

PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

## **ANNUAL STATEMENT**

For the Year Ended December 31, 2014 OF THE CONDITION AND AFFAIRS OF THE

### **PAWTUCKET INSURANCE COMPANY**

NAIC Group Code 0497 ,	0497 NAIC Company Co	ode 14931 Empl	loyer's ID Number 05-0197250
(Current Period)	(Prior Period)		
Organized under the Laws of	Rhode Island	, State of Domicile or Port of E	Entry Rhode Island
Country of Domicile		United States	
Incorporated/Organized	06/19/1848 (	Commenced Business	02/10/1849
Statutory Home Office	25 Maple Street		wtucket, RI, US 02860-2104
	(Street and Number)	(City)	or Town, State, Country and Zip Code)
Main Administrative Office	25 Maple Street	Pawtucket, RI, US 02860-2	
	(Street and Number)	(City or Town, State, Country and Zip	
	P. O. Box 820 , and Number or P.O. Box)		ket, RI, US 02862-0820
Primary Location of Books and Records	,	Pawtucket, RI, US 02	vn, State, Country and Zip Code) 2860-2104 401-725-5600
	(Street and Number)	(City or Town, State, Country	
Internet Web Site Address	ŴW	w.pawtucketinsurance.com	
Statutory Statement Contact	Laura Leigh Colangelo		401-495-6014
	(Name)		Code) (Telephone Number) (Extension)
NBIC-ComplianceInbo> (E-Mail Address			-728-0680
(E-Mail Address	,		ax Number)
	OFFICE		
Name	Title	Name	Title
Todd Christopher Hart,	Chief Executive Officer	Stewart Horner Steffey Jr.	
Kirk Howard Lusk,	Chief Financial Officer	Stephen Donald Zubiago	,Secretary
	OTHER OF	FICERS	
,	DIRECTORS OR		,
Stewart Horner Steffey Jr.	Arnold Larry Chavkin	Alex Anatol Fridlyand	Srdjan Vukovic
Kristin Kelly Gilbert	Todd Christopher Hart	Dale Stephen Hammond	
		i	
State ofRHODE ISLAND.			
County ofPROVIDENCE	SS		
County ofPROVIDENCE			
The officers of this reporting entity, being duly sy	worn, each depose and say that they are the	described officers of said reporting e	entity, and that on the reporting period stated
above, all of the herein described assets were the			
that this statement, together with related exhibits liabilities and of the condition and affairs of the s			
and have been completed in accordance with th			
may differ; or, (2) that state rules or regulations			
knowledge and belief, respectively. Furthermore			
when required, that is an exact copy (except for regulators in lieu of or in addition to the enclosed		) of the enclosed statement. The ele	ctronic filing may be requested by various
Todd Christopher Hart	Kirk Howard		Stephen Donald Zubiago
Chief Executive Officer	Chief Financia		Stephen Donaid Zublago Secretary
	omer i manoia	a. Is this an origina	
		L 17	•

Subscribed and sworn to before me this \_\_\_\_\_\_day of

b. If no:1. State the amendment number

Date filed
 Number of pages attached

	ASSETS						
			Current Year		Prior Year		
		1	2	3	4		
		A I .		Net Admitted Assets	Net Admitted		
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Assets		
1.	Bonds (Schedule D)			4,833			
2.	Stocks (Schedule D):						
	2.1 Preferred stocks	0		0	0		
	2.2 Common stocks	0		0	0		
3.	Mortgage loans on real estate (Schedule B):						
	3.1 First liens			0	0		
	3.2 Other than first liens			0			
4.	Real estate (Schedule A):						
	4.1 Properties occupied by the company (less						
	\$ encumbrances)			0	0		
	4.2 Properties held for the production of income						
	(less \$	1 040 000		1 940 000	1 007 500		
				1,840,000			
	4.3 Properties held for sale (less						
	\$ encumbrances)			0	0		
5.	Cash (\$1,191,862 , Schedule E-Part 1), cash equivalents						
	(\$0 , Schedule E-Part 2) and short-term						
		4 005 000		4 995 999	0 007 (70		
	investments (\$						
6.	Contract loans (including \$			0	0		
7.	Derivatives (Schedule DB)			0	0		
8.	Other invested assets (Schedule BA)						
9.	Receivables for securities						
10.	Securities lending reinvested collateral assets (Schedule DL)				0		
11.	Aggregate write-ins for invested assets						
12.	Subtotals, cash and invested assets (Lines 1 to 11)		0				
13.	Title plants less \$						
	only)			0	0		
14.	Investment income due and accrued						
15.	Premiums and considerations:						
	15.1 Uncollected premiums and agents' balances in the course of						
	collection			0	0		
	15.2 Deferred premiums, agents' balances and installments booked but						
	deferred and not yet due (including \$earned						
	but unbilled premiums)			0	0		
	15.3 Accrued retrospective premiums			0	0		
16.	Reinsurance:						
	16.1 Amounts recoverable from reinsurers	185 568			563 991		
	16.2 Funds held by or deposited with reinsured companies						
	16.3 Other amounts receivable under reinsurance contracts				0		
17.	Amounts receivable relating to uninsured plans				0		
18.1	Current federal and foreign income tax recoverable and interest thereon			0	0		
18.2	Net deferred tax asset			0	0		
19.	Guaranty funds receivable or on deposit			0	0		
					U م		
20.	Electronic data processing equipment and software			0	U		
21.	Furniture and equipment, including health care delivery assets						
	(\$)				0		
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	0		
23.	Receivables from parent, subsidiaries and affiliates						
24.	Health care (\$				0		
	Aggregate write-ins for other-than-invested assets						
25.				0,002			
26.	Total assets excluding Separate Accounts, Segregated Accounts and						
	Protected Cell Accounts (Lines 12 to 25)			5,210,694	4,634,576		
27.	From Separate Accounts, Segregated Accounts and Protected						
	Cell Accounts			0	0		
28.	Total (Lines 26 and 27)	14,331,033	9,120,339	5,210,694	4,634,576		
	S OF WRITE-INS	,,,,	2, 120,000	±,±10,001	.,		
				_	-		
1101.					0		
1102.					0		
1103.				0	0		
	Summary of remaining write-ins for Line 11 from overflow page	0		0	C		
1198.	,	0		0	r		
	Totals (Lines 1101 through 1103 plus 1108) (Line 11 shous)	0	-	-	0		
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	F 101 F05	E 404 E05	~			
1199. 2501.	PENSION ASSET			0	0		
1199. 2501.					0 		
<u>1199.</u> 2501. 2502.	PENSION ASSET						
1198. <u>1199.</u> 2501. 2502. 2503. 2598.	PENSION ASSET			6,002 0			

## ASSETS

## LIABILITIES, SURPLUS AND OTHER FUNDS

LIADILITILS, SORPLOS AND OTTILK I	1	2
1. Losses (Part 2A, Line 35, Column 8)	Current Year	Prior Year
<ol> <li>Losses (Part 2A, Line 35, Column 6)</li> <li>Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)</li> </ol>		
<ol> <li>Consulate payable of paid losses and loss adjustment expenses (schedule 1, Part 1, Column 0)</li> <li>Loss adjustment expenses (Part 2A, Line 35, Column 9)</li> </ol>		
<ol> <li>Commissions payable, contingent commissions and other similar charges</li></ol>		
<ol> <li>Other expenses (excluding taxes, licenses and fees)</li> </ol>		
<ol> <li>Taxes, licenses and fees (excluding federal and foreign income taxes)</li> </ol>		
7.1 Current federal and foreign income taxes (including \$		
7.2 Net deferred tax liability		
8. Borrowed money \$		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of		
\$ and including warranty reserves of \$ and accrued accident and		
health experience rating refunds including \$ for medical loss ratio rebate per the Public Health		
Service Act)		0
10. Advance premium		0
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)		
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)		
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ certified) (Schedule F, Part 8)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities		
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)		
29. Aggregate write-ins for special surplus funds		
30. Common capital stock		
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds		
33. Surplus notes		
<ul> <li>34. Gross paid in and contributed surplus</li></ul>		
	(2,570,110)	
36. Less treasury stock, at cost:		0
36.1         shares common (value included in Line 30 \$)           36.2         shares preferred (value included in Line 31 \$)		0
		0
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	5,210,693	439,448
38. Totals (Page 2, Line 28, Col. 3) DETAILS OF WRITE-INS	3,210,093	4,634,576
		0
2501. 2502.		
2502.		
2593. 2598. Summary of remaining write-ins for Line 25 from overflow page		U
2598. Summary of remaining wheteins for Line 25 from overnow page		
2999. Totais (Lines 2501 through 2505 plus 2596) (Line 25 above) 2901.		
2901.		
2902.		
		U
2998. Summary of remaining write-ins for Line 29 from overflow page		L (
3201.		
3202.		
3203. 3298. Summary of remaining write-ins for Line 32 from overflow page		
		L C
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)	U	

### ANNUAL STATEMENT FOR THE YEAR 2014 OF THE PAWTUCKET INSURANCE COMPANY

### STATEMENT OF INCOME

		1 Current Year	2 Prior Year
1.	UNDERWRITING INCOME Premiums earned (Part 1, Line 35, Column 4)	0	0
	DEDUCTIONS:	440.750	(404 504)
	Losses incurred (Part 2, Line 35, Column 7) Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		(104,531) 
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)		
5.	Aggregate write-ins for underwriting deductions		0
_	Total underwriting deductions (Lines 2 through 5)	235,288	551,206
	Net income of protected cells		0
0.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)		(001,200)
	INVESTMENT INCOME		
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17)		
	Net realized capital gains (losses) less capital gains tax of \$	3,750	1,848
11.	Net investment gain (loss) (Lines 9 + 10)		
	OTHER INCOME		
12.	Net gain (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$		0
13.	Finance and service charges not included in premiums		0
	Aggregate write-ins for miscellaneous income	0	0
	Total other income (Lines 12 through 14)	0	0
	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)		
	Dividends to policyholders		0
10.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)		
19.	Federal and foreign income taxes incurred	(1,007,349)	0
20.	Net income (Line 18 minus Line 19) (to Line 22)	1,375,058	(234,038)
	CAPITAL AND SURPLUS ACCOUNT		
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)		
	Net income (from Line 20)		(234,038)
	Net transfers (to) from Protected Cell accounts Change in net unrealized capital gains or (losses) less capital gains tax of \$		0
	Change in net unrealized toreign exchange capital gains (loss)		
26.	Change in net deferred income tax	(531,964)	
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)		1,318,706
	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
	Change in surplus notes		0 0
	Cumulative effect of changes in accounting principles		
	Capital changes:		
	32.1 Paid in		0
			0
33	32.3 Transferred to surplus		U
55.	33.1 Paid in		0
	33.2 Transferred to capital (Stock Dividend)		0
	33.3 Transferred from capital		0
			0
	Dividends to stockholders		0 0
	Aggregate write-ins for gains and losses in surplus	0	0
	Change in surplus as regards policyholders for the year (Lines 22 through 37)	(359,574)	284,773
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	79,868	439,442
	LS OF WRITE-INS		-
			0 ∩
	Summary of remaining write-ins for Line 5 from overflow page		0
	Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0
			0
			U
	Summary of remaining write-ins for Line 14 from overflow page	0	0
	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0
			0
			0
			0
		0  0	0 0
5199.	Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)	U	0

## CASH FLOW

		1 Current Year	2 Prior Year
	Orach form On anti-		Phor rear
1	Cash from Operations Premiums collected net of reinsurance	0	0
			0 
	Net investment income Miscellaneous income		
			372,853
	Total (Lines 1 through 3) Benefit and loss related payments		
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.		
	Commissions, expenses paid and aggregate write-ins for deductions		
	Dividends paid to policyholders		
	Federal and foreign income taxes paid (recovered) net of \$tax on capital gains (losses)		D
	Total (Lines 5 through 9)	/	1,468,094
	Net cash from operations (Line 4 minus Line 10)	2,815,680	(1,095,241)
11.		2,013,000	(1,055,241)
10	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid: 12.1 Bonds	2 886	
	12.2 Stocks		
	12.3 Mortgage loans	1	
	12.4 Real estate	1	0
	12.5 Other invested assets		0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	1 1	0
	12.7 Miscellaneous proceeds		1.848
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		3.772
13	Cost of investments acquired (long-term only):		
15.	13.1 Bonds	0	0
	13.2 Stocks		0
	13.3 Mortgage loans		0
	13.4 Real estate		0
	13.5 Other invested assets		0
	13.6 Miscellaneous applications		0
	13.7 Total investments acquired (Lines 13.1 to 13.6)		0
14	Net increase (decrease) in contract loans and premium notes		0
			3,772
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	2,000	3,112
16	Cash from Financing and Miscellaneous Sources		
10.	Cash provided (applied): 16.1 Surplus notes, capital notes	0	0
	16.2 Capital and paid in surplus, less treasury stock		0
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0
	16.5 Dividends to stockholders		
		(	659,325
17	16.6 Other cash provided (applied)		659,325
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(2,331,041)	008,320
10	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(122 /75)	(122 111)
19.	Cash, cash equivalents and short-term investments: 19.1 Beginning of year	2 027 175	0180 610
		1.905.000	2,037,475
	19.2 End of year (Line 18 plus Line 19.1)	1,303,000	2,001,410



