XXX	XXX	XXX						
7. 2011	XXX	XXX	XXX	XXX						
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

**SCHEDULE P – PART 4C – COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015
1. Prior										
2. 2006										
3. 2007	XXX									
4. 2008	XXX	XXX								
5. 2009	XXX	XXX	XXX							
6. 2010	XXX	XXX	XXX	XXX						
7. 2011	XXX	XXX	XXX	XXX						
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015
1. Prior	57,910	36,777	26,356	17,688	8,509	5,619	2,624	1,082	280	220
2. 2006	41,993	19,954	12,371	7,749	4,440	4,387	1,581	891	113	113
3. 2007	XXX	37,123	18,264	9,326	4,836	2,529	728	299	646	204
4. 2008	XXX	XXX	27,073	12,179	6,547	3,130	966	457	408	109
5. 2009	XXX	XXX	XXX	26,746	9,312	2,444	1,701	293	325	73
6. 2010	XXX	XXX	XXX	XXX	19,521	3,960	2,281	872	601	188
7. 2011	XXX	XXX	XXX	XXX	XXX	22,862	5,413	3,086	998	352
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX	24,958	7,272	2,172	1,025
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22,212	4,772	2,360
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26,713	7,691
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26,583

**SCHEDULE P – PART 4E – COMMERCIAL MULTIPLE PERIL**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015
1. Prior										
2. 2006										
3. 2007	XXX									
4. 2008	XXX	XXX								
5. 2009	XXX	XXX	XXX							
6. 2010	XXX	XXX	XXX	XXX						
7. 2011	XXX	XXX	XXX	XXX						
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

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

**NONE**    **Schedule P - Part 4I, 4J, 4K, 4L, 4M**

**NONE**    **Schedule P - Part 4N, 4O, 4P**

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

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

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

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

**SCHEDULE P – PART 5D – WORKERS' COMPENSATION****(EXCLUDING EXCESS WORKERS' COMPENSATION)****SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
1. Prior	4,642	853	351	112	49	89	48	31	44	137
2. 2006	8,380	11,633	12,124	12,267	12,325	12,357	12,388	12,404	12,415	12,420
3. 2007	XXX	7,247	10,116	10,386	10,496	10,555	10,589	10,621	10,666	10,672
4. 2008	XXX	XXX	5,904	8,133	8,436	8,575	8,617	8,640	8,626	8,642
5. 2009	XXX	XXX	XXX	5,017	6,866	7,214	7,316	7,367	7,384	7,402
6. 2010	XXX	XXX	XXX	XXX	4,978	6,800	7,055	7,152	7,181	7,197
7. 2011	XXX	XXX	XXX	XXX	XXX	5,018	6,883	7,149	7,248	7,291
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX	5,253	7,010	7,217	7,358
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,149	7,012	7,320
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,122	6,924
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,939

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
1. Prior	1,482	737	402	298	272	192	158	139	116	97
2. 2006	3,372	601	262	144	91	63	35	28	20	16
3. 2007	XXX	2,852	510	237	143	87	56	31	20	15
4. 2008	XXX	XXX	2,218	489	244	122	81	57	38	22
5. 2009	XXX	XXX	XXX	1,978	515	206	117	62	47	34
6. 2010	XXX	XXX	XXX	XXX	1,910	424	191	93	68	52
7. 2011	XXX	XXX	XXX	XXX	XXX	1,980	426	199	110	69
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX	1,867	435	255	119
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,960	505	229
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,085	531
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,110

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
1. Prior	786	64	17	8	12	9	14	24	3	216
2. 2006	13,781	14,277	14,313	14,316	14,320	14,322	14,324	14,339	14,341	14,343
3. 2007	XXX	11,585	12,152	12,149	12,158	12,160	12,162	12,165	12,215	12,215
4. 2008	XXX	XXX	9,395	9,915	9,946	9,948	9,948	9,948	9,893	9,894
5. 2009	XXX	XXX	XXX	8,209	8,564	8,591	8,603	8,604	8,606	8,609
6. 2010	XXX	XXX	XXX	XXX	7,748	8,107	8,128	8,127	8,130	8,130
7. 2011	XXX	XXX	XXX	XXX	XXX	7,770	8,157	8,196	8,204	8,205
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX	7,961	8,338	8,356	8,359
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,894	8,361	8,381
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,188	8,530
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,040

