



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2014
OF THE CONDITION AND AFFAIRS OF THE

Amica Property and Casualty Insurance Company

NAIC Group Code 0028 0028 NAIC Company Code 12287 Employer's ID Number 26-0115568

Organized under the Laws of Rhode Island, State of Domicile or Port of Entry RI
Country of Domicile United States of America

Incorporated/Organized 05/11/2005 Commenced Business 01/01/2006

Statutory Home Office 100 Amica Way, Lincoln, RI, US 02865-1156
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 100 Amica Way, Lincoln, RI, US 02865-1156
(Street and Number) (City or Town, State, Country and Zip Code)
800-652-6422 (Area Code) (Telephone Number)

Mail Address P.O. Box 6008, Providence, RI, US 02940-6008
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 100 Amica Way, Lincoln, RI, US 02865-1156
(Street and Number) (City or Town, State, Country and Zip Code)
800-652-6422 (Area Code) (Telephone Number)

Internet Website Address www.amica.com

Statutory Statement Contact David Joseph Macedo, 800-652-6422-24014
(Name) (Area Code) (Telephone Number)
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OFFICERS

Chairman, President and Chief Executive Officer Robert Anthony DiMuccio
Senior Vice President, Chief Financial Officer and Treasurer James Parker Loring
Senior Assistant Vice President and Secretary Suzanne Ellen Casey

OTHER

Jill Holton Andy, Senior Vice President Robert Karl Benson, Sr VP & Chief Investment Officer James Arthur Bussiere, Senior Vice President
Peter Ernest Moreau, Senior Vice President & Chief Information Officer Theodore Charles Murphy, Senior Vice President Paul Alfred Pyne, Executive Vice President & Chief Operations Officer
Robert Paul Suglia, Sr VP and General Counsel

DIRECTORS OR TRUSTEES

Jeffrey Paul Aiken Debra Ann Canales Patricia Walsh Chadwick
Edward Francis DeGraan Robert Anthony DiMuccio Barry George Hittner
Michael David Jeans Ronald Keith Machtley Richard Alan Plotkin
Donald Julian Reaves Cheryl Watkins Snead Thomas Alfred Taylor

State of Rhode Island SS:
County of Providence

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

Robert Anthony DiMuccio Suzanne Ellen Casey James Parker Loring
Chairman, President and Chief Executive Officer Senior Assistant Vice President and Secretary Senior Vice President, Chief Financial Officer and Treasurer

Subscribed and sworn to before me this 11th day of February, 2015
a. Is this an original filing? Yes [ X ] No [ ]
b. If no,
1. State the amendment number.....
2. Date filed .....
3. Number of pages attached.....

Ann Marie Oceau
Notary Public
June 14, 2018

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY

**ASSETS**

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D) .....	14,134,277		14,134,277	8,861,603
2. Stocks (Schedule D):				
2.1 Preferred stocks .....				
2.2 Common stocks .....				
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....				
3.2 Other than first liens .....				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ .....				
encumbrances) .....				
4.2 Properties held for the production of income (less				
\$ .....				
encumbrances) .....				
4.3 Properties held for sale (less \$ .....				
encumbrances) .....				
5. Cash (\$ ....., Schedule E - Part 1), cash equivalents				
(\$ ....., Schedule E - Part 2) and short-term				
investments (\$ ....., Schedule DA) .....	3,513,910		3,513,910	939,396
6. Contract loans (including \$ .....				
premium notes) .....				
7. Derivatives (Schedule DB) .....				
8. Other invested assets (Schedule BA) .....				
9. Receivable for securities .....				
10. Securities lending reinvested collateral assets (Schedule DL) .....				
11. Aggregate write-ins for invested assets .....				
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	17,648,187		17,648,187	9,800,999
13. Title plants less \$ .....				
charged off (for Title insurers				
only) .....				
14. Investment income due and accrued .....	111,654		111,654	77,522
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	1,235,463	81,415	1,154,048	2,737,622
15.2 Deferred premiums, agents' balances and installments booked but				
deferred and not yet due (including \$ .....				
earned but unbilled premiums) .....	6,211,649	11,439	6,200,210	14,605,542
15.3 Accrued retrospective premiums .....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	3,116,352		3,116,352	4,304,592
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 .....				
18.1 Current federal and foreign income tax recoverable and interest thereon .....	91,055		91,055	106,000
18.2 Net deferred tax asset .....				528,103
19. Guaranty funds receivable or on deposit .....				
20. Electronic data processing equipment and software .....				
21. Furniture and equipment, including health care delivery assets				
(\$ .....				
) .....				
22. Net adjustment in assets and liabilities due to foreign exchange rates .....				
23. Receivables from parent, subsidiaries and affiliates .....				
24. Health care (\$ .....				
) and other amounts receivable .....				
25. Aggregate write-ins for other than invested assets .....	1,266,949	688,487	578,462	370,390
26. Total assets excluding Separate Accounts, Segregated Accounts and				
Protected Cell Accounts (Lines 12 to 25) .....	29,681,309	781,341	28,899,968	32,530,770
27. From Separate Accounts, Segregated Accounts and Protected Cell				
Accounts .....				
28. Total (Lines 26 and 27) .....	29,681,309	781,341	28,899,968	32,530,770
<b>DETAILS OF WRITE-INS</b>				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....				
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....				
2501. Receivable - other surcharges .....	578,462		578,462	370,390
2502. Prepaid expenses .....	688,487	688,487		
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....				
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	1,266,949	688,487	578,462	370,390

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY

**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8) .....		
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6) .....		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9) .....		
4. Commissions payable, contingent commissions and other similar charges .....		
5. Other expenses (excluding taxes, licenses and fees) .....		1,431,933
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....		44,314
7.1 Current federal and foreign income taxes (including \$ ..... on realized capital gains (losses)) .....		
7.2 Net deferred tax liability .....	2,851	
8. Borrowed money \$ ..... and interest thereon \$ .....		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ .....9,748,771 and including warranty reserves of \$ ..... and accrued accident and health experience rating refunds including \$ ..... for medical loss ratio rebate per the Public Health Service Act) .....		
10. Advance premium .....	16,244	20,505
11. Dividends declared and unpaid:		
11.1 Stockholders .....		
11.2 Policyholders .....		
12. Ceded reinsurance premiums payable (net of ceding commissions) .....	933,185	2,969,413
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19) .....		
14. Amounts withheld or retained by company for account of others .....	5,742	
15. Remittances and items not allocated .....		
16. Provision for reinsurance (including \$ ..... certified) (Schedule F, Part 8) .....		
17. Net adjustments in assets and liabilities due to foreign exchange rates .....		
18. Drafts outstanding .....		
19. Payable to parent, subsidiaries and affiliates .....	2,056,741	870,503
20. Derivatives .....		
21. Payable for securities .....		
22. Payable for securities lending .....		
23. Liability for amounts held under uninsured plans .....		
24. Capital notes \$ ..... and interest thereon \$ .....		
25. Aggregate write-ins for liabilities .....		4,939
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) .....	3,014,763	5,341,607
27. Protected cell liabilities .....		
28. Total liabilities (Lines 26 and 27) .....	3,014,763	5,341,607
29. Aggregate write-ins for special surplus funds .....		
30. Common capital stock .....	3,500,000	3,500,000
31. Preferred capital stock .....		
32. Aggregate write-ins for other than special surplus funds .....		
33. Surplus notes .....		
34. Gross paid in and contributed surplus .....	30,120,193	30,120,193
35. Unassigned funds (surplus) .....	(7,734,988)	(6,431,030)
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 30 \$ ..... ) .....		
36.2 ..... shares preferred (value included in Line 31 \$ ..... ) .....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39) .....	25,885,205	27,189,163
38. TOTALS (Page 2, Line 28, Col. 3) .....	28,899,968	32,530,770
<b>DETAILS OF WRITE-INS</b>		
2501. Reserve for I. D. services .....		4,939
2502. ....		
2503. ....		
2598. Summary of remaining write-ins for Line 25 from overflow page .....		
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....		4,939
2901. ....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page .....		
2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above) .....		
3201. ....		
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page .....		
3299. Totals (Lines 3201 thru 3203 plus 3298)(Line 32 above) .....		