#### ANNUAL STATEMENT FOR THE YEAR 2014 OF THE PAWTUCKET INSURANCE COMPANY

## UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

			Losses Paid L	ess Salvage		5	6	7	8
		1	2	3	4	5	8	,	Percentage of Losses
	Line of Business	Direct Business	- Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	(Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1.	Fire			0		0	0		
2.	Allied lines		0	0	0′	0	0	0	
3.	Farmowners multiple peril	0		0	0	0	0	0	
4.	Homeowners multiple peril								
5.	Commercial multiple peril			0					
6.	Mortgage guaranty	0	0	0	0	0	0	0	0.0
8.	Ocean marine	0	0	0	0	0	0	0	0.0
9.	Inland marine	0	0	0	0	0	0	0	
10.	Financial guaranty	0	0	0	0	0	0	0	0.0
11.1	Medical professional liability-occurrence	0	0	0	0	0	0	0	
11.2	Medical professional liability-claims-made	0	0	0	0	0	0	0	
12.	Earthquake	0	0	0	0	0	0	0	
13.	Group accident and health	0	0	0	0	0	0	0	
14.	Credit accident and health (group and individual)	0	0	0	0	0	0	0	
15.	Other accident and health	0	0	0	0	0	0	0	
16.	Workers' compensation	0	0	0	0	0	0	0	
17.1	Other liability-occurrence	0	0	(32,440)				(3,560)	
17.2	Other liability-claims-made	0	0	0	0	0	0	0	
17.3	Excess workers' compensation	0	0	0	0	0	0	0	
18.1	Products liability-occurrence	0	0	0	0	0	0	0	0.0
18.2	Products liability-claims-made	0	0	0	0	0	0	0	
	2 Private passenger auto liability	(1,260)	0	0	(1,260)	0	0	(1,260)	
	4 Commercial auto liability	0	0	0	0	0	0	0	
21.	Auto physical damage		0	0	(951)	0	0		
22.	Aircraft (all perils)	0	0	0	0	0	0	0	0.0
23.	Fidelity	0	0	0	0	0	0	0	0.0
24.	Surety	0	0	0	0	0	0	0	0.0
26.	Burglary and theft	0	0	0	0	0	0	0	0.0
27.	Boiler and machinery	0	0	0	0	0	0	0	0.0
28.	Credit	0	0	0	0	0	0	0	0.0
29.	International	0	0	0	0	0	0	0	0.0
30.	Warranty		<u>0</u>  .	Ô	0	Ô	0	Ô	0.0
31.	Reinsurance-nonproportional assumed property		<u>0</u>  .	0	0	Ô	0	Ô	0.0
32.	Reinsurance-nonproportional assumed liability	XXX	0	0	0	0	0	0	0.0
33.	Reinsurance-nonproportional assumed financial lines	XXX	<u>0</u>  .	Ô	0	Ô	0	Ô	0.0
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0.0
35.	TOTALS	138,792	293	(188,606)	327,691	190,000	406,933	110,758	0.0
	OF WRITE-INS				_		_	^	
3401.					0	0	0	0	0.0
3402.					0	0	0	0	0.0
3403.		·····	·····	~	0	0	0	0	0.0
3498.	Sum. of remaining write-ins for Line 34 from overflow page	0	Ô	0	0	0	0	0	0.0
3499.	Totals (Lines 3401 through 3403 + 3498) (Line 34 above)	0	0	0	0	0	0	0	0.0

#### ANNUAL STATEMENT FOR THE YEAR 2014 OF THE PAWTUCKET INSURANCE COMPANY

## UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		Reporte	d Losses		In	ncurred But Not Reported		8	9
	1	2	3	4	5	6	7	-	
Line of Business	Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 +5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1. Fire				0				0	
2. Allied lines				0				0	
3. Farmowners multiple peril				0				0	
4. Homeowners multiple peril									
5. Commercial multiple peril									
6. Mortgage guaranty				0				0	0
8. Ocean marine				0				0	0
9. Inland marine				0				0	0
10. Financial guaranty				0				0	0
11.1 Medical professional liability-occurrence				0				0	0
11.2 Medical professional liability-claims-made				0				0	0
12. Earthquake				0				0	0
13. Group accident and health				0				(a)0	0
14. Credit accident and health (group and individual)				0				0	0
15. Other accident and health				0				(a)0	0
16. Workers' compensation				0				0	0
17.1 Other liability-occurrence				0					
17.2 Other liability-claims-made				0				0	0
17.3 Excess workers' compensation				0				0	0
18.1 Products liability-occurrence				0				0	0
18.2 Products liability-claims-made				0				0	0
19.1,19.2 Private passenger auto liability				0				0	0
19.3,19.4 Commercial auto liability				0				0	0
21. Auto physical damage				0				0	0
22. Aircraft (all perils)				0				0	0
23. Fidelity				0				0	0
24. Surety				0				0	0
26. Burglary and theft				0				0	0
27. Boiler and machinery				0				0	0
28. Credit				0				0	0
29. International				0				0	0
30. Warranty				0				0	0
31. Reinsurance-nonproportional assumed property				0	XXX			0	0
32. Reinsurance-nonproportional assumed liability				0				0	0
33. Reinsurance-nonproportional assumed financial lines	XXX			0	XXX			0	l0
34. Aggregate write-ins for other lines of business		0	0	0	0	0	0	0	0
35. TOTALS	70,000	0	5,000	65,000	273,000	0	148,000	190,000	141,444
DETAILS OF WRITE-INS									
3401.				0				0	
3402.				0				0	
3403.				0				0	
3498. Sum. of remaining write-ins for Line 34 from overflow page		0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0
(a) Including \$for present value of life indemnity claims.		•			•		· · · ·		

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

## UNDERWRITING AND INVESTMENT EXHIBIT

	PARI 3	- EXPENSES	2	2	4
		Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1.	Claim adjustment services:	Expenses	Expenses	Expenses	TOLAI
	1.1 Direct				
	1.2 Reinsurance assumed				
	1.3 Reinsurance ceded	(14,180)			(14,180
	1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)		0	0	
2.	Commission and brokerage:				
	2.1 Direct, excluding contingent				0
	2.2 Reinsurance assumed, excluding contingent				c
	2.3 Reinsurance ceded, excluding contingent				
	2.4 Contingent-direct				
	2.5 Contingent-reinsurance assumed				
	2.6 Contingent-reinsurance ceded				
	2.7 Policy and membership fees				(
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)	0	0	0	
3.	Allowances to manager and agents				
	Advertising				
5.	Boards, bureaus and associations				
	Surveys and underwriting reports				
7.	Audit of assureds' records				
8.	Salary and related items:				
	8.1 Salaries				
	8.2 Payroll taxes				
9.	Employee relations and welfare				
10.	Insurance				
11.	Directors' fees				
12.	Travel and travel items				
13.	Rent and rent items				
14.	Equipment				
15.	Cost or depreciation of EDP equipment and software				
16.	Printing and stationery				
17.	Postage, telephone and telegraph, exchange and express				
18.	Legal and auditing	0	(33,000)		(33,000
19.	Totals (Lines 3 to 18)	0		0	
20.	Taxes, licenses and fees:				
	20.1 State and local insurance taxes deducting guaranty association				
	credits of \$				
	20.2 Insurance department licenses and fees	0	(72,912)	(8,400)	
	20.3 Gross guaranty association assessments				(10,526
	20.4 All other (excluding federal and foreign income and real estate)				0
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)	0	(83,438)		
21.	Real estate expenses				
22.	Real estate taxes			(2,760)	(2,760
23.	Reimbursements by uninsured plans				
24.	Aggregate write-ins for miscellaneous expenses	0	7,658	2,530	10,188
25.	Total expenses incurred			(8,630)	(a)115,900
26.	Less unpaid expenses-current year			( )	
				0	
	Amounts receivable relating to uninsured plans, prior year			0	
	Amounts receivable relating to uninsured plans, current year				(
	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	267,230	(1,370,503)	(8,630)	(1,111,903
	LS OF WRITE-INS	- ,	, , , , , , , , , , , , , , , , , , , ,	(-,-,-)	
	INVESTMENT FEES				
	MISCELLANEOUS EXPENSES				
403.			,		
	Summary of remaining write-ins for Line 24 from overflow page				
	Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)	0	7,658	2,530	

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

## **EXHIBIT OF NET INVESTMENT INCOME**

			1 Collected During Year		2 Earned During Year
1.	U.S. Government bonds	(a)			
1.1	Bonds exempt from U.S. tax				
1.2	Other bonds (unaffiliated)	(a)			
1.3	Bonds of affiliates	(a)	0		
2.1	Preferred stocks (unaffiliated)	(b)	0		
2.11	Preferred stocks of affiliates	(b)	0		
2.2	Common stocks (unaffiliated)		0		
2.21	Common stocks of affiliates		0		
3.	Mortgage loans				
4.	Real estate	(d)			
5.	Contract loans		· · · · · · · · · · · · · · · · · · ·		<i></i>
6.	Cash, cash equivalents and short-term investments	(e)			
7.	Derivative instruments				
8.	Other invested assets				
9.	Aggregate write-ins for investment income		0		0
10.	Total gross investment income		648,133		648,117
11.	Investment expenses				
12.	Investment taxes, licenses and fees, excluding federal income taxes				
12.	Interest expense				
14.	Depreciation on real estate and other invested assets				
15.	Aggregate write-ins for deductions from investment income				
16.	Total deductions (Lines 11 through 15)				
10.	Net investment income (Line 10 minus Line 16)				599.247
					555,247
1	LS OF WRITE-INS				
0901.					
0902.					
0903.					
	Summary of remaining write-ins for Line 9 from overflow page		0		0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)		0		0
1501.					
1502.					
1503.					
1598.	Summary of remaining write-ins for Line 15 from overflow page				0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)				0
	······				
(a) Incl	udes \$		0 paid for accrued	l interes	t on purchases.
	udes \$				
	udes \$				
(d) Incl	udes \$	t on end	umbrances.		
(e) Incl	udes \$		paid for accrued	l interes	t on purchases.

interest on capital notes. depreciation on other invested assets.

## EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds			0		
1.1	Bonds exempt from U.S. tax			0		
1.2	Other bonds (unaffiliated)			0		
1.3	Bonds of affiliates		0	0	0	0
2.1	Preferred stocks (unaffiliated)		0		0	0
2.11	Preferred stocks of affiliates		0	0	0	0
2.2	Common stocks (unaffiliated)	0	0	0	0	0
2.21	Common stocks of affiliates	0	0	0	0	0
3.	Mortgage loans	0	0	0	0	0
4.	Real estate	0	0	0		0
5.				0		
6.	Cash, cash equivalents and short-term investments .			0	0	0
7.	Derivative instruments			0		
8.	Other invested assets	0	0	0	0	0
9.	Aggregate write-ins for capital gains (losses)		0	0	0	0
10.	Total capital gains (losses)	3,750	0	3,750	0	0
DETAI	LS OF WRITE-INS					
0901.				0		
0902.				0		
0903.				0		
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)	0	0	0	0	0

## **EXHIBIT OF NONADMITTED ASSETS**

		1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)	0	0	0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks	0	0	0
	2.2 Common stocks	0	0	0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens	0	0	0
	3.2 Other than first liens	0	0	0
4	Real estate (Schedule A):	~		
	4.1 Properties occupied by the company	0	0	0
	4.2 Properties held for the production of income			0
	4.3 Properties held for sale			0
-				0
5.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and			0
	short-term investments (Schedule DA)			0
	Contract loans		0	0
	Derivatives (Schedule DB)		0	0
	Other invested assets (Schedule BA)		0	0
	Receivables for securities		0	0
10.	Securities lending reinvested collateral assets (Schedule DL)	0	0	0
11.	Aggregate write-ins for invested assets	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13.	Title plants (for Title insurers only)	0	0	0
14.	Investment income due and accrued	0	0	0
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due	0	0	0
	15.3 Accrued retrospective premiums		.0	.0
16.	Reinsurance:			
	16.1 Amounts recoverable from reinsurers	0	0	0
	16.2 Funds held by or deposited with reinsured companies		0	0
	16.3 Other amounts receivable under reinsurance contracts		0	0
17	Amounts receivable relating to uninsured plans		0	0
	Current federal and foreign income tax recoverable and interest thereon			
1	2 Net deferred tax asset		4,227,705	
1	Guaranty funds receivable or on deposit			
				0
	Electronic data processing equipment and software			0
	Furniture and equipment, including health care delivery assets		0	0
	Net adjustment in assets and liabilities due to foreign exchange rates		0	0
	Receivables from parent, subsidiaries and affiliates		0	0
	Health care and other amounts receivable			0
	Aggregate write-ins for other-than-invested assets			(1,809,820)
26.	Total assets excluding Separate Accounts, Segregated Accounts and			
	Protected Cell Accounts (Lines 12 to 25)			(1,277,856)
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
28.	Total (Lines 26 and 27)	9,120,339	7,842,483	(1,277,856)
DETAII	LS OF WRITE-INS			
1101.			0	0
1102.			0	0
			0	0
	Summary of remaining write-ins for Line 11 from overflow page		0	0
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0
	PENSION ASSET			
2501.				
			0	U
2503.	Cummon of compining write ing for Ling 25 from quarflow page			U
	Summary of remaining write-ins for Line 25 from overflow page			0
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	5,424,598	3,614,778	(1,809,820)

#### 1. Summary of Significant Accounting Practices

#### A. Accounting Practices

The accompanying financial statements of Pawtucket Insurance Company (the "Company" or "PIC") are presented on the basis of accounting practices prescribed or permitted by the Rhode Island Insurance Department.

The Rhode Island Insurance Department recognizes only statutory accounting practices prescribed or permitted by the State of Rhode Island for determining and reporting the financial condition and results of operations of an insurance company, and for determining its solvency under the Rhode Island Insurance Law. The National Association of Insurance Commissioners' ("NAIC") *Accounting Practices and Procedures Manual* ("NAIC SAP") has been adopted as a component of prescribed or permitted practices by the State of Rhode Island.

The Company, with the explicit permission of the Rhode Island Insurance Department, took a one-time increase in the value of its buildings and land to fair market value and depreciated the asset on the new basis. Without the write-up of the home office building and land statutory surplus would decrease by \$1,529,088 as of December 31, 2014. Net income would increase by \$57,500.