- NONE    Schedule P - Part 5E - Section 1-3**
- NONE    Schedule P - Part 5F - Section 1A-3A**
- NONE    Schedule P - Part 5F - Section 1B-3B**
- NONE    Schedule P - Part 5H - Section 1A-3A**
- NONE    Schedule P - Part 5H - Section 1B-3B**
- NONE    Schedule P - Part 5R - Section 1A-3A**
- NONE    Schedule P - Part 5R - Section 1B-3B**
- NONE    Schedule P - Part 5T - Warranty**

## SCHEDULE P – PART 6C – COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

### SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015	
1. Prior											
2. 2006											
3. 2007	XXX										
4. 2008	XXX	XXX									
5. 2009	XXX	XXX	XXX								
6. 2010	XXX	XXX	XXX	XXX							
7. 2011	XXX	XXX	XXX	XXX	XXX						
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

### SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015	
1. Prior											
2. 2006											
3. 2007	XXX										
4. 2008	XXX	XXX									
5. 2009	XXX	XXX	XXX								
6. 2010	XXX	XXX	XXX	XXX							
7. 2011	XXX	XXX	XXX	XXX	XXX						
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

## SCHEDULE P – PART 6D – WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

### SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015	
1. Prior	5,535	550	(536)	91	(158)	(1)	(3)				
2. 2006	153,678	159,160	159,425	159,426	159,403	159,390	159,390	159,390	159,390	159,390	
3. 2007	XXX	130,176	149,483	149,379	149,361	149,355	149,355	149,355	149,355	149,355	
4. 2008	XXX	XXX	99,692	110,958	112,318	112,283	112,243	112,243	112,243	112,243	
5. 2009	XXX	XXX	XXX	90,416	98,234	98,411	98,382	98,382	98,382	98,382	
6. 2010	XXX	XXX	XXX	XXX	82,472	93,881	94,058	94,045	94,045	94,045	
7. 2011	XXX	XXX	XXX	XXX	XXX	80,928	95,075	95,451	95,450	95,450	
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX	88,345	104,222	104,554	104,560	6
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	95,360	114,641	115,255	614
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	106,844	129,195	22,351
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	112,279	112,279
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	135,250
13. Earned Premiums (Sc P-Pt 1)	159,213	136,208	118,728	101,670	91,451	92,459	102,597	111,600	126,456	135,250	XXX

### SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015	
1. Prior	318	(2,582)	(472)	(308)	(14)						
2. 2006	11,197	14,842	14,191	12,357	12,242	11,800	11,443	11,093	11,093	11,093	
3. 2007	XXX	10,280	11,884	11,874	11,872	11,871	11,871	11,871	11,871	11,871	
4. 2008	XXX	XXX	9,490	10,527	10,648	10,645	10,642	10,642	10,642	10,642	
5. 2009	XXX	XXX	XXX	8,288	8,976	8,991	8,989	8,989	8,989	8,989	
6. 2010	XXX	XXX	XXX	XXX	7,350	8,325	8,340	8,339	8,339	8,339	
7. 2011	XXX	XXX	XXX	XXX	XXX	6,907	8,126	8,157	8,157	8,157	
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX	7,559	8,869	8,891	8,891	
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,788	9,041	9,078	37
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,574	7,813	1,239
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,757	6,757
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,033
13. Earned Premiums (Sc P-Pt 1)	11,915	11,343	9,971	7,173	8,028	7,451	8,431	8,778	7,849	8,033	XXX

