QUARTERLY STATEMENT

OF THE

	ALTUS DENTAL	
	INSURANCE COMPANY, INC.	
of	PROVIDENCE	
in the state of	RHODE ISLAND	

TO THE

Insurance Department

OF THE

STATE OF

STATE OF RHODE ISLAND

FOR THE QUARTER ENDED

March 31, 2016

HEALTH

2016



QUARTERLY STATEMENT

AS OF MARCH 31, 2016
OF THE CONDITION AND AFFAIRS OF THE

			ALTUS D	ENTAL INSUR	ANCE CO.	, INC.			
		1571				_	Emp	oloyer's ID Number	05-0513223
,	•	,			Stat	e of Domicilo	or Port of Entry	BHUDE ISI WID	
_				,	Sidt	e or portificile	. OI FOIL OI EIIUY_	MIODE ISLAND	
Licensed as business type			[X]			[]	Hospital, Medical	& Dental Service or Inde	emnity []
		rvice Corporation	[]					ce Organization	[]
In a superstant/Organizant	Other	A.,		Is HMO Federally (Qualified?			Contombor 1	2004
Country of Domicile Laws of Domicile Charles RHODE (SLAND UNITED STATES OF AMERICA UNITED STATES UNITED STATES OF AMERICA UNI		2001							
_	TO OTTAINED		and Number)	,		### Employer's ID Number	ide)	
Main Administrative Office	10 CHAF	RLES STREET			(2)				
Mode County 1971									
	PROVID			and Zip Code)				umber)	
Mail Address 10 CH	ARLES STREET				,	PRO'			
D: 1 # 1D 1)		DD 01 //D EN 05	, ,		,
Primary Location of Books and	Records	10 CHARLI		d Number)					
Internet Website Address	www.altı	usdental.com	(00.000 a	a 11a551)	(0.1)	o. 101111, otate	s, country and <u>-</u> .p co	/ac) (/ aca coac) (/ c.c.p	
Statutory Statement Contact	GEC	RGE J. BEDARD							
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	gbed		E-Mail Addre	ss)	-		· · · · · · · · · · · · · · · · · · ·		
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3.	RICHARD A. FF	RITZ			TREASU	RER			
				VICE-PRESID	ENTS				
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JOHN I RUGGEIRI		EDWIN J. SANTOS			VANESSA TO	LEDU-VICKER	(5	-	
									
									
State of RHODE ISLAND									
County of PROVIDENCE	ss								
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(except for formatting differences du	ie to electronic filir	ng) of the enclosed sta	tement. The	electronic filing may b	e requested by	various regula	tors in lieu of or in ad	idition to the enclosed state	ement.
(Signatur	·e)			(Signature	e)			(Signature)	
JOSEPH A. N	√AGLE			KERRIE BEN	INETT			RICHARD A. FRIT	Z
(Printed Na	ıme)			(Printed Na	me)			,	
1.				2.				3.	
PRESIDE	.NT			SECRETA	RY			TREASURER	
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Subscribed and sworn to before me	this						a. Is this an original t	filing?	[X]Yes []No
12th day of MAY		, 2016					b. If no: 1. State	the amendment number	
							2. Date f	iled	
			_				3. Numb	er of pages attached	
PAMELA B. BUTERA									

My commission expires 8/24/18

ASSETS

		C	urrent Statement Da	te	
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
	Bonds Stocks:	23,473,533		23,473,533	23,423,675
	2.1 Preferred stocks				
	2.2 Common stocks	6,250		6,250	118,949
3.	Mortgage loans on real estate:				
	3.1 First liens3.2 Other than first liens				
4.	Real estate:				
	4.1 Properties occupied by the company (less \$				
	4.2 Properties held for the production of income (less \$0 encumbrances)				
E	4.3 Properties held for sale (less \$ 0 encumbrances)				
5.	Cash (\$ 507,610), cash equivalents (\$ 0), and short-term investments (\$ 0)	507,610		507,610	858.373
6.	Contract loans (including \$ 0 premium notes)				
7.	Derivatives				
8.	Other invested assets	58,024		58,024	1,215,365
9.	Receivables for securities				
10. 11.	Securities lending reinvested collateral assets Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	24,045,417		24,045,417	25,616,362
13.	Title plants less \$ 0 charged off (for Title insurers only)				
14.	Investment income due and accrued	389,430		389,430	278,034
15.	Premiums and considerations:				
	 15.1 Uncollected premiums and agents' balances in the course of collection 15.2 Deferred premiums, agents' balances and installments booked but deferred 	422,479	55,354	367,125	458,417
	and not yet due (including \$ 0 earned but unbilled premiums)				
	15.3 Accrued retrospective premiums (\$ 0) and contracts				
	subject to redetermination (\$ 0)				
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				
	 16.2 Funds held by or deposited with reinsured companies 16.3 Other amounts receivable under reinsurance contracts 				
17.	Amounts receivable relating to uninsured plans	1,044,231	97,967	946,264	762,778
18.1	Current federal and foreign income tax recoverable and interest thereon				
18.2	Net deferred tax asset	182,587		182,587	182,587
19.	Guaranty funds receivable or on deposit				
20. 21.	Electronic data processing equipment and software Furniture and equipment, including health care delivery assets (\$ 0)				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$ 0) and other amounts receivable				
25.	Aggregate write-ins for other than invested assets				
26.	Total assets excluding Separate Accounts, Segregated Accounts and	26.004.144	452 204	25 020 022	27 200 470
27.	Protected Cell Accounts (Lines 12 to 25) From Separate Accounts, Segregated Accounts and Protected Cell Accounts	26,084,144	153,321	25,930,823	27,298,178
	Total (Lines 26 and 27)	26,084,144	153,321	25,930,823	27,298,178
	DETAILS OF WRITE-IN LINES				
1101.					
1102.					
1103.					
	Summary of remaining write-ins for Line 11 from overflow page				
1199. 2501.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2502.					
2503.					
	Summary of remaining write-ins for Line 25 from overflow page				
2599	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	i	I	l	l

LIABILITIES, CAPITAL AND SURPLUS

			Current Period		Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less \$ 0 reinsurance ceded)	1,684,440		1,684,440	1,507,790
	Accrued medical incentive pool and bonus amounts Unpaid claims adjustment expenses Aggregate health policy reserves, including the liability of \$ 0 for medical loss ratio rebate per the Public Health Service Act	93,922		93,922	87,312
5.	Aggregate life policy reserves				
6.	• • • • • • • • • • • • • • • • • • • •				
7.	Aggregate health claim reserves				
	Premiums received in advance	1,032,969		1,032,969	828,432
9.	General expenses due or accrued	1,125,412		1,125,412	2,655,246
10.1	Current federal and foreign income tax payable and interest thereon (including \$ 0 on realized gains (losses))				
10.2	Net deferred tax liability				
11.	Ceded reinsurance premiums payable				
12.	Amounts withheld or retained for the account of others				
	Remittances and items not allocated				
14.	Borrowed money (including \$ 0 current) and interest thereon \$ 0 (including \$ 0 current)				
15.	Amounts due to parent, subsidiaries and affiliates	855,654		855,654	1,363,113
16.	Derivatives				
17.	Payable for securities				
18.	Payable for securities lending				
19.	Funds held under reinsurance treaties (with \$ 0 authorized reinsurers,				
	\$ 0 unauthorized reinsurers, and \$ 0 certified reinsurers)				
20.	Reinsurance in unauthorized and certified (\$ 0) companies				
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans				
23.	Aggregate write-ins for other liabilities (including \$ 0 current)	1,243,479		1,243,479	456,000
24.	Total liabilities (Lines 1 to 23)	6,035,876		6,035,876	6,897,893
25.	Aggregate write-ins for special surplus funds	XXX	XXX		
26.	Common capital stock	XXX	XXX	3,000,000	3,000,000
27.	Preferred capital stock	XXX	XXX		
28.	Gross paid in and contributed surplus	XXX	XXX	3,319,861	3,319,861
29.	Surplus notes	XXX	XXX		
	Aggregate write-ins for other than special surplus funds	XXX	XXX		787,479
31.	Unassigned funds (surplus)	XXX	XXX	13,575,086	13,292,945
32.	Less treasury stock, at cost:				
	32.1 0 shares common (value included in Line 26 \$ 0)	XXX	XXX		
	32.2 0 shares preferred (value included in Line 27 \$ 0)	XXX	XXX		
	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	19,894,947	20,400,285
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	25,930,823	27,298,178

DETAILS OF WRITE-IN LINES				
2301. 2016 ACA TAX ASSESSMENT LIABILITY	787,479		787,479	
2302. ADVANCE DEPOSITS	456,000		456,000	456,000
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page				
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	1,243,479		1,243,479	456,000
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX		
3001. RESTRICTED RESERVES ACA ASSESSMENT	XXX	XXX		787,479
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX		
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX		787,479

STATEMENT OF REVENUE AND EXPENSES

			nt Year Date	Prior Year To Date	Prior Year Ended December 31
		1	2	3	4
		Uncovered	Total	Total	Total
1.	Member Months	XXX	425,888	402,345	1,649,333
2.	Net premium income (including \$ 0 non-health premium income)	XXX	13,465,454	12,203,822	50,760,595
3.	Change in unearned premium reserves and reserve for rate credits	XXX			
	Fee-for-service (net of \$ 0 medical expenses)	XXX			
5.	District the second	XXX			
6.	Aggregate write-ins for other health care related revenues				
7	Aggregate write-ins for other non-health revenues				
8	Total revenues (Lines 2 to 7)	XXX	13,465,454	12,203,822	50,760,595
Host	oital and Medical:		10,400,404	12,200,022	00,700,000
	11				
	Hospital/medical benefits				00.400.400
10.	Other professional services		10,906,111	9,356,541	38,138,160
	Outside referrals				
12.	Emergency room and out-of-area				
13.	Prescription drugs				
14.	Aggregate write-ins for other hospital and medical				
15.	Incentive pool, withhold adjustments and bonus amounts				
	Subtotal (Lines 9 to 15)		10,906,111	9,356,541	38,138,160
Less	:				
17.	Net reinsurance recoveries				
18.	Total hospital and medical (Lines 16 minus 17)		10,906,111	9,356,541	38,138,160
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$ 121,622 cost containment expenses		608,109	582,304	2,493,636
21.	General administrative expenses		2,437,256	2,255,100	6,659,557
22.	Increase in reserves for life and accident and health contracts (including				
	\$0 increase in reserves for life only)				
23.	Total underwriting deductions (Lines 18 through 22)		13,951,476	12,193,945	47,291,353
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(486,022)	9,877	3,469,242
25.	Net investment income earned		135,575	111,233	460,262
26.	Net realized capital gains (losses) less capital gains tax of \$ 0				7,292
	Net investment gains (losses) (Lines 25 plus 26)		135,575	111,233	467,554
28.	Net gain or (loss) from agents' or premium balances charged off [(amount				
	recovered \$ 0) (amount charged off \$ 0)]				
29.	Aggregate write-ins for other income or expenses				88,109
	Net income or (loss) after capital gains tax and before all other federal income taxes				
	(Lines 24 plus 27 plus 28 plus 29)	xxx	(350,447)	121,110	4,024,905
31.	Federal and foreign income taxes incurred	XXX	154,891	242,469	1,816,458
	Net income (loss) (Lines 30 minus 31)	XXX	(505,338)	(121,359)	

DETAILS OF WRITE-IN LINES		
0601.	XXX	
0602.	XXX	
0603.	XXX	
0698. Summary of remaining write-ins for Line 06 from overflow page	XXX	
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 06 above)	XXX	
0701.	XXX	
0702.	XXX	
0703.	XXX	
0798. Summary of remaining write-ins for Line 07 from overflow page	XXX	
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 07 above)	XXX	
1401.		
1402.		
1403.		
1498. Summary of remaining write-ins for Line 14 from overflow page		
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)		
2901. GAIN ON PURCHASE OF MASSACHUSETTS TAX CREDITS		88,109
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		88,109

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1	2	3
		Current Year	Prior Year	Prior Year Ended
		To Date	To Date	December 31
	CAPITAL & SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	20,400,285	18,146,993	18,146,993
34.			(121,359)	2,208,447
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$ 0			
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			44,845
39.	Change in nonadmitted assets			(56,449)
40.	Change in unauthorized and certified reinsurance			
41.				
42.	Change in surplus notes			
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in			
	44.2 Transferred from surplus (Stock Dividend)			
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in			
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus	45,613	25,071	56,449
48.	Net change in capital and surplus (Lines 34 to 47)	(505,338)	(121,359)	2,253,292
49.	Capital and surplus end of reporting period (Line 33 plus 48)	19,894,947	18,025,634	20,400,285

	DETAILS OF WRITE-IN LINES			
4701.	INCLUSION OF BAD DEBT RESERVE IN THE NON ADMITTED ASSET	45,613	25,071	56,449
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page			
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	45,613	25,071	56,449

