NAIC Group Code..... 0, $\,$ 0



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

Motor Club Insurance Company
NAIC Company Code..... 12487 Employer's ID Number..... 20-3462094

(Current Period) (Prior Perio					
Organized under the Laws of RI		ile or Port of Entry RI		Country of Domicile	US
Incorporated/Organized September 14			Business January	1, 2006	
Statutory Home Office		Providence RI U			
		ity or Town, State, Country and			
Main Administrative Office	110 Royal Little Drive	Providence RI U	JS 02904	401	-868-6520
	, , ,	ity or Town, State, Country and		(Area Code)) (Telephone Number)
Mail Address	110 Royal Little Drive	Providence RI U			
	(Street and Number or P. O.		Country and Zip Code)		
Primary Location of Books and Records	110 Royal Little Drive	Providence RI U	JS 02904	401	-868-6520
		ity or Town, State, Country and	Zip Code)	(Area Code)) (Telephone Number)
Internet Web Site Address	N/A				
Statutory Statement Contact	Russell Stephen Manty			401	-868-6106
	(Name)			(Area Code) (Telephone	
	smanty@aaanortheast.	com		401	-868-2013
	(E-Mail Address)			(Fa	ax Number)
		OFFICEDS			
Nome		OFFICERS	Name		Title
Name 1. Mark Allen Shaw	Title President	2. Francis Xavi		Vice Presider	
Russell Stephen Manty	Treasurer	4.	ei Doyle	vice Fresidei	nt and Secretary
3. Russell Stephen Marity	rreasurer				
		OTHER			
	DIRECTO	DRS OR TRUSTEI	ES		
Mark Allen Shaw Joh	nn Michael Costello	William Alfred M	_	Irving Emerson Ro	ogers III
Michael Francis Fitzgerald				9 =	.g
G					
N					
State of Rhode Island					
County of Providence					
The officers of this reporting entity being duly sw	orn, each depose and say th	nat they are the described off	ficers of said reporting	entity, and that on the r	eporting period
stated above, all of the herein described assets					
nerein stated, and that this statement, together w					
of all the assets and liabilities and of the condition					
herefrom for the period ended, and have been o					
nanual except to the extent that: (1) state law m					
procedures, according to the best of their information					
ncludes the related corresponding electronic filing	ng with the NAIC, when requ	ired, that is an exact copy (e	except for formatting di	fferences due to electro	onic filing) of the
enclosed statement. The electronic filing may be	e requested by various regul	ators in lieu of or in addition	to the enclosed statem	ient.	
(Signature)		(Signature)	<u> </u>	(Signature)	_
Mark Allen Shaw	F	rancis Xavier Doyle		Russell Stephen Man	ty
1. (Printed Name)		2. (Printed Name)		3. (Printed Name)	
President	Vice	President and Secretary		Treasurer	
(Title)		(Title)		(Title)	
Subscribed and sworn to before me		a. Is this an original filin		Yes [X]	No []
This day of			e amendment number		
		Date file			
		3. Number	of pages attached		

ASSETS

		1	Current Statement Date	3	•
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	22,907,342		22,907,342	22,554,750
2.	Stocks:				
2	2.1 Preferred stocks			0	
2	2.2 Common stocks	24,166,389		24,166,389	21,756,261
3. 1	Mortgage loans on real estate:				
;	3.1 First liens			0	
;	3.2 Other than first liens			0	
4. I	Real estate:				
4	4.1 Properties occupied by the company (less \$0 encumbrances)			0	
4	4.2 Properties held for the production of income (less \$0 encumbrances)			0	
4	4.3 Properties held for sale (less \$0 encumbrances)			0	
	Cash (\$131,360), cash equivalents (\$0)	407 700		407.700	000.400
	and short-term investments (\$66,142)				
	Contract loans (including \$0 premium notes)				
	Derivatives				
	Other invested assets				
	Securities lending reinvested collateral assets				
	Subtotals, cash and invested assets (Lines 1 to 11)				
	Title plants less \$0 charged off (for Title insurers only)				
	Investment income due and accrued				
	Premiums and considerations:	200,031		200,031	204,430
	15.1 Uncollected premiums and agents' balances in the course of collection			0	
	15.2 Deferred premiums, agents' balances and installments booked but deferred			0	
	and not yet due (including \$0 earned but unbilled premiums)			0	
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers			0	
	16.2 Funds held by or deposited with reinsured companies	800,000		800,000	650,990
	16.3 Other amounts receivable under reinsurance contracts			0	
17.	Amounts receivable relating to uninsured plans			0	
	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset				
	Guaranty funds receivable or on deposit				
	Electronic data processing equipment and software				
	Furniture and equipment, including health care delivery assets (\$0)				
	Net adjustment in assets and liabilities due to foreign exchange rates				
	Receivables from parent, subsidiaries and affiliates				
	Health care (\$0) and other amounts receivable				
	Aggregate write-ins for other than invested assets				
	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25)	51,420,459	0	51,420,459	48,177,893
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	
28.	Total (Lines 26 and 27)	51,420,459	0	51,420,459	48,177,893
	DETAILS OF				
1101.				0	
	Summary of remaining write-ins for Line 11 from overflow page				
	Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)				
	Summary of remaining write-ins for Line 25 from overflow page				
	Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)		0		

Stateme	LIABILITIES, SURPLUS AND OTHER FU	JNDS	
	,	1 Current Statement Date	2 December 31 Prior Year
1.	Losses (current accident year \$322,374)	346,600	184,562
2.	Reinsurance payable on paid losses and loss adjustment expenses		
3.	Loss adjustment expenses	17,330	9,228
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)	27,200	37,094
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$84,207 on realized capital gains (losses))		55,159
7.2	Net deferred tax liability	1,415,208	501,081
8.	Borrowed money \$0 and interest thereon \$0.		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$0 and including warranty reserves of \$0 and accrued accident and health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health Service Act)	700,159	457,198
10.	Advance premium		
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)		
13.	Funds held by company under reinsurance treaties		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$0 certified)		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates	8,000	5,200
20.	Derivatives		
21.	Payable for securities		
22.	Payable for securities lending		
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$0 and interest thereon \$0.		
25.	Aggregate write-ins for liabilities		
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
27.	Protected cell liabilities		
28.	Total liabilities (Lines 26 and 27)		
29.	Aggregate write-ins for special surplus funds		
30.	Common capital stock		
31.	Preferred capital stock		
32.	Aggregate write-ins for other than special surplus funds		
33.	Surplus notes		
34.	Gross paid in and contributed surplus.		
35.	Unassigned funds (surplus)		
36.	Less treasury stock, at cost:	10,403,302	14,420,071
50.	36.10.000 shares common (value included in Line 30 \$0)		
	36.20.000 shares preferred (value included in Line 31 \$0)		
27			
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)		
38.	Totals (Page 2, Line 28, Col. 3)	51,420,459	48,177,893
2501.	DETAILS OF WRITE-ING		
2502.			
	Summary of remaining write-ins for Line 25 from overflow page		0
	Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)		0
2903.			
	Summary of remaining write-ins for Line 29 from overflow page		0
	Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above)		0
2002			

3298. Summary of remaining write-ins for Line 32 from overflow page.. 3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above)...