**STATEMENT OF INCOME**

	1 Current Year	2 Prior Year
<b>UNDERWRITING INCOME</b>		
1. Premiums earned (Part 1, Line 35, Column 4).....		
<b>DEDUCTIONS:</b>		
2. Losses incurred (Part 2, Line 35, Column 7).....		(12,118,166)
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....		(2,101,179)
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2).....	1,014,644	14,683,292
5. Aggregate write-ins for underwriting deductions.....		
6. Total underwriting deductions (Lines 2 through 5).....	1,014,644	463,947
7. Net income of protected cells.....		
8. Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7).....	(1,014,644)	(463,947)
<b>INVESTMENT INCOME</b>		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	220,566	192,860
10. Net realized capital gains or (losses) less capital gains tax of \$ .....4,672 (Exhibit of Capital Gains (Losses) ).....	8,677	81,899
11. Net investment gain (loss) (Lines 9 + 10).....	229,243	274,759
<b>OTHER INCOME</b>		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ .....36,216 amount charged off \$ .....305,420 ).....	(269,204)	(263,415)
13. Finance and service charges not included in premiums.....	166,252	282,605
14. Aggregate write-ins for miscellaneous income.....		
15. Total other income (Lines 12 through 14).....	(102,952)	19,190
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	(888,353)	(169,998)
17. Dividends to policyholders.....		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	(888,353)	(169,998)
19. Federal and foreign income taxes incurred.....	(813,067)	(831,277)
20. Net income (Line 18 minus Line 19)(to Line 22).....	(75,286)	661,279
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	27,189,163	7,958,669
22. Net income (from Line 20).....	(75,286)	661,279
23. Net transfers (to) from Protected Cell accounts.....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ .....(22,284).....		(22,284)
25. Change in net unrealized foreign exchange capital gain (loss).....		
26. Change in net deferred income tax.....	(530,954)	(730,439)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3).....	(697,718)	201,745
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....		
29. Change in surplus notes.....		
30. Surplus (contributed to) withdrawn from protected cells.....		
31. Cumulative effect of changes in accounting principles.....		
32. Capital changes:		
32.1 Paid in.....		
32.2 Transferred from surplus (Stock Dividend).....		
32.3 Transferred to surplus.....		
33. Surplus adjustments:		
33.1 Paid in.....		19,120,193
33.2 Transferred to capital (Stock Dividend).....		
33.3 Transferred from capital.....		
34. Net remittances from or (to) Home Office.....		
35. Dividends to stockholders.....		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....		
37. Aggregate write-ins for gains and losses in surplus.....		
38. Change in surplus as regards policyholders for the year (Lines 22 through 37).....	(1,303,958)	19,230,494
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	25,885,205	27,189,163
<b>DETAILS OF WRITE-INS</b>		
0501. ....		
0502. ....		
0503. ....		
0598. Summary of remaining write-ins for Line 5 from overflow page.....		
0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above).....		
1401. ....		
1402. ....		
1403. ....		
1498. Summary of remaining write-ins for Line 14 from overflow page.....		
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above).....		
3701. ....		
3702. ....		
3703. ....		
3798. Summary of remaining write-ins for Line 37 from overflow page.....		
3799. Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above).....		

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY

**CASH FLOW**

	1	2
	Current Year	Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance .....	7,939,187	(5,057,642)
2. Net investment income .....	245,003	257,955
3. Miscellaneous income .....	(310,222)	31,365
4. Total (Lines 1 through 3) .....	7,873,968	(4,768,322)
5. Benefit and loss related payments .....	(1,188,239)	1,412,557
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....		
7. Commissions, expenses paid and aggregate write-ins for deductions .....	2,490,891	14,522,769
8. Dividends paid to policyholders .....		
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	(823,340)	(550,177)
10. Total (Lines 5 through 9) .....	479,312	15,385,149
11. Net cash from operations (Line 4 minus Line 10) .....	7,394,656	(20,153,471)
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	1,920,486	2,958,868
12.2 Stocks .....		
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) .....	1,920,486	2,958,868
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	7,238,380	2,282,667
13.2 Stocks .....		
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) .....	7,238,380	2,282,667
14. Net increase (decrease) in contract loans and premium notes .....		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	(5,317,894)	676,201
<b>Cash from Financing and Miscellaneous Sources</b>		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes .....		
16.2 Capital and paid in surplus, less treasury stock .....		19,120,193
16.3 Borrowed funds .....		
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....		
16.5 Dividends to stockholders .....		
16.6 Other cash provided (applied) .....	497,751	532,163
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	497,751	19,652,356
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	2,574,513	175,086
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	939,397	764,311
19.2 End of period (Line 18 plus Line 19.1) .....	3,513,910	939,397

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

On January 1, 2013, Amica Mutual Insurance Company made a \$19,120,193 non-cash capital contribution to Amica Property and Casualty Insurance Company resulting from the change in the quota share rate from 80% to 100%. No 20.0001 non-cash transactions occurred in 2014. ....		
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Underwriting and Investment Exhibit - Part 1 - Premiums Earned

**N O N E**

Underwriting and Investment Exhibit - Part 1A - Recapitulation of all Premiums

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY

**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 1B - PREMIUMS WRITTEN

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3-4-5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire .....						
2. Allied lines .....						
3. Farmowners multiple peril .....						
4. Homeowners multiple peril .....						
5. Commercial multiple peril .....						
6. Mortgage guaranty .....						
8. Ocean marine .....						
9. Inland marine .....						
10. Financial guaranty .....						
11.1 Medical professional liability - occurrence .....						
11.2 Medical professional liability - claims-made .....						
12. Earthquake .....						
13. Group accident and health .....						
14. Credit accident and health (group and individual) .....						
15. Other accident and health .....						
16. Workers' compensation .....						
17.1 Other liability - occurrence .....						
17.2 Other liability - claims-made .....						
17.3 Excess workers' compensation .....						
18.1 Products liability - occurrence .....						
18.2 Products liability - claims-made .....						
19.1, 19.2 Private passenger auto liability .....	13,634,451			12,586,330	1,048,121	
19.3, 19.4 Commercial auto liability .....						
21. Auto physical damage .....	5,279,037			5,279,037		
22. Aircraft (all perils) .....						
23. Fidelity .....						
24. Surety .....						
26. Burglary and theft .....						
27. Boiler and machinery .....						
28. Credit .....						
29. International .....						
30. Warranty .....						
31. Reinsurance - nonproportional assumed property .....	XXX					
32. Reinsurance - nonproportional assumed liability .....	XXX					
33. Reinsurance - nonproportional assumed financial lines .....	XXX					
34. Aggregate write-ins for other lines of business .....						
35. TOTALS	18,913,488			17,865,367	1,048,121	
<b>DETAILS OF WRITE-INS</b>						
3401. ....						
3402. ....						
3403. ....						
3498. Summary of remaining write-ins for Line 34 from overflow page .....						
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)						

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [ ] No [ X ]

If yes: 1. The amount of such installment premiums \$ .....

2. Amount at which such installment premiums would have been reported had they been reported on an annualized basis \$ .....

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY

**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A , Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 -3 )				
1. Fire .....								
2. Allied lines .....								
3. Farmowners multiple peril .....								
4. Homeowners multiple peril .....								
5. Commercial multiple peril .....								
6. Mortgage guaranty .....								
8. Ocean marine .....								
9. Inland marine .....								
10. Financial guaranty .....								
11.1 Medical professional liability - occurrence .....								
11.2 Medical professional liability - claims-made .....								
12. Earthquake .....								
13. Group accident and health .....								
14. Credit accident and health (group and individual) .....								
15. Other accident and health .....								
16. Workers' compensation .....								
17.1 Other liability - occurrence .....								
17.2 Other liability - claims-made .....								
17.3 Excess workers' compensation .....								
18.1 Products liability - occurrence .....								
18.2 Products liability - claims-made .....								
19.1, 19.2 Private passenger auto liability .....	29,766,077		29,766,077					
19.3, 19.4 Commercial auto liability .....								
21. Auto physical damage .....	6,223,213		6,223,213					
22. Aircraft (all perils) .....								
23. Fidelity .....								
24. Surety .....								
26. Burglary and theft .....								
27. Boiler and machinery .....								
28. Credit .....								
29. International .....								
30. Warranty .....								
31. Reinsurance - nonproportional assumed property .....	XXX							
32. Reinsurance - nonproportional assumed liability .....	XXX							
33. Reinsurance - nonproportional assumed financial lines .....	XXX							
34. Aggregate write-ins for other lines of business .....								
35. TOTALS .....	35,989,290		35,989,290					
<b>DETAILS OF WRITE-INS</b>								
3401. ....								
3402. ....								
3403. ....								
3498. Summary of remaining write-ins for Line 34 from overflow page .....								
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....								