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

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

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

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

## SCHEDULE P – PART 7A – PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 omitted)

### SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners						
2. Private Passenger Auto Liability/Medical						
3. Commercial Auto/Truck Liability/Medical						
4. Workers' Compensation	138,400	2,065	1.492	128,856		
5. Commercial Multiple Peril						
6. Medical Professional Liability - Occurrence						
7. Medical Professional Liability - Claims-made						
8. Special Liability						
9. Other Liability - Occurrence						
10. Other Liabilities - Claims-made						
11. Special Property						
12. Auto Physical Damage						
13. Fidelity/ Surety						
14. Other						
15. International						
16. Reinsurance-Nonproportional Assumed Property	X X X	X X X	X X X	X X X	X X X	X X X
17. Reinsurance-Nonproportional Assumed Liability	X X X	X X X	X X X	X X X	X X X	X X X
18. Reinsurance-Nonproportional Assumed Financial Lines	X X X	X X X	X X X	X X X	X X X	X X X
19. Products Liability - Occurrence						
20. Products Liability - Claims-made						
21. Financial Guaranty/Mortgage Guaranty						
22. Warranty						
23. Totals	138,400	2,065	1.492	128,856		

### SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
1. Prior	8,490	6,196	5,743	6,255	6,814	7,687	5,708	6,410	6,478	6,399
2. 2006										
3. 2007	X X X									
4. 2008	X X X	X X X								
5. 2009	X X X	X X X	X X X							
6. 2010	X X X	X X X	X X X	X X X						
7. 2011	X X X	X X X	X X X	X X X	X X X					
8. 2012	X X X	X X X	X X X	X X X	X X X	X X X				
9. 2013	X X X	X X X	X X X	X X X	X X X	X X X	X X X			
10. 2014	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		
11. 2015	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	

### SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
1. Prior	154	155	74	56						
2. 2006										
3. 2007	X X X									
4. 2008	X X X	X X X								
5. 2009	X X X	X X X	X X X							
6. 2010	X X X	X X X	X X X	X X X						
7. 2011	X X X	X X X	X X X	X X X	X X X					
8. 2012	X X X	X X X	X X X	X X X	X X X	X X X				
9. 2013	X X X	X X X	X X X	X X X	X X X	X X X	X X X			
10. 2014	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		
11. 2015	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	

**SCHEDULE P – PART 7A**  
**PRIMARY LOSS SENSITIVE CONTRACTS (Continued)**

**SECTION 4**

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015
1. Prior	3,797	3,106	2,943	2,926	2,855	2,855	2,855	2,855	2,855	2,855
2. 2006										
3. 2007	XXX									
4. 2008	XXX	XXX								
5. 2009	XXX	XXX	XXX							
6. 2010	XXX	XXX	XXX	XXX						
7. 2011	XXX	XXX	XXX	XXX	XXX					
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 5**

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1 2006	2 2007	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015
1. Prior	698	216	(11)	71						
2. 2006										
3. 2007	XXX									
4. 2008	XXX	XXX								
5. 2009	XXX	XXX	XXX							
6. 2010	XXX	XXX	XXX	XXX						
7. 2011	XXX	XXX	XXX	XXX	XXX					
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

## SCHEDULE P – PART 7B – REINSURANCE LOSS SENSITIVE CONTRACTS

(\$000 omitted)

### SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners						
2. Private Passenger Auto Liability/Medical						
3. Commercial Auto/Truck Liability/Medical						
4. Workers' Compensation	138,400	2,065	1.492	128,856		
5. Commercial Multiple Peril						
6. Medical Professional Liability - Occurrence						
7. Medical Professional Liability - Claims-made						
8. Special Liability						
9. Other Liability - Occurrence						
10. Other Liabilities - Claims-made						
11. Special Property						
12. Auto Physical Damage						
13. Fidelity/ Surety						
14. Other						
15. International						
16. Reinsurance-Nonproportional Assumed Property						
17. Reinsurance-Nonproportional Assumed Liability						
18. Reinsurance-Nonproportional Assumed Financial Lines						
19. Products Liability - Occurrence						
20. Products Liability - Claims-made						
21. Financial Guaranty/Mortgage Guaranty						
22. Warranty						
23. Totals	138,400	2,065	1.492	128,856		

### SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
1. Prior										
2. 2006										
3. 2007	XXX									
4. 2008	XXX	XXX								
5. 2009	XXX	XXX	XXX							
6. 2010	XXX	XXX	XXX	XXX						
7. 2011	XXX	XXX	XXX	XXX	XXX					
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

### SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
1. Prior										
2. 2006										
3. 2007	XXX									
4. 2008	XXX	XXX								
5. 2009	XXX	XXX	XXX							
6. 2010	XXX	XXX	XXX	XXX						
7. 2011	XXX	XXX	XXX	XXX	XXX					
8. 2012	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE    Schedule P - Part 7B (Continued)**

## SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.

1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [ ] No [X]

If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:

1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? \$ \_\_\_\_\_

1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [ ] No [X]

1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [ ] No [X]

1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [ ] No [ ] N/A [X]

1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior		
1.602 2006		
1.603 2007		
1.604 2008		
1.605 2009		
1.606 2010		
1.607 2011		
1.608 2012		
1.609 2013		
1.610 2014		
1.611 2015		
1.612 Totals		

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No [ ]

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No [ ]

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [ ] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.

Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for: 5.1 Fidelity \$ \_\_\_\_\_  
5.2 Surety \$ \_\_\_\_\_  
 (in thousands of dollars)

6. Claim count information is reported per claim or per claimant. (indicate which). Per Claimant \_\_\_\_\_

If not the same in all years, explain in Interrogatory 7.

7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [ ] No [X]

7.2 An extended statement may be attached

.....  
 .....  
 .....

**NONE    Schedule T - Part 2**

## 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
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)	*
3490	Beacon Mutual Insurance Group	24017	05-0458697				Beacon Mutual Insurance Company	RI						
3490	Beacon Mutual Insurance Group	11837	20-0317088				Castle Hill Insurance Company	RI	DS	Beacon Mutual Insurance Company	Ownership	100.0	Beacon Mutual Insurance Compa	
		00000	06-1490630				BMIC Service Corp	RI	DS	Beacon Mutual Insurance Company	Ownership	100.0	Beacon Mutual Insurance Compa	

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Asterik	Explanation
	NONE

**NONE    Schedule Y - Part 2**

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	<u>Responses</u>
<b>MARCH FILING</b>	
1. Will an actuarial opinion be filed by March 1?	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
<b>APRIL FILING</b>	
5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6. Will Management's Discussion and Analysis be filed by April 1?	YES
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
<b>MAY FILING</b>	
8. Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	WAIVED
<b>JUNE FILING</b>	
9. Will an audited financial report be filed by June 1?	YES
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
<b>AUGUST FILING</b>	
11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	YES

The following supplemental reports are required to be filed as part of your annual 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.

<b>MARCH FILING</b>	
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15. Will Supplemental A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17. Will the Premiums Attributed to Protected Cells be filed by March 1?	NO
18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
23. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
25. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
26. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
27. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
<b>APRIL FILING</b>	
28. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
29. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
30. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
31. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
32. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
33. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	NO
<b>AUGUST FILING</b>	
34. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO

**Explanation:**Explanation 13: N/A

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Explanation 14: N/A

Explanation 15: N/A

Explanation 16: N/A

Explanation 17: N/A

Explanation 18: N/A

Explanation 19: N/A

Explanation 22: N/A

Explanation 23: N/A

Explanation 24: N/A

Explanation 25: N/A

Explanation 26: N/A

Explanation 27: N/A

Explanation 28: N/A

Explanation 29: N/A

Explanation 30: N/A

Explanation 31: N/A

Explanation 32: N/A

Explanation 33: N/A

Explanation 34: N/A

**Bar Code:**



24017201520100000



24017201542000000



24017201524000000



24017201536000000



24017201545500000



24017201549000000



24017201538500000



24017201540100000

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES



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24017201540000000



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**OVERFLOW PAGE FOR WRITE-INS**

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