A reconciliation of the Company's surplus between the practice permitted by the Rhode Island Department and the NAIC SAP is shown below:

	State of		
	Domicile	2014	2013
<u>NET INCOME (LOSS)</u>			
(1) Pawtucket Insurance Company state basis (Page 4, Line 20, Columns 1 &2)	Rhode Island	\$ 1,375,058	\$ (234,038)
(2) State Prescribed Practices that increase/(decrease) NAIC SAP:		-	-
(3) State Prescribed Practices that increase/(decrease) NAIC SAP: Depreciation of buildings and land	Rhode Island	 57,500	57,500
(4) NAIC SAP (1-2-3=4)		\$ 1,432,558	\$ (176,538)
SURPLUS			
(5) Pawtucket Insurance Company state basis (Page 3, Line 37, Columns 1 & 2)	Rhode Island	\$ 79,884	\$ 439,448
(6) State Prescribed Practices that increase/(decrease) NAIC SAP:		-	-
<ul> <li>(7) State Prescribed Practices that increase/(decrease) NAIC SAP: Building and land</li> </ul>	Rhode Island	 1,529,088	1,586,588
(8) NAIC SAP (5-6-7=8)		\$ (1,449,204)	\$ (1,147,140)

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

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

C. Accounting Policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business and are based on reports from ceding companies for reinsurance assumed and contract terms for reinsurance ceded. However, there were no written or earned premiums in 2014 or 2013.

Expenses incurred in connection with acquiring new insurance business, including such acquisitions costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable. No new insurance business was acquired in 2014 or 2013.

In addition, the company uses the following accounting policies:

- (1) Short-term investments are stated at amortized cost.
- (2) Bonds not backed by other loans are stated at amortized cost using the scientific interest method.
- (3) Unaffiliated common stocks are stated at market value.
- (4) Preferred Stocks, depending on type, are stated at cost or market.
- (5) Mortgage loans on real estate N/A
- (6) Loan-backed securities are stated at amortized cost. The retrospective amortization adjustment method is used to value all loan-backed securities.
- Investments in uncombined subsidiaries, controlled and affiliated companies N/A

- (8) Investments in joint ventures, partnerships and limited liability companies N/A
- (9) Derivatives N/A
- (10) N/A
- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and, while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates, and for establishing the resulting liability, are continually reviewed and any adjustments are reflected in the period determined.
- (12) The Company has not modified its capitalization policy from the prior period.
- (13) Method used to estimate pharmaceutical rebate receivables N/A
- 2. Accounting Changes and Corrections of Errors N/A
- 3. Business Combinations and Goodwill
  - A. Statutory Purchase Method N/A
  - B. Statutory Merger N/A
  - C. Impairment Loss N/A
- Discontinued Operations N/A
- 5. Investments
  - A. Mortgage Loans, including Mezzanine Real Estate Loans N/A
  - B. Debt Restructuring N/A
  - C. Reverse Mortgages N/A
  - D. Loan-Backed Securities N/A
  - E. Repurchase Agreements and/or Securities Lending Transactions N/A
  - F. Real Estate N/A
  - G. Low Income Housing Tax Credits N/A

#### H. Restricted Assets

In accordance with revisions to SSAP No. 1, effective in 2013, the following tables disclose quantitative information about the Company's restricted assets by category of restricted asset for the year ended December 31, 2014.

#### (1) Restricted assets (including pledged) summarized by restricted asset category

			Gi	ross Restricted					Perce	ntage
			Current Year			6	7	8	0	10
	1	2	3	4	5	6	7		9	10
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	s -	\$ -	\$ -	ş -	\$-	0.00%	0.00%
b. Collateral held under security lending agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
c.Subject to repurchase agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
d. Subject to reverse repurchase agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
e. Subject to dollar repurchase agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
g. Placed under option contracts	-	-	_	-	-	-	-	-	0.00%	0.00%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	-	-	-	-	-	-	-	-	0.00%	0.00%
i. FHLB capital stock	_	_	_	_	_	_	-	_	0.00%	0.00%
j. On deposit with state	378,873	-	-	-	378,873	378,761	112	378,873	2.64%	7.27%
k. On deposit with other regulatory bodies	-	-	-	-	-	-	-	-	0.00%	0.00%
l. Pledged collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-	-	-	0.00%	0.00%
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-	-	-	0.00%	0.00%
n. Other restricted assets	-	-	-	-	-	-	-	-	0.00%	0.00%
o. Total Restricted Assets	\$ 378,873	\$-	\$ -	\$ -	\$ 378,873	\$ 378,761	\$ 112	\$ 378,873	2.64%	7.27%

(a) Subset of column 1

(b) Subset of column 3

I

# (2) Detail of assets pledged as collateral not captured in other categories $\rm N/A$

(3) Detail of other restricted N/A

- I. Working Capital Finance Investments
  - (1) Aggregate Working Capital Finance Investments (WCFI) Book/Adjusted Carrying Value by NAIC Designation: N/A
  - (2) Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs N/A
- J. Offsetting and Netting of Assets and Liabilities  $N\!/\!A$
- K. Structured Notes N/A
- 6. Joint Ventures, Partnerships and Limited Liability Companies
  - A. Detail for Those Greater than 10% of Admitted Assets N/A
  - B. Write-downs for Impairments N/A
- 7. Investment Income
  - A. Due and Accrued Investment Income

The Company non-admits investment income due and accrued if amounts are over 90 days past due.

B. Amounts Non-Admitted

No investment income due and accrued was excluded from surplus as of December 31, 2014.

8. Derivative Instruments N/A

#### 9. Income Taxes

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

		12/31/2014			12/31/2013			Change	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
1	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 14) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
(a) Gross Deferred Tax Assets	. 3,440,741	255,000	3,695,741	3,972,705	255,000	4,227,705	(531,964)	0	(531,964)
(b) Statutory Valuation Allowance Adjustments		,	0		,	0	0	0	0
(C) Adjusted Gross Deferred Tax Assets (1a-1b)	. 3,440,741	255,000	3,695,741	3,972,705	255,000	4,227,705	(531,964)	0	(531,964)
(d) Deferred Tax Assets Nonadmitted		255,000	3,695,741	3,972,705	255,000	4,227,705	(531,964)	0	(531,964)
(e) Subtotal Net Admitted Deferred Tax Asset (1c-1c		0	0,000,111	0,012,100	0	.,,	(00,001)	0	(00 ,00 ))
(f) Deferred Tax Liabilities	., .	, i i i i i i i i i i i i i i i i i i i	0	Ĵ		0	0	0	0
(g) Net Admitted Deferred Tax Assets/ (Net Deferred Tax Liability) (1e-1f)	0	0	0	0	0	0	0	0	0
		12/31/2014			12/31/2013			Change	
	(1)	(2)	(3)	(1)	(2)	(3)	(7)	(8)	(9)
2	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 14) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
<ul> <li>Admission Calculation Components SSAP No. 101:</li> <li>(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.</li> <li>(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1and 2(b)2 Below).</li> <li>1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.</li> <li>2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.</li> <li>(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities</li> <li>(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101 Total (2(a)+2(b)+2(c)))</li> </ul>	0	0	0 0 0 0	0	0	0 0 46,819 0 0	0 0 0	0 0 0	0 46,819 0
							[		
3 (a) Ratio Percentage Used to Determine					2014			2013	
<ul> <li>(a) Ratio Percentage Used to Determine Recovery Period And Threshold Limitation Amount.</li> <li>(b) Amount of Adjusted Captial And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above</li> </ul>					74% 76,884			369% 439,448	
	12/31	/2014	12/31/	2013	Ch	ange			
	(1)	(2)	(3)	(4)	(5)	(6)			
4 Impact of Tax-Planning Strategies	Ordinary	Capital	Ordinary	Capital	(Col 1-3) Ordinary	(Col 2-4) Capital			
<ul> <li>(a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, B y Tax Character, As A Percentage.</li> <li>1 Adjusted Gross DTAs Amount From Note 0 A (1c)</li> </ul>		055.000	4044705	0.070.705	055.000	4.0.44705			

9A 1(c).
2 Percentage Of Adjusted Gross Dtas By Tax Character Attributable To The Impact Of Tax Planning Strategies.

 3 Net Admitted Adjusted Gross Dtas Amount From Note 9a1(e).

4 Percentage Of Net Admitted Adjusted Gross Dtas By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies.

(b) Does the company's tax planning strategies include the use of reinsurance? Yes[ ] No  $[\rm X]$ 

B. Deferred tax liabilities are not recognized for the following amounts:  $N\!/\!A$ 

3,440,741

0.00%

0

0%

255,000

0.00%

0

0%

4,241,725

0.00%

0

0%

3,972,705

0.00%

0

0%

255,000

0.00%

0

0%

4,241,725

0.00%

0

0%

C. Current income tax incurred consist of the following major categories:

		]	(1)	(2)	(3)
			12/31/2014	12/31/2013	(Col 1-2) Change
1		Current Income T ax			
(a)		Federal	0	0	0
(b)		Foreign	0	0	0
(c	)	Subtotal	0	0	0
(d)		Federal income tax on net capital gains	0	0	0
(e)		Utilization of capital loss carry-forwards	0	0	0
(f)		Other Utilization of operating loss carry-forwards	(1,007,349)	0	(1,007,349)
(g)		Federal and foreign income taxes incurred	(1,007,349)	0	(1,007,349)
2		Deferred Tax Assets:			
(a)		Ordinary			
	(1)	Discounting of unpaid losses	7,550	11,635	(4,085)
	(2)	Unearned premium reserve	0	0	0
	(3)	Policyholder reserves	0	0	0
	(4)	Investments	0	0	0
	(5)	Deferred acquisition costs	0	0	0
	(6)	Policyholder dividends accrual	0	0	0
	(7)	Fixed assets	153,391	137,188	16,203
	(8)	Compensation and benefits accrual	0	0	0
	(9)	Pension accrual	2,831,889	2,293,037	538,852
	(10)	Receivables - nonadmitted	0	0	0
	(11)	Net operating loss carry-forward	386,791	1,422,037	(1,035,246)
	(12)	Tax credit carry-forward	0	0	0
	(13)	Other (including items <5% of total ordinary tax assets)	61,120	108,808	(47,688)
		(99) Subtotal	3,440,741	3,972,705	(531,964)
(b)		Statutory valuation allowance adjustment	0	0	0
(c	)	Non admitted	3,440,741	3,972,705	(531,964)
(d)		Admitted ordinary deferred tax assets (2a99-2b-2c)	0	0	0
(e)		Capital:			
	(1)	Investments	255,000	255,000	0
	(2)	Net capital loss carry-forward	0	0	0
	(3)	Real estate	0	0	0
	(4)	Other (including items <5% of total capital tax assets)	0	0	0
		(99) Subtotal	255,000	255,000	0
(f)		Statutory valuation allowance adjustment	0	0	0
(g)		Non admitted	255,000	255,000	0
(h)		Admitted capital deferred tax assets (2e99-2f-2g)	0	0	0
(i)		Admitted deferred tax assets (2d+2h)	0	0	0
3		Deferred Tax Liabilities:			
(a)		Ordinary			
(u)	(1)	Investments	0	0	0
	(2)	Fixed assets.	0	0	0
	(3)		0	0	0
	(4)	Policyholder reserves	0	0	0
	(5)		0	0	0
		(99) Subtotal	0	0	0
(b)		Capital:	-		
	(1)	Investments	0	0	0
	(2)	Real estate	0	0	0
	(3)	Other (including items <5% of total capital tax liabilities)	0	0	0
		(99) Subtotal	0	0	0
(c	)	Deferred tax liabilities (3a99+3b99)	0	0	0
Λ		Not deferred tax assets/lisbilities (2: 2a)	0	0	0
4		Net deferred tax assets/liabilities (2i-3c)	0	0	0

- D. The Company did not have permanent differences and as a result there are no book to tax adjustments for the years ended December 31, 2014 and 2013.
- E. (1) At December 31, 2014, the Company had \$1,137,622 of operating loss carryforwards originating in 2009 through 2014, which expire, if unused, in 2029 through 2033. As of December 31, 2014 the Company had \$750,000 of net capital loss carryforwards originating in 2014 and expiring if unused in 2019.

(2) The Company had no income tax expense for the years ended December 31, 2014 and 2013 that will be available for recoupment in the event of future net losses.

(3) The Company had no admitted deposits under Section 6603 of the Internal Revenue Service Code during the years ended December 31, 2014 and 2013.

- F. Consolidated Federal Income Tax Return
  - The Company's 2014 federal income tax return will be consolidated with the following entities: NBIC Holdings, Inc., NBIC Financial Holdings, Inc., NBIC Service Company, Inc. and Pawtucket Insurance Company.
  - (2) Allocation is based upon separate return calculations.
- G. Federal or foreign income tax loss contingencies N/A
- 10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties
  - A.- C. The parent company of PIC, Narragansett Bay Insurance Company ("NBIC") has been capitalized through a \$200 million funding agreement between Blackstone Financial Group, Inc. ("BFG") (ultimate parent company of the group) and an outside investment group.

Prior to December 7, 2005, the Company was a 100% owned subsidiary of NBIC (NAIC #43001). On December 7, 2005, the Company was purchased by BFG and the ownership of the NBIC was distributed to BFG, resulting in the NBIC becoming a sister corporation of the Company.

As of March 31, 2006, BFG contributed all of the Company's issued and outstanding capital stock to NBIC, which, as noted above, is a 100% owned subsidiary of BFG. The statutory surplus of the Company at March 31, 2006 was \$3,007,995.