Statement for June 30, 2017 of the Motor Club Insurance Company STATEMENT OF INCOME

	OTATEMENT OF INCOME	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
	UNDERWRITING INCOME	10 2410	10 2010	200020. 0.
	Premiums earned:			
	1.1 Direct			
	1.3 Ceded(written \$0)			
	1.4 Net	874,439	847,515	1,635,903
	DEDUCTIONS: Losses incurred (current accident year \$434,400):			
	2.1 Direct			
	2.2 Assumed			
	2.3 Ceded	533.354	591.573	882.074
3.	Loss adjustment expenses incurred	26,668	29,579	44,104
	Other underwriting expenses incurred		499,866	
	Total underwriting deductions (Lines 2 through 5)			
7.	Net income of protected cells			
8.	Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	(278,850)	(273,503)	(83,224)
0	INVESTMENT INCOME Net investment income earned	252.074	200 422	601 406
	Net investment income earned. Net realized capital gains (losses) less capital gains tax of \$807			
11.	Net investment gain (loss) (Lines 9 + 10)	254,571	205,982	756,292
	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off			
12	(amount recovered \$0 amount charged off \$0).			
	Finance and service charges not included in premiums			
15.	Total other income (Lines 12 through 14)	0	0	0
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	(04.070)	(07.504)	672.000
	Dividends to policyholders			
	Net income, after dividends to policyholders, after capital gains tax and before all other federal and			
4.0	foreign income taxes (Line 16 minus Line 17)			
	Federal and foreign income taxes incurred			
20.	CAPITAL AND SURPLUS ACCOUNT		07,004	
21	Surplus as regards policyholders, December 31 prior year	46 928 371	45 063 494	45 063 494
	Net income (from Line 20)			
	Net transfers (to) from Protected Cell accounts			
	Change in net unrealized capital gains or (losses) less capital gains tax of \$942,746			
26.	Change in net deferred income tax	28,618	2,700	(33,434)
	Change in nonadmitted assets			
	Change in provision for reinsurance			
30.	Surplus (contributed to) withdrawn from protected cells			
	Cumulative effect of changes in accounting principles			
32.	Capital changes: 32.1 Paid in			
	32.2 Transferred from surplus (Stock Dividend)			
	32.3 Transferred to surplus			
33.	Surplus adjustments: 33.1 Paid in			
	33.2 Transferred to capital (Stock Dividend)			
•	33.3 Transferred from capital			
	Net remittances from or (to) Home Office			
	Change in treasury stock.			
	Aggregate write-ins for gains and losses in surplus			
	Change in surplus as regards policyholders (Lines 22 through 37)			
აყ.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS	40,900,902	45,005,208	40,320,37
	Summary of remaining write-ins for Line 5 from overflow page		0	0
	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)			
1402.				
1402. 1403.	Summary of remaining write-ins for Line 14 from overflow page			
1402. 1403. 1498. 1499.	Summary of remaining write-ins for Line 14 from overflow page Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)	0	0	0
1402. 1403. 1498. 1499. 3701.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1402. 1403. 1498. 1499. 3701. 3702.	Summary of remaining write-ins for Line 14 from overflow page Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)	0	0	0
1402. 1403. 1498. 1499. 3701. 3702. 3703. 3798.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0

Statement for June 30, 2017 of the Motor Club Insurance Company **CASH FLOW**

CASH FLOW	1	2	3
	Current Year	Prior Year	Prior Year Ended
CASH FROM OPERATIONS	to Date	To Date	December 31
Premiums collected net of reinsurance	1 117 400	639 341	1,546,727
Net investment income.			1,147,997
Miscellaneous income		·	
4. Total (Lines 1 through 3)			2,694,724
Benefit and loss related payments			698.500
Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		•	
7. Commissions, expenses paid and aggregate write-ins for deductions			
Dividends paid to policyholders			
Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)			
10. Total (Lines 5 through 9)			1,807,998
11. Net cash from operations (Line 4 minus Line 10)			886,726
CASH FROM INVESTMENTS			000,720
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	3 581 547	2 519 182	5 355 601
12.2 Stocks	, ,	2,010,102	482.902
12.3 Mortgage loans			
12.4 Real estate.			
12.5 Other invested assets.			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
12.7 Miscellaneous proceeds			
12.8 Total investment proceeds (Lines 12.1 to 12.7)			5,838,503
Cost of investments acquired (long-term only):		2,313,102	
13.1 Bonds	4 206 348	3 140 525	6 448 194
13.2 Stocks	' '	84,687	566.936
13.3 Mortgage loans			
13.4 Real estate			
13.5 Other invested assets			
13.6 Miscellaneous applications			
13.7 Total investments acquired (Lines 13.1 to 13.6)			
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)			
CASH FROM FINANCING AND MISCELLANEOUS SOURCES	(142,210)	(100,000)	(1,170,020
16. Cash provided (applied):			
16.1 Surplus notes, capital notes			
16.2 Capital and paid in surplus, less treasury stock			
16.4 Net deposits on deposit-type contracts and other insurance liabilities			
16.5 Dividends to stockholders			
16.6 Other cash provided (applied)			
	U	0	0
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS	,	,	,
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)	(91,906)	(392,303)	(289,900
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year		•	579,308
19.2 End of period (Line 18 plus Line 19.1)	197,502	187,006	289,408

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

Note 1 - Summary of Significant Accounting Policies

A. Accounting Practices

The accompanying financial statements of Motor Club Insurance Company (the Company) have been prepared in conformity with the accounting practices prescribed by the National Association of Insurance Commissioners (NAIC) or otherwise permitted by the State of Rhode Island Department of Business Regulation - Insurance Division. The NAIC Accounting Practices and Procedures manual, version effective January 1, 2001, (NAIC SAP) has been adopted as a component of prescribed or permitted practice by the State of Rhode Island.

Net income for the six months ended June 30, 2017 amounts to \$49,150 and surplus as of June 30, 2017 amounts to \$48,905,962.

B. Use of Estimates

The preparation of financial statements in conformity with NAIC SAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policies

Net investment income earned consists primarily of interest and dividends less related expenses. Interest is recognized on an accrual basis and dividends are recognized on an ex-dividend basis. Net realized capital gains (losses) are recognized on a specific identification basis when securities are sold, redeemed, or otherwise disposed. Realized capital losses include writedowns for impairments considered to be other than temporary.

In addition, the Company uses the following accounting policies:

- 1. Short-term investments are accounted for in the same manner as similar long-term investments in accordance with Statement of Statutory Accounting Principles (SSAP) No. 2.
- 2. Bonds are generally stated at amortized cost using the scientific method. Bonds containing call provisions are amortized to either the call or maturity value / date, whichever produces the lowest asset value (yield to worst), in accordance with SSAP No. 26. Bonds that are designated highest-quality and high-quality (NAIC designation 1 and 2, respectively) are reported at amortized cost. Non-investment grade bonds with NAIC designations of 3 through 6 are stated at the lower of amortized value or fair value.
- 3. Common stocks are stated at fair value.
- 4. The Company has no preferred stocks.
- 5. The Company has no mortgage loans.
- 6. Investment grade loan-backed securities are stated at amortized cost. The retrospective adjustment method is used to determine amortized cost for all loan-backed securities. Non-investment grade loan-backed securities with NAIC designations of 3 through 6 are stated at the lower of amortized cost or fair value.
- 7. The Company has no investments in subsidiaries and affiliated companies.
- 8. Investments in joint ventures and partnerships are stated at the underlying audited, in accordance with accounting principles generally accepted in the United States (GAAP), equity value.
- 9. The Company has no derivatives.
- 10. The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53, Property Casualty Contracts Premiums.
- 11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period determined.
- 12. The Company has no prepaid expenses, electronic data processing equipment, software, furniture, vehicles, other equipment, or leasehold improvements.
- 13. The Company does not write major medical insurance with prescription drug coverage.