CASH FLOW

		1	2	3
	Cash from Operations	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
1.	Premiums collected net of reinsurance	13,577,797	12,800,142	50,863,55
2.	Net investment income	24,179	60,696	435,30
3.	Miscellaneous income			
4.	Total (Lines 1 to 3)	13,601,976	12,860,838	51,298,85
5.	Benefit and loss related payments	10,729,461	9,246,931	37,915,70
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	4,568,589	3,387,728	8,142,56
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)	154,891	242,469	1,816,45
10.	Total (Lines 5 through 9)	15,452,941	12,877,128	47,874,72
11.	Net cash from operations (Line 4 minus Line 10)	(1,850,965)	(16,290)	3,424,13
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	1,050,000		6,467,7
	12.2 Stocks	4 000 700	190,416	
	12.3 Mortgage loans			
	12.4 Real estate			
	12.5 Other invested assets	1,157,341	1,114,478	1,114,47
	12.6 Net gains (or losses) on cash, cash equivalents and short-term investments			
	12.7 Miscellaneous proceeds			
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	3,537,140	1,304,894	7,582,19
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	1,233,645		11,230,37
	13.2 Stocks	1,217,100	150,500	79,03
	13.3 Mortgage loans			
	13.4 Real estate			
	13.5 Other invested assets			870,40
	13.6 Miscellaneous applications		1,208	
	13.7 Total investments acquired (Lines 13.1 to 13.6)	2,450,745	151,708	12,179,8
14.	Net increase (or decrease) in contract loans and premium notes			// ===
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	1,086,395	1,153,186	(4,597,62
10	Cash from Financing and Miscellaneous Sources			
10.	Cash provided (applied):			
	16.1 Surplus notes, capital notes16.2 Capital and paid in surplus, less treasury stock			
	16.3 Borrowed funds			
	16.4 Net deposits on deposit-type contracts and other insurance liabilities			
	16.5 Dividende te eteckholdere			
	16.6 Other cash provided (applied)	413,807	306,667	406,07
17	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus	410,007	300,007	400,01
.,.	Line 16 F plus Line 16 6)	413,807	306,667	406,07
	* * * * * * * * * * * * * * * * * * * *	1.0,001	300,00.	100,01
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS	(0-0-0-0)		
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(350,763)	1,443,563	(767,4
	Cash, cash equivalents and short-term investments:	050 070	4.005.705	4.005.76
19.	19.1 Beginning of year	858,373	1,625,785 3,069,348	1,625,78 858,3
19.	19.2 End of period (Line 18 plus Line 19.1)	507,610		

Note: Supplemental disclosures of cash flow information for non-cash transactions:	
20.0001	
20.0002	
20.0003	ı

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive ((Hospital & Medical)	4	5	6	7	8	9	10
		2	3							
				Medicare	Vision	Dental	Federal Employees	Title XVIII	Title XIX	
	Total	Individual	Group	Supplement	Only	Only	Health Benefit Plan	Medicare	Medicaid	Other
Total Members at end of:										
1. Prior Year	141,116		.			141,116				
2. First Quarter	142,544					142,544				
3. Second Quarter										
4. Third Quarter										
5. Current Year			.							
6. Current Year Member Months	425,888					425,888				
Total Member Ambulatory Encounters for Period: 7. Physician										
8 Non-Physician										
9. Totals										
10. Hospital Patient Days Incurred										
11. Number of Inpatient Admissions										
12. Health Premiums Written (a)	13,577,797					13,577,797				
13. Life Premiums Direct										
14. Property/Casualty Premiums Written										
15. Health Premiums Earned	13,465,454					13,465,454				
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services	10 720 461					10,729,461				
18. Amount Incurred for Provision of Health Care Services	10,906,111					10,906,111				

⁽a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 0

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims

1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Account	1 - 50 Days	01 - 00 Days	01 - 30 Days	31 - 120 Days	Over 120 Bays	Total
Claims unpaid (Reported)						
0199999 Individually listed claims unpaid						
0299999 Aggregate accounts not individually listed - uncovered						
0399999 Aggregate accounts not individually listed - covered	1,054,834	237,266	156,629	88,751	146,960	1,684,44
0499999 Subtotals	4.054.024	007.000	450,000	00.754	146,960	4 004 44
U499999 Sudiotais	1,054,834	237,266	156,629	88,751	146,960	1,684,44
0599999 Unreported claims and other claim reserves						
OCCOSCO CHICACOLOGICA CIGITA CALICA CIGITA TOCCO VCC						
0699999 Total amounts withheld						
0799999 Total claims unpaid						1,684,44
	1				1	
	1		1		1	
	1				1	
	1		1		1	
0899999 Accrued medical incentive pool and bonus amounts						

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

	Claims Paid	Year to Date	Liability End of	Current Quarter	5	6
	1	2	3	4		Estimated Claim
Line	On Claims Incurred	On Claims Incurred	On Claims Unpaid	On Claims Incurred	Claims Incurred in	Reserve and Claim
of	Prior to January 1	During the	Dec. 31 of	During the	Prior Years	Liability Dec. 31
Business	of Current Year	Year	Prior Year	Year	(Columns 1 + 3)	of Prior Year
Comprehensive (hospital and medical)						
2. Medicare Supplement						
3. Dental only	1 224 642	9,494,818	235,711	1,448,729	1,470,353	1,507,790
4. Vision only						
5. Federal Employees Health Benefits Plan						
6. Title XVIII - Medicare						
7. Title XIX - Medicaid						
8. Other health						
9. Health subtotal (Lines 1 to 8)	1 224 642	9,494,818	235,711	1,448,729	1,470,353	1,507,79
10. Health care receivables (a)						
11. Other non-health						
12. Medical incentive pools and bonus amounts						
13. Totals (Lines 9 - 10 + 11 + 12)	1,234,642	9,494,818	235,711	1,448,729	1,470,353	1,507,790

(a) Excludes \$ 0 loans or advances to providers not yet expensed.

NOTE 1 - - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

(A) Basis of Presentation

The Quarterly Statement of Altus Dental Insurance Company, Inc. for the quarter ended March 31, 2016 has been completed in accordance with the NAIC *Annual Statement Instructions* and the *Accounting Practices and Procedures Manual* and are presented on the basis of accounting practices prescribed or permitted by the Rhode Island Department of Business Regulations. Note management is not aware of any deviations from this NAIC guidance, as interpreted by the Rhode Island Department of Business Regulation, as it relates to the financial information contained in this statement.

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies

A. Reconciliation of the Company's net inc. and capital & surplus between NAIC SAP and the state of Rhode Island is shown below.

NET INCOME				
				State of
		2016	2015	Domicile
01. ALTUS DENTAL INSURANCE CO., INC. state basis (Pa	ş \$	(505,338)	2,208,447	RI
02. State Prescribed Practices that increase/(decrease) NA	IC S	AP:		
		Net Income	Net Income	State of
Details of Depreciation of Fixed Assets		2016	2015	Domicile
Totals (Lines 01A0201 through 01A0225)	\$			
703. State Permitted Practices that increase/(decrease) NAIO	C SA	NP: Net Income	Net Income	State of
Details of Depreciation of Home Office Property		2016	2015	Domicile
Details of Depreciation of Home Office Property	Т	2010	2013	Domicie
	+			
Totals (Lines 01A0301 through 01A0325)	\$			
rotate (Enter on tood rathought on tooler)	· ·	I		
04. NAIC SAP	•	(505,338)	2,208,447	RI
04. NAIC SAF	Ψ_	(303,330)	2,200,447	IXI
SURPLUS				
SOM 200				State of
		2016	2015	Domicile
05. ALTUS DENTAL INSURANCE CO., INC. state basis (Pa	\$ \$	19.894.947	20,400,285	RI
06. State Prescribed Practices that increase/(decrease) NA		, , , , , , , , , , , , , , , , , , , ,	20,400,200	131
os. State i resoribed i ruotious triat increase/(decrease) iva		Surplus	Surplus	State of
Goodwill, net; Fixed Assets, Net		2016	2015	Domicile
Coodym, not, 1 Med Assets, 146t	Т	2010	2010	Dominione
	-			
Totals (Lines 01A0601 through 01A0625)	\$			
. State (Interest throught an insector)	Ψ			
07. State Permitted Practices that increase/(decrease) NAIC	C SA	P:		
		Surplus	Surplus	State of
Home Office Property		2016	2015	Domicile
	T			
Totals (Lines 01A0701 through 01A0725)	\$			

(B) Use of Estimates in the Preparation of the Financial Statements

The preparation of the financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates. Therefore there is no effect on the reported net income, statutory surplus and risk based capital from utilizing an accounting practice that differs from the NAIC statutory accounting practices and procedures.

19,894,947

20,400,285

RI

(C) Accounting Policies

Investment Income and Declines in Fair Value

The Company periodically reviews its bonds to determine whether a decline in fair value below the amortized cost basis is other than temporary. The process for identifying declines in the fair value of investments that are other than temporary involves consideration of several factors. These factors include (1) the period in which there has been a significant decline in value; (2) an analysis of the liquidity, business prospects, and overall financial condition of the issuer; (3) the significance of the decline; and (4) our intent and ability to hold the investment for a sufficient period for the value to recover. When our analysis of the above factors results in the conclusion that declines in fair values are other than temporary, the cost of the securities is written down to fair value and is reflected as a realized loss.

Rands

Bond investments are stated at amortized cost and consist of United States Treasury and government agency securities as well as "Investment Grade" corporate notes with fixed rates and maturities. Interest income is accrued as earned. The Company has both the intent and ability to hold all securities until maturity and, accordingly, has categorized all investments as "held-to-maturity" securities. As a result, unrealized gains and losses are excluded from net income.

Claims and Claims Adjudication Expenses

The estimated liability for claims incurred but unpaid is actuarially determined based on an analysis of historical claims experience, modified for changes in enrollment, inflation and benefit coverage. The estimated liability for accrued claims adjudication expense represents the anticipated cost of processing claims incurred but unpaid at the balance sheet date. The estimates for claims and claims adjudication expenses may be more or less than the amount ultimately paid when claims are settled. Such changes in estimates are reflected in current period operations.

Additionally, in accordance with NAIC guidelines, the following accounting policies are either utilized or are not applicable to the company.

- 1. Short term investments are stated at amortized cost.
- 2. Bonds are stated at amortized value using the constant yield / scientific method.
- 3. The company does not own common stocks; however, in accordance with NAIC guidelines, money market funds are reported as Common Stocks on the Balance Sheet.
- 4. The company does not own preferred stocks; hence this accounting policy is not applicable.
- 5. The company does not have mortgage loans; hence this accounting policy is not applicable.
- 6. Loan-backed securities are stated at amortized value using the constant yield / scientific method
- 7. Investments in subsidiaries, controlled and affiliated entities would be reported using the equity method.
- 8. The company does not have investments in joint ventures, partnerships and limited liability companies; hence this accounting policy is not applicable.
- 9. The company does not own derivatives; hence this accounting policy is not applicable.
- 10. The company does utilize anticipated investment income as a factor in the premium deficiency calculation.
- 11. The company methodologies for estimating the liabilities for losses and loss/claim adjustment expenses are actuarially derived as described above.
- 12. The capitalization policy and the predefined thresholds did not change from the prior period.
- 13. The company does not use pharmaceutical rebate receivables; hence this accounting policy is not applicable.

(D) Going Concerns

There are no going concerns for this company.

NOTE 2 - - ACCOUNTING CHANGES AND CORRECTION OF ERRORS

As part of this current year's quarterly statement preparation, the Company's financial statements contain no items that resulted from corrections of errors or changes in accounting principles. Additionally, as required the Company's financial statements are prepared in accordance with the Codification of the NAIC Accounting Practices and Procedures Manual. This had no material impact on the 2016 and 2015 accounting practices or resulting statutory income and surplus as reported by the Company.

NOTE 3 - - BUSINESS COMBINATIONS AND GOODWILL

During 2016, the Company had no business combinations, direct purchases or mergers with other companies. The related disclosures are all not applicable.

NOTE 4 - - DISCONTINUED OPERATIONS

During 2016, the Company's financial results include no gains or losses from discontinued operations. The related note disclosures are all not applicable.

NOTE 5 - - INVESTMENTS

The Company's bond investments described in Note 1 represent all of the Company's statutory recorded investments at March 31, 2016 and December 31, 2015.

Additionally, in accordance with NAIC guidelines, the following accounting policies are either utilized or are not applicable to the company. The related note disclosures are all not applicable.

- 1. Mortgage Loans, including Mezzanine Real Estate Loans This is not applicable.
- 2. Debt Restructuring This is not applicable.
- 3. Reverse Mortgages This is not applicable.
- 4. Loan Backed Securities This is not applicable.
- 5. Repurchase Agreements and/or Securities Lending Transactions This is not applicable.
- 6. Real Estate The company's parent through one of its subsidiaries, Altus Realty, owns the building that functions as corporate headquarters for the parent and all subsidiaries.
- 7. Investments in low-income housing tax credits The company does utilize state tax credits, which may include low-income housing tax credits. See footnote number 21, where accounting for tax credits is addressed.
- 8. Restricted Assets This is not applicable, so no table is needed.
- 9. Working Capital Finance Investments This is not applicable.
- 10. Offsetting and Netting of Assets and Liabilities This is not applicable.
- 11. Structured Notes This is not applicable.