On December 7, 2005, upon the purchase by BFG, the Company was removed from rehabilitation status. In conjunction with this purchase, all assets and liabilities of NBIC, other than its insurance licenses, were transferred, by order of the Rhode Island Superior Court, to PIC, leaving the NBIC free of both assets and liabilities, but retaining its insurance licenses.

On December 28, 2011, the Company issued a surplus note to its affiliate NBIC Service Company, Inc. in the amount of \$650,000. Interest on the surplus note shall be paid at the rate equal to LIBOR. The principal amount of the surplus note shall be payable upon the earlier of 1) the Company being reimbursed for net operating losses utilized in the NBIC Holdings, Inc. consolidated tax return, or 2) December 31, 2016.

On December 28, 2012, the Company issued a surplus note to its affiliate NBIC Service Company, Inc. in the amount of \$500,000. Interest on the surplus note shall be paid at the rate equal to LIBOR. The principal amount of the surplus note shall be payable upon the earlier of 1) the Company being reimbursed for net operating losses utilized in the NBIC Holdings, Inc. consolidated tax return, or 2) December 31, 2017.

- D. As of December 31, 2014, the Company was due \$1,265,510 from its affiliates, NBIC Service Company, Inc. (\$1,020,014) and Narragansett Bay Insurance Company (\$245,496). \$1,007,349 of the amount due to the Company related to utilization of net operating loss carry-forwards, NBIC Service Company, Inc. (\$762,013) and Narragansett Bay Insurance Company (\$245,496). An additional \$258,002 due from NBIC Service Company, Inc. is related to home office rent and \$159 from Narragansett Bay Insurance Company.
- E. Guarantees or Contingencies for Related Parties N/A
- F. Management, Service Contracts, Cost Sharing Arrangements

The Company has an Administrative Services arrangement with NBIC Service Company, NBIC Holdings Inc. and NBIC. The Company reimburses these affiliated entities for costs directly related to the business of the Company. The allocation policies were designed to be fair and equitable to all parties.

- G. See Note 10 A., B., & C. and 10 I.
- H. Value of an Upstream Intermediate Entity N/A
- I. Investment in an SCA that exceeds 10% of admitted assets

In accordance with NAIC SAP, NBIC has reported the investment in its 100% owned insurance subsidiary, PIC (See 10A & 10B), at the statutory surplus value of that subsidiary. However, effective September 30, 2006, PIC, with the explicit permission of the Rhode Island Insurance Department, records its buildings and land at fair market value instead of at depreciated cost required by NAIC SAP. This permitted practice, however, does not extend to the value of PIC as recorded by NBIC. NBIC, therefore, continues to record its investment in PIC as an amount equal to PIC's surplus on an NAIC SAP basis.

- J. Write down for impairment of Investments in SCA Entities N/A
- K. Investment in Foreign Insurance Subsidiary N/A
- A. Investment in Downstream Non-Insurance Holding Company N/A
- 11. Debt N/A
- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Post Retirement Benefit Plans
  - A. Defined Benefit Plans

The Company has a qualified defined benefit retirement plan covering substantially all of its former employees. The benefits are based on years of service, age at retirement and employee's compensation during the last five years of employment. The Company also has a non-qualified executive retirement plan covering certain former senior officers. The plan provides minimum retirement benefits based on years of service, age at retirement and compensation during the last two years of employment.

Effective July 27, 2003, benefits accumulated under the qualified plan were frozen and no further benefits are accumulating for employees.

Effective September 22, 2005, the benefits due to certain participants in the executive retirement plan were re-defined by the Rhode Island Superior Court. Of the remaining participants, benefits for both have been accrued on either a lump sum basis or agreed upon basis.

Additionally, during 2003, a plan providing certain healthcare benefits to retirees was terminated for both current and future retirees.

A summary of assets, obligations and assumptions of the Qualified Pension Plan are as follows at December 31, 2014 and 2013.

		Overfu	nded	Underfu	nded
		2014	2013	2014	2013
l Cha	nge in benefit obligation				
a.	Pension Benefits				
1	Benefit obligation at beginning of year	-	-	10,823,346	11,020,197
2	Service cost	-	-		
3	Interest cost	-	-	499,990	482,639
4	Contribution by plan participants	-	-		
5	Actuarial gain (loss)	-	-	2,030,252	(94,275
6	Foreign currency exchange rate changes	-	-		
7	Benefits paid	-	-	(608,674)	(585,215
8	Plan amendments	-	-	-	-
	Business combinations, divestitures,				
9	curtailments, settlements and special			-	-
	termination benefits	-	-		
10	Benefit obligation at end of year	-	-	12,744,914	10,823,346
		Overfu	nded	Underfu	nded
		2014	2013	2014	2013
b.	Postretirement Benefits				
1	Benefit obligation at beginning of year	-	-	-	-
2	Service cost	-	-	-	-
3	Interest cost	-	-	-	-
4	Contribution by plan participants	-	-	-	-
5	Actuarial gain (loss)	-	-	-	-
6	Foreign currency exchange rate changes	-	-	-	-
7	Benefits paid	-	-	-	-
8	Plan amendments	-	-	-	-
	Business combinations, divestitures,				
9	Business combinations, divestitures, curtailments, settlements and special				
9		-	_	-	-

			funded		rfunded		
		2014	2013	2014	2013		
c.	Postemployment & Compensated Absence Benefits						
1	Benefit obligation at beginning of year	-				-	
	Service cost	-				-	
	Interest cost	-				_	
	Contribution by plan participants						
	Actuarial gain (loss)	-		-			
	Foreign currency exchange rate changes					-	
		-	· ·		•	-	
	Benefits paid	-	· ·		•	-	
8	Plan amendments	-	· ·			-	
9	Business combinations, divestitures, curtailments, settlements and special termination benefits	_					
10	Benefit obligation at end of year	-	-	-		-	
		Pension B	an a fi ta	Destudius menu	Don office	Destematory	
		2014	2013	Postretirement 2014	2013	Postemployr 2014	2013
2 Cha	ngo in plan aggata	2014	2013	2014	2013	2014	2013
	nge in plan assets						
a.	Fair value of plan assets at beginning of	7 742 000	7.051.(22				
1.	year	7,743,896	7,051,633	-	-	-	-
b.	Actual return on plan assets	581,054	866,342	-	-	-	-
C.	Foreign currency exchange rate changes	264.221	411.107	-	-	-	-
d.	Reporting entity contribution	364,331	411,136	-	-	-	-
e.	Plan participants' contributions	((00 = ))	(=======	-	-	-	-
f.	Benefits paid	(608,674)	(585,215)	-	-	-	-
g.	Business combinations, divestitures and						
	settlements	-	-	-	-	-	-
h.	Fair value of plan assets at end of year	8,080,607	7,743,896	-	-	-	-
		Pension	1 Benefits	Postretiren	nent Benefits		
		2014	2013	2014	2013		
3 Fun	ided status						
	erfunded:						
a.	Assets (nonadmitted)						
	Prepaid benefits costs	_		-		-	
	· · ·						
	2 Overfunded plan assets 5 Total assets (nonadmitted)	-				-	
				-		-	
	derfunded:						
b.	Liabilities recognized						
	Accrued benefit costs	4,664,307	3,079,450	)			
	Liability for pension benefits	-	-			-	
3	Total liabilities recognized	4,664,307	3,079,450	) -		-	
c.	Unrecognized liabilities	-	-	-		-	
		1			-	Postemployment & C	Compensated
		Pension B	enefits	Postretirement		Absence Ben	-
		2014	2013	2014	2013	2014	2013
4 Con	nponents of net periodic benefit cost						-
a.	Service cost	_	_	-	_	-	_
b.	Interest cost	499,990	482,639			-	-
с.	Expected return on plan assets	(458,362)	(516,389)			-	-
d.	Transition asset or obligation	(130,302)	(310,309)		-		-
и. е.	Gains and losses	97,740	227,461	-	-		-
f.	Prior service cost or credit	97,740	227,401	-	-		-
1.		-	-	-	-	-	-
g.	Amount of gain or loss recognized due to						
	a settlement or curtailment	-	-	-	-	-	-
h.		139,368	193,711	-	-	-	-
	Total net periodic benefit cost						
11.	Total net periodic benefit cost						
			Benefits		nent Benefits		
		2014	2013	2014	nent Benefits 2013		
	ounts in unassigned funds (surplus) recogniz	2014	2013	2014			
		2014	2013	2014			
5 Am a.	ounts in unassigned funds (surplus) recogniz Items not yet recognized as a component of net periodic cost - prior year	2014 red as componen	2013 ts of net periodic	2014			
5 Am	ounts in unassigned funds (surplus) recogniz Items not yet recognized as a component of net periodic cost - prior year Net transition asset or obligation recognized	2014 red as componen	2013 ts of net periodic	2014			
5 Am a.	ounts in unassigned funds (surplus) recogniz Items not yet recognized as a component of net periodic cost - prior year Net transition asset or obligation recognized Net prior service cost or credit arising	2014 red as componen	2013 ts of net periodic -	2014			
5 Ama a. b. c	ounts in unassigned funds (surplus) recogniz Items not yet recognized as a component of net periodic cost - prior year Net transition asset or obligation recognized Net prior service cost or credit arising during the period	2014 red as componen - -	2013 ts of net periodic - -	2014 benefit cost -		-	
5 Am a. b. c d.	ounts in unassigned funds (surplus) recogniz Items not yet recognized as a component of net periodic cost - prior year Net transition asset or obligation recognized Net prior service cost or credit arising during the period Net prior service cost or credit recognized	2014 red as componen - - -	2013 ts of net periodic - - -	2014 benefit cost - - -			
5 Am a. b. c d. e.	ounts in unassigned funds (surplus) recogniz Items not yet recognized as a component of net periodic cost - prior year Net transition asset or obligation recognized Net prior service cost or credit arising during the period Net prior service cost or credit recognized Net gain and loss arising during the period	2014 red as componen - - - - 1,907,560	2013 ts of net periodic - - - - (444,228	2014 benefit cost - - - - )		- - -	
5 Am a. b. c d.	ounts in unassigned funds (surplus) recogniz Items not yet recognized as a component of net periodic cost - prior year Net transition asset or obligation recognized Net prior service cost or credit arising during the period Net prior service cost or credit recognized Net gain and loss arising during the period Net gain and loss recognized	2014 red as componen - - -	2013 ts of net periodic - - - - (444,228	2014 benefit cost - - - - )			
5 Am a. b. c d. e.	ounts in unassigned funds (surplus) recogniz Items not yet recognized as a component of net periodic cost - prior year Net transition asset or obligation recognized Net prior service cost or credit arising during the period Net prior service cost or credit recognized Net gain and loss arising during the period	2014 red as componen - - - - 1,907,560	2013 ts of net periodic - - - - (444,228	2014 benefit cost - - - - )		- - -	

		Pension B	enefits	Postretireme	nt Benefits
		2014	2013	2014	2013
6 An	nounts in unassigned funds (surplus) expected	ed to be recognized	in the next fiscal	year as componen	its of net
perio	odic benefit cost				
a.	Net transition asset or obligation	-	-	-	-
b.	Net prior service cost or credit	-	-	-	-
С	Net recognized gains and losses	151,796	97,740	-	-

		Pension B	enefits	Postretirem	ent Benefits
		2014	2013	2014	2013
7 An	nounts in unassigned funds (surplus) that have	ve not yet been reco	ognized as compo	onents of net perio	odic benefit cost
a.	Net transition asset or obligation	535,328	317,903		
b.	Net prior service cost or credit	224,963	217,425		
С	Net recognized gains and losses	760,291	535,328		

8 Weighted-average assumptions used to determine net periodic benefit cost as of Dec. 31,

		2014	2013
a.	Weighted average discount rate	4.50%	4.75%
b.	Expected long-term rate of return on plan assets	6.00%	7.50%
c.	Rate of compensation increase	N/A - Pla	n is frozen

Weighted average assumptions used to determine projected benefit obligations as of Dec. 31,

		2014	2013
d.	Weighted average discount rate	3.75%	4.75%
e.	Rate of compensation increase	N/A - Pla	n is frozen

(9) The amount of the accumulated benefit obligation for defined benefit pension was \$12,744,914 for the current year and \$10,823,346 for the prior year.

(10) N/A

(11) N/A

(12) The Company's defined benefit plan is frozen. The projected benefit obligation is the actuarial present value of all benefits attributed to employee service as of the date of calculation. The expected long-term rate of return on assets is developed based on a model which utilizes modern portfolio theory to produce a statistical range of expected returns. The model is based on the historical behavior of the broad financial markets, reflects the plan's asset allocation and utilizes the plan's actuarial assumption regarding future rates of inflation.

The Plan's assets are overseen by the Plan's fiduciaries, with an overall investment strategy of asset preservation in order to meet future benefit obligations. The Plan invests in a diversified mix of traditional asset classes. Investments in US and foreign equity securities, fixed income securities, real estate and cash are made to maximize long-term returns while recognizing the need for adequate liquidity to meet on-going benefit and administrative obligations. A professional investment firm is engaged and operates under the investment guidelines.

The following estimated future payments are expected to be paid in the years indicated:

	Year_Ending:	Amo	unt
	December 31, 2015	\$ 607,172	
	December 31, 2016	616,814	
	December 31, 2017	653,701	
	December 31, 2018	663,620	
	December 31, 2019	666,158	
	December 31, 2020 through December 31, 2024	3,539,994	
(13)	Estimated Expected Contribution to the Plan:		
	Year Ending December 31, 2015	\$ 553,560	
(1.4)			
(14)	N/A		
(15)	N/A		
(16)	N/A		
(17)	NI/A		
(17)	N/A		
(18)	N/A		
(19)	N/A		
(20)	N/A		
(20)	1V/ $r$		

(21) The Company uses December 31 as the measurement date for calculating its obligations relating to the defined benefit pension plan. The projected benefit obligation for the pension benefits represents the present value of pension benefits earned as of December 31 based on service and compensation through December 31 of the respective year-end.