Note 2 - Accounting Changes and Corrections of Errors

Not applicable.

Note 3 - Business Combinations and Goodwill

Not applicable.

Note 4 - Discontinued Operations

Not applicable.

Note 5 - Investments

A. Mortgage Loans

Not applicable.

B. Troubled Debt Restructuring for Creditors

Not applicable.

C. Reverse Mortgages

Not applicable.

- D. Loan-Backed and Structured Securities
 - 1. The Company did not make prepayment assumptions for loan-backed or structured securities.
 - 2. The Company did not recognize other-than-temporary impairments for loan-backed securities.
 - 3. The Company did not recognize other-than-temporary impairments for loan-backed securities.
 - 4. The Company did not hold any loan-backed and structured securities that were in an unrealized loss position as of June 30, 2017.
 - 5. The Company did not hold any loan-backed and structured securities that were in an unrealized loss position as of June 30, 2017.
- E. Repurchase Agreements and/or Securities Lending Transactions

For repurchase agreements, the Company requires a minimum 105% of the fair value of securities purchased under repurchase agreements to be maintained as collateral. There were no open repurchase agreements as of June 30, 2017.

F. Writedowns for Impairments of Real Estate, Real Estate Sales, Retail Land Sales Operations, and Real Estate with Participating Mortgage Loan Features

Not applicable.

G. Low Income Housing Tax Credits

Not applicable.

H. Restricted Assets

Not applicable.

I. Working Capital Finance Investments

Not applicable.

J. Offsetting and Netting of Assets and Liabilities

	K.	Structured Notes
		Not applicable.
	L.	5* Securities
		Not applicable.
	M.	Short Sales
		Not applicable.
	N.	Prepayment Penalty and Acceleration Fees
		Not applicable.
<u>Note 6 -</u>	Joint	Ventures, Partnerships, and Limited Liability Companies
	A.	Detail for Those Greater than 10% of Admitted Assets
		Not applicable.
	B.	Writedowns for Impairment of Joint Ventures, Partnerships, and LLCs
		Not applicable.
<u>Note 7 -</u>	Inves	tment Income
	No s	ignificant change.
Note 8 -	Deriv	ative Instruments
110100		applicable.
<u>Note 9 -</u>	Incon	ne Taxes
	No s	ignificant change.
Note 10	- Infor	mation Concerning Parent, Subsidiaries, Affiliates, and Other Related Parties
	No s	significant change.
Note 11	Dob	
Note 11		applicable.
	NOC	applicable.
Note 12		rement Plans, Deferred Compensation, Postemployment Benefits, Compensated Absences, and Other retirement Benefit Plans
	Not a	applicable.
Note 13	- Cani	ital and Surplus, Dividend Restrictions, and Quasi-Reorganizations
		significant change.
<u>Note 14</u>	– Liab	oilities, Contingencies, and Assessments

Note 15 - Leases

Not applicable.

Note 16 - Information about Financial Instruments with Off-Balance Sheet Risk

Not applicable.

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

Not applicable.

Note 18 - Gain or Loss from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

Not applicable.

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

Not applicable.

Note 20 - Fair Value Measurements

- A. Inputs Used for Assets and Liabilities Measured and Reported at Fair Value
 - 1. Items Measured and Reported at Fair Value by Levels 1, 2, and 3

Fair value is measured utilizing a three-tier hierarchy to classify fair value measurements as follows:

- Level 1 Values measured using quoted prices in active markets for identical assets and liabilities
- Level 2 Values measured using other significant observable inputs such as quoted prices for similar assets and liabilities, interest rates, credit risk, etc.
- Level 3 Values measured using significant unobservable inputs, including internal assumptions

The fair values of the Company's investments are determined using Level 1 inputs for common stocks, cash, cash equivalents, and short-term investments and Level 2 inputs for bonds.

2. Rollforward of Level 3 Items

The Company has no assets or liabilities measured at fair value in the Level 3 category.

3. Policy on Transfers Into and Out of Level 3

The Company had no transfers into or out of Level 3 during the current period.

4. Inputs and Techniques Used for Level 2 and Level 3 Fair Values

Not applicable.

5. Derivative Fair Values

Not applicable.

B. Other Fair Value Disclosures

C. Fair Values for All Financial Instruments by Levels 1, 2, and 3

Type of Financial Instrument	Fair Value	Admitted Value	Level 1	Level 2	Level 3	Not Practicable (Carrying Value)
Bonds	23,167,336	22,907,342		23,167,336		
Common stocks	24,166,389	24,166,389	24,166,389			
Cash, cash equivalents, and short-term investments	197,502	197,502	197,502			
Total assets	47,531,227	47,271,233	24,363,891	23,167,336		

D. Items for which Not Practicable to Estimate Fair Values

Not applicable.

Note 21 - Other Items

Not applicable.

Note 22 - Events Subsequent

The Interinsurance Exchange of the Automobile Club, a California interinsurance exchange (the Exchange), proposes to acquire control of the Company through the purchase of 50% of the issued and outstanding capital stock of the Company pursuant to the terms of a Stock Purchase Agreement dated June 20, 2017, by and among the Exchange and the Company's ultimate parent, subject to certain terms and conditions. As of August 10, 2017, the date of issuance of these statutory financial statements, the closing related to this transaction has not occurred and there were no other events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

Note 23 - Reinsurance

A. Unsecured Reinsurance Recoverables

Not applicable.

B. Reinsurance Recoverables in Dispute

Not applicable.

C. Reinsurance Assumed, Ceded, and Protected Cells

Effective July 8, 2014, the Company entered into a travel insurance quota share reinsurance agreement with BCS Insurance Company to assume 100% of certain travel insurance risks. The State of Rhode Island Department of Business Regulation – Insurance Division approved the agreement during 2014. All of the Company's underwriting results during 2017 are from the quota share agreement. Effective June 30, 2017, the Company terminated the travel insurance quota share reinsurance agreement.

	Assumed Unearned Premiums as of June 30, 2017	Assumed Commission Equity	Ceded Unearned Premiums	Ceded Commission Equity	Net Unearned Premiums as of June 30, 2017	Net Commission Equity
a. Affiliates	\$0	\$0	\$0	\$0	\$0	\$0
b. All Others	\$700,159	\$ 0	\$0	\$0	\$700,159	\$0
c. Totals	\$700,159	\$0	\$0	\$0	\$700,159	\$0

D. Uncollectible Reinsurance

Not applicable.

E. Commutation of Ceded Reinsurance

F. Retroactive Reinsurance

Not applicable.

G. Reinsurance Accounted for as a Deposit

Not applicable.

H. Run-off Arrangements

Not applicable.

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not applicable

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not applicable.

Note 24 - Retrospectively Rated Contracts and Contracts Subject to Redetermination

Not applicable.

Note 25 - Changes in Incurred Losses and Loss Adjustment Expenses

Current year changes in estimates of the costs of prior year losses and LAE affect the current year Statement of Income. Increases in those estimates increase current year expense and are referred to as unfavorable development or prior year reserve shortages. Decreases in those estimates decrease current year expense and are referred to as favorable development or prior year reserve redundancies. The estimated cost of loss and LAE attributed to insured events of prior years decreased by \$20,000 during the current period. The favorable development of \$20,000 is approximately 10.31% of the unpaid losses and LAE of \$194,000 as of December 31, 2016.

Note 26 - Intercompany Pooling Arrangements

Not applicable.

Note 27 - Structured Settlements

Not applicable.

Note 28 - Health Care Receivables

A. and B. Not applicable.

Note 29 - Participating Policies

Not applicable.