NOTE 6 - - JOINT VENTURES, PARTNERSHIPS and LIMITED LIABILITY COMPANIES

During 2016 and 2015, the Company did not participate in any joint ventures, partnerships or LLCs. The related disclosures are all not applicable.

NOTE 7 - - INVESTMENT INCOME

Interest income is accrued as earned. At March 31, 2016 and December 31, 2015, the Company had no income due or accrued that it considered a nonadmitted asset, as collection on accrued interest is reasonably assured for all Company investments. There was no income excluded.

NOTE 8 - - DERIVATIVE INSTRUMENTS

As disclosed in Note 1 above, all investments consist of United States government and government agency securities, and "investment grade" corporate notes with fixed rates and maturities. During the periods ended March 31, 2016 and December 31, 2015, the Company had not utilized any derivative financial instruments. The related disclosures are all not applicable.

NOTE 9 - - FEDERAL INCOME TAXES

The Company adopted SSAP No. 101, a replacement of SSAP No. 10R, effective January 1, 2012. The March 31, 2016 and December 31, 2015 balances and related disclosures are calculated and presented pursuant to SSAP No. 101.

NOTES TO FINANCIAL STATEMENTS

ð.	income raxes
A.	The components of the net deferred tax asset/(liability) at March 31 are as follows:

^ 1.			03/31/2016		12/31/2015		
		(1)	(2)	(3)	(4)	(5)	(6)
				(Col 1 + 2)			(Col 4 + 5)
		Ordinary	Capital	Total	Ordinary	Capital	Total
a.	Gross Deferred Tax Assets	\$ 182,587		182,587	182,587		182,587
b.	Statutory Valuation Allowance Adjustment	\$					
C.	Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 182,587		182,587	182,587		182,587
d.	Deferred Tax Assets Nonadmitted	\$					
e.	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 182,587		182,587	182,587		182,587
f.	Deferred Tax Liabilities	\$					
g.	Net Admitted Deferred Tax Asset /						
	(Net Admitted Deferred Tax Liability) (1e - 1f)	\$ 182,587		182,587	182,587		182,587

1.		Change	
	(7)	(8)	(9)
	(Col 1 - 4) Ordinary	(Col 2- 5) Capital	(Col 7 + 8) Total
a. Gross Deferred Tax Assets	\$		
Statutory Valuation Allowance Adjustment	\$		
. Adjusted Gross Deferred Tax Assets (1a - 1b)	\$		
Deferred Tax Assets Nonadmitted	\$		
e. Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 		
. Deferred Tax Liabilities	\$ 		
Net Admitted Deferred Tax Asset /			
(Net Admitted Deferred Tax Liability) (1e - 1f)	\$		

2.		03/31/2016			12/31/2015	
	(1)	(2)	(3)	(4)	(5)	(6)
			(Col 1 + 2)			(Col 4 + 5)
Admission Calculation Components SSAP No. 101	Ordinary	Capital	Total	Ordinary	Capital	Total
a. Federal Income Taxes Paid In Prior Years Recovera	ble					
Through Loss Carrybacks.	\$					
b. Adjusted Gross Deferred Tax Assets Expected To B	e Realized					
(Excluding The Amount Of Deferred Tax Assets From	m 2(a) above)					
After Application of the Threshold Limitation. (The Le	sser of					
2(b)1 and 2(b)2 Below)	\$ 182,587		182,587	182,587		182,587
Adjusted Gross Deferred Tax Assets to be Realized the Balance Sheet Date.	Following					
Adjusted Gross Deferred Tax Assets Allowed per	4					
Limitation Threshold	\$ XXX	XXX		XXX	XXX	
c. Adjusted Gross Deferred Tax Assets (Excluding the	Amount					
Of Deferred Tax Assets From 2(a) and 2(b) above) (Offset by					
Gross Deferred Tax Liabilities.	\$					
d. Deferred Tax Assets Admitted as the result of applic	ation of SSAP					
No. 101. Total (2(a) + 2(b) + 2(c))	\$ 182,587		182,587	182,587		182,587

2.			Change	
		(7)	(8)	(9)
		(Col 1 - 4)	(Col 2 - 5)	(Col 7 + 8)
	Admission Calculation Components SSAP No. 101	Ordinary	Capital	Total
a.	Federal Income Taxes Paid In Prior Years Recoverable			
	Through Loss Carrybacks. \$			
b.	Adjusted Gross Deferred Tax Assets Expected To Be Real	lized		
	(Excluding The Amount Of Deferred Tax Assets From 2(a)	above)		
	After Application of the Threshold Limitation. (The Lesser of	f		
	2(b)1 and 2(b)2 Below) \$			

	, ₁	Adjusted Gross Deferred Tax Assets to be Realized Followi	na					
		the Balance Sheet Date.	ng .					
	2.	Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold \$	XXX	XXX				
	C.	Adjusted Gross Deferred Tax Assets (Excluding the Amoun Of Deferred Tax Assets From 2(a) and 2(b) above) Offset b						
	d.	Gross Deferred Tax Liabilities. \$ Deferred Tax Assets Admitted as the result of application of	SSAP					
	-	No. 101. Total (2(a) + 2(b) + 2(c)) \$						
	7 3.	Γ	2016	2015				
		Ratio Percentage Used to Determine Recover Period	2010	2010				
	b.	And Threshold Limitation Amount. Amount Of Adjusted Capital And Surplus Used To Determin	e					
		Recovery Period And Threshold Limitation In 2(b)2 Above \$						
	4.		03/31		12/31/		Cha	
	(a)	Impact of Tax Planning Strategies Determination of Adjusted Gross Deferred Tax Accepted Tay Ac	(1)	(2)	(3)	(4)	(5)	(6)
	4	Assets and Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.	Ordinary 182,587	Capital	Ordinary 182.587	Capital	(Col 1 - 3) Capital	(Col 2 - 4) Total
		Adjusted Gross DTAs Amount From Note 9A1(c) Percentage of Adjusted Gross DTAs By Tax	102,307		102,307			
	2	Character Attributable To The Impact of Tax Planning Strat Net Admitted Adjusted Gross DTAs Amount from Note 9A1	182,587		182.587			
		Percentage of Net Admitted Adjusted Gross DTAs by Tax Character Attributable To The Impact of Tax Planning Strate	102,307		102,507	***************************************		
		Character Attributable 10 The Impact of Tax Flamming Strate						
	b.	Does the Company's Tax-planning Strategies include the use of reinsurance?						
		the use of reinsurance?						
	*	As reported on the statutory balance sheet for the most rece	ently filed staten	nent with the do	milicary state co	mmissioner a	djusted in accord	dance with SS
C.		Current income taxes incurred consist of the following major	r components:					
			(1)	(2)	(3)			
					(Col 1 - 2)			
			03/31/2016	12/31/2015	Change			
1.	a.	Current Income Tax Federal \$	154,891	1,816,458	(1,661,567)			
	b.	Foreign \$						
		Subtotal \$ Federal Income Tax on net capital gains \$	154,891	1,816,458	(1,661,567)			
	e.	Utilization of capital loss carry-forwards \$,			
	f. g.	Other \$ Federal and foreign income taxes incurred \$	154,891	1,816,458	(1,661,567)			
_		-		.,,	(, , , , , , , , , , , , , , , , , , ,			
2.	a.	Deferred Tax Assets: Ordinary						
	(1)	Discounting of unpaid losses	10,685	10,685				
		Unearned premium reserve \$	87,341	87,341	***************************************			
		Policyholder reserves \$		***************************************	***************************************			
		Investments \$ Deferred acquisition costs \$						
		Policyholder dividends accrual \$ Fixed assets \$			***************************************			
		Compensation and benefits accrual \$		***************************************	***************************************			
	. ,	Pension accrual \$ Receivables - nonadmitted \$	36,621	36,621	····			
		Net operating loss carry-forward \$	30,021	30,021				
		Tax credit carry-forward \$ Other (including items <5% of total ordinary tax assets) \$	47,940	47,940				
		Subtotal \$	182,587	182,587				
	b.	Statutory valuation allowance adjustment \$						
	C.	Nonadmitted \$						
	d.	Admitted ordinary deferred tax assets (2a99 - 2b - 2c) \$	182,587	182,587				
	e.	Capital:						
	(1)	Investments \$						
	(2)	Net capital loss carry-forward \$		***************************************	***************************************			
		Real estate \$ Other (including items <5% of total capital tax assets) \$	***************************************		***************************************			
		Subtotal \$						
	f.	Statutory valuation allowance adjustment \$						
	g.	Nonadmitted \$						
	h. i.	Admitted capital deferred tax assets (2e99 - 2f - 2g) \$ Admitted deferred tax assets (2d + 2h) \$	182,587	182,587				
2		Defermed Total Schilling						
3.	a.	Deferred Tax Liabilities: Ordinary						
	/41	Investments						
		Investments \$ Fixed assets \$						
		Deferred and uncollected premium \$						
		Policyholder reserves \$ Other (including items <5% of total ordinary tax liabilities) \$						
		Subtotal \$						
	b.	Capital:						
		Investments \$ Real Estate \$						
	(3)	Other (including items <5% of total capital tax liabilities) \$						
	##	Subtotal \$						

\$ 182,587 182,587

c. Deferred tax liabilities (3a99 + 3b99)

Net deferred tax assets/liabilities (2i - 3c)

The Company is not utilizing tax planning strategies.

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

There was no valuation allowance adjustment to gross deferred tax assets as of March 31, 2016 and no net change in the total valuation allowance adjustments for the periods ended March 31, 2016 and December 31, 2015, respectively.

The realization of the deferred tax asset is dependent upon the Company's ability to generate sufficient taxable income in future periods. Based on historical results and the prospects for future current operations, management anticipates that it is more likely than not that future taxable income will be sufficient for the realization of the remaining deferred tax assets.

As of March 31, 2016 and December 31, 2015, there are no operating losses or tax credit carryforwards available for federal tax purposes.

The following are income taxes incurred in the current and prior years that will be available for recoupment in the event of future losses:

	Ordinary	Capital	Total
Year:			
2016	\$ 154,891	_	154,891
2015	\$ 1,816,458	_	1,816,458
2014	\$ 1,607,452	_	1,607,452
2013	\$ 1,355,018	_	1,355,018
2012	\$ 1,191,982	_	1,191,982
2011	\$ 856,015	_	856,015

There are no deposits held under Section 6603 of the Internal Revenue Code.

Altus Dental Insurance Company, Inc. is incorporated in the State of Rhode Island as a for-profit company. The Company pays premium taxes to the State of Massachusetts as opposed to state income tax.

Additionally, for federal tax purposes the Company's taxable operations are included within the consolidated group tax filings of its parent, The Altus Group, Inc. The other subsidiaries of The Altus Group, Inc. are Altus Systems, Inc., Altus Dental, Inc., and Altus Ventures, Inc., which are included in the consolidated returns for both federal and state tax reporting.

The Company's income tax returns that remain open to examination are for the years 2012 and subsequent.

NOTE 10 - - INFORMATION CONCERNING PARENT, SUBSIDIARIES AND AFFILIATES

Altus Dental Insurance Company, Inc. is a wholly owned subsidiary of The Altus Group, Inc. which itself is a wholly owned subsidiary of Delta Dental of Rhode Island. This group of affiliated for-profit entities was established in 1999 for the purpose of expanding the ultimate parent company's offering of prepaid dental care products to organizations based outside the State of Rhode Island.

Altus Dental Insurance Company and Delta Dental of RI (DDRI) are allocated expenses from Altus Systems, Inc., a subsidiary within the Altus Group. Altus Systems (AS) is the company that employs the operations staff necessary to administer the dental business of both DDRI and Altus Dental Insurance Company. As a for-profit company, AS "sells" its dental related services to its sister and ultimate parent company at a 2% markup over its costs (to satisfy IRS requirements); therefore AS generates net income on its dental operations. The allocations from Altus Systems are based on the Company's member enrollment levels as a percentage of total consolidated dental member enrollment.

The Parent Company's one dental insurance subsidiary, Altus Dental Insurance Company, is allocated expenses from three affiliated Companies. The Parent, Delta Dental of RI and two sister companies (Altus Systems, Inc. and Altus Dental, Inc.) within the Altus Group. The allocations from Delta and Altus Systems are based on the Company's member enrollment levels as a percentage of total consolidated dental member enrollment. Expenses from Altus Dental are based on the number of subscribers under contract by the Company. The main allocated expenses from each source are as follows:

- Expenses are allocated from the Parent, Delta Dental (DDRI), for costs associated with a portion of consolidated expenses incurred by the Parent that should be spread among the two insurance companies. The main costs in this category would be rent, depreciation and payroll and fringes benefit costs for the various departments that service both insurance Companies.
- Altus Systems (AS) is the company that employs the operations staff necessary to administer the dental business of both DDRI and this Company.
- Altus Dental incurs costs related to: (1) advertising, (2) recruiting and servicing the provider network, and (3) sales and marketing activities. These costs are then allocated to the Company based on the volume of subscriber dental contracts.