The Company's defined benefit pension plan asset allocation percentage and the target asset percentage at December 31, 2014 and 2013 by asset category are as follows:

	Target	Allo	cation
Asset Category	December 31, 2015	<b>December 31, 2014</b>	<b>December 31, 2013</b>
Equity Securities	30%	27%	33%
Debt Securities	65%	67%	58%
Real Estate	0%	0%	0%
Other	5%	6%	9%
Total	100%	100%	100%

#### B. N/A

C. Fair Value Measurements

Description for each class of plan assets	(Level 1)	(Level 2)	(Level 3)	Total
Fixed maturities – domestic:				
U.S. Government bonds	\$ 753,561	\$ -	\$ -	753,56
Bond funds	4,338,921	-	-	4,338,92
Other Fixed Income	134,400	-	-	134,40
Total fixed maturities - domestic	5,226,883	-	-	5,226,88
Equities:		-	-	
Equity mutual funds and exchange traded funds	2,508,679	-	-	2,508,67
Total equities	2,508,679	-	-	2,508,67
Cash Equivalents	181,863	-	-	181,86
Balanced Funds	167,121	-	-	167,12
Total Plan Assets	\$ 8,084,546	\$ -	\$ -	\$ 8,084,54

(2) N/A

D. N/A

E. N/A

F. N/A

G. N/A

H. N/A I. N/A

I. IN/A

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

- The Company has 1,000,000 shares of \$1 par value common stock authorized, issued and outstanding at December 31, 2014 and 2013.
- (2) The Company has no preferred stock outstanding.
- (3) The Company may pay dividends without prior approval of the Rhode Island (state of domicile) Department of Business Regulation ("DBR") except as required under Rhode Island law. Prior notification to the DBR prior to paying dividends, however, is required.
- (4) The Company made no dividend payments during the years ended December 31, 2014 and 2013.
- (5) Within the limits described above (see Note 13(3)), there are no restrictions placed on the portion of profits that may be paid as ordinary dividends. The Company had an unassigned deficit at December 31, 2014; consequently, the Company cannot pay dividends in 2015 without prior approval of the Rhode Island DBR
- (6) Restrictions on Unassigned Funds (Surplus) N/A
- (7) Mutual Surplus Advances N/A
- (8) Stock Held for Special Purposes N/A
- (9) Changes in Special Surplus Funds N/A

The Company's unassigned funds/surplus has been reduced by \$0 cumulative unrealized losses at December 31, 2014 and 2013.

#### (11) Surplus Notes

The Company issued the following surplus notes:

							Interest					
							and/or					
			Par Value	(	Carrying	F	rincipal	Tc	tal Interest	J	Jnapproved	
	Interest	(F	Face Amounts	,	Value of	Pai	d Current	and	/or Principal	In	terest and/or	
Date Issued	Rate		of Notes)		Note		Year		Paid		Principal	Date of Maturity
December 28, 2011	LIBOR	\$	650,000	\$	650,000	\$	-	\$	-	\$	-	December 31, 2016
December 28, 2012	LIBOR		500,000		500,000							December 31, 2017
131199	Total	\$	1,150,000	\$1	1,150,000	\$	-	\$	_	\$	_	

A surplus note was issued to the Company's affiliate NBIC Service Company, Inc. in the amount of \$650,000 on December 28, 2011. Interest on the Surplus Note shall be paid at the rate equal to LIBOR. The principal amount of the Surplus Note shall be payable upon the earlier of 1) the Company being reimbursed for net operating losses utilized in the NBIC Holdings, Inc. consolidated tax return, or 2) December 31, 2016. However, any and all payments or prepayments of principal or interest on the surplus note may be made only with the prior written approval of the Superintendent of Insurance of Rhode Island. As of December 31, 2014, no interest or principal has been paid to date on this surplus note.

A second surplus note was issued to the Company's affiliate NBIC Service Company, Inc. in the amount of \$500,000 on December 28, 2012. Interest on the Surplus Note shall be paid at the rate equal to LIBOR. The principal amount of the Surplus Note shall be payable upon the earlier of 1) the Company being reimbursed for net operating losses utilized in the NBIC Holdings, Inc. consolidated tax return, or 2) December 31, 2017. However, any and all payments or prepayments of principal or interest on the surplus note may be made only with the prior written approval of the Superintendent of Insurance of Rhode Island. As of December 31, 2014, no interest or principal has been paid to date on this surplus note.

As of December 31, 2014 the Company is now in the position of being reimbursed for net operating losses utilized in the NBIC Holdings Inc. consolidated tax return. Management notified the RI DBR of this change and the RI DBR indicated that the trigger of repayment of the surplus notes would be disallowed until at time in the future when the solvency status of the Company had improved significantly. At such time the Superintendent of Insurance of Rhode Island would re-visit the Company's solvency status to ensure the result of such payment would not adversely affect such status in the present and near future.

In the event that the Company is subject to delinquency proceeding pursuant to the Rhode Island Insurers' Rehabilitation and Liquidation Act, RIGL 27-14.3-1, then each of the surplus notes would be satisfied in accordance with the priority distribution set forth in RIGL 27-14.3-46.

### (12) Quasi Reorganizations

- N/A
- (13) Effective Date of Quasi Reorganizations N/A
- 14. Liabilities, Contingencies and Assessments
  - A. Contingent Commitments None
  - B. Assessments None
  - C. Gain Contingencies None
  - D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits N/A
  - E. Product Warranties N/A
  - E. Joint and Several Liabilities N/A
  - F. All Other Contingencies

Lawsuits against the Company related to claims settlement activities arise in the course of business. The estimated settlement of all claims is included in paid and unpaid losses and loss adjusting expense.

- 15. Leases
  - A. Lessee Operating Lease

The Company incurs no significant lease expense.

B. Lessor Leases

The Company has no leasing agreements as a lessor.

- Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk N/A
- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishment of Liabilities
  - A. Transfers of Receivables Reported as Sales N/A
  - B. Transfers and Servicing of Financial Assets N/A
  - C. Wash Sales

The Company had no wash sales during the years ended December 31, 2014 and 2013.

- 18. Gain or Loss to the Reporting Entity from Uninsured A & H Plans and the Uninsured portion of Partially Insured plans
  - A. ASO Plans N/A
  - B. ASC Plans N/A
  - C. Medicare or Similarly Structured Cost Based Reimbursement Contract N/A
- 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators N/A
- 20. Fair Value Measurements
  - A. Asset and Liabilities Measured and Reported at Fair Value
    - 1. The Company did not hold any investment securities that were measured and reported at fair value during the years ended December 31, 2014 and 2013.
    - 2. N/A
    - 3. N/A
    - 4. N/A
    - 5. N/A
  - B. Other Fair Value Disclosures N/A
  - C. Fair Values for All Financial Instruments

Types of Financial Instrument	Ag	gregate Fair Value	Admitted Assets	(Level 1)	(I	Level 2)	(Le	evel 3)	Practical ving Value)
Financial instruments – assets: Bonds Cash, cash equivalents and short-term investments	\$	5,121	\$ 4,833	\$ -	\$	5,121	\$	-	\$ -
Total assets	\$	1,910,130	\$ 1,909,842	\$ 1,905,009	\$	5,121	\$	-	\$ -

D. N/A

21. Other Items

- A. Extraordinary Items N/A
- B. Troubled Debt Restructuring Debtors N/A
- C. Other Disclosures and Unusual Items

The Company is required to maintain security deposits with various state insurance departments. The security deposits had a carrying value of \$378,873 and \$378,761 at December 31, 2014 and 2013, respectively.

D. Business Interruption Recoveries

N/A

- E. State Transferable and Non Transferable Tax Credits  $N\!/\!A$
- F. Subprime-Mortgage-Related Risk Exposure

The Company had no subprime mortgage risk exposure during the years ended December 31, 2014 and 2013.

- 22. Events Subsequent N/A
- 23. Reinsurance
  - A. Unsecured Reinsurance Recoverables

Reinsurance Recoverable Exceeding 3% of Surplus

Numerous individual reinsurance balances recoverable exceed 3% of Surplus. See schedule F, Part 3 for a listing by individual reinsurer.

- B. Reinsurance Recoverable in Dispute N/A
- C. Reinsurance Assumed and Ceded:

N/A - Every reinsurance contract expired or was terminated prior to December 31, 2004. Consequently, any related commissions have been recorded.

D. Uncollectible Reinsurance

During 2014, the Company wrote off reinsurance balances due (from the companies listed below) in the amount of: \$179,194, which is reflected as:

a.	Losses incurred	\$	-		
b.	Loss adjustment expenses incurred	\$	179,194		
c.	Premiums earned	\$	-		
d.	Other	\$	-		
e.	<u>Company</u>	Am	Amount		
	Hartford Fire Ins Co	\$	6,199		
	North Star Reinsurance Corp	\$	29,754		
	Berkley Ins Co	\$	6,199		
	Swiss Reins Amer Corp	\$	27,196		
	Scor Reins Co	\$	9,565		
	Partner Re Ins Co of NY	\$	10,634		
	Sirius Amer Ins Co	\$	10,117		
	Clearwater	\$	10,281		
	R&Q/ ACE/ Signs	\$	22,315		
	NE Reinsurance Corp	\$	27,274		
	Gen Reinsurance	\$	19,660		

The Company had no significant write-offs of uncollectible reinsurance balances during the year ended December 31, 2014.

- E. Commutation of Ceded Reinsurance N/A
- F. Retroactive Reinsurance N/A
- G. Reinsurance Accounted for as a Deposit N/A
- H. Disclosures for the Transfer of Property and Casualty Run-off Agreements  $N\!/\!A$
- I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation  $N\!/\!A$
- 24. Retrospectively Rated Contracts & Contracts Subject to Redetermination N/A
- 25. Changes in Incurred Losses and Loss Adjustment Expenses

The Company's net incurred loss and loss adjustment expenses for the years ended December 31, 2014 and 2013 includes adverse loss development on prior accident years of \$203,703 and \$288,580, respectively. Original ultimate loss and loss adjustment expense estimates are increased or decreased over time as additional information becomes known regarding individual claims.

- 26. Intercompany Pooling Arrangements N/A
- 27. Structured Settlements N/A
- 28. Health Care Receivables N/A
- 29. Participating Policies N/A
- 30. Premium Deficiency Reserves N/A
- 31. High Deductibles N/A
- 32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses  $_{\rm N/A}$

#### 33. Asbestos/Environmental Reserves

A. Asbestos losses

The Company had no remaining asbestos losses open as of December 31, 2014 and 2013.

		<u>2010</u>	2011	2012	2013	<u>2014</u>
(1)	Direct Basis					
a.	Beginning reserves	16,000	-	-	-	-
b.	Incurred losses and loss	22 409				
c.	adjustment expense Calendar year payments for losses and loss adjustment	22,498	-	-	-	-
	expenses	38,498	-	-	-	-
d.	Ending reserves	-	-	-	-	-
(2)	Assumed Reinsurance					
a.	Beginning reserves	-	-	-	-	-
b.	Incurred losses and loss					
c.	adjustment expense Calendar year payments for	-	-	-	-	-
U.	losses and loss adjustment					
1	expenses	-	-	-	-	-
d.	Ending reserves	-	-	-	-	-
(3)	Net of Ceded Reinsurance					
a.	Beginning reserves	16,000	-	-	-	-
b.	Incurred losses and loss	22 400				
c.	adjustment expense Calendar year payments for	22,498	-	-	-	-
υ.	losses and loss adjustment					
	expenses	38,498	-	-	-	-
d.	Ending reserves	-	-	-	-	-

- B. N/A Bulk and IBNR reserves are separately identified by line but not by type of claim.
- C. N/A Bulk and IBNR reserves are separately identified by line but not by type of claim.
- D. Environmental losses

The Company had 4 environmental losses open as of December 31, 2014 pertaining to the Homeowners line of business. These claims are a result of oil spills from overfilling residential oil tanks, escapes from corroded underground storage tanks, or spillage of dry cleaning solvents. Reserves are set on a case by case basis for indemnity. LAE is not reserved on a case by case basis. Both LAE and IBNR are bulk reserved for all lines of business. Therefore, amounts below include case reserves only.