Note 30 - Premium Deficiency Reserves

Not applicable.

Note 31 - High Deductibles

Not applicable.

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

Not applicable.

Note 33 - Asbestos and Environmental Reserves

Note 34 - Subscriber Savings Accounts

Not applicable.

Note 35 - Multiple Peril Crop Insurance

Not applicable.

Note 36 - Financial Guaranty Insurance

A. and B. Not applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring the filling of Disclosure of	Material Transactions with the State of Domicile,			V [V	l Nati			
1.2	as required by the Model Act? If yes, has the report been filed with the domiciliary state?				Yes [X] Yes [X]				
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of	incorporation, or deed of settlement of the			163[7]	110[]			
2.2	reporting entity? If yes, date of change:	morporation, or dood or social more or the			Yes[]	No [X]			
3.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or If yes, complete Schedule Y, Parts 1 and 1A.	more affiliated persons, one or more of which is an ins	nore of which is an insurer? Yes [X]						
3.2	Have there been any substantial changes in the organizational chart since the prior 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 period covered by the second	this statement?			Yes[]	No [X]			
4.2	If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state a result of the merger or consolidation.	abbreviation) for any entity that has ceased to exist as	а						
	1			2 NAIC	_	3			
	Name of Entity			Compa Code		State of Domicile			
5.	If the reporting entity is subject to a management agreement, including third-party administrator(similar agreement, have there been any significant changes regarding the terms of the agreement (yes, attach an explanation.			Yes[]	No [X]	N/A []			
6.1	State as of what date the latest financial examination of the reporting entity was made or is being	g made.		12/3	31/2014				
6.2	State the as of date that the latest financial examination report became available from either the should be the date of the examined balance sheet and not the date the report was completed or			12/31/2014					
6.3	State as of what date the latest financial examination report became available to other states or reporting entity. This is the release date or completion date of the examination report and not the		08/14/2015						
6.4	By what department or departments? <u>State of Rhode Island Department of Business Regulation - Insurance Division</u>								
6.5	Have all financial statement adjustments within the latest financial examination report been account with Departments?	ounted for in a subsequent financial statement filed		Yes[]	No[]	N/A [X]			
6.6	Have all of the recommendations within the latest financial examination report been complied wi		Yes[]	No []	N/A [X]				
7.1	Has this reporting entity had any Certificates of Authority, licenses or registrations (including corp by any governmental entity during the reporting period?	porate registration, if applicable) suspended or revoke	d		Yes[]	No [X]			
7.2	If yes, give full information:								
8.1	Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Boa	ard?			Yes[]	No [X]			
8.2	If response to 8.1 is yes, please identify the name of the bank holding company.								
8.3	Is the company affiliated with one or more banks, thrifts or securities firms?				Yes [X]	No[]			
8.4	If the response to 8.3 is yes, please provide below the names and location (city and state of the regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's provided the computation of the Securities (SEC) and identify the affiliate of the Securities (SEC) and identify the Securities (SEC) and identification (SEC) and identify the Securities (SEC) and identification (SEC) and ide	of the Currency (OCC), the Federal Deposit Insurance	;						
	1 Affiliate Name N/A	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC			
9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting functions) of the reporting entity subject to a code of ethics, which includes the following standar				Yes [X]	No[]			
	(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of	of interest between personal and professional relations	hips;						
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to	o be filed by the reporting entity;							
	(c) Compliance with applicable governmental laws, rules and regulations;								
	(d) The prompt internal reporting of violations to an appropriate person or persons identified in	n the code; and							
	(e) Accountability for adherence to the code.								
9.11	If the response to 9.1 is No, please explain:								
9.2	Has the code of ethics for senior managers been amended?				Yes[]	No [X]			
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).								
9.3	Have any provisions of the code of ethics been waived for any of the specified officers?				Yes[]	No [X]			
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).								
	FINANCI	AL							
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page				Yes[]	No [X]			

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

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

				IN	VESTMENT						
11.1		any of the stocks, bonds, or other a another person? (Exclude securiti			under option agreen	nent, or otherwise	e made available for			Yes[]	No [X
11.2	If yes,	give full and complete information r	relating thereto:								
12.	Amou	nt of real estate and mortgages held	d in other invested assets in So	chedule BA:					\$		0
13.	Amou	nt of real estate and mortgages held	d in short-term investments:						\$		0
14.1	Does	the reporting entity have any investr	ments in parent, subsidiaries a	nd affiliates?						Yes[]	No [X
	14.2	If yes, please complete the following	g:								
						Prior Y	1 ear End Book/Adjus Carrying Value	ted	2 Current Quarter Book/Adjuste Carrying Value		
	14.21 14.22	Bonds Preferred Stock				\$		0	\$		0
	14.23	Common Stock						0			0
	14.24 14.25		te.					0			0
	14.26	0 0						0			0
	14.27 14.28		,		.21 to 14.26)	\$ \$		0	\$ \$		0
15.1		ne reporting entity entered into any h			DB?	¥			Ψ	Yes[]	No [X
15.2	If yes,	has a comprehensive description o	f the hedging program been m	ade availabl	e to the domiciliary s	tate?				Yes[]	No [
	If no, a	attach a description with this statem	ent.								
16.	For th	e reporting entity's security lending	program, state the amount of t	he following	as of current stateme	ent date:					
16.1	Total t	fair value of reinvested collateral ass	sets reported on Schedule DL,	Parts 1 and	2:				\$		0
16.2	Total I	book adjusted/carrying value of rein	vested collateral assets reporte	ed on Sched	ule DL, Parts 1 and 2	2:			\$		0
16.3	Total _I	payable for securities lending report	ed on the liability page:						\$		0
17.	offices custod of Crit	ding items in Schedule E-Part 3-Spe s, vaults or safety deposit boxes, we dial agreement with a qualified bank ical Functions, Custodial or Safekee For all agreements that comply with	re all stocks, bonds and other or trust company in accordance eping Agreements of the NAIC	securities, ov ce with Section Financial Co	wned throughout the on 1, III - General Exandition Examiners F	current year held amination Consideral andbook?	d pursuant to a derations, F. Outsou	ırcing		Yes[X]	No [
			1			· ·		2			
		State Street Bank and Trust Com	Name of Custodian(s) pany			Custodian Address 1200 Crown Colony Drive, 5th Floor, Quincy, MA 02169					
		For all agreements that do not com location and a complete explanation		NAIC Financial Condition Examiners Handbook, provide the name,							
		1 Name	e(s)		2 Locatio	n(s)	3 Complete Explanation			anation(s)	
	17.3	L Have there been any changes, inclu	uding name changes, in the cu	stodian(s) id	entified in 17.1 durin	g the current qua	arter?			Yes []	No [X
	17.4	If yes, give full and complete inform	ation relating thereto:								
		1			2		3 Date of			4	
		Old Custoo	lian		New Custodian		Change		R	eason	
		Investment management – Identify of the reporting entity. For assets the securities"].									on behal
			Name of Fi	1 rm or Individ	ual				Af	2 filiation	
		Income Research & Management Prime, Buchholz & Associates, Inc								U	
		17.5097 For those firms/individu	als listed in the table for Quest of the reporting entity's asse		any firms/individuals	unaffiliated with	the reporting entity	(i.e., desig	nated with		No [
		17.5098 For firms/individuals un	affiliated with the reporting ent e to more than 50% of the rep	tity (i.e., desig		ted in the table fo	or Question 17.5, do	es the tota	al assets ui	nder	
	17.6	For those firms or individuals listed	•			U" (unaffiliated),	provide the informat	ion for the	table belo	Yes[]	No [X
		1 Central Registration Depository	2		3		4			5 Investment Managemen	
		Number 104863	Name of Firm or Indiv Income Research & Manage		Legal Entity Ide	entifier (LEI)	Registere U.S. Securities ar			Agreement (IMA) No	Filed
							Commission				
		106455	Prime, Buchholz & Associate	es, inc.			U.S. Securities ar Commission	id Exchan	ge	No	

Yes[X] No[]

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

18.2 If no, list exceptions:

Statement for June 30, 2017 of the Motor Club Insurance Company

GENERAL INTERROGATORIES (continued)

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? If yes, attach an explanation.