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY

**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire									
2. Allied lines									
3. Farmowners multiple peril									
4. Homeowners multiple peril									
5. Commercial multiple peril									
6. Mortgage guaranty									
8. Ocean marine									
9. Inland marine									
10. Financial guaranty									
11.1 Medical professional liability - occurrence									
11.2 Medical professional liability - claims-made									
12. Earthquake									
13. Group accident and health								(a)	
14. Credit accident and health (group and individual)								(a)	
15. Other accident and health									
16. Workers' compensation									
17.1 Other liability - occurrence									
17.2 Other liability - claims-made									
17.3 Excess workers' compensation									
18.1 Products liability - occurrence									
18.2 Products liability - claims-made									
19.1, 19.2 Private passenger auto liability	28,780,655		28,780,655		15,990,036		15,990,036		
19.3, 19.4 Commercial auto liability									
21. Auto physical damage	492,625		492,625		651,997		651,997		
22. Aircraft (all perils)									
23. Fidelity									
24. Surety									
26. Burglary and theft									
27. Boiler and machinery									
28. Credit									
29. International									
30. Warranty									
31. Reinsurance - nonproportional assumed property	XXX				XXX				
32. Reinsurance - nonproportional assumed liability	XXX				XXX				
33. Reinsurance - nonproportional assumed financial lines	XXX				XXX				
34. Aggregate write-ins for other lines of business									
35. TOTALS	29,273,280		29,273,280		16,642,033		16,642,033		
<b>DETAILS OF WRITE-INS</b>									
3401.									
3402.									
3403.									
3498. Summary of remaining write-ins for Line 34 from overflow page									
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)									

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

**UNDERWRITING AND INVESTMENT EXHIBIT**

## PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct .....	1,382,000			1,382,000
1.2 Reinsurance assumed .....				
1.3 Reinsurance ceded .....	4,036,403			4,036,403
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3) .....	(2,654,403)			(2,654,403)
2. Commission and brokerage:				
2.1 Direct excluding contingent .....				
2.2 Reinsurance assumed, excluding contingent .....				
2.3 Reinsurance ceded, excluding contingent .....		4,990,066		4,990,066
2.4 Contingent - direct .....				
2.5 Contingent - reinsurance assumed .....				
2.6 Contingent - reinsurance ceded .....				
2.7 Policy and membership fees .....				
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7) .....		(4,990,066)		(4,990,066)
3. Allowances to managers and agents .....				
4. Advertising .....		(56)		(56)
5. Boards, bureaus and associations .....	34,708	283,536		318,244
6. Surveys and underwriting reports .....		75,437		75,437
7. Audit of assureds' records .....				
8. Salary and related items:				
8.1 Salaries .....	1,572,051	2,652,258	81,508	4,305,817
8.2 Payroll taxes .....	119,053	201,574	6,193	326,820
9. Employee relations and welfare .....	532,594	901,770	27,714	1,462,078
10. Insurance .....				
11. Directors' fees .....				
12. Travel and travel items .....				
13. Rent and rent items .....	180,872	294,003	8,451	483,326
14. Equipment .....	125,313	434,063	25,377	584,753
15. Cost or depreciation of EDP equipment and software .....				
16. Printing and stationery .....				
17. Postage, telephone and telegraph, exchange and express .....	89,812	194,027	8,157	291,996
18. Legal and auditing .....		24,000		24,000
19. Totals (Lines 3 to 18) .....	2,654,403	5,060,612	157,400	7,872,415
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ .....		615,481		615,481
20.2 Insurance department licenses and fees .....		29,360		29,360
20.3 Gross guaranty association assessments .....				
20.4 All other (excluding federal and foreign income and real estate) .....				
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4) .....		644,841		644,841
21. Real estate expenses .....				
22. Real estate taxes .....				
23. Reimbursements by uninsured plans .....				
24. Aggregate write-ins for miscellaneous expenses .....		299,257		299,257
25. Total expenses incurred .....		1,014,644	157,400 (a)	1,172,044
26. Less unpaid expenses - current year .....				
27. Add unpaid expenses - prior year .....		1,476,247		1,476,247
28. Amounts receivable relating to uninsured plans, prior year .....				
29. Amounts receivable relating to uninsured plans, current year .....				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29) .....		2,490,891	157,400	2,648,291
<b>DETAILS OF WRITE-INS</b>				
2401. Residual Market Buy-Out Fees .....		299,257		299,257
2402. ....				
2403. ....				
2498. Summary of remaining write-ins for Line 24 from overflow page .....				
2499. Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above) .....		299,257		299,257

(a) Includes management fees of \$ 7,449,151 to affiliates and \$ to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY

**EXHIBIT OF NET INVESTMENT INCOME**

	1	2
	Collected During Year	Earned During Year
1. U.S. Government bonds .....	(a) ..... 166,291	..... 186,155
1.1 Bonds exempt from U.S. tax .....	(a) .....	.....
1.2 Other bonds (unaffiliated) .....	(a) ..... 161,805	..... 175,651
1.3 Bonds of affiliates .....	(a) .....	.....
2.1 Preferred stocks (unaffiliated) .....	(b) .....	.....
2.11 Preferred stocks of affiliates .....	(b) .....	.....
2.2 Common stocks (unaffiliated) .....	.....	.....
2.21 Common stocks of affiliates .....	.....	.....
3. Mortgage loans .....	(c) .....	.....
4. Real estate .....	(d) .....	.....
5. Contract loans .....	.....	.....
6. Cash, cash equivalents and short-term investments .....	(e) ..... 17,518	..... 17,940
7. Derivative instruments .....	(f) .....	.....
8. Other invested assets .....	.....	.....
9. Aggregate write-ins for investment income .....	.....	.....
10. Total gross investment income .....	345,614	379,746
11. Investment expenses .....	.....	(g) ..... 157,400
12. Investment taxes, licenses and fees, excluding federal income taxes .....	.....	(g) .....
13. Interest expense .....	.....	(h) .....
14. Depreciation on real estate and other invested assets .....	.....	(i) .....
15. Aggregate write-ins for deductions from investment income .....	.....	..... 1,780
16. Total deductions (Lines 11 through 15) .....	.....	..... 159,180
17. Net investment income (Line 10 minus Line 16) .....	.....	220,566
<b>DETAILS OF WRITE-INS</b>		
0901. ....	.....	.....
0902. ....	.....	.....
0903. ....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page .....	.....	.....
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	.....	.....
1501. Miscellaneous interest expense .....	.....	..... 1,780
1502. ....	.....	.....
1503. ....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page .....	.....	.....
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above) .....	.....	1,780

- (a) Includes \$ ..... 6,804 accrual of discount less \$ ..... 65,373 amortization of premium and less \$ ..... 38,412 paid for accrued interest on purchases.
- (b) Includes \$ ..... accrual of discount less \$ ..... amortization of premium and less \$ ..... paid for accrued dividends on purchases.
- (c) Includes \$ ..... accrual of discount less \$ ..... amortization of premium and less \$ ..... paid for accrued interest on purchases.
- (d) Includes \$ ..... for company's occupancy of its own buildings; and excludes \$ ..... interest on encumbrances.
- (e) Includes \$ ..... accrual of discount less \$ ..... amortization of premium and less \$ ..... paid for accrued interest on purchases.
- (f) Includes \$ ..... accrual of discount less \$ ..... amortization of premium.
- (g) Includes \$ ..... investment expenses and \$ ..... investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ ..... interest on surplus notes and \$ ..... interest on capital notes.
- (i) Includes \$ ..... depreciation on real estate and \$ ..... depreciation on other invested assets.