(1)	Direct Basis	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>
a.	Beginning reserves	741,328	344,462	420,625	319,622	234,642
b.	Incurred losses and loss adjustment expense	294,591	346,301	233,328	441,007	9,525
c.	Calendar year payments for losses and loss adjustment expenses	691,457	270,138	334,291	526,027	137,507
d.	Ending reserves	344,462	420,625	319,662	234,642	106,660
(2)	Assumed Reinsurance					
a.	Beginning reserves	-	-	-	-	-

b.	Incurred losses and loss adjustment expense	-	-	-	-	-
c.	Calendar year payments for losses and loss adjustment					
	expenses	-	-	-	-	-
d.	Ending reserves	-	-	-	-	-
(3)	Net of Ceded Reinsurance Basis					
a.	Beginning reserves	236,328	335,986	258,352	319,622	231,933
b.	Incurred losses and loss					
	adjustment expense	887,929	163,058	132,963	95,020	(3,367)
c.	Calendar year payments for losses and loss adjustment					
	expenses	788,270	240,692	71,653	182,749	126,906
d.	Ending reserves	335,986	258,352	319,662	231,933	101,660

E. N/A - Bulk and IBNR reserves are separately identified by line but not by type of claim.

F. N/A - Bulk and IBNR reserves are separately identified by line but not by type of claim.

- 34. Subscriber Savings Accounts N/A
- 35. Multiple Peril Crop Insurance N/A
- 36. Financial Guaranty Insurance N/A

#### PART 1 - COMMON INTERROGATORIES

#### GENERAL

	GENERAL						
1.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more which is an insurer?		[ X	]	No [	]	
	If yes, complete Schedule Y, Parts 1, 1A and 2.						
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?	Yes [X] No	[	] N	/A [	]	
1.3	State Regulating?	RHODE ISLA	AND				
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 reporting entity?		[	]	No [	X ]	
2.2	If yes, date of change:						
3.1	State as of what date the latest financial examination of the reporting entity was made or is being made.			12	/31/2	.013	
3.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. date should be the date of the examined balance sheet and not the date the report was completed or released.	This		12	/31/2	800	
3.3	3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).						
3.4	By what department or departments? RHODE ISLAND INSURANCE DEPARTMENT						
3.5	Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?	Yes [ ] No	[	] N	/A [	X ]	
3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes						]	
4.1	any r or Yes Yes		,	No [ No [	1		
4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an							
	affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured direct premiums) of:	d on	r	1	No. [	V I	
	4.21 sales of new business?	Yes Yes			No [ No [		
<b>5</b> 1	4.22 renewals?	Yes			No [		
5.1 5.2	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that ceased to exist as a result of the merger or consolidation.		l	]	NO [	× ]	
	1 2 3	7					
	Name of Entity NAIC Company Code State of Domicile	-					
6.1	Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspen or revoked by any governmental entity during the reporting period?	nded Yes	[	]	No [	X ]	
6.2	2 If yes, give full information						
7.1	1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [ ] No [ X						
7.2	2 If yes,						
	7.21 State the percentage of foreign control						

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

1 Nationality	2 Type of Entity

8.1 8.2	Is the company a subsidiary of a bank holding company reg If response to 8.1 is yes, please identify the name of the ba					Yes [	] No [ X ]
8.3 8.4	If response to 8.3 is yes, please provide the names and loc financial regulatory services agency [i.e. the Federal Reser	the company affiliated with one or more banks, thrifts or securities firms? response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal nancial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the ederal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal egulator.					
	1	2	3	4	5	6	٦
		Location				SEC	
	Affiliate Name (City, State) FRB OCC FDIC						-
9.	What is the name and address of the independent certified JOHNSON LAMBERT LLP, 510 THORNALL ST., SUITE 3	85, EDISON, NJ 08837					_
10.1	Has the insurer been granted any exemptions to the proh requirements as allowed in Section 7H of the Annual Finan law or regulation?					Yes [	] No [X]
10.2	If the response to 10.1 is yes, provide information related to	o this exemption:				-	
10.3	B Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 17A of the Model Regulation, or substantially similar state law or regulation? Yes [ ] No [ X ]						
10.4	If the response to 10.3 is yes, provide information related to	o this exemption:					
	Has the reporting entity established an Audit Committee in If the response to 10.5 is no or n/a, please explain	compliance with the domiciliary state insu	irance laws?		Yes	[X]No[	] N/A [ ]
11.	What is the name, address and affiliation (officer/emplo consulting firm) of the individual providing the statement of JOEL S. CHANSKY, MILLIMAN, INC., 289 EDGEWATER	actuarial opinion/certification?					
12.1	Does the reporting entity own any securities of a real estate					Yes [	] No [ X ]
		12.11 Name of rea	al estate holdi	ng company			
		12.12 Number of p					
12.2	If yes, provide explanation	12.13 Total book/a	adjusted carry	ing value	\$		
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTIN	NG ENTITIES ONLY:					
13.1	What changes have been made during the year in the Unit	ed States manager or the United States tr	rustees of the	reporting enti	ty?		
13.2	Does this statement contain all business transacted for the	reporting entity through its United States	Branch on ris	ks wherever lo	ocated?	Yes [	] No [ ]
	Have there been any changes made to any of the trust inde					Yes [	] No [ ]
13.4	If answer to (13.3) is yes, has the domiciliary or entry state	approved the changes?			Yes	[ ] No [	] N/A [ X ]
14.1	Are the senior officers (principal executive officer, principal similar functions) of the reporting entity subject to a code of	of ethics, which includes the following stan	idards?			Yes [	X ] No [ ]
	<ul> <li>a. Honest and ethical conduct, including the ethical hand relationships;</li> </ul>	ling of actual or apparent conflicts of inte	erest between	personal and	a protessional		
	b. Full, fair, accurate, timely and understandable disclosure c. Compliance with applicable governmental laws, rules an		d by the repor	ting entity;			
	d. The prompt internal reporting of violations to an appropri	iate person or persons identified in the co	de; and				
	e. Accountability for adherence to the code.						
14.11	If the response to 14.1 is no, please explain:						
14.2	Has the code of ethics for senior managers been amended	?				Yes [	] No [X]
	If the response to 14.2 is yes, provide information related to					L	
						\/ ·	1 N. 5 Y 3
	Have any provisions of the code of ethics been waived for a If the response to 14.3 is yes, provide the nature of any wa	, ,				Yes [	] No [X]

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

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

Yes [ ] No [ X ]

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

### 

	BOARD OF DI	RECTORS	5						
16.	Is the purchase or sale of all investments of the reporting entity passed upon eith thereof?	er by the boa	rd of directors or a subordinate comm	ittee	Yes	5 [ X	] Nc	э [	]
17.	Does the reporting entity keep a complete permanent record of the proceedings thereof?	of its board o	f directors and all subordinate commit	tees	Yes	5 [ X	] Nc	э [	]
18.	Has the reporting entity an established procedure for disclosure to its board of dire the part of any of its officers, directors, trustees or responsible employees that is i such person?				Yes	[ X	] No	) [	]
	FINANCIAL								
19.	Has this statement been prepared using a basis of accounting other than Statutory A Accounting Principles)?	Accounting Pri	inciples (e.g., Generally Accepted		Yes	[	] No	5 [ X	( ]
20.1	Total amount loaned during the year (inclusive of Separate Accounts, exclusive of per-	olicy loans):	20.11 To directors or other officers	\$					
			20.12 To stockholders not officers	\$					
			20.13 Trustees, supreme or grand (Fraternal only)	\$					
20.2	Total amount of loans outstanding at the end of year (inclusive of Separate Accounts	s, exclusive of							
	policy loans):		20.21 To directors or other officers						
			20.22 To stockholders not officers	\$					
			20.23 Trustees, supreme or grand (Fraternal only)	\$					
21.1	Were any assets reported in this statement subject to a contractual obligation to tran obligation being reported in the statement?					5 [			
21.2	,,	1.21 Rented fr							
		1.22 Borrowed							
		.23 Leased fr	om others						
		.24 Other		\$					
22.1	Does this statement include payments for assessments as described in the Annual S guaranty association assessments?	Statement Inst	tructions other than guaranty fund or		Yes	5 [	1 Nc	o [ )	( )
22.2		2.21 Amount	paid as losses or risk adjustment	\$					
			paid as expenses						
		2.23 Other an							
23.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliate		·			5 [ X			
23.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:	Ū		\$					
	INVESTM	ENT							
24.01	Were all the stocks, bonds and other securities owned December 31 of current year, the actual possession of the reporting entity on said date? (other than securities lend			, in	Yes	[ X	] Nc	) [	]
24.02	If no, give full and complete information, relating thereto								
24.03	For security lending programs, provide a description of the program including va whether collateral is carried on or off-balance sheet. (an alternative is to reference N			and					
24.04	Does the company's security lending program meet the requirements for a confor Instructions?	ming program	n as outlined in the Risk-Based Capita	I Yes [	] N	lo [	] N#	A [ )	( ]
24.05	If answer to 24.04 is yes, report amount of collateral for conforming programs.			\$					
24.06	If answer to 24.04 is no, report amount of collateral for other programs.			\$					
24.07	Does your securities lending program require 102% (domestic securities) and 10 outset of the contract?	5% (foreign s	securities) from the counterparty at the	Yes [	] N	lo [	] N#	A [ )	( ]
24.08	Does the reporting entity non-admit when the collateral received from the counterpart	ty falls below	100%?	Yes [	] N	lo [	] NA	4 [ )	( ]
24.09	Does the reporting entity or the reporting entity's securities lending agent utilize ti conduct securities lending?	he Master Se	curities Lending Agreement (MSLA) to	Yes [	] N	lo [	] N/	A [ )	( ]
24.10	For the reporting entity's security lending program, state the amount of the following	as of Decemb	per 31 of the current year:	-		-			
	24.101 Total fair value of reinvested collateral assets reported of		-	\$					
	24.102 Total book adjusted/carrying value of reinvested collater	al assets repo	orted on Schedule DL, Parts 1 and 2	\$					

24.103 Total payable for securities lending reported on the liability page

\$.....

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

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

r 31 of th	e current year:	
25.21	Subject to repurchase agreements	\$
25.22	Subject to reverse repurchase agreements	\$
25.23	Subject to dollar repurchase agreements	\$
25.24	Subject to reverse dollar repurchase agreements	\$
25.25	Placed under option agreements	\$
25.26	Letter stock or securities restricted as to sale – excluding FHLB Capital Stock	\$
25.27	FHLB Capital Stock	\$
25.28	On deposit with states	\$
25.29	On deposit with other regulatory bodies	\$
25.30	Pledged as collateral – excluding collateral pledged to an FHLB	\$
25.31	Pledged as collateral to FHLB – including assets backing funding agreements	\$
25.32	Other	\$

25.3 For category (25.26) provide the following:

	1 Nature of Restriction	2 Description		3 Amount			
						1	
.1 Doe	es the reporting entity have any hedging transactions reported on	Schedule DB?		Yes [	]	lo [	Х
	es, has a comprehensive description of the hedging program beer o, attach a description with this statement.	n made available to the domiciliary state?	Yes [	] No [	] N/	Ά[	Х
	ere any preferred stocks or bonds owned as of December 31 of the issuer, convertible into equity?	e current year mandatorily convertible into equity, or, at the option of		Yes [	] N	lo [	Х
.2 If ye	es, state the amount thereof at December 31 of the current year.		\$				

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

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

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

1	2			
Name of Custodian(s)	Custodian's Address			
BANK OF AMERICA	111 WESTMINSTER STREET, PROVIDENCE, RI 02903			

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

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

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? 28.04 If yes, give full and complete information relating thereto:

Yes [ ] No [ X ]

Yes [ X ] No [ ]

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

Yes [ X ] No [ ]

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

1	2	3
Central Registration Depository Number(s)	Name	Address
	NEW ENGLAND ASSET MANAGEMENT	FARMINGTON, CT

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D - Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?
29.2 If yes, complete the following schedule:

		•
1	2	3
CUSIP #	Name of Mutual Fund	Book/Adjusted Carrying Value
29 2999 TOTAL		0

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

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

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

		1	2	3
				Excess of Statement
		Statement (Admitted)		over Fair Value (-), or Fair Value
		Value	Fair Value	over Statement (+)
30.1	Bonds			
30.2	Preferred Stocks	0		0
30.3	Totals	717,980	718,268	288

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

FAIR VALUES ARE BASED ON VALUES EITHER PUBLISHED BY THE SVO OR FROM AN INDEPENDENT PRICING VENDOR SUCH AS MERRILL LYNCH INDICES, INTERACTIVE DATA CORP, REUTERS, S&P, OR BLOOMBERG. IF NEITHER IS AVAILABLE, A PRICE MAY BE OBTAINED FROM A BROKER. ST AND CASH EQUIVALENTS ARE VALUED AT AMORTIZED COST......

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

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

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

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?

32.2 If no. list exceptions:

Yes [ ] No [ X ]

Yes [ ] No [ X ]

Yes [ X ] No [ ]

#### OTHER

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

\$

\$

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

1 Name	2 Amount Paid
INGINE	Amount au
	\$
	\$
	\$

34.1 Amount of payments for legal expenses, if any?

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

1 Name	2 Amount Paid
	\$
	\$
	\$

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

\$

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

1 Name	2 Amount Paid
	\$
	\$
	\$

### ANNUAL STATEMENT FOR THE YEAR 2014 OF THE PAWTUCKET INSURANCE COMPANY

## **GENERAL INTERROGATORIES**

1.1	Does the reporting entity have any direct Medicare Supp	lement Insurance in force?				Yes	[ ] No [ X ]
1.2	If yes, indicate premium earned on U. S. business only.					\$	0
1.3	What portion of Item (1.2) is not reported on the Medicar 1.31 Reason for excluding						0
1.4	Indicate amount of earned premium attributable to Cana						0
1.5	Indicate total incurred claims on all Medicare Supplement	nt insurance.				\$	0
1.6	Individual policies:						
			Most currer	nt three years:			
			1.61 Total	premium earned		\$	0
			1.62 Total	incurred claims		\$	0
				ber of covered lives			0
				ior to most current three	-		
				premium earned			0
				incurred claims			0
			1.66 Num	ber of covered lives			0
1.7	Group policies:						
				nt three years:		•	0
				premium earned		-	0 0
				ber of covered lives		•	0
				ior to most current three			0
				premium earned	-	¢	.0
				incurred claims		-	0
				ber of covered lives			
2.	Health Test:						
				1 Current Year	Pr	2 ior Year	
	2.1	Premium Numerator	\$.	0	\$	0	
	2.2	Premium Denominator	\$	0	\$	0	
	2.3	Premium Ratio (2.1/2.2)	-	0.000		0.000	
	2.4	Reserve Numerator		0	\$	0	
	2.5	Reserve Denominator			\$	722,662	
	2.6	Reserve Ratio (2.4/2.5)	-	0.000		0.000	
3.1	Does the reporting entity issue both participating and not	n-participating policies?				Yes	[ ] No [ X ]
3.2	If yes, state the amount of calendar year premiums writte						
				ipating policies			
			3.22 Non-p	participating policies		\$	