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

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

Yes[] No[X]

If yes, attach an explanation.

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

Yes[] No[X]

3.2 If yes, give full and complete information thereto:

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

Yes[] No[X]

Yes[] No[X]

4.2 If yes, complete the following schedule:

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

5.1 Operating Percentages:

	5.1 A&H loss percent		0.000%
	5.2 A&H cost containment percent		0.000%
	5.3 A&H expense percent excluding cost containment expenses		0.000%
6.1	Do you act as a custodian for health savings accounts?	 Yes[]	No [X]
6.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$	0

6.3 Do you act as an administrator for health savings accounts?

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

Q08

Statement for June 30, 2017 of the Motor Club Insurance Company SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

		eneming / in New Members of Carrett Tear to Ba				
1	2	3	4	5	6	7
NAIC					Certified	Effective Date of Certified
Company			Domiciliary	Type of	Reinsurer Rating	Reinsurer
Code	ID Number	Name of Reinsurer	Jurisdiction	Reinsurer	(1 through 6)	Rating

NONE

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

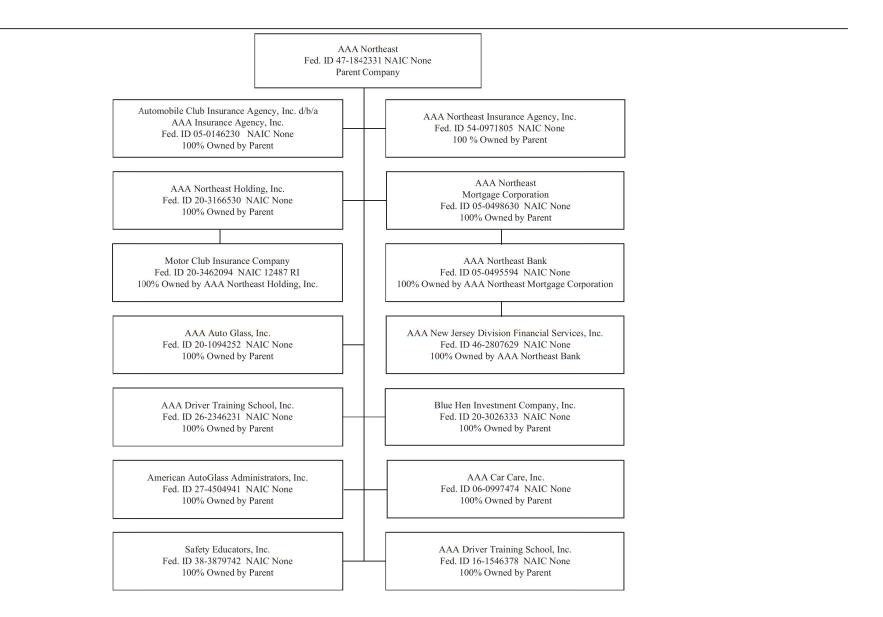
1			Direct Premiums Written Direct Losses Paid (D		(Deducting Salvage)	Direct Losses Unpaid 6 7				
	States, Etc.	Active Status	Current Year to Date	3 Prior Year to Date	Current Year to Date	Prior Year to Date	Current Year to Date	Prior Year to Date		
	AlabamaAL									
	AlaskaAK									
	ArizonaAZ									
	ArkansasAR									
	CaliforniaCA ColoradoCO									
	ConnecticutCT									
	DelawareDE									
	District of ColumbiaDC									
	FloridaFL									
	GeorgiaGA									
12.	HawaiiHI	N								
13.	ldahoID									
	IllinoisIL									
	IndianaIN									
	lowaIA									
	KansasKS									
	KentuckyKY									
	LouisianaLA MaineME									
	MarylandMD									
	MassachusettsMA									
	MichiganMI									
	MinnesotaMN									
	MississippiMS									
	MissouriMO									
	MontanaMT									
	NebraskaNE									
	NevadaNV									
	New HampshireNH									
	New JerseyNJ									
	New MexicoNM									
	New YorkNY North CarolinaNC									
	North DakotaND	N								
	OhioOH									
	OklahomaOK									
	OregonOR									
	PennsylvaniaPA									
40.	Rhode IslandRI	L								
	South CarolinaSC									
	South DakotaSD									
	TennesseeTN									
	TexasTX									
	UtahUT									
	VermontVT VirginiaVA	N								
	WashingtonWA									
	West VirginiaWV									
	WisconsinWI									
	WyomingWY									
	American SamoaAS									
	GuamGU	N								
	Puerto RicoPR									
	US Virgin IslandsVI									
	Northern Mariana IslandsMP									
	CanadaCAN									
	Aggregate Other AlienOT		0	0	0	0	0	0		
59.										
58001	DETAILS OF WRITE-INS 3001XXX									
		XXX.								
		XXX.								
	Summary of remaining write-ins									
	for Line 58 from overflow page	XXX.	0	0	0	0	0	0		
	Totals (Lines 58001 thru 58003+									
	Line 58998) (Line 58 above) censed or Chartered - Licensed Ins	XXX.	0	0	demisited BBCs; (O) O	0	0	0		

⁽E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile see DSLI); (D) - DSLI - Domestic Surplus Lines Insurer

⁽DSLI) - Reporting entities authorized to write Surplus Lines in the state of domicile; (N) - None of the above - Not allowed to write business in the state.