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

	1	2	3	4	5
	Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds .....	439	.....	439	.....	.....
1.1 Bonds exempt from U.S. tax .....	.....	.....	.....	.....	.....
1.2 Other bonds (unaffiliated) .....	12,910	.....	12,910	.....	.....
1.3 Bonds of affiliates .....	.....	.....	.....	.....	.....
2.1 Preferred stocks (unaffiliated) .....	.....	.....	.....	.....	.....
2.11 Preferred stocks of affiliates .....	.....	.....	.....	.....	.....
2.2 Common stocks (unaffiliated) .....	.....	.....	.....	.....	.....
2.21 Common stocks of affiliates .....	.....	.....	.....	.....	.....
3. Mortgage loans .....	.....	.....	.....	.....	.....
4. Real estate .....	.....	.....	.....	.....	.....
5. Contract loans .....	.....	.....	.....	.....	.....
6. Cash, cash equivalents and short-term investments .....	.....	.....	.....	.....	.....
7. Derivative instruments .....	.....	.....	.....	.....	.....
8. Other invested assets .....	.....	.....	.....	.....	.....
9. Aggregate write-ins for capital gains (losses) .....	.....	.....	.....	.....	.....
10. Total capital gains (losses) .....	13,349	.....	13,349	.....	.....
<b>DETAILS OF WRITE-INS</b>					
0901. ....	.....	.....	.....	.....	.....
0902. ....	.....	.....	.....	.....	.....
0903. ....	.....	.....	.....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page .....	.....	.....	.....	.....	.....
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	.....	.....	.....	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY

**EXHIBIT OF NON-ADMITTED ASSETS**

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D) .....			
2. Stocks (Schedule D):			
2.1 Preferred stocks .....			
2.2 Common stocks .....			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....			
3.2 Other than first liens .....			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....			
4.2 Properties held for the production of income .....			
4.3 Properties held for sale .....			
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA) .....			
6. Contract loans .....			
7. Derivatives (Schedule DB) .....			
8. Other invested assets (Schedule BA) .....			
9. Receivables for securities .....			
10. Securities lending reinvested collateral assets (Schedule DL) .....			
11. Aggregate write-ins for invested assets .....			
12. Subtotals, cash and invested assets (Lines 1 to 11) .....			
13. Title plants (for Title insurers only) .....			
14. Investment income due and accrued .....			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection .....	81,415	70,278	(11,137)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due .....	11,439	13,345	1,906
15.3 Accrued retrospective premiums .....			
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 .....			
18.1 Current federal and foreign income tax recoverable and interest thereon .....			
18.2 Net deferred tax asset .....			
19. Guaranty funds receivable or on deposit .....			
20. Electronic data processing equipment and software .....			
21. Furniture and equipment, including health care delivery assets .....			
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			
23. Receivables from parent, subsidiaries and affiliates .....			
24. Health care and other amounts receivable .....			
25. Aggregate write-ins for other than invested assets .....	688,487		(688,487)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	781,341	83,623	(697,718)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
28. Total (Lines 26 and 27) .....	781,341	83,623	(697,718)
<b>DETAILS OF WRITE-INS</b>			
1101. ....			
1102. ....			
1103. ....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....			
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)			
2501. Prepaid expenses .....	688,487		(688,487)
2502. ....			
2503. ....			
2598. Summary of remaining write-ins for Line 25 from overflow page .....			
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	688,487		(688,487)

## NOTES TO FINANCIAL STATEMENTS

### **Note 1 – Summary of Significant Accounting Policies**

#### A. Accounting Practices

The accompanying financial statements of the Amica Property and Casualty Insurance Company (the Company) have been prepared on the basis of accounting practices prescribed or permitted by the state of Rhode Island.

The state of Rhode Island requires insurance companies domiciled in the state of Rhode Island to prepare their statutory financial statements in accordance with the National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* subject to any deviations prescribed or permitted by the state of Rhode Island Insurance Department. The Company has no state basis statement adjustments to report.

A reconciliation of the Company's net income and capital and surplus between NAIC statutory accounting practices (NAIC SAP) and practices prescribed and permitted by the state of Rhode Island as of December 31, 2014 and December 31, 2013 is shown below:

	State of Domicile	12/31/14	12/31/13
<b>Net Income - Rhode Island Basis</b>	RI	(\$75,286)	\$661,279
State Prescribed Practices - None	RI	0	0
State Permitted Practices - None	RI	0	0
<b>Net Income - NAIC SAP</b>	RI	(\$75,286)	\$661,279
<b>Statutory Surplus - Rhode Island Basis</b>	RI	\$25,885,205	\$27,189,163
State Prescribed Practices - None	RI	0	0
State Permitted Practices - None	RI	0	0
<b>Statutory Surplus - NAIC SAP</b>	RI	\$25,885,205	\$27,189,163

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

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, revenues and expenses. It also requires estimates in the disclosure of contingent assets and liabilities. Actual results could differ from these estimates.

#### C. Accounting Policies

Premiums are earned over the terms of the related policies and reinsurance contracts. Unearned premiums are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business. Expenses incurred in connection with acquiring new insurance business, including acquisition costs, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the Company uses the following accounting policies:

1. Short-term investments are stated at cost. The Company only purchases investment grade securities.
2. Bonds not backed by other loans are stated at amortized cost using the scientific method.
3. The Company does not hold common stock.
4. The Company does not hold preferred stock.
5. The Company does not own any first lien mortgage loans on real estate.
6. Loan-backed bonds and structured securities are valued at amortized cost using the scientific method. The Company only purchases investment grade securities.
7. The Company does not have an interest in any subsidiaries.
8. The Company has no investments in joint ventures, partnerships, and limited liability corporations.
9. The Company does not hold or issue derivative financial instruments.
10. The Company does not anticipate investment income as a factor in premium deficiency calculations.
11. Unpaid losses and loss adjustment expenses will 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 will be continually reviewed and any adjustments are reflected in the period determined.
12. The Company has not modified its capitalization policy from the prior period.
13. The Company has no pharmaceutical rebate receivables.
14. The Company presents net realized capital gains or (losses) net of capital gains tax on the statement of income.
15. When the commission received under a reinsurance agreement exceeds the anticipated acquisition costs of the business ceded, the Company establishes a liability equal to the difference between the anticipated acquisition costs and the reinsurance commission received.

### **Note 2 – Accounting Changes and Correction of Errors**

There have been no significant accounting changes or correction of errors in 2014 or 2013.

## NOTES TO FINANCIAL STATEMENTS

### Note 3 – Business Combinations and Goodwill

Not applicable.

### Note 4 – Discontinued Operations

Not applicable.

### Note 5 – Investments

#### A. Mortgage Loans, including Mezzanine Real Estate Loans

Not applicable.

#### B. Debt Restructuring

Not applicable.

#### C. Reverse Mortgages

Not applicable.

#### D. Loan-Backed Securities

1. Prepayment assumptions for single class and multi-class mortgage-backed and asset-backed securities were obtained from broker dealer survey values, nationally recognized data services or internal estimates. The Company used Hub Data, Inc. to determine the market value of its loan-backed securities. In 2014, there were no changes from retrospective to prospective methodologies.

2-3. The Company did not write down any loan-backed securities during the period.

4. All impaired securities (fair value is less than amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a. The aggregate amount of unrealized losses:

1. Less than 12 Months	\$ 6,527
2. 12 Months or Longer	\$ 24,776

b. The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months	\$ 1,315,566
2. 12 Months or Longer	\$ 799,812

5. All loan-backed and structured securities in an unrealized loss position were reviewed to determine whether other-than-temporary impairments should be recognized. The Company asserts that it has the intent and ability to hold these securities long enough to allow the cost basis of these securities to be recovered. These conclusions are supported by an analysis of the underlying credit of each security. Unrealized losses are primarily attributable to higher interest rates and modestly wider spread levels. It is possible that the Company could recognize other-than-temporary impairments in the future on some of the securities, if future events, information and the passage of time cause it to conclude that declines in the value are other-than-temporary.

#### E. Repurchase Agreements and/or Securities Lending Transactions

Not applicable.

#### F. Real Estate

Not applicable.

#### G. Investments in Low-Income Housing Tax Credits (LIHTC)

Not applicable.

## NOTES TO FINANCIAL STATEMENTS

### H. Restricted Assets

#### 1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross Restricted							Percentage		
	Current Year					6	7	8	9	10
	1	2	3	4	5					
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
a. Subject to contractual obligation for which liability is not shown	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%	0.0%
b. Collateral held under security lending arrangements	0	0	0	0	0	0	0	0	0.0%	0.0%
c. Subject to repurchase agreements	0	0	0	0	0	0	0	0	0.0%	0.0%
d. Subject to reverse repurchase agreements	0	0	0	0	0	0	0	0	0.0%	0.0%
e. Subject to dollar repurchase agreements	0	0	0	0	0	0	0	0	0.0%	0.0%
f. Subject to dollar reverse repurchase agreements	0	0	0	0	0	0	0	0	0.0%	0.0%
g. Placed under option contracts	0	0	0	0	0	0	0	0	0.0%	0.0%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	0	0	0	0	0	0	0	0	0.0%	0.0%
i. FHLB capital stock	0	0	0	0	0	0	0	0	0.0%	0.0%
j. On deposit with states	1,070,174	0	0	0	1,070,174	1,033,870	36,304	1,070,174	3.6%	3.7%
k. On deposit with other regulatory bodies	0	0	0	0	0	0	0	0	0.0%	0.0%
l. Pledged as collateral to FHLB (including assets backing funding agreements)	0	0	0	0	0	0	0	0	0.0%	0.0%
m. Pledged as collateral not captured in other categories	0	0	0	0	0	0	0	0	0.0%	0.0%
n. Other restricted assets	0	0	0	0	0	0	0	0	0.0%	0.0%
<b>o. Total restricted assets</b>	<b>\$1,070,174</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,070,174</b>	<b>\$1,033,870</b>	<b>\$36,304</b>	<b>\$1,070,174</b>	<b>3.6%</b>	<b>3.7%</b>

(a) Subset of column 1

(b) Subset of column 3

#### 2. Detail of Assets Pledged as Collateral Not Captured in Other Categories

Not applicable.