4.1	For Mutual reporting entities and Reciprocal Exchanges only: Does the reporting entity issue assessable policies?		Yes Yes		]	No [	]
4.2	·····					NO [	]
4.3	If assessable policies are issued, what is the extent of the contingent liability of the policyholders?						%
4.4	Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.	\$					
5. 5.1	For Reciprocal Exchanges Only: Does the exchange appoint local agents?		Yes	ſ	1	No [	1
	If yes, is the commission paid:			L	1		1
	5.21 Out of Attorney's-in-fact compensation		Yes [ Yes [	,			
5.3	What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?						1
5.4 5.5	Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? If yes, give full information		Yes	[	]	No [	]

#### ANNUAL STATEMENT FOR THE YEAR 2014 OF THE PAWTUCKET INSURANCE COMPANY

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

What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' 61 compensation contract issued without limit of loss: NO POLICIES IN FORCE Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting 62 firms or computer software models), if any, used in the estimation process: NO POLICIES IN FORCE What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?..... 6.3 NO POLICIES IN FORCE 6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its Yes [] No [X] estimated probable maximum loss attributable to a single loss event or occurrence? If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to 65 edge its exposure to unreinsured catastrophic loss NO POLICIES IN FORCE. Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that 71 would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?... Yes [ ] No [ X ] If yes, indicate the number of reinsurance contracts containing such provisions. 72 7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?. Yes [ ] No [ 1 8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes [ ] No [ X ] 8.2 If yes, give full information 9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior yearend surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results: (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term; (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; (c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party; (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the Yes [ ] No [ X ] reimbursement to the ceding entity 9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where: (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes [ ] No [ X ] 9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income: (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to e achieved Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the 9.4 period covered by the financial statement, and either: (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes [ ] No [ X ] 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP. The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria: (a) The entity does not utilize reinsurance; or Yes [ ] No [X] (b) The entity only engages in a 100% guota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or Yes [ ] No [ X ] (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement Yes [ ] No [ X ] If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? 10 Yes [ ] No [ ] N/A [X]

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

	Has the reporting entity guaranteed policies issued by any other entity and now in force: If yes, give full information	Yes	[	]	No [	X ]
12.1	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for: 12.11 Unpaid losses.	\$				
	12.12 Unpaid underwriting expenses (including loss adjustment expenses)	\$ 				0
	Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?	\$ 				0
	If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?	 Yes [	] No	[	] N/A	[X]
12.4	If yes, provide the range of interest rates charged under such notes during the period covered by this statement: 12.41 From	 			0.0	%
	12.42 To	 			0.0	%
	Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpa losses under loss deductible features of commercial policies?	Yes	[	]	No [	X ]
12.6	If yes, state the amount thereof at December 31 of current year:					
	12.61 Letters of Credit					
	12.62 Collateral and other funds	\$ 				0
	Largest net aggregate amount insured in any one risk (excluding workers' compensation):				.250,0	000
13.2	Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a	Vee	r	1	Na f	V 1
40.0	reinstatement provision?	 Yes	l	]	NO [	ΧJ
13.3	State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.	 				0
14.1	Is the company a cedant in a multiple cedant reinsurance contract?	Yes	ſ	1	No [	¥ 1
14.2	If yes, please describe the method of allocating and recording reinsurance among the cedants:	103	L	1	NO [	ΥJ
14.3	If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance	Vee	r	1	No [	,
14.4	contracts?	Yes	l	]	No [	]
	If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? If the answer to 14.4 is no, please explain:	 Yes	[	]	No [	]
15.1						
	Has the reporting entity guaranteed any financed premium accounts? If yes, give full information	Yes	l	]	No [	XJ
16.1	Does the reporting entity write any warranty business?	 Yes	[	]	No [	X ]
	If yes, disclose the following information for each of the following types of warranty coverage:					
	a yee, decised at following methods of the color of the following types of warranty develope.					

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

\* Disclose type of coverage:

## GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that it excludes from Schedule F Yes [ ] No [ X ] - Part 5. Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F – Part 5. Provide the following information for this exemption: Gross amount of unauthorized reinsurance in Schedule F - Part 3 
 17.11
 excluded from Schedule F – Part 5.....
 \$ 0 .....0 17.12 Unfunded portion of Interrogatory 17.11..... \$..... 17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11 \$.....0 17.14 Case reserves portion of Interrogatory 17.11..... \$... 0 17.16 Unearned premium portion of Interrogatory 17.11...... \$.....0 17.17 Contingent commission portion of Interrogatory 17.11..... \$..... .....0

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

17.18	Gross amount of unauthorized reinsurance in Schedule F $-$ Part 3 excluded from Schedule F $-$ Part 5	\$ 	(	0
17.19	Unfunded portion of Interrogatory 17.18	\$ 	(	C
17.20	Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$ 	(	C
17.21	Case reserves portion of Interrogatory 17.18	\$ 	(	J
17.22	Incurred but not reported portion of Interrogatory 17.18	\$ 	(	D
17.23	Unearned premium portion of Interrogatory 17.18	\$ 	(	J
17.24	Contingent commission portion of Interrogatory 17.18	\$ 	(	C
18.1 Do you act as a custodian for health savings accounts?		 Yes [ ]	No [X	(]
18.2 If yes, please provide the amount of custodial funds held as of	the reporting date.	\$ 	0	)
18.3 Do you act as an administrator for health savings accounts?		 Yes [ ]	No [ X	[]
18.4 If yes, please provide the balance of the funds administered as	of the reporting date.	\$ 	0	)

### ANNUAL STATEMENT FOR THE YEAR 2014 OF THE PAWTUCKET INSURANCE COMPANY

### **FIVE-YEAR HISTORICAL DATA**

	Show amounts in whole	1 2014	2 2013	3 2012	4 2011	5 2010
Gross P	Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)	2014	2013	2012	2011	2010
	Liability lines (Lines 11.1.11.2.16.17.1.17.2.17.3					
	18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	0	0	0	0	
	Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	(
3.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0		0	0	
4. /	All other lines (Lines 6 10 12 14 15 22 24 29					
-	29, 30 & 34)	0	0	0	0	
	Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	(
	Total (Line 35)					
let Prei	miums Written (Page 8, Part 1B, Col. 6)					
7.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	0	0	0	0	(
8	Property lines (Lines 1, 2, 9, 12, 21 & 26)			0	0	(
0	Droporty and liability combined lines					
	(Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	(
10.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	(
11	Nonproportional rainquirance lines					
(	(Lines 31, 32 & 33)	0	0	0	0	(
12.	Total (Line 35)	0	0	0	0	(
	ent of Income (Page 4)	(005,000)	(554,000)	(10, 110)	05 007	(002.04)
13.	Net underwriting gain (loss) (Line 8) Net investment gain (loss) (Line 11)	(233,288) 602 007		(16,419) 		
14.	Total other income (Line 15)					
16.	Dividends to policyholders (Line 17)	Õ		0		,00
17	Enderal and foreign income taxes incurred					
10	(Line 19)	(1,007,349)	(234, 038)		450,630	(989,93
	Sheet Lines (Pages 2 and 3)		(234,030)	(7,470)	439,039	
	l otal admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	5,210,694	4,634,576	5,238,415	6 ,027 ,552	6 , 383 , 68
20.	Premiums and considerations (Page 2, Col. 3)	0	0	0	0	
1	20.1 In course of collection (Line 15.1)		0	0 0	0	
	20.2 Deterred and not yet due (Line 15.2)	0	0		0	
21	Total liabilities excluding protected cell					
	business (Page 3, Line 26)	5,130,809	4,195,128	5,083,741	5,923,846	6,277,28
22.	Losses (Page 3, Line 1)					1 , 562 , 67 
23. 1	Loss adjustment expenses (Page 3, Line 3) Unearned premiums (Page 3, Line 9)					
25.	Capital paid up (Page 3, Lines 30 & 31)	1,000,000				
26.	Surplus as regards policyholders (Page 3, Line 37)					
	ow (Page 5)					
	Net cash from operations (Line 11)	2,815,680	(1,095,241)	(32,844)	(532,766)	
	sed Capital Analysis	70 004	420 449	164 676	102 705	106 200
28.	Total adjusted capital Authorized control level risk-based capital		439,448 110 112	154,070 125,726		
	age Distribution of Cash, Cash Equivalents					
	ested Assets					
	(Page 2, Col. 3)(Item divided by Page 2, Line 12,					
00	Col. 3) x 100.0	0.1	0.0	0.0	0.0	17
	Bonds (Line 1) Stocks (Lines 2.1 & 2.2)					
32.	Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.0			.0.
33.	Real estate (Lines 4.1, 4.2 & 4.3)					
	Cash, cash equivalents and short-term investments (Line 5)					15
35	(Line 5) Contract loans (Line 6)		51./   0.0			
36.	Derivatives (Line 7)	0.0	0.0	0.0		
37. (	Other invested assets (Line 8)	0.0	0.0		0.0	.0.
38.	Receivables for securities (Line 9)	0.1	0.0	0.0	0.0	0.
39.	Securities lending reinvested collateral assets (Line 10)	0.0	0.0	0.0	0.0	0
	Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
41.	Cash. cash equivalents and invested assets (Line					
	12)					100.0
ivestm	ents in Parent, Subsidiaries and Affiliates					
	Affiliated bonds, (Sch. D, Summary, Line 12, Col. 1)	0	0	0	0	
43. /	Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1)	o	o l	o l	o l	
11	Affiliated common stocks					
	(Sch. D, Summary, Line 24, Col. 1)	0	0	0	0	
45. /	Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)	n	n	n	0	
			Ö			
47.	Affiliated mortgage loans on real estate All other affiliated Total of above Lines 42 to 47		0	0	0	
		0	0	0	0	
	Total Investment in parent included in Lines 42 to 47		0			
	above Percentage of investments in parent, subsidiaries		U	U	u	
	i oroontage or investillents in parent, subsidianes					
	and affiliates to surplus as regards policyholders			I	I	

# FIVE-YEAR HISTORICAL DATA

			tinued)	I		
		1 2014	2 2013	3 2012	4 2011	5 2010
apita	al and Surplus Accounts (Page 4)					
51.	Net unrealized capital gains (losses) (Line 24)	0	0	0	0	
52.	Dividends to stockholders (Line 35)	0				
	Change in surplus as regards policyholders for the year (Line 38)					(1 740 E
	year (Line 38)	(359,574)			(2,093)	(1,749,50
ross	Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	(1.260)	(2, 898)	(1 289)	721 125	1 146 6
55	Property lines (Lines 1, 2, 9, 12, 21 & 26)	(971)	(8 659)	(3 145)	(1, 211)	(8.7
	Descents and lightly samplined lines					(0):
	(Lines 3, 4, 5, 8, 22 & 27)	141,316				
57.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	
58.	Nonproportional reinsurance lines					
	(Lines 31, 32 & 33)	0	0	0	0	
59.	Total (Line 35)	139,085			1,380,703	1,737,5
et Lo	osses Paid (Page 9, Part 2, Col. 4)					
60.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3,		(0,000)	(0.100)	440.007	
~ 1	18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)			(6,169) (3,145)		
	Property lines (Lines 1, 2, 9, 12, 21 & 26)			(3,140)	(1,211)	
02.	(Lines 3, 4, 5, 8, 22 & 27)					712,5
63.	All other lines	0	0	0	0	
64	(Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	U	U	U	0	
04.	(Lines 31, 32 & 33)	0	0	0	0	
65.	Total (Line 35)		158,190	109 , 565	1,114,521	1,092,5
66.	divided by Page 4, Line 1) x 100.0					
67.	Losses incurred (Line 2)	0.0				0
68.	Loss expenses incurred (Line 3)	0.0	0.0	0.0		0
69. 70	Other underwriting expenses incurred (Line 4)           Net underwriting gain (loss) (Line 8)	0.0	0.0	0.0		0 0
				0.0		0
	Percentages					
71.	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	0.0	0.0	0.0	0.0	0
72.	Losses and loss expenses incurred to premiums					
	earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)					0
73.	Net premiums written to policyholders' surplus					
	(Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	0.0	0.0	0.0	0.0	0
	ear Loss Development (000 omitted)					
ne Y	I					
	Development in estimated losses and loss				1	
	Development in estimated losses and loss expenses incurred prior to current year					
74.	expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11)					4
74.	expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior					
74. 75.	expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)					
74. 75. <b>wo Y</b>	expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)					
74. 75. wo Y	expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) <b>Year Loss Development (000 omitted)</b> Development in estimated losses and loss expenses					
74. 75. wo Y	expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) <b>/ear Loss Development (000 omitted)</b> Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col.		20.5			
74. 75. <b>wo Y</b> 76.	expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) <b>/ear Loss Development (000 omitted)</b> Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)					
74. 75. <b>wo Y</b> 76.	expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) <b>/ear Loss Development (000 omitted)</b> Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col.		20.5			
74. 75. <b>wo Y</b> 76.	expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) <b>/ear Loss Development (000 omitted)</b> Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) Percent of development of losses and loss		20.5			