For the periods ended March 31, 2016 and December 31, 2015, after elimination of intercompany transactions, The Altus Group, Inc. generated income of \$166,000 and \$2,229,000, respectively.

Altus Dental Insurance Company, Inc. is allocated expenses from affiliated entities based on allocation methods, which are analyzed and updated by management on an annual basis. The resulting total expense allocations are disclosed on Schedule Y of the 2015 Annual Statement filing. Total expenses, including these allocated expenses, are disclosed in more descriptive detail in the year end Underwriting and Investment Exhibit Part 3 – Analysis of Expenses.

At March 31, 2016 and December 31, 2015 the Company has intercompany receivables and payables with/to the Altus Group, Inc. and other affiliates. Some of these balances resulted from the fact that Altus Dental Insurance Company maintained a sweep banking arrangement for the Altus Group and some of its subsidiaries. The remainder of these balances are related to allocated expenses.

Management's cash flow projections for The Altus Group, Inc. and its subsidiaries are made based on a number of factors, which affect the changes in the intercompany balances over the period of time being analyzed. The most significant factors include: the relative and absolute growth in enrollment levels for Altus Dental Insurance Company, Inc.; the amount and rate of increase in operating and administrative expenses; the level of success Altus Dental, Inc. experiences in developing and maintaining its dental network; and the level of resources required by Altus Dental, Inc. for recruitment and marketing functions. Management's current cash flow projections for The Altus Group, Inc. and its subsidiaries projects profitability going forward and that the intercompany advances will be reduced gradually over time.

NOTE 11 - - DEBT

During the periods ended March 31, 2016 and December 31, 2015 the Company had no outstanding capital notes or any debt arrangements. The related note disclosures are all not applicable.

NOTE 12 - - EMPLOYEE RETIREMENT PLANS AND OTHER POSTRETIREMENT BENEFIT PLANS

The Company maintains no retirement or other post retirement benefit plans. The related note disclosures are all not applicable.

NOTE 13 - - CAPITAL AND SURPLUS

Altus Dental Insurance Company, Inc. is a subsidiary of The Altus Group, Inc. and is a for-profit corporation. The Company's capital stock consists of 30 shares issued and outstanding. Each share has \$100,000 par value amounting to the \$3,000,000 total reflected on the balance sheet. All of the Company's outstanding shares of stock are owned by The Altus Group, Inc. The Company has no dividend restrictions, and has not been involved in any quasi-reorganization.

The contributed surplus of \$3,319,861 results from the additional capitalization of the Company when bond and fixed income notes (the investment portfolio) were transferred from its parent to the Company. The initial and subsequent additional capitalizations (from these investment portfolio transfers) were to fulfill capitalization requirements of the Rhode Island Department of Business Regulation and the Massachusetts Division of Insurance.

Note the following disclosures related to the company's capital and surplus. The related note disclosures are all not applicable.

- 1. 30 shares at \$100,000 per share. No shares issued.
- 2. Dividend rate Not applicable
- 3. Dividend restrictions Not applicable
- 4. Dividends paid Not applicable
- 5. Profits that may be paid as dividends Not applicable
- 6. Restrictions placed on unassigned funds \$0 of reserves are restricted for the estimated twelve months of the 2017 ACA assessment in the March 31, 2016 filing, due to the one year moratorium. The Consolidated Appropriations Act, 2016 (Public Law No: 114-113), which was signed into law on December 18, 2015, imposes a moratorium on the Annual ACA Assessment for calendar year 2017. \$787,479 of reserves are restricted for the estimated twelve months of the 2016 ACA assessment in the December 31, 2015 filing, which will be paid in September, 2016.
- 7. Total amount of advances to surplus Not applicable
- 8. Amount of stock held by reporting entity for special purposes Not applicable
- 9. Changes in the balances of special surplus funds from the prior year Not applicable
- 10. Portion of unassigned funds represented or reduced by unrealized gains and losses Not applicable
- 11. Surplus notes Not applicable
- 12. Impact of the restatement in a quasi-reorganization Not applicable
- 13. Effective date of quasi-reorganization Not applicable

NOTE 14 - - CONTINGENT LIABILITIES

There are no contingent liabilities arising from litigation which would be considered material in relation to the Company's financial position. Accordingly, the Company has committed no reserves to cover any contingent liabilities. The related note disclosures are all not applicable.

The following are not applicable to the company.

- 1. Contingent commitments Not applicable
- 2. Assessments Not applicable, other than the ACA Assessment addressed above
- 3. Gain contingencies Not applicable
- 4. Claims related extra contractual obligation Not applicable
- 5. Joint and several liabilities Not applicable
- 6. All other contingencies Not applicable

NOTE 15 - - LEASES

The Company has no lease obligations for office space or other such commitments. The related note disclosures are all not applicable.

NOTE 16 - - INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE SHEET RISK

The Company maintains no financial instruments with off-balance sheet risk or any financial instruments with concentrations of credit risk. The related note disclosures are all not applicable.

NOTE 17 - - SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS

The Company has no transactions relating to transfers of receivables reported as sales, transfer and servicing of financial assets or wash sales. The related note disclosures are all not applicable.

NOTE 18 - - GAIN OR LOSS FROM UNINSURED ACCIDENT & HEALTH PLANS

The Company's policy regarding underwriting and pricing for uninsured or partially insured accident and health plans has been to determine that the administrative premium charged to each account covers all incremental costs (directly associated with servicing the specific account) plus a share of fixed and variable operating expenses to be incurred by the Company during the contract period.

As discussed in Note 2, for the 2016 quarterly and 2015 annual filings, the Company's financial statements are prepared in accordance with the Codification of the NAIC Accounting Practices and Procedures Manual. This included the implementation of Statement on Statutory Accounting Principles (SSAP) # 47 "Uninsured Plans". The Company's March 31, 2016 and December 31, 2015 financial operations respectively exclude approximately \$1,945,000 and \$6,827,000 of revenues from such plans and there are no significant gains or losses related to such transactions.

The company does not have any ASO plans and Medicare or similarly structured cost based reimbursement contract. The company does have ASC plan information, which is included in the following illustration.

NOTES TO FINANCIAL STATEMENTS

18.	Gain or Loss to the Reporting Entity from Uninsured Plans	and	I the Uninsur	ed Portion of Part	ially Insured
A.	ASO Plans The gain from operations from Administrative Services Only (AS plans and the uninsured portion of partially insured plans was as during 2016: (years as seen in Notes text)		ASO Uninsured Plans	Ininsured Portion f Partially Insure Plans	Total ASO
	 a. Net reimbursement for administrative expenses (including admifees) in excess of actual expenses b. Total net other income or expenses (including interest paid to or c. Net gain or (loss) from operations (a + b) d. Total claim payment volume 	\$	rative		
В.	ASC Plans The gain from operations from Administrative Services Contract plans and the uninsured portion of partially insured plans was as during 2016: (years as seen in Notes text)		ASC Uninsured Plans	Jninsured Portion f Partially Insure Plans	Total ASC
	 a. Gross reimbursement for medical cost incurred b. Gross administrative fees accrued c. Other income or expenses (including interest paid to or received) 	\$ \$ 1 \$	1,791,095 154,045		1,791,095 154,045
	 d. Gross expenses incurred (claims and administrative) e. Total net gain or loss from operations (a + b + c - d) 	\$	1,945,140		1,945,140

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

The Company maintains no relationships with managing general agents or third party administrators. The Company does utilize in-house sales efforts, as well as independent brokers to market its products. Premiums earned are reported gross of broker's commissions of approximately \$579,000 and \$2,205,000 for the periods ended March 31, 2016 and December 31, 2015. The related note disclosures are all not applicable.

NOTE 20 - - FAIR VALUE MEASUREMENTS

The use of different assumptions or valuation methodologies may have a material impact on the estimated fair value amounts.

The Company's valuation techniques are based on observable and unobservable pricing inputs. Observable inputs reflect market date obtained from independent sources based on trades of securities while unobservable inputs reflect the Company's market assumptions. These inputs comprise of the following fair value hierarchy:

Level 1 – Observable inputs in the form of quoted prices for identical instruments in active markets.

Level 2 – Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active or other inputs that are observable or can be derived from observable market data for substantially the full term of the assets or liabilities.

Level 3 – One or more unobservable inputs that are supported by little or no market activity and are significant to the fair value of the assets and liabilities. Level 3 assets and liabilities include financial instruments whose value is determined using internal models, as well as instruments for which the determination of fair value requires significant management judgment or estimation.

The Company does not currently have any financial assets that are measured at Level 3 fair value on a recurring basis.

The following table provides information about the Company's financial assets and liabilities measured at fair value on a recurring basis:

	Level 1	Level 2	Level 3	Total
March 31, 2016:				
Assets at fair value:				
Common Stock - Money Market	\$ 6,250			6,250
Investments - Bonds		23,843,576		23,843,576
December 31, 2015				
Assets at fair value:				
Common Stock - Money Market	\$ 118,949			118,949
Investments - Bonds		23,409,816		23,409,816

The book values and estimated fair values of the Company's financial instruments are as follows:

	20	2016			2015		
	Book value	Estimated fair value		Book value	Estimated fair value		
Assets: Cash and Cash Equivalents	\$ 507,610	507,610	\$	858,373	858,373		
Common Stock - Money Mark	e 6,250	6,250		118,949	118,949		
Investments - Bonds	23,473,533	23,843,576		23,423,675	23,409,816		

Cash and Cash Equivalents – The carrying value of cash and cash equivalents are presented at cost, which approximates fair value.

Common Stock – Money Market – The carrying value of short-term investments are presented at cost, which approximates fair value.

Investments – Investment securities are reported at amortized cost. The Company obtains fair value measurements from independent pricing sources, which base their fair value measurements upon observable inputs such as reported trades of comparable securities, broker quotes, the U.S. Treasury yield curve, benchmark interest rates, credit information, and the securities' terms and conditions. These prices are deemed to be Level 2.

NOTES TO FINANCIAL STATEMENTS

20. Fair Value Measurements Fair Value Measurements at Reporting Date (2)(3)(5)(Level 1) (Level 2) (Level 3) Total Description for each class of asset or liability Assets at fair Value 507.610 507,610 01 Cash and Cash Equivalents \$ Common Stock - Money Market \$ 6.250 6,250 Investn=ments - Bonds 23,843,576 23,843,576 Total assets at fair value \$ 513,860 23,843,576 24,357,436 Liabilities at fair value Total liabilities at fair value

NOTE 21 - - OTHER ITEMS

The Company has no extraordinary items, subprime mortgage related risk exposure, troubled debt restructuring or other required disclosures of unusual items. Additionally, the Company has no additional disclosure requirements regarding Retirement Plans, Deferred Compensation and Postretirement Benefits.

The Company has not yet entered into signed agreements to purchase state tax credits that will be utilized in 2016, but had in 2015 and has remaining 2016 carryforwards from these 2015 purchases; hence the Company maintains tax credits as net assets at March 31, 2016 and December 31, 2015. Before purchasing the tax credits the Company estimates the utilization of 2016 and 2015 tax credits by projecting future premium levels taking into account policy growth and applicable rate changes.

Other than the purchase of MA state tax credits, the remaining areas below are not applicable to the company.