#### 3. Detail of Other Restricted Assets

Not applicable.

### I. Working Capital Finance Investments

Not applicable.

### J. Offsetting and Netting of Assets and Liabilities

Not applicable.

### K. Structured Notes

Not applicable.

## NOTES TO FINANCIAL STATEMENTS

### Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

Not applicable.

### Note 7 – Investment Income

#### A. Basis for Excluding (Non-Admitting) Investment Income Due and Accrued

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

#### B. Amounts Non-Admitted

No investment income due and accrued was non-admitted in 2014 or 2013.

### Note 8 – Derivative Instruments

Not applicable.

### Note 9 – Income Taxes

#### A. Deferred Tax Asset/(Liability)

##### 1. Components of Net Deferred Tax Assets (DTAs) and Net Deferred Liabilities (DTLs)

	(1)	(2)	(3)
	Ordinary	Capital	(Col 1+2) Total
<b>12/31/14</b>			
(a) Gross deferred tax assets	\$274,757	\$0	\$274,757
(b) Statutory valuation allowance adjustment	274,757	0	274,757
(c) Adjusted gross deferred tax assets (1a-1b)	0	0	0
(d) Deferred tax assets nonadmitted	0	0	0
(e) Subtotal net admitted deferred tax asset (1c-1d)	0	0	0
(f) Deferred tax liabilities	2,851	0	2,851
(g) Net admitted deferred tax asset/(Net deferred tax liability) (1e-1f)	(\$2,851)	\$0	(\$2,851)
<b>12/31/13</b>			
	(4)	(5)	(6)
	Ordinary	Capital	(Col 4+5) Total
(a) Gross deferred tax assets	\$531,880	\$0	\$531,880
(b) Statutory valuation allowance adjustment	0	0	0
(c) Adjusted gross deferred tax assets (1a-1b)	531,880	0	531,880
(d) Deferred tax assets nonadmitted	0	0	0
(e) Subtotal net admitted deferred tax asset (1c-1d)	531,880	0	531,880
(f) Deferred tax liabilities	3,777	0	3,777
(g) Net admitted deferred tax asset/(Net deferred tax liability) (1e-1f)	\$528,103	\$0	\$528,103
<b>Change</b>			
	(7)	(8)	(9)
	(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
(a) Gross deferred tax assets	(\$257,123)	\$0	(\$257,123)
(b) Statutory valuation allowance adjustment	274,757	0	274,757
(c) Adjusted gross deferred tax assets (1a-1b)	(531,880)	0	(531,880)
(d) Deferred tax assets nonadmitted	0	0	0
(e) Subtotal net admitted deferred tax asset (1c-1d)	(531,880)	0	(531,880)
(f) Deferred tax liabilities	(926)	0	(926)
(g) Net admitted deferred tax asset/(Net deferred tax liability) (1e-1f)	(\$530,954)	\$0	(\$530,954)



## NOTES TO FINANCIAL STATEMENTS

### 2. Admission Calculation Components

	(1) Ordinary	(2) Capital	(3) (Col 1+2) Total
<b>12/31/14</b>			
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$0	\$0	\$0
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation (The lesser of 2(b)1 and 2(b)2 below)	0	0	0
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	0	0	0
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	3,882,781
(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	0	0	0
(d) Deferred tax assets admitted as the result of application of SSAP No. 101	\$0	\$0	\$0
<hr/>			
	(4) Ordinary	(5) Capital	(6) (Col 4+5) Total
<b>12/31/13</b>			
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$0	\$0	\$0
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation (The lesser of 2(b)1 and 2(b)2 below)	531,880	0	531,880
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	531,880	0	531,880
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	3,999,159
(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	0	0	0
(d) Deferred tax assets admitted as the result of application of SSAP No. 101	\$531,880	\$0	\$531,880
<hr/>			
	(7) (Col 1-4) Ordinary	(8) (Col 2-5) Capital	(9) (Col 7+8) Total
<b>Change</b>			
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$0	\$0	\$0
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation (The lesser of 2(b)1 and 2(b)2 below)	(531,880)	0	(531,880)
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	(531,880)	0	(531,880)
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	(116,378)
(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	0	0	0
(d) Deferred tax assets admitted as the result of application of SSAP No. 101	(\$531,880)	\$0	(\$531,880)

### 3. Other Admissibility Criteria

	2014	2013
(a) Ratio used to determine recovery period and threshold limitations amount	31163%	51996%
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$25,885,205	\$26,661,060

## NOTES TO FINANCIAL STATEMENTS

### 4. Impact of Tax Planning Strategies

	12/31/14		12/31/13		Change	
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	(Col 1-3) Ordinary	(Col 2-4) Capital
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character, as a						
1. Adjusted gross DTAs amount from Note 9A1(c).	\$0	\$0	\$531,880	\$0	(\$531,880)	\$0
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies.	0%	0%	0%	0%	0%	0%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e).	\$0	\$0	\$531,880	\$0	(\$531,880)	\$0
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies.	0%	0%	0%	0%	0%	0%
(b) Does the Company's tax-planning strategies include the use of reinsurance?			Yes [ ]		No [X]	

### B. Deferred Tax Liabilities Not Recognized

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

### C. Current and Deferred Income Taxes

#### 1. Current Income Tax

	(1)	(2)	(3)
	12/31/14	12/31/13	(Col 1-2) Change
(a) Federal	(\$813,067)	(\$831,277)	\$18,210
(b) Foreign	0	0	0
(c) Subtotal	(813,067)	(831,277)	18,210
(d) Federal income tax on net capital gains	4,672	44,100	(39,428)
(e) Utilization of capital loss carry-forwards	0	0	0
(f) Other	0	0	0
(g) Federal and foreign income taxes incurred	(\$808,395)	(\$787,177)	(\$21,218)

## NOTES TO FINANCIAL STATEMENTS

### 2. Deferred Tax Assets

	(1)	(2)	(3)
	12/31/14	12/31/13	(Col 1-2) Change
(a) Ordinary :			
(1) Discounting of unpaid losses	\$0	\$0	\$0
(2) Unearned premium reserve	1,137	1,435	(298)
(3) Policy holder reserves	0	0	0
(4) Investments	0	0	0
(5) Deferred acquisition costs	0	0	0
(6) Policy holder dividends accrual	0	0	0
(7) Fixed assets	0	0	0
(8) Compensation and benefits accrual	0	0	0
(9) Pension accrual	0	0	0
(10) Receivables - nonadmitted	32,499	29,268	3,231
(11) Net operating loss carry-forward	0	0	0
(12) Tax credit carry-forward	0	0	0
(13) Other (including items <5% of total ordinary tax assets)	241,121	501,177	(260,056)
(99) Subtotal	274,757	531,880	(257,123)
(b) Statutory valuation allowance adjustment	274,757	0	274,757
(c) Nonadmitted	0	0	0
(d) Admitted ordinary deferred tax assets (2a99-2b-2c)	0	531,880	(531,880)
(e) Capital:			
(1) Investments	\$0	\$0	\$0
(2) Net capital loss carry-forward	0	0	0
(3) Real estate	0	0	0
(4) Other (including items <5% of total capital tax assets)	0	0	0
(99) Subtotal	0	0	0
(f) Statutory valuation allowance adjustment	0	0	0
(g) Nonadmitted	0	0	0
(h) Admitted capital deferred tax assets (2e99-2f-2g)	0	0	0
(i) Admitted deferred tax assets (2d + 2h)	\$0	\$531,880	(\$531,880)