If no, please explain

#### ANNUAL STATEMENT FOR THE YEAR 2014 OF THE PAWTUCKET INSURANCE COMPANY

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

(\$000 Omitted)												
	Pr	emiums Earn	ed			Loss	and Loss Ex	kpense Paym	ents			12
Years in	1	2	3				and Cost	Adjusting and Other		10	11	
Which				Loss Pa	<i>.</i>	Containment Payments		Payments				Number of
Premiums				4	5	6	7	8	9	Salvage	Total Net	Claims
Were Earned and Losses	Direct and		Net	Direct and		Direct and		Direct and		and	Paid (Cols. 4 - 5 + 6 -	Reported Direct and
Were Incurred	Assumed	Ceded	(Cols. 1 - 2)		Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Subrogation Received	4 - 5 + 6 - 7 + 8 - 9)	Assumed
			í í					7 toounicu	Ocucu	Received	/	
1. Prior	XXX	XXX	XXX	141	(189)	100	(167)	0	0	2		XXX
2. 2005		0		0	0	0	0	0	0	0	0	xxx
3. 2006	0	0	0	0	0	0	0	0	0	0	0	xxx
4. 2007	0	0	0	0	0	0	0	0	0	0	0	xxx
5. 2008	0	0	0	0	0	0	0	0	0	0	0	xxx
6. 2009	0	0	0	0	0	0	0	0	0	0	0	xxx
7. 2010	0	0	0	0	0	0	0	0	0	0	0	xxx
8. 2011	0	0	0	0	0	0	0	0	0	0	0	xxx
9. 2012	0	0	0	0	0	0	0	0	0	0	0	xxx
10. 2013	0	0	0	0	0	0	0	0	0	0	0	xxx
11. 2014	0	0	0	0	0	0	0	0	0	0	0	XXX
12. Totals	xxx	xxx	xxx	141	(189)	100	(167)	0	0	2	597	ххх

		Losses	Unpaid		Defens	e and Cost (	Containment	Unpaid	Adjusting Ung		23	24	25
	Case	Basis	Bulk +		Case	Basis	Bulk +	IBNR	21	22		Total	Number of
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	Salvage and Subrog- ation Anticipated	Net Losses and Expenses Unpaid	Claims Outstand- ing Direct and Assumed
1		5		148	0	0	128	50	63	0	0		XXX
2	0	0	0	0	0	0	0	0	0	0	0	0	xxx
3	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6	0	0	0	0	0	0	0	0	0	0	0	0	xxx
7	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8	0	0	0	0	0	0	0	0	0	0	0	0	xxx
9	0	0	0	0	0	0	0	0	0	0	0	0	XXX
10	0	0	0	0	0	0	0	0	0	0	0	0	xxx
11.	0	0	0	0	0	0	0	0	0	0	0	0	xxx
12.	70	5	273	148	0	0	128	50	63	0	0	331	xxx

	Losses and	Total Loss Expense	es Incurred		oss Expense F ed/Premiums E		Nontabula	r Discount	34 Inter-	Net Balar Reserves Af	
	26 Direct and	27	28	29 Direct and	30	31	32 33		Company Pooling	35	36 Loss
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Participation Percentage	Losses Unpaid	Expenses Unpaid
1	xxx	xxx	XXX	xxx	xxx.	xxx	0	0	xxx		141
2	0	0	0	0.0	0.0	0.0	0	0		0	0
3	0	0	0	0.0	0.0	0.0	0	0		0	0
4	0	0	0	0.0	0.0	0.0	0	0		0	0
5	0	0	0	0.0	0.0	0.0	0	0		0	0
6	0	0	0	0.0	0.0	0.0	0	0		0	0
7	0	0	0	0.0	0.0	0.0	0	0		0	0
8	0	0	0	0.0	0.0	0.0	0	0		0	0
9	0	0	0	0.0	0.0	0.0	0	0		0	0
10	0	0	0	0.0	0.0	0.0	0	0		0	0
11.	0	0	0	0.0	0.0	0.0	0	0		0	0
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	190	141

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements, which will reconcile Part 1 with Parts 2 and 4.

#### ANNUAL STATEMENT FOR THE YEAR 2014 OF THE PAWTUCKET INSURANCE COMPANY

# SCHEDULE P - PART 2 - SUMMARY

	INC	CURRED NET	ND									
		-	-		(\$000 OI	,	_	•	<u>^</u>		DEVELO	
Years in Which Losses Were	1	2	3	4	5	6	7	8	9	10	11	12
Incurred	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	One Year	Two Year
1. Prior		19 , 122	17 ,931		17 ,846		18,657		18 ,986	19,345	359	
2. 2005	0	0	174	174	174	0	0	0	0	0	0	0
3. 2006	xxx	0	48	48	56	0	0	0	0	0	0	0
4. 2007	xxx	xxx	0	0	2	0	0	0	0	0	0	0
5. 2008	xxx	xxx	xxx.	0	4	0	0	0	0	0	0	0
6. 2009	xxx	xxx	xxx	xxx	0	0	0	0	0	0	0	0
7. 2010	xxx	xxx	xxx	xxx	XXX	0	0	0	0	0	0	0
8. 2011	xxx	xxx	xxx	xxx	XXX	xxx	0	0	0	0	0	0
9. 2012	xxx	xxx	xxx	xxx	XXX	xxx	XXX	0	0	0	0	0
10. 2013	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	0	0	0	xxx
11. 2014	XXX	xxx	xxx	XXX	XXX	xxx	XXX	XXX	XXX	0	xxx	xxx
										12. Totals	359	390

# SCHEDULE P - PART 3 - SUMMARY

	CUMULAT	IVE PAID NE	T LOSSES AI	ND DEFENSE	AND COST		NT EXPENSE	ES REPORTE	D AT YEAR I	END (\$000	11	12 Number of
Years in Which	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With	Claims Closed Without
Losses Were	0005	0000	0007	0000	0000	0040	0011	0040	0040	0014	Loss	Loss
Incurred	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	Payment	Payment
1. Prior	000	7 , 268	10,664	13,611	15,462	16,619	17,811	18,137		19,076	xxx	xxx
2. 2005	0	0	0	0	0	0	0	0	0	0	xxx	xxx
3. 2006	XXX	0	0	0	0	0	0	0	0	0	xxx	xxx
4. 2007	XXX	xxx	0	0	0	0	0	0	0	0	xxx	xxx
5. 2008	XXX	xxx	XXX	0	0	0	0	0	0	0	xxx	xxx
6. 2009	xxx	xxx.	xxx	xxx.	0	0	0	0	0	0	xxx	xxx.
7. 2010	XXX	xxx	XXX	XXX	XXX	0	0	0	0	0	xxx	xxx
8. 2011	XXX	xxx	XXX	XXX	XXX	XXX	0	0	0	0	xxx	xxx
9. 2012	XXX	xxx	XXX	xxx.	XXX	XXX	XXX	0	0	0	xxx	xxx
10. 2013	xxx	xxx.	xxx	xxx	xxx	xxx	xxx	xxx	0	0	xxx	xxx.
11. 2014	XXX	xxx	XXX	xxx	XXX	XXX	xxx	xxx	xxx	0	xxx	xxx

### **SCHEDULE P - PART 4 - SUMMARY**

Years in Which	BULK AND I	BNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
Losses Were Incurred	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior		4,449	2,405	1,277	713	637		321	225	203
2. 2005	0	0	0	0	0	0	0	0	0	0
3. 2006	XXX	0	0	0	0	0	0	0	0	0
4. 2007	XXX	XXX	0	0	0	0	0	0	0	0
5. 2008	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2009			xxx.	xxx.	0	0	0	0	0	0
7. 2010	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2011	XXX	XXX	XXX	XXX	XXX	xxx	0	0	0	0
9. 2012	XXX	XXX	XXX	XXX	XXX	xxx	xxx	0	0	0
10. 2013	XXX	XXX	XXX	XXX	XXX	xxx	xxx	xxx	0	0
11. 2014	XXX	XXX	xxx	xxx	XXX	XXX	xxx	XXX	xxx	0

## SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

					Alloc	ated By States	And Territories				
			1	Gross Premiu Policy and Mer Less Return P Premiums on Tak	ms, Including nbership Fees rremiums and Policies Not	4 Dividends Paid	5	6	7	8 Finance and	9 Direct Premium Written for Federal
			Active	2 Direct Premiums	3 Direct Premiums	or Credited to Policyholders on Direct	Direct Losses Paid (Deducting	Direct Losses	Direct Losses	Service Charges Not Included in	Purchasing Groups (Included in
	States, etc.		Status	Written	Earned	Business	Salvage)	Incurred	Unpaid	Premiums	Col. 2)
		4L  4K	N N	0	0	0	0	0	0	0	
	Arizona		N		0		0	0	0		
4.	Arkansas		N	0	0	0	0	0	0	0	
		CA	N	0	0	0	0	0	0	0	
		СО  СТ	N N	0	0	0	0	0	0	0	
		DE	N				(140)		0	0	
	Dist. Columbia		N	0	0	0	0	0	0	0	
		FL	N	0	0	0	0	0	0	0	
		GA  HI	N N	0	0	0	0	0	0	0	
		D	N			0		0	0	0	
		L	N	0	0	0	0	0	0	0	
		N	N	0	0	0	0	0	0	0	
	lowal Kansas	A KS	N N	U	U	0 N	0 N	0 N	0 N	0 N	
18.	Kentucky	KY	N		0	0	0	0	0	0	
19.	Louisiana l	_A	N	0	0	0	0	0	0	0	
	Maine		N	0	0	0	0	0	0	0	
21.	Maryland		N N	U	0 N	0 N	0	0	0 N	0 N	
23.	Michigan	MI	N	0		0		0	0	0	
24.	Minnesota	MN	N	0	0	0	0	0	0	0	
	Mississippi		N	0	0	0	0	0	0	0	
	Missouri Montana		N N	U	0 N	0 N	0 N	<u>0</u>	0 0	0 N	
	Nebraska		N	0	0	0	0	0	0	0	
29.	Nevada N	NV	N	0	0	0	0	0	0	0	
	New Hampshire New James New Jam		Ļ	Ö	0	0		(2,211)	0	Ö	
	New Jersey		L N	0	0	0		(53,479)		0	
	New York		к. 	0	0		0				
34.	No.Carolina N	NC	N	0	0	0	0	0	0	0	
	No.Dakota		N	0	0	0	0	0	ļ <u>0</u>	ļ <u>0</u>	
	Ohio	ОН  ОК	N N		0	0	0	0	0	0	
		0R	N N		0 N	0		0	0	0	
39.	Pennsylvania F	PA	N	Ö	0	0	0	0			
		RI	L	Ö	0	0	0	(20,000)		Ö	
		SC SD	N N	0	0	0	0	0	0	0	
	Tennessee		N				0	0	0	0	
		TX	N	Ö	0	0	0	0	0		
45.	Utahl	UT	N	0	<u>0</u>	0	0	0	<u>0</u>	<u>0</u>	
		VT	N	0	0	0			0	0	
	Virginia V Washington V		N N		0 N	0 0	0	0 	0 	0 	
	West Virginia		N	0	0	0	0	0	0	0	
	Wisconsin		N	Ô	0	0	0	0	0	Ô	
	Wyoming		N	0	0	0	0	0	0	0	
	American Samoa A Guam		N N	0 0	0 0	0	0	0	0	0	
	Puerto Rico F		N			0	0	0	0	0	
	U.S. Virgin Islands				-	_	_	-	_	_	
56.	Northern Mariana	VI	N	0	0	0	0	0	0	0	
57	Islands I Canada		N N		0 	0	0	0	0	0	
	Aggregate other										
	alien	от	<b>XXX</b> (a) 4	0 0	0 0	0 0	0 138,792	0 (75,850)	0 343,000	0 0	0 0
<b>DETAII</b> 58001.	S OF WRITE-INS										
58001.			XXX								
58003.			XXX								
58998.	Sum. of remaining write-ins for Line 58 from overflow page		xxx	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 + 58 (Line 58 above)		xxx	. 0	0	0	0	0	0	0	n
<u> </u>		Licon		0			Non dominilad Pl		÷	oprodited Boipour	0

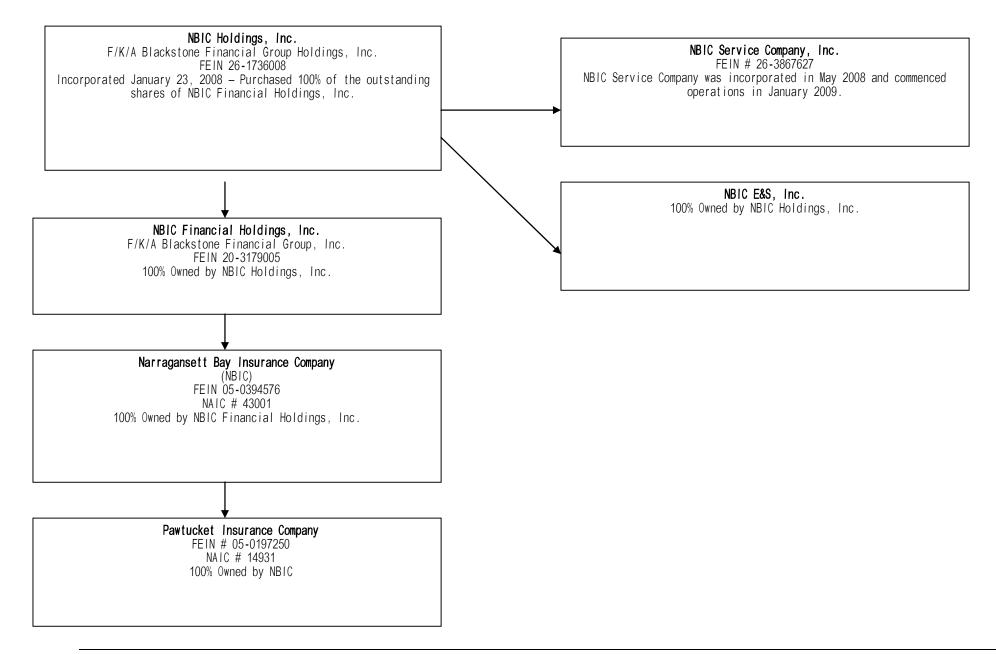
(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

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

THERE WERE NO PREMIUMS WRITTEN OR EARNED DURING 2014.

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

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