- 1. Unusual or infrequent items Not applicable
- 2. Troubled debt restructuring debtors Not applicable
- 3. Other disclosures and unusual items Not applicable
- 4. Business interruption insurance recoveries Not applicable
- 5. State transferable and non-transferable tax credits State tax credits will be purchased in 2016 to be utilized in 2016, but have not been purchased at the present time. The carrying value for credits purchased and utilized for 2015 is listed below and on the Balance Sheet. There were five separate purchases of MA tax credits to be utilized in 2015. The carrying value in the amount of \$1,215,365 is listed on the Balance Sheet.
- 6. Subprime-mortgage-related risk exposure Not applicable
- 7. Retained assets Not applicable

NOTES TO FINANCIAL STATEMENTS

	Description of State Transferable Tax Credits	State	Carrying Value	Unused Amoun	t
0	1 2015 Massachusetts Tax Credits	MA	58,024	1,184	
	Total	X X X	58,024	1,184	
4	State Tax Credits Admitted and Nonadmitted	Total Admitted	otal Non-Admitte	ed	
	. Transferable . Non-transferable				
	Colorina Madana Balatad Birli Forman				
2	Subprime Mortgage Related Risk Exposure Direct exposure through investments in subprime mo		_		
		1 Book/Adjusted	2	3	4 Other Than Temporary
		Carrying Value (excluding		Value of Land	Impairment Losses
	a. Mortgages in the process of foreclosure	interest)	Fair Value	and Buildings	Recognized
	b. Mortgages in good standing		***************************************	***************************************	***************************************
	c. Mortgages with restructure terms	***************************************	***************************************	***************************************	***************************************
	d. Total				
" 3	Direct exposure through other investments.				
		1	2	3	4 Other Than
			Book/Adjusted Carrying Value (excluding		Temporary Impairment Losses
		Actual Cost	interest)	Fair Value	Recognized
	a. Residential mortgage-backed securities				
	b. Commercial mortgage-backed securities c. Collateralized debt obligations		***************************************	***************************************	***************************************
	d. Structured securities		***************************************	***************************************	***************************************
	e. Equity investment in SCAs *		***************************************	***************************************	***************************************
	f. Other assets				
	g. Total				
	mortgages. These investments comprise% of invested assets.	of the companies			
4	. Underwriting exposure to subprime mortgage risk thr	ough Mortgage Guara	nty or Financial	Guaranty insura	nce coverage.
4	. Underwriting exposure to subprime mortgage risk thr				
4	. Underwriting exposure to subprime mortgage risk thr	1	2	3	4
4	. Underwriting exposure to subprime mortgage risk thr	1 Losses Paid	2 Losses Incurred	3	4 IBNR Reserves
4	. Underwriting exposure to subprime mortgage risk thr	1	2	3 Case Reserves at End of	4
4	Underwriting exposure to subprime mortgage risk thr a. Mortgage Guaranty Coverage	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage c. Other Lines (specify):	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
4	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage c. Other Lines (specify):	1 Losses Paid in the	2 Losses Incurred in the	3 Case Reserves at End of	4 IBNR Reserves at End of
	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage c. Other Lines (specify):	1 Losses Paid in the Current Year	2 Losses Incurred in the Current Year	3 Case Reserves at End of Current Period	4 IBNR Reserves at End of Current Period
	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage c. Other Lines (specify): d. Total Retained Assets	1 Losses Paid in the Current Year As of End of	2 Losses Incurred in the Current Year	3 Case Reserves at End of Current Period	4 IBNR Reserves at End of Current Period
	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage c. Other Lines (specify): d. Total Retained Assets	1 Losses Paid in the Current Year	2 Losses Incurred in the Current Year	3 Case Reserves at End of Current Period	4 IBNR Reserves at End of Current Period
	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage c. Other Lines (specify): d. Total Retained Assets 2.	1 Losses Paid in the Current Year As of End of	2 Losses Incurred in the Current Year	3 Case Reserves at End of Current Period	4 IBNR Reserves at End of Current Period
	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage c. Other Lines (specify): d. Total Retained Assets 2. a. Up to and including 12 Months b. 13 to 24 Months	1 Losses Paid in the Current Year As of End of	2 Losses Incurred in the Current Year	3 Case Reserves at End of Current Period	4 IBNR Reserves at End of Current Period
	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage c. Other Lines (specify): d. Total Retained Assets 2. a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months	1 Losses Paid in the Current Year As of End of	2 Losses Incurred in the Current Year	3 Case Reserves at End of Current Period	4 IBNR Reserves at End of Current Period
	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage c. Other Lines (specify): d. Total Retained Assets 2. a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months	1 Losses Paid in the Current Year As of End of	2 Losses Incurred in the Current Year	3 Case Reserves at End of Current Period	4 IBNR Reserves at End of Current Period
	a. Mortgage Guaranty Coverage b. Financial Guaranty Coverage c. Other Lines (specify): d. Total Retained Assets 2. a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months	1 Losses Paid in the Current Year As of End of	2 Losses Incurred in the Current Year	3 Case Reserves at End of Current Period	4 IBNR Reserves at End of Current Period

03 Individual Balance/ Balance Number Amount Number Amount a. Number/Balance of Retained Asset Accounts at the Beginning of the Year b. Number/Balance of Retained Asset Accounts Issued/Added During the Year c. Investment Earnings Credited to Retained Asset Accounts During the Year XXXXXXd. Fees and Other Charges Assessed to Retained Asset Accounts During the Year xxxXXX e. Number/Amount of Retained Asset Accounts Transferred to State Unclaimed Property funds During th f. Number/Amount of Retained Asset Accounts Closed/Withdrawn

NOTE 22 - - EVENTS SUBSEQUENT

g. Number/Balance of Retained Asset Accounts at the End

The Company has no events subsequent to March 31, 2016 that would warrant disclosure in these statutory 2016 financial statements.

In accordance with SSAP 35R, the company in 2016 has a liability for the 2016 ACA assessment in the amount of \$787,479 and recorded \$0 as restricted reserves in this March 31, 2016 filing, due to the one year moratorium. The company had expensed its full 2015 ACA assessment within the three quarters ending September 30, 2015. This payment of \$682,516 was made in September 2015. The estimated twelve month 2016 ACA assessment in the amount of \$787,479 has been expensed in this quarter, which is payable on September 30, 2016. Additionally \$0 has been recorded as restricted reserves at March 31, 2016 due to the one year moratorium, which will result in no payment for the 2016 statutory premiums written projected ACA assessment, which would have been due September 30, 2017.

NOTES TO FINANCIAL STATEMENTS

22. Events Subsequent

	Current Year	Prior Year
A. Did the reporting entity write accident and health insurance p		
subject to Section 9010 of the Federal Affordable Care Act ()	YES	
B. ACA fee assessment payable for the upcoming year	\$	787,479
C. ACA fee assessment paid	\$	682,516
D. Premium written subject to ACA 9010 assessment	\$	50,760,595
E. Total Adjusted Capital before surplus adjustment (Five-Year	\$ 20,400,285	
F. Total Adjusted Capital after surplus adjustment		
(Five-Year Historical Line 14 minus 22B above)	\$ 20,400,285	
G. Authorized Control Level after surplus adjustment		
(Five-Year Historical Line 15)	\$ 1,626,157	
H. Would reporting the ACA assessment as of Dec. 31, 2016		
have triggered an RBC action level (YES/NO)?	NO	

NOTE 23 - - REINSURANCE

The Company utilizes no reinsurance arrangements in its underwriting of dental premiums. The related note disclosures are all not applicable.

NOTE 24 - - RETROSPECTIVELY RATED CONTRACTS

The Company presently does not underwrite premiums that are subject to retrospective rating or are contingent premiums (based on actual claims incurred) for the periods ended March 31, 2016 and December 31, 2015. The related note disclosures are all not applicable.

NOTE 25 - - CHANGE IN INCURRED CLAIMS AND CLAIMS ADJUSTMENT EXPENSES

Reserves as of March 31, 2016 were \$1,684,440. As of March 31, 2016 \$1,234,642 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$235,711 as a result of re-estimation of unpaid claims and claim adjustment expenses principally on dental line of insurance. Therefore, there has been a \$37,437 favorable prior-year development since December 31, 2015 to March 31, 2016. The increase is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. Included in this increase, the Company experienced \$0 of unfavorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.

NOTE 26 - - INTERCOMPANY POOLING ARRANGEMENTS

The Company utilizes no intercompany pooling arrangements in its dental premium underwriting.

NOTE 27 - - STRUCTURED SETTLEMENTS

As documented in the NAIC Annual Statement filing instructions for 2016 and 2015, this footnote is not applicable to health insurance insurers.

NOTE 28- - HEALTH CARE RECEIVABLES

The Company has no receivables that would be considered Health Care Receivables under SSAP #84. Accordingly, pharmacy rebates and risk sharing receivables are not currently applicable to the Company's operations.

The company does not have any risk sharing receivables. The related note disclosures are all not applicable.

NOTE 29 - - PARTICIPATING POLICIES

The Company does not underwrite any business that would result in group accident or health participating policies. Accordingly, policy dividends are not applicable to the Company's operations.

NOTE 30 - - PREMIUM DEFICIENCY RESERVES

The Company performed an analysis for premium deficiency reserves as of March 31, 2016 and December 31, 2015. This resulted in no additional liability for the current 2016 year as well as 2015. The related note disclosures are all not applicable.

NOTE 31 - - ANTICIPATED SALVAGE AND SUBROGATION

The Company's liability for unpaid claims is actuarially determined based on an analysis of historical claims experience, modified for changes in enrollment, inflation and benefit coverage. This liability reflects no reductions for salvage and subrogation recoveries, which are recorded in the year of receipt.

PART 1 – COMMON INTERROGATORIES

GENERAL

	Did the reporting entity experience any material transactions requiring the filing with the State of Domicile, as required by the Model Act?	of Disclosure of Material Transa	ctions	Yes[]No[X]
1.2	If yes, has the report been filed with the domiciliary state?			Yes [] No []
2.1	Has any change been made during the year of this statement in the charter, by settlement of the reporting entity?	-laws, articles of incorporation, o	r deed of	Yes[]No[X]
2.2	If yes, date of change:			
3.1	Is the reporting entity a member of an Insurance Holding Company System con one or more of which is an insurer?	sisting of two or more affiliated p	persons,	Yes[X]No[]
	If yes, complete Schedule Y, Parts 1, and 1A.			
3.2	Have there been any substantial changes in the organizational chart since the p	orior quarter end?		Yes[]No[X]
3.3	If the response to 3.2 is yes, provide a brief description of those changes.			
4.1	Has the reporting entity been a party to a merger or consolidation during the pe	riod covered by this statement?		Yes [] No [X]
4.2	If yes, provide the name of entity, NAIC Company Code, and state of domicile (entity that has ceased to exist as a result of the merger or consolidation.	use two letter state abbreviation) for any	
	1 Name of Entity	2 NAIC Company Code	3 State of Domicile	
5.	If the reporting entity is subject to a management agreement, including third-par general agent(s), attorney-in-fact, or similar agreement, have there been any sign terms of the agreement or principals involved? If yes, attach an explanation.			Yes[]No[]N/A[X]
6.1	State as of what date the latest financial examination of the reporting entity was	made or is being made.		12/31/2012
6.2	State the as of date that the latest financial examination report became available the reporting entity. This date should be the date of the examined balance she completed or released.			12/31/2012
6.3	State as of what date the latest financial examination report became available to the state of domicile or the reporting entity. This is the release date or complet not the date of the examination (balance sheet date).	·		03/13/2014
6.4	By what department or departments? INSURANCE DIVISION, DEPARTMENT OF BUSINESS REGULATION, STAT	E OF RHODE ISLAND		
	Have all financial statement adjustments within the latest financial examination subsequent financial statement filed with Departments?	report been accounted for in a		Yes[X]No[]N/A[]
6.6	Have all of the recommendations within the latest financial examination report b	peen complied with?		Yes [X] No [] N/A []
	Has this reporting entity had any Certificates of Authority, licenses or registration if applicable) suspended or revoked by any governmental entity during the repo	, , , ,	on,	Yes[]No[X]