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

PART 1 – ORGANIZATIONAL CHART



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

TART IN BEITHE OF INCOMMINE HOLDING COMMINENT CHOICEM														
2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
					Name of					Type of				
					Securities					Control				
					Exchange					(Ownership			ls an	
					if Publicly						If Control is		SCA	
	NAIC					Names of		Relationship						
Group	_	ID	Federal				Domiciliary		Directly Controlled by			Ultimate Controlling	3	
				CIK										*
	Oodo	rambo	TOOD	Oilt	international	or rumates	Location	Linuty	(Name of Enary) crossing	illiactice, ethor)	i crocinage	Entity(160)/1 G13G11(0)	(1714)	
1	00000	47 4040004				A A A North a set	DE	LUD					N	
	00000	47-1842331				AAA Nortneast	DE	UIP					N	
						Automobile Club Insurance Agency Inc. d/b/a								
	00000	05-0146230					RI	ΝΙΔ	AAA Northeast	Ownership	100 000	AAA Northeast	N	
	00000	54-0971805				AAA Northeast Insurance Agency, Inc	MA	NIA	AAA Northeast	Ownership	100.000	AAA Northeast	N	
	00000	20-3166530				AAA Northeast Holding, Inc	RI	UDP	AAA Northeast	Ownership	100.000	AAA Northeast	N	
						_	RI	NIA	AAA Northeast	Ownership	100 000	AAA Northeast	N	
							DI	140		•				
	12487	20-3462094				Motor Club Insurance Company	KI		AAA Nortneast Holding, Inc	Ownersnip	100.000	AAA Nortneast	N	
	00000	05-0495594				AAA Northeast Bank	RI	NIA	AAA Northeast Mortgage Corporation	Ownership	100.000	AAA Northeast	N	
						AAA Now Jarsey Division Financial Services								
	00000	40 0007000				AAA New Jersey Division Financial Services,	NI I	NII A	A A A North and Doub	O	100 000	A A A North a set	NI.	
						Inc.	NJ	NIA	AAA Northeast Bank	Ownersnip	100.000	AAA Northeast	N	
	00000	20-1094252				AAA Auto Glass, Inc	RI	NIA	AAA Northeast	Ownership	100.000	AAA Northeast	N	
	00000	20-3026333				Blue Hen Investment Company, Inc	DE	NIA	AAA Northeast	Ownership	100.000	AAA Northeast	N	
							МА	NIA	AAA Northeast	Ownership	100 000	AAA Northeast	N	
							DI.	NII A					NI NI	
							KI	NIA					N	
	00000	06-0997474				AAA Car Care, Inc	CT	NIA	AAA Northeast	Ownership	100.000	AAA Northeast	N	
	00000	38-3879742				Safety Educators, Inc	RI	NIA	AAA Northeast	Ownership	100.000	AAA Northeast	N	
	00000	16-1546378				AAA Driver Training School, Inc	NY	NIA	AAA Northeast	Ownership	100.000	AAA Northeast	N	
	Group Name	Name Code DerS	Group Name Company Code Number	Group Name Company Code ID Number Federal RSSD Ders 00000 47-1842331	Group Name Company Code Number Federal RSSD CIK	NAIC Group Name Code Number RSSD CIK Traded (U.S. or International)	NAIC Company ID Federal RSSD CIK International) Names of Parent, Subsidiaries Parent, Subsidia	NAIC	Name Name	Name Company ID	Name Name of Securities S	Name Company ID Federal Fublicity Names of Parent, Subsidiaries Domiciliary International Parent, Subsidiaries Domiciliary International Domiciliary International Domiciliary International Domiciliary International Domiciliary Directly Controlled by Attorney-in-Fact, Attorney-in-Fact, Attorney-in-Fact, International Parent, Subsidiaries Domiciliary International Domiciliary Directly Controlled by Attorney-in-Fact, Attorney-in-Fact, International Parent, Subsidiaries Domiciliary International Domiciliary International Domiciliary Directly Controlled by Attorney-in-Fact, Attorney-in-Fact, International Parent, Subsidiaries Domiciliary Directly Controlled by Attorney-in-Fact, Attorney-in-Fact, International Parent, Subsidiaries Domiciliary Directly Controlled by Attorney-in-Fact, Attorney-in-Fact, International Domiciliary Directly Controlled by Attorney-in-Fact, Attorney-in-Fact, Attorney-in-Fact, International Domiciliary Directly Controlled by Department Domiciliary Domiciliary Directly Controlled by Department Domiciliary Department Domiciliary Department Domiciliary Department Domiciliary Department Domiciliar	Name of Securities Exchange Flublicy Traded Vomership Board Vomership Board Vomership Board Vomership Board Vomership Board Vomership Board Vomership Vomership	Name of Securities Securiti

	174141	- LOOU LAI L			
			Current Year to Date		4
		1	2	3	Prior Year to Date
		Direct Premiums	Direct Losses	Direct	Direct Loss
	Lines of Business	Earned	Incurred	Loss Percentage	Percentage
1.	Fire			0.000	
2.	Allied lines			0.000	
3.	Farmowners multiple peril			0.000	
	Homeowners multiple peril			0.000	
5.	Commercial multiple peril			0.000	
	Mortgage guaranty			0.000	
	Ocean marine			0.000	
	Inland marine			0.000	
	Financial guaranty			0.000	
	Medical professional liability - occurrence			0.000	
	Medical professional liability - claims-made			0.000	
	Earthquake			0.000	
				0.000	
	Group accident and health				
	Credit accident and health			0.000	
	Other accident and health			0.000	
	Workers' compensation			0.000	
17.1	Other liability-occurrence			0.000	
17.2	Other liability-claims made			0.000	
17.3	Excess workers' compensation			0.000	
18.1	Products liability-occurrence			0.000	
18.2	Products liability-claims made			0.000	
	19.2 Private passenger auto liability			0.000	
19.3.	19.4 Commercial auto liability			0.000	
	Auto physical damage			0.000	
	Aircraft (all perils)			0.000	
	Fidelity			0.000	
	Surety			0.000	
	Burglary and theft			0.000	
	Boiler and machinery			0.000	
				0.000	
	Credit			0.000	
			•••••		
	Warranty			0.000	
	Reinsurance-nonproportional assumed property	XXX	XXX	XXX	XXX
		XXX	XXX	XXX	XXX
	Reinsurance-nonproportional assumed financial lines		XXX	XXX	XXX
	Aggregate write-ins for other lines of business		0	0.000	
35.	Totals	0	0	0.000	
		DETAILS OF WRITE-INS			
3401.				0.000	
3402.				0.000	
				0.000	
	Sum. of remaining write-ins for Line 34 from overflow page	n	0		XXX
	Totals (Lines 3401 thru 3403 plus 3498) (Line 34)		0	0.000	
J 4 JJ.	10tais (Lines 3401 tillu 3403 plus 3430) (Line 34)	U	0	0.000	

	PART 2 - DIR	ECT PREMIUMS WRIT	TEN	
	Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1	Fire		rour to Buto	Tour to Date
	Allied lines.			
	Farmowners multiple peril			
	Homeowners multiple peril			
	Commercial multiple peril			
	Mortgage guaranty			
	Ocean marine			
	Inland marine			
	Financial guaranty			
	Medical professional liability - occurrence			
	Medical professional liability - claims made			
	Earthquake			
	Group accident and health			
	Credit accident and health			
	Other accident and health			
_	Workers' compensation.			
17 1	Other liability accurrance			
17.1	Other liability-occurrence			
17.2	Other liability-claims made			
17.3	Excess workers compensation	\		
18.1	Products liability-occurrence			
_				
	19.2 Private passenger auto liability			
	19.4 Commercial auto liability			
	Auto physical damage			
	Aircraft (all perils)			
	Fidelity			
	Surety			
	Burglary and theft			
	Boiler and machinery			
	Credit			
29.	International			
	Warranty			
	Reinsurance-nonproportional assumed property		XXX	XXX
	Reinsurance-nonproportional assumed liability	XXX	XXX	XXX
33.	Reinsurance-nonproportional assumed financial lines	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0
35.	Totals	0	0	0
0.101		DETAILS OF WRITE-INS		
3401.				
	Sum. of remaining write-ins for Line 34 from overflow page		0	<u>0</u>
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34)		0	0

PART 3 (000 omitted)