### 3. Deferred Tax Liabilities

	(1)	(2)	(3)
	12/31/14	12/31/13	(Col 1-2) Change
(a) Ordinary :			
(1) Investments	\$2,851	\$3,777	(\$926)
(2) Fixed assets	0	0	0
(3) Deferred and uncollected premium	0	0	0
(4) Policy holder reserves	0	0	0
(5) Other (including items <5% of total ordinary tax liabilities)	0	0	0
(99) Subtotal	2,851	3,777	(926)
(b) Capital:			
(1) Investments	\$0	\$0	\$0
(2) Real estate	0	0	0
(3) Other (including items <5% of total ordinary tax liabilities)	0	0	0
(99) Subtotal	0	0	0
(c) Deferred tax liabilities (3a99 + 3b99)	\$2,851	\$3,777	(\$926)

### 4. Net Deferred Tax Assets/(Liabilities)

	(1)	(2)	(3)
	12/31/14	12/31/13	(Col 1-2) Change
Net deferred tax assets/(liabilities) (2i - 3c)	(\$2,851)	\$528,103	(\$530,954)

## NOTES TO FINANCIAL STATEMENTS

The change in net deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):

	12/31/14	12/31/13	Change
Total deferred tax assets	\$274,757	\$531,880	(\$257,123)
Total deferred tax liabilities	2,851	3,777	(926)
Net deferred tax assets/(liabilities)	271,906	528,103	(256,197)
Statutory valuation allowance adjustment	(274,757)	0	(274,757)
Net deferred tax assets/(liabilities) after SVA	(2,851)	528,103	(530,954)
Tax effect of unrealized gains (losses)	0	0	0
Statutory valuation allowance adjustment allocation to unrealized	0	0	0
Change in net deferred tax	(\$2,851)	\$528,103	(\$530,954)

### D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate

The provision for Federal income taxes incurred is different from that which would be obtained by applying the statutory Federal income tax rate to income before taxes. Among the more significant book to tax adjustments were the following:

	12/31/14		12/31/13	
	Amount	Effective Tax Rate	Amount	Effective Tax Rate
Income before taxes	(\$309,288)	35.0%	(\$44,064)	35.0%
Change in statutory valuation adjustment	274,757	-31.1%	0	0.0%
Change in non-admitted assets	(244,201)	27.6%	0	0.0%
Other	1,291	-0.1%	(12,674)	10.1%
Total	(\$277,441)	31.4%	(\$56,738)	45.1%
Federal income taxes incurred	(\$813,067)	92.0%	(\$831,277)	660.3%
Tax on capital gains (losses)	4,672	-0.5%	44,100	-35.0%
Change in net deferred taxes	530,954	-60.1%	730,439	-580.2%
Total statutory income taxes	(\$277,441)	31.4%	(\$56,738)	45.1%

### E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits

- At December 31, 2014, the Company did not have any unused operating loss carryforwards available to offset against future taxable income.
- The amounts of Federal income taxes incurred and available for recoupment in the event of future net losses are:

Year	Total
2014	\$0
2013	\$0

- The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.

### F. Consolidated Federal Income Tax Return

- The Company's Federal income tax return is consolidated with the following entities:
  - Amica Mutual Insurance Company
  - Amica Lloyd's of Texas
  - Amica Lloyd's of Texas, Inc.
  - Amica General Agency, Inc.
  - Amica General Insurance Agency of California, Inc.
- The method of allocation between the companies is contained in a written agreement approved by the Board of Directors. Allocation is made in accordance with Section 1552(a)(2) of the Internal Revenue Code based upon separate return calculations with current credit for net losses. Inter-company estimated tax balances are settled at least quarterly during the tax year with a final settlement during the month following the filing of the consolidated income tax return.

### G. Federal or Foreign Federal Income Tax Loss Contingencies

The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

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

### A. Nature of Relationships

Amica Mutual Insurance Company manages its wholly-owned subsidiary, Amica Property and Casualty Insurance Company.

## NOTES TO FINANCIAL STATEMENTS

Effective January 1, 2014 and upon policy renewal, approximately 65% of the business previously written by Amica Property and Casualty Insurance Company was written by its parent, Amica Mutual Insurance Company, based on underwriting criteria developed by the parent.

In addition, effective July 1, 2014, the Company began writing New York auto policies. New auto business in New York was written by either the Company or its parent based on set underwriting criteria. Renewals of current New York auto policies will continue to be written by Amica Mutual Insurance Company. As with its current book of business, the Company will cede 100% of all premiums, losses and loss expenses to Amica Mutual Insurance Company under the quota share contract.

B. Detail of Transactions Greater than ½% of Admitted Assets

On January 1, 2013, Amica Mutual Insurance Company made a non-cash investment in the Company totaling \$19.1 million. This was done to facilitate the January 1, 2013 change in the quota share rate from 80% to 100% for settlement of the Company's December 31, 2012 reserve balances for losses, loss adjustment expenses, and unearned premiums net of ceding commission.

C. Changes in Terms of Intercompany Arrangements

Effective January 1, 2013 the Company amended the quota share reinsurance agreement with Amica Mutual Insurance Company. From inception of business to December 31, 2012 Amica Property and Casualty maintained quota share reinsurance ceding 80% of all premiums, losses and loss adjustment expenses under all policies covered with Amica Mutual Insurance Company. Beginning January 1, 2013, the ceding share changed from 80% to 100%.

Prior to January 1, 2014, the Company was party to a Capital Maintenance Agreement with its ultimate parent, Amica Mutual Insurance Company. The terms of the agreement stated that when the ratio of net premiums written to surplus for the Company is above an agreed upon ratio, Amica Mutual will infuse capital to restore surplus. Based on the changes to the quota share agreement discussed above, management elected to not renew the Capital Maintenance Agreement for 2014.

D. Amounts Due to or from Related Parties

The Company reported \$2,056,741 and \$870,503 due to Amica Mutual Insurance Company at December 31, 2014 and December 31, 2013, respectively. The amounts due to or from Amica Mutual Insurance Company are settled on a monthly basis.

E. Guarantees or Undertakings for Related Parties

Not applicable.

F. Management, Service Contracts, Cost Sharing Arrangements

Amica Mutual Insurance Company performs certain managerial and other operational functions for the benefit of Amica Property and Casualty Insurance Company. Amica Mutual Insurance Company allocates such costs to Amica Property and Casualty Insurance Company based on the estimated costs of the services performed. The written agreement between the companies indicates that settlement of these costs be made within fifty-five days of the end of the month to which it applies. The costs charged from Amica Mutual to Amica Property and Casualty Insurance Company amounted to \$7,449,151 and \$10,674,756 in 2014 and 2013, respectively.

G. Nature of Relationships that Could Affect Operations

All outstanding shares of the Company are owned by its parent.

H. Amount Deducted for Investment in Upstream Company

Not applicable.

I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets

Not applicable.

J. Writedowns for Impairment of Investments in Affiliates

Not applicable.

K. Foreign Insurance Subsidiary Valued Using CARVM

Not applicable.

L. Downstream Holding Company Valued Using Look-Through Method

Not applicable.

**Note 11 – Debt**

Not applicable.

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

The Company has no employees. Management and other services are provided by its ultimate parent, Amica Mutual Insurance Company.

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

1. Outstanding Shares

The Company has 10,000 shares authorized and issued. All shares are Class A shares with par value of \$350.

2. Dividend Rate of Preferred Stock

The Company has no preferred stock outstanding.

## NOTES TO FINANCIAL STATEMENTS

3. Dividend Restrictions

The state of Rhode Island has limitations on the amount of ordinary dividends that may be paid to stockholders in any twelve month period. These limitations are based on net income and surplus. For 2014, any dividend paid by the Company would be categorized as "extraordinary" for purposes of the Rhode Island statute, and would require the Insurance Commissioner's approval before being paid.

4. Dates and Amounts of Dividends Paid

No dividends were paid during the period.

5. Amount of Ordinary Dividends That May Be Paid

The amount of the Company's profits that may be paid as ordinary dividends to stockholders is \$0.

6. Restrictions on Unassigned Funds

There are no restrictions on the unassigned funds of the Company other than those described above in paragraph 3 as of December 31, 2014 and 2013. Unassigned funds are held for the benefit of the owner and policyholders.

7. Mutual Surplus Advances

Not applicable.

8. Company Stock Held for Special Purposes

Not applicable.

9. Changes in Special Surplus Funds

Not applicable.

10. Changes in Unassigned Funds

The portion of unassigned funds (surplus) represented by cumulative unrealized gains(losses) is \$0.

11. Surplus Notes

Not applicable.

12. Impact of Quasi Reorganizations

Not applicable.

13. Effective Date of Quasi Reorganizations

Not applicable.