	ii yos, givo	full information						
Q 1	ls the comp	any a subsidiary of a bank holding company regulated by	y the Enderal Decemb Board?				Yes[]No	V [V]
0.1	is the comp	any a subsidiary of a bank holding company regulated by	The rederal Reserve Board?				res[]No)[^]
8.2	If response	to 8.1 is yes, please identify the name of the bank holding	g company.					
8.3	Is the comp	any affiliated with one or more banks, thrifts or securities	firms?				Yes[]No	[X]
8.4	If response	to 8.3 is yes, please provide below the names and location	on (city and state of the main office) of any				
		gulated by a federal regulatory services agency [i.e. the Fo						
		of the Currency (OCC), the Federal Deposit Insurance C n (SEC)] and identify the affiliate's primary federal regulat		es Exchange	,			
		1	2	3	4	5	6	
		Affiliate	Location	-				
		Name	(City, State)	FRB	OCC	FDIC	SEC	
9.1		ior officers (principal executive officer, principal financial of	· · · · · · · · · · · · · · · · · · ·		or			
	persons per standards?	forming similar functions) of the reporting entity subject to	o a code of ethics, which includes t	ne following				
		and ethical conduct, including the ethical handling of actua	al or apparent conflicts of interest b	oetween				
		I and professional relationships; accurate, timely and understandable disclosure in the pe	eriodic reports required to be filed b	ov the report	ina			
	entity;	aboutato, afficing and affective action alone and afficiency	should reporte required to be illed t	y the report	y			
		nce with applicable governmental laws, rules, and regulat						
				: and				
0 11		mpt internal reporting of violations to an appropriate persoability for adherence to the code.		; and			Yes [X] N	lo[]
3.11	If the recen	mpt internal reporting of violations to an appropriate persoability for adherence to the code.		; and			Yes [X]N	o[]
	If the respons	mpt internal reporting of violations to an appropriate person		; and			Yes [X] N	lo[]
	If the respons	mpt internal reporting of violations to an appropriate persoability for adherence to the code.		; and			Yes [X] N	0[]
	If the response	mpt internal reporting of violations to an appropriate persoability for adherence to the code.		; and			Yes [X] N	0[]
9.2		mpt internal reporting of violations to an appropriate persoability for adherence to the code.		; and			Yes [X] N	
	Has the coo	mpt internal reporting of violations to an appropriate personability for adherence to the code. see to 9.1 is No, please explain:	on or persons identified in the code	; and				
	Has the coo	mpt internal reporting of violations to an appropriate personability for adherence to the code. see to 9.1 is No, please explain: le of ethics for senior managers been amended?	on or persons identified in the code	; and				
	Has the coo	mpt internal reporting of violations to an appropriate personability for adherence to the code. see to 9.1 is No, please explain: le of ethics for senior managers been amended?	on or persons identified in the code	; and				
9.21	Has the coo	mpt internal reporting of violations to an appropriate personability for adherence to the code. see to 9.1 is No, please explain: le of ethics for senior managers been amended? see to 9.2 is Yes, provide information related to amendment	on or persons identified in the code	; and			Yes [] No	o[X]
9.21	Has the coo	mpt internal reporting of violations to an appropriate personability for adherence to the code. see to 9.1 is No, please explain: le of ethics for senior managers been amended?	on or persons identified in the code	; and				o[X]
9.21 9.3	Has the coo	mpt internal reporting of violations to an appropriate personability for adherence to the code. see to 9.1 is No, please explain: le of ethics for senior managers been amended? see to 9.2 is Yes, provide information related to amendment	on or persons identified in the code	; and			Yes [] No	o[X]
9.21 9.3	Has the coo	mpt internal reporting of violations to an appropriate personability for adherence to the code. Inse to 9.1 is No, please explain: It is equivalent of the code of ethics been waived for any of the code of ethics been waived for any of the	on or persons identified in the code	; and			Yes [] No	o[X]
9.21 9.3	Has the coo	mpt internal reporting of violations to an appropriate personability for adherence to the code. Inse to 9.1 is No, please explain: It is equivalent of the code of ethics been waived for any of the code of ethics been waived for any of the	on or persons identified in the code	; and			Yes [] No	o[X]
9.21 9.3	Has the coo	mpt internal reporting of violations to an appropriate personability for adherence to the code. Inse to 9.1 is No, please explain: It is equivalent of the code of ethics been waived for any of the code of ethics been waived for any of the	on or persons identified in the code	; and			Yes [] No	o[X]
9.21 9.3 9.31	Has the coo	mpt internal reporting of violations to an appropriate personability for adherence to the code. Inse to 9.1 is No, please explain: It is entire of ethics for senior managers been amended? Inse to 9.2 is Yes, provide information related to amendment of the code of ethics been waived for any of the code to 9.3 is Yes, provide the nature of any waiver(s).	ent(s). FINANCIAL				Yes [] No	o[X]
9.21 9.3 9.31	Has the coo	mpt internal reporting of violations to an appropriate personability for adherence to the code. Inse to 9.1 is No, please explain: It is equivalent of the code of ethics been waived for any of the code of ethics been waived for any of the	ent(s). FINANCIAL				Yes [] No	o[X]
9.21 9.3 9.31	Has the cool If the respo Have any p If the respo Does the re	mpt internal reporting of violations to an appropriate personability for adherence to the code. Inse to 9.1 is No, please explain: It is entire of ethics for senior managers been amended? Inse to 9.2 is Yes, provide information related to amendment of the code of ethics been waived for any of the code to 9.3 is Yes, provide the nature of any waiver(s).	ent(s). FINANCIAL diaries or affiliates on Page 2 of this				Yes [] No	o[X]
9.21 9.3 9.31	Has the cool If the respo Have any p If the respo Does the re	npt internal reporting of violations to an appropriate personability for adherence to the code. Inse to 9.1 is No, please explain: Ile of ethics for senior managers been amended? Inse to 9.2 is Yes, provide information related to amendment amendment of the code of ethics been waived for any of the code of ethics been waived for any of the code of 9.3 is Yes, provide the nature of any waiver(s).	ent(s). FINANCIAL diaries or affiliates on Page 2 of this				Yes [] No	o[X]

Yes[]No[X]

otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

\$ Yes[]No[X] 2 rent Quarter ob/Adjusted rying Value Yes[]No[X] Yes[]No[] \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Yes [] No [X] 2 rent Quarter ok/Adjusted rrying Value Yes [] No [X] Yes [] No []
Yes [] No [X] 2 rent Quarter ok/Adjusted rrying Value Yes [] No [X] Yes [] No []
2 rent Quarter ok/Adjusted rying Value Yes [] No [X] Yes [] No []
2 rent Quarter ok/Adjusted rying Value Yes [] No [X] Yes [] No []
rent Quarter ok/Adjusted rying Value Yes [] No [X] Yes [] No []
ok/Adjusted rrying Value Yes [] No [X] Yes [] No []
Yes[]No[X] Yes[]No[]
Yes[]No[X] Yes[]No[]
Yes[]No[X] Yes[]No[]
Yes[]No[] \$
\$
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\$\$ \$\$
\$\$ \$
\$
Yes[X]No[]
dress
dress)2903
02903
02903
02903
02903
02903
)2903
3
3 Explanation(s)

quarter?

Yes[]No[X]

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

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

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

1	2	3
Central		
l Redistration		
Depository	Name(s)	Address
1		[

18.1	Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?	Yes [X]No[]
18.2	! If no, list exceptions:	

PART 2 - HEALTH

1.	Operating Percentages:	
	1.1 A&H loss percent	81.90 %
	1.2 A&H cost containment percent	0.90 %
	1.3 A&H expense percent excluding cost containment expenses	21.71 %
2.1	Do you act as a custodian for health savings accounts?	Yes[]No[X]
2.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$
2.3	Do you act as an administrator for health savings accounts?	Yes [] No [X]
2.4	If yes, please provide the balance of the funds administered as of the reporting date.	\$

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

	0		,	_		7		
1	2	3	4	5	6	7	8	9
NAIC	ID	Effective	Name of	Domiciliary	Type of Reinsurance	Type of	Certified Reinsurer Rating	Effective Date of Certified
Company Code	Number	Date	Reinsurer	Jurisdiction	Ceded	Reinsurer	(1 through 6)	Reinsurer Rating
			N. (NE				
				/. I. T. L				

SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS

Current Year To Date - Allocated by States and Territories

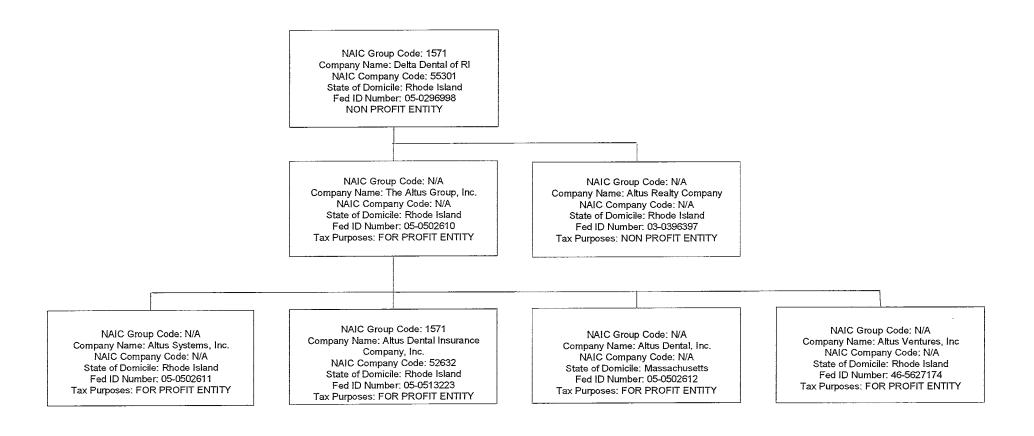
		1		Direct Business Only						
			2	3	4	5 Federal	6	7	8	9
			Accident &			Employees Health Benefits	Life & Annuity Premiums &	Property /	Total	
	States, Etc.	Active Status	Health Premiums	Medicare Title XVIII	Medicaid Ttle XIX	Program Premiums	Other Considerations	Casualty Premiums	Columns 2 Through 7	Deposit-Type Contracts
	Alabama AL Alaska AK	^N N								
1	Arizona AZ	N								
	Arkansas AR	. N								
5. 6.	California CA Colorado CO	^N								
	Connecticut CT	N								
	Delaware DE	. N								
	District of Columbia DC Florida FL	N N								
	Georgia GA	N								
12.	Hawaii HI	N								
	Idaho ID III III III III III III III III III	^N N								
	Indiana IN	N.								
1	lowa IA	N								
	Kansas KS Kentucky KY	^N								
	Louisiana LA	'\ N								
	Maine ME	N								
	Maryland MD Massachusetts MA	. N	13,465,454						13,465,454	
	Michigan MI	^L	19,409,494						13,403,434	
24.	Minnesota MN	N								
	Mississippi MS	. N								
	Missouri MO Montana MT	N N								
	Nebraska NE	N								
	Nevada NV	. N								
	New Hampshire NH New Jersey NJ	^N								
	New Mexico NM	N								
	New York NY	. N								
35.	North Carolina NC North Dakota ND Ohio OH	N N N								
	Oklahoma OK	N								
39.	Oregon OR Pennsylvania PA	. N . N								
	Rhode Island RI	. N								
	South Carolina SC South Dakota SD	. N . N								
43.	Tennessee TN	. N								
	Texas TX	. N								
	Utah UT Vermont VT	. N . N								
47.	Virginia VA	N								
	Washington WA	. N								
	West Virginia WV Wisconsin WI	N N								
51.	Wyoming WY	N								
1	American Samoa AS	. N								
1	Guam GU Puerto Rico PR	. N . N								
	U.S. Virgin Islands VI	N								
	Northern Mariana Islands MP	N								
	Canada CAN Aggregate other alien OT	N								
59.	Subtotal	XXX	13,465,454						13,465,454	
60.	Reporting entity contributions	v v v								
61.	for Employee Benefit Plans Totals (Direct Business)	(a) 1	13,465,454						13,465,454	
		., .	-,,						-,,	

	DETAILS OF WRITE-INS					
58001.		XXX				
58002.		XXX				
58003.		XXX	 	 	 	 l
58998.		XXX				
58999.	Summary of remaining write-ins for Line 58					
	(Line 58 above)	XXX				

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

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

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



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
		00000	05-0502610				THE ALTUS GROUP, INC.	. RI	UPD	DELTA DENTAL OF RHODE ISLAND	BOARD OF DIRECTORS	100.0	DELTA DENTAL OF RHODE ISLAND	0
		00000	05-0502611				ALTUS SYSTEMS, INC.	. RI	NIA	THE ALTUS GROUP, INC.	BOARD OF DIRECTORS	100.0	DELTA DENTAL OF RHODE ISLAND	0
		00000	05-0502612				ALTUS DENTAL, INC.	MA	NIA	THE ALTUS GROUP, INC.	BOARD OF DIRECTORS	100.0	DELTA DENTAL OF RHODE ISLAND	0
1	1	00000	46-5627174				ALTUS VENTURES, INC.	RI	NIA	THE ALTUS GROUP, INC.	BOARD OF DIRECTORS	100.0	DELTA DENTAL OF RHODE ISLAND	0
1571	DELTA DENTAL OF RHODE ISLAND	55301	05-0526998				DELTA DENTAL OF RHODE ISLAND	RI	UPD	DELTA DENTAL OF RHODE ISLAND	BOARD OF DIRECTORS	100.0	DELTA DENTAL OF RHODE ISLAND	0
1571	DELTA DENTAL OF RHODE ISLAND	52632	05-0513223				ALTUS DENTAL INSURANCE CO., INC.	RI	RE	THE ALTUS GROUP, INC.	BOARD OF DIRECTORS	100.0	DELTA DENTAL OF RHODE ISLAND	0
		00000	03-0396397				ALTUS REALTY, INC.	RI	NIA	DELTA DENTAL OF RHODE ISLAND	BOARD OF DIRECTORS	100.0	DELTA DENTAL OF RHODE ISLAND	0
1		1	1						1			1		1
1		1	1						1			1		1
		1												1
												1		1
;														
				1		1						1		1

Asterik	Explanation

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

		Response
1. Will the Med	icare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
Explanation:		
Question 1:	THE COMPANY DOES NOT TRANSACT THIS TYPE OF BUSINESS	
Bar Code:		
	52632201636500101	

OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A - VERIFICATION Real Estate

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

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

		1	2 Prior Year
		Year To Date	Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	1,215,365	1,371,327
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		870,406
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		88,109
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals	1,157,341	1,114,477
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10)	58,024	1,215,365
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	58,024	1,215,365

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year
		Year To Date	Ended December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	23,542,624	19,246,968
2.	Cost of bonds and stocks acquired	2,450,745	11,230,376
	Accrual of discount	2,156	6,366
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		(7,285)
6.	Deduct consideration for bonds and stocks disposed of	2,379,799	6,453,139
	Deduct amortization of premium	135 0/13	
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)	23,479,783	23,542,624
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	23,479,783	23,542,624