				L	OSS AND LOSS A	DJUSTMENT E	XPENSE RESEF	RVES SCHEDULE					
	1	2	3 Total Prior	4 2017	5 2017	6	7 Q.S. Date Known Case Loss and	8 Q.S. Date Known Case Loss and LAE	9	10	11 Prior Year-End Known Case Loss and LAE		13 Prior Year-End Total Loss
Years in Which Losses	Prior Year-End Known Case Loss and LAE	Prior Year-End IBNR Loss and LAE	Year-End Loss and LAE Reserves	Loss and LAE Payments on Claims Reported as of Prior	Unreported as of	Total 2017 Loss and LAE Payments	Open as of Prior	Reserves on Claims Reported or Reopened Subsequent to	Loss and LAE	Total Q.S. Loss and LAE Reserves	(Cols. 4 + 7	Reserves Developed (Savings)/Deficiency (Cols. 5 + 8 + 9	Developed (Savings)/Deficiency
Occurred	Reserves	Reserves	(Cols. 1 + 2)	Year-End	Prior Year-End	(Cols. 4 + 5)	Year-End	Prior Year-End	Reserves	(Cols. 7 + 8 + 9)	minus Col. 1)	minus Col. 2)	(Cols. 11 + 12)
1. 2014 + Prior			0			0				0	0	0	0
2. 2015		2	2			0				0	0	(2)	(2)
Subtotals 2015 + Prior	0	2	2	0	0	0	0	0	0	0	0	(2)	(2)
4. 2016		192	192		149	149			25	25	0	(18)	(18)
5. Subtotals		404	404		440	440			05	05		(00)	(20)
2016 + Prior	0	194	194	0	149	149	0	0	25	25	0	(20)	(20)
6. 2017	XXX	XXX	XXX	XXX	241	241	XXX		338	338	XXX	XXX	XXX
7. Totals	0	194	194	0	390	390	0	0	363	363	0	(20)	(20)
8. Prior Year- End's Surplus As Regards Policyholders	46,928										Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7

Col. 13, Line 7 Line 8 4.(0.043)%

....(10.309)%

...(10.309)% 3.

...0.000 % 2.

Statement for June 30, 2017 of the Motor Club Insurance Company

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.

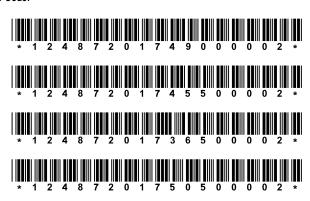
1.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile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

Response

Explanation:

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

Bar Code:



NONE

Statement for June 30, 2017 of the Motor Club Insurance Company SCHEDULE A - VERIFICATION

Real Estate

	Todi Estate		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	2.1 Actual cost at time of acquisition 2.2 Additional investment made after acquisition 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 end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)	0	0

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	2,662,028	2,410,492
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)	400,903	251,536
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Deduct amortization of premium and depreciation		
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)	3,062,931	2,662,028
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	3,062,931	2,662,028

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
		Prior Year Ended
	Year to Date	December 31
Book/adjusted carrying value of bonds and stocks, December 31 of prior year		42,062,912
Cost of bonds and stocks acquired	4,468,820	7,015,130
3. Accrual of discount	12,860	26,932
Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals	2,307	238,287
Deduct consideration for bonds and stocks disposed of	3,726,547	5,838,503
7. Deduct amortization of premium		583,027
8. Total foreign exchange change in book/adjusted carrying value		
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)	47,073,731	44,311,011
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	47,073,731	44,311,011

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

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

		1	2	3	4	5	6	7	8
		Book/Adjusted Carrying	Acquisitions	Dispositions	Non-Trading Activity	Book/Adjusted Carrying	Book/Adjusted Carrying	Book/Adjusted Carrying	Book/Adjusted Carrying
		Value Beginning	During	During	During	Value End of	Value End of	Value End of	Value December 31
	NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
	BONDS								
1	. NAIC 1 (a)	22,075,364	3,677,823	3,461,166 .	(135,200)	22,075,364	22,156,821		21,999,664
2	. NAIC 2 (a)	819,594			(2,931)	819,594	816,663		818,739
3	. NAIC 3 (a)						0		
4	. NAIC 4 (a)						0		
5	. NAIC 5 (a)						0		
	. NAIC 6 (a)						0		
7	. Total Bonds	22,894,958	3,677,823	3,461,166	(138,131)	22,894,958	22,973,483	0	22,818,404
	PREFERRED STOCK								
8	. NAIC 1						0		
ç	. NAIC 2						0		
1	D. NAIC 3						0		
	1. NAIC 4						0		
	2. NAIC 5						0		
1	3. NAIC 6						0		
1.	4. Total Preferred Stock	0	0	0	0	0	0	0	0
1:	5. Total Bonds and Preferred Stock			3,461,166	(138,131)	22,894,958	22,973,483	0	22,818,404

Statement for June 30, 2017 of the Motor Club Insurance Company SCHEDULE DA - PART 1

Short-Term Investments

Chort Torri invocatione													
	1	2	3	4	5								
	Book/Adjusted		Actual	Interest Collected	Paid for Accrued Interest								
	Carrying Value	Par Value	Cost	Year To Date	Year To Date								
9199999	66,142	XXX	66,142	812									

SCHEDULE DA - VERIFICATION

Short-Term Investments

	Snort-Term Investments	1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	263,654	333,440
2.	Cost of short-term investments acquired	3,645,407	5,204,960
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	3,842,919	5,274,746
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other-than-temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	66,142	263,654
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	66,142	263,654

Sch. DB - Pt. A - Verification NONE

Sch. DB - Pt. B - Verification NONE

Sch. DB - Pt. C - Sn. 1 NONE

Sch. DB - Pt. C - Sn. 2 NONE

Sch. DB - Verification NONE

Sch. E - Verification NONE

Sch. A - Pt. 2 NONE

Sch. A - Pt. 3 NONE

Sch. B - Pt. 2 NONE

Sch. B - Pt. 3 NONE

Sch. BA - Pt. 2 NONE

Sch. BA - Pt. 3 NONE

SCHEDULE D - PART 3 Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

4	Ō		4			7			40
1	2	3	4	5	6	/	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
Bonds - U.S. Political Subdivisions of St	ates								
442403 MQ 1 HOUSTON TE	EX INDPT SCH DIST		05/31/2017	CITIGROUP GLOBAL MARKETS INC		176,132	170,000		1FE
2499999. Total - Bonds - U.S. Po	litical Subdivisions of States					176,132	170,000	0	XXX
Bonds - U.S. Special Revenue and Speci	al Assessment					<u> </u>			
047870 KL 3 ATLANTA GA	WTR & WASTEWTR REV		06/22/2017	JANNEY MONTGOMERY, SCOTT INC		370,039	330,000	3,208	1FE
13032U MT 2 CALIFORNIA	HEALTH FACS FING AUTH REV		04/26/2017	GOLDMAN, SACHS & CO		180.395	155.000		1FE
18085P RC 0 CLARK CNTY	NEV ARPT REV		06/01/2017	CITIGROUP GLOBAL MARKETS INC		323.042	285.000		1FE
56042R KS 0 MAINE HEAL	TH & HIGHER EDL FACS AUTH REV		06/07/2017	WELLS FARGO BANK, N.A./SIG			375.000		1FE
647310 S9 3 NEW MEXICO	ST SEVERANCE TAX		05/30/2017	JP MORGAN SECURITIES LLC		129.961	120.000	2.517	1FE
	Y TENN HEALTH EDL & HSG FACS B		04/05/2017	JP MORGAN SECURITIES LLC		298.838	265.000	, ,	1FE
	ecial Revenue and Special Assessments					1.708.119	1.530.000	5.725	XXX
8399997. Total - Bonds - Part 3			1.884.251	1,700,000	5.725	XXX			
8399999. Total - Bonds						1.884.251	1,700,000	5.725	XXX
Common Stocks - Mutual Funds							, ,		
	NDEX FDS TTLSTK MKT-INST		06/20/2017	STATE STREET BANK AND TRUST	825.140	50.152	XXX		L
9299999. Total - Common Stocks			1			.50.152	XXX	0	XXX
Common Stocks - Money Market Mutual							7001		
000000 00 0 SANTANDER			06/30/2017	SANTANDER	125.156.460	125.156	XXX		V
9399999. Total - Common Stocks			XXX	0	XXX				
9799997. Total - Common Stocks	,	175.308	XXX	0	XXX				
9799999. Total - Common Stocks						175.308	XXX	0	XXX
9899999. Total - Preferred and C						175.308	XXX	0	XXX
9999999. Total - Bonds, Preferre						2.059.559	XXX	5.725	XXX
ooooooo. Total - Dollas, I Teleffel	d did Common Stocks					2,003,003	////		////

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

SCHEDULE D - PART 4
Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

Г		1	2	2 4	F.	6	7	0	0	10		Chango in D	ook/Adjusted	Carrying Value		16	17	10	10	20	21	22
		1	2	3 4	5	O	′	0	9	10	11	12	13	Janying value	15	10	17	10	19	20	21	22
												12	10	14	10							
				F									Current							Bond		
													Year's							Interest /		
				r							Unrealized	Current	Other-Than-		Total Foreign		Foreign			Stock	Stated	NAIC
				ei						Prior Year	Valuation	Year's	Temporary	Total Change	Exchange	Book/Adjusted	Exchange	Realized	Total Gain	Dividends	Contractual	Designation
				g Disposal		Number of				Book/Adjusted	Increase	(Amortization)	Impairment	in B./A.C.V.		Carrying Value at	Gain (Loss)		(Loss) on	Received	Maturity	or Market
(CUSIP Id	dentific	cation Description	n Date	Name of Purchaser	Shares of Stock	Consideration	Par Value	Actual Cost	Carrying Value	(Decrease)	/ Accretion	Recognized	(11+12-13)	B./A.C.V.	Disposal Date	on Disposal	on Disposal	Disposal	During Year	Date	Indicator (a)
Е	onds -	U.S. S	States, Territories and Possessions																			
	93974A	FN	9 WASHINGTON ST	05/01/2017	CALLED @ 100.00		35,000	35,000	39,766	36,069		(263)		(263)		35,808		(808)	(808)	963	05/01/2018.	1FE
1	799999.		Total - Bonds - U.S. States, Territories & Poss	essions			35,000	35,000	39,766	36,069	0	(263)	0	(263)	0	35,808	0	(808)	(808)	963	XXX	XXX
E	onds -	U.S. P	Political Subdivisions of States																			
	249002	DE	3 DENTON TEX INDPT SCH DIST	06/02/2017	PERSHING LLC		115,143	110,000	122,808	116,910		(1,795)		(1,795)		115,084		59	59	4,461	08/15/2018.	1FE
	526030	V8	1 LENEXA KANS	04/27/2017	PERSHING LLC		52,568	50,000	55,407	53,294		(632)		(632)		52,663		(95)	(95)	1,646	09/01/2018.	1FE
	564386	FB	1 MANSFIELD TEX INDPT SCH DIST	06/08/2017	SWS GROUP		395,280	395,000	403,820	398,139		(2,354)		(2,354)		395,785		(504)	(504)	5,914	08/01/2042.	1FE
	968661	GZ	5 WILL CNTY ILL FST PRESV DIST	05/11/2017	PERSHING LLC		168,792	150,000	174,354	164,256		(1,280)		(1,280)		162,975		5,817	5,817	3,146	12/15/2020.	1FE
2	499999.		Total - Bonds - U.S. Political Subdivisions of S	tates			731,782	705,000	756,389	732,598	0	(6,062)	0	(6,062)	0	726,507	0	5,275	5,275	15,167	XXX	XXX
E	onds -	U.S. S	Special Revenue and Special Assessment																	•		
			ILLINOIS ST UNEMPLOYMENT INS FD																			
	452256	BB	5 BLDG RCPTS REV	06/15/2017	MATURITY		365,000	365,000	409,008	365,000				0		365,000			0	9,125	06/15/2017.	1FE
	721876	RA	0 PIMA CNTY ARIZ SWR REV	06/02/2017	VARIOUS		381,647	365,000	419,192	386,930		(4,873)		(4,873)		382,056		(409)	(409)	15,252	07/01/2018.	1FE
	914713	J3	7 UNIVERSITY N C CHAPEL HILL REV	04/17/2017	GOLDMAN, SACHS & CO									0					0	32	12/01/2041.	1FE
			UTAH ST BLDG OWNERSHIP AUTH																			
	917547	LS	8 LEASE REV	05/15/2017	CALLED @ 100.00		45,000	45,000	50,612	45,566		(84)		(84)		45,482		(482)	(482)	1,238	05/15/2019.	1FE
	199999.		Total - Bonds - U.S. Special Revenue and Speci	ecial Assessments			791,647	775,000	878,811	797,496	0	(4,958)	0	(4,958)	0	792,538	0	(891)	(891)	25,647	XXX	XXX
<u>;;</u>	399997.		Total - Bonds - Part 4				1,558,430	1,515,000	1,674,966	1,566,163	0	(11,283)	0	(11,283)	0	1,554,853	0	3,577	3,577	41,776	XXX	XXX
9	399999.		Total - Bonds				1,558,430	1,515,000	1,674,966	1,566,163	0	(11,283)	0	(11,283)	0	1,554,853	0	3,577	3,577	41,776	XXX	XXX
C	ommon	Stoc	cks - Money Market Mutual Funds																			
	000000	00	0 SANTANDER MMF	05/31/2017	SANTANDER	90,000.000	90,000	XXX	90,000	32,651				0		90,000			0	22	XXX	V
9	399999.		Total - Common Stocks - Money Market Mutu	al Funds		·····	90,000	XXX	90,000	32,651	0	0	0	0	0	90,000	0	0	0	22	XXX	XXX
9	799997.		Total - Common Stocks - Part 4				90,000	XXX	90,000	32,651	0	0	0	0	0	90,000	0	0	0	22	XXX	XXX
9	799999.		Total - Common Stocks				90,000	XXX	90,000	32,651	0	0	0	0	0	90,000	0	0	0	22	XXX	XXX
9	899999.		Total - Preferred and Common Stocks				90,000	XXX	90,000	32,651	0	0	0	0	0	90,000	0	0	0	22	XXX	XXX
9	999999.		Total - Bonds, Preferred and Common Stocks				1.648.430	XXX	1.764.966	1.598.814	0	(11,283)	0	(11,283)	0	1.644.853	0	3,577	3,577	41.798	XXX	XXX

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

Sch. DB - Pt. A - Sn. 1 NONE

Sch. DB - Pt. B - Sn. 1 NONE

Sch. DB - Pt. D - Sn. 1 NONE

Sch. DB - Pt. D - Sn. 2 NONE

> Sch. DL - Pt. 1 NONE

Sch. DL - Pt. 2 NONE

Statement for June 30, 2017 of the Motor Club Insurance Company SCHEDULE E - PART 1 - CASH

Mon	th End D	epository	Balances							
1	2	3	4	5	-	Book Balance at End of Each Month During Current Quarter				
					6	7	8			
			Amount of Interest Received During	Amount of Interest Accrued at Current						
Depository	Code	Rate of Interest	Current Quarter	Statement Date	First Month	Second Month	Third Month	*		
Open Depositories		1		I	I	I				
SANTANDER BANKPROVIDENCE, RI					(8,885)	26,814	131,360	XXX		
0199999. Total Open Depositories	XXX	XXX	0	0	(8,885)	26,814	131,360	XXX		
0399999. Total Cash on Deposit	XXX	XXX	0	0	(8,885)	26,814	131,360	XXX		
0500000 7 4 4 0 4	100/	1001			(0.005)	00.011	404.000			

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

QE13

NONE