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	20,951,993	1,233,645	650,000	(1,661,928)	19,873,710			20,951,993
2. NAIC 2 (a)	2,471,682		400,000	1,528,141	3,599,823			2,471,682
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	23,423,675	1,233,645	1,050,000	(133,787)	23,473,533			23,423,675
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds & Preferred Stock	23,423,675	1,233,645	1,050,000	(133,787)	23,473,533			23,423,675

(a)	Book/Adjusted Carrying	g Value column for the end o	of the current reporting period	d includes the following amou	unt of non-rated, short-term	and cash-equivalent bonds by	y NAIC designation:
	NAIC 1 \$	0; NAIC 2 \$	0; NAIC 3 \$	0; NAIC 4 \$	0; NAIC 5 \$	0; NAIC 6 \$	0

SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
				Interest	Paid for Accrued
	Book/Adjusted	Par	Actual	Collected	Interest
	Carrying Value	Nu 🔿	ost	Year To Date	Year To Date
9199999			IVC		

SCHEDULE DA - VERIFICATION

Short-Term Investments

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

SCHEDULE DB - PART A - VERIFICATION

Options, Caps, Floors, Collars, Swaps and Forwards

1.	Book/A	djusted Carrying Value, December 31, prior year (Line 9, prior year)
2.	Cost Pa	aid/(Consideration Received) on additions
3.	Unreali:	zed Valuation increase/(decrease)
4.	Total ga	ain (loss) on termination recognized
5.	Conside	erations received/(paid) on terminations NONE
6.	Amortiz	
7.	Adjustn	nent to the Book/Adjusted Carrying Value of hedged item
8.	-	reign exchange change in Book/Adjusted Carrying Value
9.		djusted Carrying Value at End of Current Period (Lines 1 + 2 + 3 + 4 - 5 + 6 + 7 + 8)
0.		nonadmitted assets
1.	Statem	ent value at end of current period (Line 9 minus Line 10)
		SCHEDULE DB - PART B - VERIFICATION
		Future Contracts
1.	Book/A	djusted carrying value, December 31 of prior year (Line 6, prior year)
		tive cash change (Section 1, Broker Name/Net Cash Deposits Footnote - Cumulative Cash Change column)
3.1	Add:	
		Change in variation margin on open contracts - Highly Effective Hedges
	3.11	Section 1, Column 15, current year to date minus
	3.12	Section 1, Column 15, prior year
		Change in variation margin on open contracts - All Other
	3.13	Section 1, Column 18, current year to date minus
	3.14	Section 1, Column 18, prior year
3.2	Add:	
		Change in adjustment to basis of hedged item
	3.21	Section 1, Column 17, current year to date minus
	3.22	Section 1, Column 17, prior year
		Change in amount recognized
	3.23	Section 1, Column 19, current year to date minus
	3.24	Section 1, Column 19, current year to date minus Section 1, Column 19, prior year Section 2, Column 19, prior year
3.3	Subtota	d (Line 3.1 minus Line 3.2)
1.1	Cumula	ative variation margin on terminated contracts during the year
.2	Less:	
	4.21	Amount used to adjust basis of hedged item
	4.22	Amount recognized
1.3	Subtota	ll (Line 4.1 minus Line 4.2)
5.	Disposi	tions gains (losses) on contracts terminated in prior year:
	5.1 1	Total gain (loss) recognized for terminations in prior year
		Total gain (loss) adjusted into the hedged item(s) for terminations in prior year
6.	Book/A	djusted carrying value at end of current period (Lines 1 + 2 + 3.3 - 4.3 - 5.1 - 5.2)
7.		total nonadmitted amounts
8.	Statem	ent value at end of current period (Line 6 minus Line 7)

SCHEDULE DB - PART C - SECTION 1

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

		Replicated (Syr	nthetic Asset) Ti	ransactions					Components of the Replication (Synthetic Asset) Transactions							
1	2	3	4	5	6	7	8	Derivative Ins	trument(s) Open	,		Cash Instru	ment(s) Held			
								9	10	11	12	13	14	15	16	
Number	Description	NAIC Designation or Other Description	Notional		Book/Adjusted Carrying Value	Fair Value	Effective Date	Maturity Date	Description	Book/Adjusted Carrying Value	Fair Value	CUSIP	Description	NAIC Designation or Other Description	Book/Adjusted Carrying Value	Fair Value
										I						
							l	IONE								
						1			1					1		
									1							
						[::::::::::::::::::::::::::::::::::::::										
									1							
											1					
9999999	Totals	1		-		XXX	XXX	XXX	+		XXX	XXX	XXX	+		

SCHEDULE DB - PART C - SECTION 2

Replication (Synthetic Asset) Transactions Open

		First C	Quarter	Second	Quarter	Third C	Quarter	Fourth	Quarter	Year t	o Date
		1 Number of Positions	2 Total Replication (Synthetic Asset) Transactions Statement Value	3 Number of Positions	4 Total Replication (Synthetic Asset) Transactions Statement Value	5 Number of Positions	6 Total Replication (Synthetic Asset) Transactions Statement Value	7 Number of Positions	8 Total Replication (Synthetic Asset) Transactions Statement Value	9 Number of Positions	10 Total Replication (Synthetic Asset) Transactions Statement Value
	inning Inventory : Opened or Acquired Transactions : Increases in Replication										
4. Less	(Synthetic Asset) Transactions Statement Value s: Closed or Disposed of Transactions	xxx		xxx	NON	xxx		xxx		xxx	
	s: Positions Disposed of for Failing Effectiveness Criteria s: Decreases in Replication				INOIN						
	(Synthetic Asset) Transactions Statement Value	XXX									

SCHEDULE DB VERIFICATION

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

Book/Adjusted Carrying Value Check

1	Part A, Section 1, Column 14	
	Part A, Section 1, Column 14 Part B, Section 1, Column 15 plus Part B, Section 1 Footnote - Total Ending Cash Balance	
٥.	Total (Line 1 plus Line 2) Part D. Section 1 Column 5	
4.	Part D, Section 1, Column 5	
	Part D, Section 1, Column 6	
6.	Total (Line 3 minus Line 4 minus Line 5) NONE Fair V	alue Check
7.	Part A, Section 1, Column 16	
8.	Part B, Section 1, Column 13	
9.	Total (Line 7 plus Line 8)	
10.	Part D, Section 1, Column 8	
11.	Part D, Section 1, Column 9	
	Total (Line 9 minus Line 10 minus Line 11)	
		exposure Check
13.	Part A, Section 1, Column 21	
14.	Part B, Section 1, Column 20	
15.	Part D, Section 1, Column 11	
16.	Total (Line 13 plus Line 14 minus Line 15)	

SCHEDULE E - VERIFICATION

(Cash Equivalents)

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

SCHEDULE A - PART 2

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

1	Location		4	5	6	7	8	9
	2	3			Actual Cost		Book/Adjusted Carrying Value	Additional Investment
			Date		at Time of	Amount of	Less	Made After
Description of Property	City	State	Acquired	Name of Vendor	Acquisition	Encumbrances	Encumbrances	Acquisition
			MAN					
			N()N					
			1.4.0.1.4					
0399999 Totals								

SCHEDULE A - PART 3

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

1	Locati	on	4	5	6	7	8	Char	ige in Book/Adjust	ted Carrying Value	Less Encumbra	nces	14	15	16	17	18	19	20
	2	3						9	10	11	12	13]						
						Expended for												Gross	
						Additions,	Book/Adjusted		Current Year's				Book/Adjusted		Foreign			Income	
						Permanent	Carrying Value		Other Than			Total Foreign	Carrying Value		Exchange	Realized	Total	Earned Less	Taxes,
						Improvements	Less		Temporary	Current Year's	Total Change	Exchange	Less	Amounts	Gain	Gain	Gain	Interest	Repairs and
			Disposal	Name of	Actual		Encumbrances		Impairment	Change in	in B./A.C.V.	Change in	Encumbrances	Received	(Loss) on	(Loss) on	(Loss) on	Incurred on	Expenses
Description of Property	City	State	Date	Purchaser	Cost	Encumbrances	Prior Year	Depreciation	Recognized	Encumbrances	(11 - 9 - 10)	B./A.C.V.	on Disposal	During Year	Disposal	Disposal	Disposal	Encumbrances	Incurred
									<u> </u>	<u> </u>									
								 N (<u> </u>									
									7										
0399999 Totals			I I																

SCHEDULE B - PART 2

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

1	Location		4	5	6	7	8	9
	2	3					Additional	
						Actual Cost	Investment	
					Rate of	at Time	Made After	Value of Land
Loan Number	City	State	Loan Type	Date Acquired	Interest	of Acquisition	Acquisitions	and Buildings
				(·)				
			· · · · · · · · · · · · · · · · · · ·					
3399999 Totals				XXX	XXX			

SCHEDULE B - PART 3

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

1	Location		4	5	6	7		Ch	ange in Book Value	e/Recorded Investr	nent		14	15	16	17	18
	2	3				Book Value/	8	9	10	11	12	13	Book Value/				
						Recorded			Current				Recorded				
						Investment			Year's Other				Investment		Foreign		
						Excluding	Unrealized	Current	than	Capitalized	Total	Total Foreign	Excluding		Exchange	Realized	Total
						Accrued	Valuation	Year's	Temporary	Deferred	Change in	Exchange	Accrued		Gain	Gain	Gain
				Date	Disposal	Interest	Increase	(Amortization) /	Impairment	Interest and	Book Value	Change in	Interest		(Loss) on	(Loss) on	(Loss) on
Loan Number	City	State	Loan Type	Acquired	Date	Prior Year	(Decrease)	Accretion	Recognized	Other	(8+9-10+11)	Book Value	on Disposal	Consideration	Disposal	Disposal	Disposal
								<u>.</u>	<u> </u>								
									N								
									N • EE • • • •								
																	[
0599999 Totals			1	1	ı												

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

1	2	Location		5	6	7	8	9	10	11	12	13
		3	4									
				Name of								
CUSIP				Vendor or	NAIC	Date	Туре	Actual Cost	Additional		Commitment	Percentage
Ident-	Name			General	Desig-	Originally	and	at Time of	Investment Made	Amount of	for Additional	of
ification	or Description	City	State	Partner	nation	Acquired	Strategy	Acquisition	After Acquisition	Encumbrances	Investment	Ownership
				· · · · · · · · · · · · · · · · · · ·								
						L						
							1::::::::::::::::::::::::::::::::::::::					
4000000 T-4-1-												
4699999 Totals						,	,					XXX

SCHEDULE BA - PART 3

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

1	2	Location	1	5	6	7	8		Ch	ange in Book/Adj	usted Carrying V	alue		15	16	17	18	19	20
		3	4				1	9	10	11	12	13	14	1					
							Book/Adjusted		Current Year's	Current Year's			Total	Book/Adjusted					
				Name of			Carrying	Unrealized	(Depreciation)	Other Than	Capitalized	Total	Foreign	Carrying Value		Foreign	Realized	Total	
CUSIP				Purchaser	Date		Value Less	Valuation	or	Temporary	Deferred	Change in	Exchange	Less		Exchange	Gain	Gain	
Ident-	Name			or Nature of	Originally	Disposal	Encumbrances,	Increase	(Amortization)/	Impairment	Interest and	B./A.C.V.	Change in	Encumbrances		Gain (Loss)	(Loss) on	(Loss) on	Investment
ification	or Description	City	State	Disposal	Acquired	Date	Prior Year	(Decrease)	Accretion	Recognized	Other	(9+10-11+12)	B./A.C.V.	on Disposal	Consideration	on Disposal	Disposal	Disposal	Income
	MASSACHUSETTS TAX CREDIT		MA.	TAX CR USED TO PAY 2015 T	02/11/2016	03/31/2016													
	MASSACHUSETTS TAX CREDIT		MA.		02/12/2016	03/31/2016									371,819				
	MASSACHUSETTS TAX CREDIT	BOSTON	MA	TAX CR USED TO PREPAY 20	02/12/2016	03/31/2016									59,208				
4399999 An	y Other Class of Admitted Assets - A	_I Affiliated													931,027				
															, ,				
4599999 To	tal Affiliated	1													931,027				
4699999 To	tals														931,027				

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Ident- ification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator (a)
20826F-AE-6 406216-AZ-4	CONOCOPHILLIPS CO HALLIBURTON CO		02/05/2016 02/26/2016	CITIZENS BANK CITIZENS BANK		281,925 319,551	300,000.00 320,000.00	2,036 2,301	1FE 1FE
760719-AR-5	Republic New York Corporation	R	02/05/2016	CITIZENS BANK		632,169	500,000.00	10,773	1FE
3899999	Total Bonds Industrial and Miscellaneous (Unaffiliated)				XXX	1,233,645	1,120,000.00	15,110	XXX
8399997	Total Bonds Part 3				XXX	1,233,645	1,120,000.00	15,110	XXX
8399998	Summary Item from Part 5 for Bonds			1	XXX	XXX	XXX	XXX	XXX
8399999	Total Bonds				XXX	1,233,645	1,120,000.00	15,110	XXX
990220-47-7	RBS CITIZENS NA CASH SWEEP		03/30/2016	CITIZENS BANK	1,217,099.760	1,217,100			V
9399999	Total Common Stock Money Market Mutual Funds			1	XXX	1,217,100	XXX		XXX
9799997	Total Common Stock Part 3			T	XXX	1,217,100	XXX		XXX
9799998	Summary Item from Part 5 for Common Stocks				XXX	XXX	XXX	XXX	XXX
9799999	Total Common Stock			<u></u>	XXX	1,217,100	XXX		XXX
						, ,			
9899999	Total Preferred and Common Stock				XXX	1,217,100	XXX		XXX
	.								

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3 4	5	6	7	8	9	10		Change in F	Book/Adjusted C	arrying Value		16	17	18	19	20	21	22
'	2	3 4	5	0	′	0	9	10	11	12	13	14	15	10	17	10	19	20	21	22
		_							''	12	Current	14	13					Bond		NAIC
1								Drior			1	t		Pook/						Desig-
1		0		Number				Prior Year		Current	Year's Other	Total	Tatal	Book/	Faraian			Interest/ Stock		, ,
				Number						Current		Total	Total	Adjusted	Foreign	Deelleed	T-4-1		04-4-4	nation
O LOUD		e		of				Book/	Unrealized	Year's	Than	Change	Foreign	Carrying	Exchange	Realized	Total	Dividends	Stated	or
CUSIP				Shares		_		Adjusted	Valuation	(Amort-	Temporary	in	Exchange	Value at	Gain	Gain	Gain	Received	Contractua	ł
Ident-		g Disposal	Name of	of	Consid-	Par	Actual	Carrying	Increase/	ization)/	Impairment	B./A.C.V.	Change in	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	Indicator
ification	Description	n Date	Purchaser	Stock	eration	Value	Cost	Value	(Decrease)	Accretion	Recognized	(11+12-13)	B./A.C.V.	Date	Disposal	Disposal	Disposal	Year	Date	(a)
				.																
216871-AF-0	COOPER US INC	R 01/15/2016	Maturity		400,000	400,000.00	407,724	400,072		(72)	1	(72)		400,000			1	4,750	01/15/2016	3 2FE
067383-AB-5	CR BARD INC	01/15/2016	Maturity	.	250,000	250,000.00	259,775	250,091		(91)	1	(91)		250,000			1	3,594	01/15/2016	3 1FE
26875P-AH-4	EOG RESOURCES INC	02/01/2016	Maturity		400,000	400,000.00	394,816	399,903		97		97		400,000				5,000	02/01/2016	3 1FE
3899999	Total - Bonds - Industrial and Miscellaneo	us (Unaffiliated)		XXX	1,050,000	1,050,000.00	1,062,315	1,050,066		(66)		(66)		1,050,000				13,344	XXX	XXX
8399997	Total - Bonds - Part 4			XXX	1,050,000	1,050,000.00	1,062,315	1,050,066		(66)		(66)		1,050,000				13,344	XXX	XXX
8399998	Summary Item from Part 5 for Bonds			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0399990																				
8399999	Total Bonds		i	XXX	1,050,000	1,050,000.00	1,062,315	1,050,066		(66)		(66)		1,050,000				13,344	XXX	XXX
				.																
990220-47-7	RBS CITIZENS NA CASH SWEEP	03/29/2016	CITIZENS BANK	1,329,798.5	1,329,799		1,329,799	118,949						1,329,799				230		. V
9399999	Total - Common Stock - Money Market M	lutual Funds		XXX	1,329,799	XXX	1,329,799	118,949						1,329,799				230	XXX	XXX
9799997	Total - Common Stock - Part 4		1	XXX	1,329,799	XXX	1,329,799	118,949						1,329,799				230	XXX	XXX
9799998	Summary Item from Part 5 for Common S	Phoeko		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799990	Summary item from Part 5 for Common S	Slocks		***	^^^	***	^^^	^^^	***	^^^	***	***	***	^^^	***	***	***	***	***	+^^^
9799999	Total Common Stocks			XXX	1,329,799	XXX	1.329.799	118.949						1.329.799				230	XXX	XXX
					1,020,100		1,020,100	,						1,020,100						
9899999	Total Preferred and Common Stocks			XXX	1,329,799	XXX	1,329,799	118,949						1,329,799				230	XXX	XXX
		.																		
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		.		.																
9999999	Totals		1		2,379,799	XXX	2,392,114	1,169,015		(66)		(66)		2,379,799				13,574	XXX	XXX

SCHEDULE DB - PART A - SECTION 1

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

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
		Description									Cumulative	Current											Hedge
		of Item(s)								Strike Price,	Prior Year(s)	Year Initial						Total					Effectiveness
		Hedged, Used			Exchange,					Rate or	Initial Cost	Cost of		Book/			Unrealized	Foreign		Adjustment		Credit	at Inception
1		for Income	Schedule/	Type(s) of	Counterparty		Date of			Index	of Premium	Premium		Adjusted			Valuation	Exchange	Current Year's	to Carrying		Quality of	and at
-		Generation or	Exhibit	Risk(s)	or Central		Maturity or	Number of	Notional	Received	(Received)	(Received)	Current	Carrying			Increase/	Change in	(Amortization)/	Value of	Potential	Reference	Quarter-end
-	Description	Replicated	Identifier	(a)	Clearinghouse	Trade Date	Expiration	Contracts	Amount	(Paid)	Paid	Paid	Year Income	Value	Code	Fair Value	(Decrease)	B./A.C.V.	Accretion	Hedged Item	Exposure	Entity	(b)
												$\mathbf{N}\mathbf{N}\mathbf{I}$											
L													·		1								
	1449999 Total						XXX	XXX	XXX	XXX					XXX							XXX	XXX

Code Description of Hedged Risk(s)

NONE

Code Financial or Economic Impact of the Hedge at the End of the Reporting Period

NONE

SCHEDULE DB - PART B - SECTION 1

Future Contracts Open as of the Current Statement Date

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Hi	ghly Effective He	dges	18	19	20	21	22
														15	16	17					
	İ			Description					1							Change in		Change in			
	İ			of Item(s)					1							Variation		Variation		Hedge	
	İ			Hedged,					1				l			Margin	Cumulative	Margin		Effectiveness	
	İ			Used for		ĺ	1		1				Book/			Gain (Loss)	Variation	Gain (Loss)		at Inception	
				Income	Schedule/	Type(s) of	Date of		1				Adjusted	Cumulative	Deferred	Used to	Margin for	Recognized		and at	Value of
Ticker	Number of	Notional		Generation or	Exhibit	Risk(s)	Maturity or		1	Transaction	Reporting	Fair	Carrying	Variation	Variation	Adjust Basis	All Other	in Current	Potential	Quarter-end	One (1)
Symbol	Contracts	Amount	Description	Replicated	Identifier	(a)	Expiration	Exchange	Trade Date	Price	Date Price	Value	Value	Margin	Margin	of Hedged Item	Hedges	Year	Exposure	(b)	Point
1449999 Total				1		XXX	XXX	XXX		X X	XXX									XXX	XXX

											Brol	er Na	me														Beg	inning	Cash						Cı	mulativ	ve Cas	h					Е	Ending	Cash			\neg
-																												Baland	ce							Char	nge							Balar	nce			
Γ.						 	 	 	 	 	 			 	 	 	 	 	 	 							 			 	 		 	 					 	 	 	 				 	 	
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пЦ						 	 	 	 	 	 			 	 	 	 	 	 	 							 			 	 		 	 					 		 	 				 	 	_
3 ⊺	otal Ne	et Cas	sh De	posits	s																																											

Code	Description of Hedged Risk(s)
	······································
	······································
	······································

(b)	Code	Financial or Economic Impact of the Hedge at the End of the Reporting Period
		······································

2. Net after right of offset per SSAP No. 64

SCHEDULE DB - PART D - SECTION 1

Counterparty Exposure for Derivative Instruments Open as of Current Statement Date

	1	2	3	4	Boo	k/Adjusted Carrying Valu	е		Fair Value		11	12
D (Description of Exchange, Counterparty or Central Clearinghouse	Master Agreement (Y or N)	Credit Support Annex (Y or N)	Fair Value of Acceptable Collateral	5 Contracts With Book/ Adjusted Carrying Value >0	6 Contracts With Book/ Adjusted Carrying Value <0	7 Exposure net of Collateral	8 Contracts With Fair Value >0	9 Contracts With Fair Value <0	10 Exposure Net of Collateral	Potential Exposure	Off-Balance Sheet Exposure
	Gleaninghouse	(1 0114)	(1 0114)	Ooliateral	value > 0	value 10	or conateral	value > 0	Value 10	or conateral	Exposure	Exposure
			1									
			1									
												1
					NO	KI E						
			1		INU	INE						
			1									
										l		
											1	1
												1
												1
												1
												1
999999 Gross Totals			1			 				 	1	

SCHEDULE DB - PART D - SECTION 2

Collateral for Derivative Instruments Open as of Current Statement Date

ollateral Pledged by Reporting Entity 1	2	3	4	5	6	7	8	9
Exchange, Counterparty or Central Clearinghouse	Type of Asset Pledged	CUSIP Identification	Description	Fair Value	Par Value	Book / Adjusted Carrying Value	Maturity Date	Type of Margin (I, V or IV)
			NONE					
99999 Total Collateral Pledged by Reporting Entity							XXX	XXX
ollateral Pledged to Reporting Entity								
1	2	3	4	5	6	7	8	9
Exchange, Counterparty or Central Clearinghouse	Type of Asset Pledged	CUSIP Identification	Description	Fair Value	Par Value	Book / Adjusted Carrying Value	Maturity Date	Type of Margin (I, V or IV)

1	2	3	4	5	6	7	8	9
Exchange,								
Exchange, Counterparty or Central Clearinghouse	Type of Asset	CUSIP				Book / Adjusted Carrying Value		Type of Margin
Clearinghouse	Pledged	Identification	Description	Fair Value	Par Value	Carrying Value	Maturity Date	(I, V or IV)
			······································					
]							
0299999 Total Collateral Pledged to Reporting Entity						XXX	XXX	XXX

SCHEDULE DL - PART 1

SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

1	2	3	4	5	6	7
CUSIP			NAIC Desig- nation/ Market	Fair	Book / Adjusted Carrying	Maturity
Identification	Description	Code	Indicator	Value	Value	Dates
	NA					
	NO	NE				
9999999 Totals	S					XXX
					•	

General Interrogatories:						
1. Total activity for the year to date	Fair Val	ue \$	0	Boo	k/Adjusted Carrying Value \$.0
2. Average balance for the year to date	Fair Val	ue \$	0	Boo	k/Adjusted Carrying Value \$	0
3. Reinvested securities lending collateral	assets book/adjusted carrying	ig value included in t	this schedule by NAIC designation:	:		
NAIC 1 \$	0; NAIC 2 \$	0; NAIC 3 \$	0; NAIC 4 \$	0; NAIC 5 \$	0; NAIC 6 \$).

SCHEDULE DL - PART 2

SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

1	2	3 4 5		5	6	7
CUSIP Identification	Description	Code	NAIC Desig- nation/ Market Indicator	Fair Value	Book / Adjusted Carrying Value	Maturity Dates
Identification	Description	Code	Indicator	value	value	Dates
				<u></u>		
		. .	$\bigcup V$			
			01			
9999999 Totals						XXX

General Interrogatories:

Total activity for the year

Average balance for the year

Fair Value \$				0
Fair Value \$				0

Book/Adjusted Carrying Value \$ 0 Book/Adjusted Carrying Value \$ 0

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1		3	4 Amount of	5 Amount of	Book Balance at End of Each Month During Current Quarter			
Depository	Code	Rate of Interest	Interest Received During Current Quarter	Interest Accrued at Current Statement Date	6 First Month	7 Second Month	8 Third Month	*
Depository	Oode	interest	Quarter	Otatement Bate	1 ii ot ivioriti	Occord World	Third World	-
Open Depositories								
CITIZENS BANK 18615368 CONTROL PROVIDENCE RI 02903 CITIZENS BANK 19425988 OPERATIVE PROVIDENCE RI 02903 CITIZENS BANK 99000695 CLAIMS PROVIDENCE RI 02903					4,061,497 (8,977) (2,494,629)	3,149,878 (8,161) (2,506,118)	2,723,724 (6,100) (2,210,014)	
0199998 Deposits in (0) depositories that do not exceed the allowable limit in any one depository (see Instructions) - Open Depositories	XXX	XXX						xxx
0199999 Total - Open Depositories Suspended Depositories	XXX	XXX			1,557,891	635,599	507,610	XXX
0299998 Deposits in (XXX	XXX XXX						XXX
0399999 Total Cash on Deposit	XXX	XXX			1,557,891	635,599	507,610	XXX
0499999 Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
	1::::							
	1							
	1							
0599999 Total	XXX	XXX			1,557,891	635,599	507,610	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2 3		4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
•••••	.						
	.						
	.						
	.]]
				l		.	
	.						
			NONE				
			·· M· (··) IN — ··				
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