### **Note 14 – Liabilities, Contingencies and Assessments**

A. Contingent Commitments

The Company has no material contingent commitments.

B. Assessments

The Company is not aware of any assessments that could have a material financial effect on the financial statements.

C. Gain Contingencies

The Company has no material gain contingencies.

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits

There was no activity pertaining to claims related extra contractual obligations or bad faith losses stemming from lawsuits during the period and no such liabilities exist as of December 31, 2014.

E. Product Warranties

Not applicable.

F. Joint and Several Liabilities

Not applicable.

G. All Other Contingencies

Lawsuits arise against the Company in the normal course of business. The ultimate resolution of such proceedings will not, in our opinion, have a material impact on the Company's financial position.

### **Note 15 – Leases**

Not applicable.

### **Note 16 – Information About Financial Instruments With Off-Balance Sheet Risk And With Concentrations of Credit Risk**

The Company does not have financial instruments with off balance sheet risk or with concentrations of credit risk.

## NOTES TO FINANCIAL STATEMENTS

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

A. Transfers of Receivables Reported as Sales

Not applicable.

B. Transfer and Servicing of Financial Assets

Not applicable.

C. Wash Sales

The Company did not have any wash sales during 2014 or 2013.

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

Not applicable.

### **Note 19 – Direct Premiums Written / Produced by Managing General Agents / Third Party Administrators**

Not applicable.

### **Note 20 – Fair Value Measurement**

A. Assets and Liabilities Measured at Fair Value

1. Fair Value Measurements at December 31, 2014:

The Company's valuation techniques are based on observable and unobservable pricing inputs. Observable inputs reflect market data obtained from independent sources based on trades of securities, while unobservable inputs reflect the Company's market assumptions. These inputs comprise 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 had no financial instruments carried at fair value as of December 31, 2014.

2. Rollforward of Level 3 Items

Not applicable.

3. Policy on Transfers Into and out of Level 3

Not applicable.

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

Not applicable.

## NOTES TO FINANCIAL STATEMENTS

### C. Fair Value Measurements for All Financial Instruments at December 31, 2014

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Not Practicable (Carrying Value)
Bonds:						
U.S. governments	\$8,377,694	\$8,003,174	\$1,286,592	\$7,091,102	\$0	\$0
Municipal bonds	3,535,406	3,387,018	0	3,535,406	0	0
U.S. special revenue and assessments	54,959	49,684	0	54,959	0	0
Industrial and miscellaneous	2,776,658	2,694,401	0	2,776,658	0	0
Total bonds	14,744,717	14,134,277	1,286,592	13,458,125	0	0
Cash equivalents and short-term investments:						
Exempt money market mutual funds	1,364,974	1,364,974	0	1,364,974	0	0
Commercial paper	2,148,936	2,148,936	0	2,148,936	0	0
Total cash equivalents and short-term investments	3,513,910	3,513,910	0	3,513,910	0	0
Total assets	\$18,258,627	\$17,648,187	\$1,286,592	\$16,972,035	\$0	\$0

### D. Not Practicable to Estimate Fair Value

Not applicable.

### **Note 21 – Other Items**

#### A. Extraordinary Items

There were no extraordinary items meriting recognition or disclosure in these statements during 2014 or 2013.

#### B. Troubled Debt Restructuring: Debtors

Not applicable.

#### C. Other Disclosures and Unusual Items

Assets with book values in the amount of \$1,070,174 and \$1,033,870 at December 31, 2014 and December 31, 2013, respectively, were on deposit with government authorities or trustees as required by law.

#### D. Business Interruption Insurance Recoveries

The Company did not have any business interruption insurance recoveries during the period.

#### E. State Transferable and Non-transferable Tax Credits

The Company does not have any state transferrable or non-transferable tax credits as of December 31, 2014.

#### F. Subprime Mortgage Related Risk Exposure

- At December 31, 2014, the Company did not invest directly in subprime mortgage loans. Direct exposure is classified as exposure through (1) direct investment in subprime mortgage loans, (2) investment in mortgage-backed or asset-backed securities, or (3) any other assets in which the investment's primary objective, or underlying assets, are significantly invested in, or indexed to, subprime mortgage loans or related exposures. The Company has minimal exposure to subprime mortgage related risk through equity investments in financial institutions. The Company believes its greatest exposure is to unrealized losses from declines in asset values versus realized losses resulting from defaults or foreclosures. Conservative investment practices limit the Company's exposure to such losses.
- As of December 31, 2014, substantially all of the Company's investments in mortgage-backed or asset-backed securities are limited to securities which are guaranteed by the issuer (e.g. GNMA or FNMA), and, therefore, have no direct exposure to subprime mortgage related risk.
- As of December 31, 2014, the Company has no other investments in which the investment's primary objective, or underlying assets, are significantly invested in, or indexed to, subprime mortgage loans or related exposure.
- As of December 31, 2014, the Company has no underwriting exposure to subprime mortgage risk.

### **Note 22 – Events Subsequent**

Subsequent events have been considered through February 11, 2015 for the statutory statement issued on February 11, 2015. There were no events occurring subsequent to the end of the year that merited recognition or disclosure in these statements.

### **Note 23 – Reinsurance**

#### A. Unsecured Reinsurance Recoverable

The Company's unsecured reinsurance balances (including ceded case and IBNR reserves) in excess of 3% of policyholders' surplus with any one reinsurer are displayed below:

NAIC Code	Federal ID No.	Name of Reinsurer	Amount
0028	05-0348344	Amica Mutual Insurance Company	\$67,776,488



## NOTES TO FINANCIAL STATEMENTS

### B. Reinsurance Recoverable in Dispute

There are no individual reinsurance recoverable amounts on paid and unpaid losses in dispute which exceed 5% of the Company's policyholders' surplus or exceed 10% of the Company's policyholders' surplus in aggregate.

### C. Reinsurance Assumed and Ceded

- The following table summarizes ceded and assumed unearned premiums and the related commission equity at December 31, 2014:

	Assumed		Ceded		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
(a) Affiliated	\$0	\$0	\$9,748,771	\$1,949,754	(\$9,748,771)	(\$1,949,754)
(b) All Other	0	0	0	0	0	0
(c) Total	\$0	\$0	\$9,748,771	\$1,949,754	(\$9,748,771)	(\$1,949,754)
(d) Direct Unearned Premium Reserve			\$9,748,771			

- The Company does not have any existing reinsurance contractual arrangements which allow for additional or return commission which is predicated on loss experience or on any other form of profit sharing arrangements.
- The Company does not use protected cells as an alternative to traditional reinsurance.

### D. Uncollectible Reinsurance

As of December 31, 2014, the Company believes that all reinsurance recoverables are collectible.

### E. Commutation of Ceded Reinsurance

Not applicable.

### F. Retroactive Reinsurance

Not applicable.

### G. Reinsurance Accounted for as a Deposit

Not applicable.

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

Not applicable.

### I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not applicable.

### **Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination**

Not applicable.

### **Note 25 – Changes in Incurred Losses and Loss Adjustment Expenses**

As the result of the 100% quota share reinsurance agreement, loss and loss adjusting reserves are \$0 as of December 31, 2014. There is no change in incurred losses and loss adjustment expenses, as both were \$0 as of December 31, 2013.

### **Note 26 – Intercompany Pooling Arrangements**

Not applicable.

### **Note 27 – Structured Settlements**

Not applicable.

### **Note 28 – Health Care Receivables**

Not applicable.

### **Note 29 – Participating Policies**

Not applicable.

### **Note 30 – Premium Deficiency Reserves**

- Liability carried for premium deficiency reserve \$0
- Date of the most recent evaluation of this liability 12/31/14
- Was anticipated investment income utilized in this calculation? No

### **Note 31– High Deductibles**

Not applicable.

## NOTES TO FINANCIAL STATEMENTS

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

Not applicable.

**Note 33 – Asbestos and Environmental Reserves**

Not applicable.

**Note 34 – Subscriber Savings Accounts**

Not applicable.

**Note 35 – Multiple Peril Crop Insurance**

Not applicable.

**Note 36 – Financial Guaranty Insurance**

Not applicable.

# GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? ..... Yes [ X ] No [ ]  
If yes, complete Schedule Y, Parts 1, 1A and 2
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? ..... Yes [ X ] No [ ] N/A [ ]
- 1.3 State Regulating? ..... Rhode Island
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes [ ] No [ X ]
- 2.2 If yes, date of change: .....
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .... 12/31/2014
- 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .... 12/31/2010
- 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .... 02/07/2012
- 3.4 By what department or departments?  
State of Rhode Island .....
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes [ X ] No [ ] N/A [ ]
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [ X ] No [ ] N/A [ ]
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
4.11 sales of new business? ..... Yes [ ] No [ X ]  
4.12 renewals? ..... Yes [ ] No [ X ]
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
4.21 sales of new business? ..... Yes [ ] No [ X ]  
4.22 renewals? ..... Yes [ ] No [ X ]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [ ] No [ X ]
- 5.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.
- | 1              | 2                 | 3                 |
|----------------|-------------------|-------------------|
| Name of Entity | NAIC Company Code | State of Domicile |
|                |                   |                   |
- 6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [ X ]
- 6.2 If yes, give full information:  
.....
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? ..... Yes [ ] No [ X ]
- 7.2 If yes,  
7.21 State the percentage of foreign control; ..... %  
7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).

1	2
Nationality	Type of Entity

**GENERAL INTERROGATORIES**

- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... 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 [ ] No [ X ]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

- 9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
KPMG, LLP 6th Floor, Suite A, 100 Westminster Street, Providence, RI 02903-2321
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? ..... Yes [ ] No [ X ]
- 10.2 If the response to 10.1 is yes, provide information related to this exemption:  
.....
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 17A of the Model Regulation, or substantially similar state law or regulation? ..... Yes [ ] No [ X ]
- 10.4 If the response to 10.3 is yes, provide information related to this exemption:  
.....
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? ..... Yes [ X ] No [ ] N/A [ ]
- 10.6 If the response to 10.5 is no or n/a, please explain  
.....
- 11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?  
G. Christopher Nyce, FCAS, MAAA, KPMG, LLP, Three Radnor Corporate Center, Suite 105, 100 Matsonford Road, Radnor, PA 19087 .....
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? ..... Yes [ X ] No [ ]
- 12.11 Name of real estate holding company .....
- 12.12 Number of parcels involved .....
- 12.13 Total book/adjusted carrying value ..... \$ .....741,200
- 12.2 If, yes provide explanation:  
The company owns real estate indirectly through various securities listed in Schedule D. ....
- 13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?  
.....
- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? ..... Yes [ ] No [ ]
- 13.3 Have there been any changes made to any of the trust indentures during the year? ..... Yes [ ] No [ ]
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? ..... Yes [ ] No [ ] N/A [ ]
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [ X ] No [ ]
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c) Compliance with applicable governmental laws, rules and regulations;
- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e) Accountability for adherence to the code.
- 14.11 If the response to 14.1 is No, please explain:  
.....
- 14.2 Has the code of ethics for senior managers been amended? ..... Yes [ ] No [ X ]
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).  
.....
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [ X ]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).  
.....

**ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY  
GENERAL INTERROGATORIES**

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? ..... Yes [ ] No [ X ]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

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

**BOARD OF DIRECTORS**

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? ..... Yes [ X ] No [ ]
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? ..... Yes [ X ] No [ ]
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? ..... Yes [ X ] No [ ]

**FINANCIAL**

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? ..... Yes [ ] No [ X ]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- |   |          |
|---|----------|
| 20.11 To directors or other officers.....               | \$ ..... |
| 20.12 To stockholders not officers.....                 | \$ ..... |
| 20.13 Trustees, supreme or grand (Fraternal Only) ..... | \$ ..... |
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- |   |          |
|---|----------|
| 20.21 To directors or other officers.....               | \$ ..... |
| 20.22 To stockholders not officers.....                 | \$ ..... |
| 20.23 Trustees, supreme or grand (Fraternal Only) ..... | \$ ..... |
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? ..... Yes [ ] No [ X ]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- |                                 |          |
|---------------------------------|----------|
| 21.21 Rented from others.....   | \$ ..... |
| 21.22 Borrowed from others..... | \$ ..... |
| 21.23 Leased from others .....  | \$ ..... |
| 21.24 Other .....               | \$ ..... |
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? ..... Yes [ ] No [ X ]
- 22.2 If answer is yes:
- |   |
|---|
| 22.21 Amount paid as losses or risk adjustment \$ ..... |
| 22.22 Amount paid as expenses .....                     |
| 22.23 Other amounts paid .....                          |
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ ] No [ X ]
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ .....

**INVESTMENT**

- 24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03)..... Yes [ X ] No [ ]
- 24.02 If no, give full and complete information relating thereto  
.....
- 24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)  
.....
- 24.04 Does the Company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? ..... Yes [ ] No [ ] N/A [ X ]
- 24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. .... \$ .....
- 24.06 If answer to 24.04 is no, report amount of collateral for other programs. .... \$ .....
- 24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? ..... Yes [ ] No [ ] N/A [ X ]
- 24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? ..... Yes [ ] No [ ] N/A [ X ]
- 24.09 Does the reporting entity or the reporting entity 's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? ..... Yes [ ] No [ ] N/A [ X ]

**ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**

24.10 For the reporting entity's security lending program state the amount of the following as December 31 of the current year:

24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 ..... \$ .....  
 24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 ..... \$ .....  
 24.103 Total payable for securities lending reported on the liability page ..... \$ .....

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03) ..... Yes [ X ] No [ ]

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

25.21 Subject to repurchase agreements ..... \$ .....  
 25.22 Subject to reverse repurchase agreements ..... \$ .....  
 25.23 Subject to dollar repurchase agreements ..... \$ .....  
 25.24 Subject to reverse dollar repurchase agreements ..... \$ .....  
 25.25 Placed under option agreements ..... \$ .....  
 25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock ..... \$ .....  
 25.27 FHLB Capital Stock ..... \$ .....  
 25.28 On deposit with states ..... \$ ..... 1,070,174  
 25.29 On deposit with other regulatory bodies ..... \$ .....  
 25.30 Pledged as collateral - excluding collateral pledged to an FHLB ..... \$ .....  
 25.31 Pledged as collateral to FHLB - including assets backing funding agreements ..... \$ .....  
 25.32 Other ..... \$ .....

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? ..... Yes [ ] No [ X ]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ] N/A [ X ]  
 If no, attach a description with this statement.

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? ..... Yes [ ] No [ X ]

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

28. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? ..... Yes [ X ] No [ ]

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

1 Name of Custodian(s)	2 Custodian's Address
State Street Bank & Trust Co. ....	801 Pennsylvania Ave., Kansas City, MO 64105 .....

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

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

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? ..... Yes [ ] No [ X ]

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

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

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

1 Central Registration Depository Number(s)	2 Name	3 Address

**ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**

- 29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? Yes [ ] No [ X ]
- 29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
29.2999 - Total		

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

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

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds .....	17,648,187	18,258,627	610,440
30.2 Preferred stocks .....			
30.3 Totals	17,648,187	18,258,627	610,440

- 30.4 Describe the sources or methods utilized in determining the fair values:  
 Fair values are obtained from HubData Inc., Bloomberg or determined by the reporting entity. The reporting entity's method for determining fair value is based on market yields of securities from an identical issuer with similar maturities. ....

- 31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? ..... Yes [ ] No [ X ]
- 31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? ..... Yes [ ] No [ ]
- 31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:  
 .....
- 32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? ..... Yes [ X ] No [ ]
- 32.2 If no, list exceptions:  
 .....

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY  
**GENERAL INTERROGATORIES**

**OTHER**

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? .....\$ .....318,245

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

1 Name	2 Amount Paid
AIPSO .....	197,318
ISO .....	94,363

34.1 Amount of payments for legal expenses, if any? .....\$ .....

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

1 Name	2 Amount Paid
.....	.....

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

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

1 Name	2 Amount Paid
.....	.....



# GENERAL INTERROGATORIES

## PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? ..... Yes [ ] No [ X ]

1.2 If yes, indicate premium earned on U. S. business only. .... \$ \_\_\_\_\_

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? ..... \$ \_\_\_\_\_  
 1.31 Reason for excluding  
 .....

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. .... \$ \_\_\_\_\_

1.5 Indicate total incurred claims on all Medicare Supplement Insurance. .... \$ \_\_\_\_\_

1.6 Individual policies:

	Most current three years:	
1.61 Total premium earned .....		\$ .....
1.62 Total incurred claims .....		\$ .....
1.63 Number of covered lives .....		.....
All years prior to most current three years		
1.64 Total premium earned .....		\$ .....
1.65 Total incurred claims .....		\$ .....
1.66 Number of covered lives .....		.....

1.7 Group policies:

	Most current three years:	
1.71 Total premium earned .....		\$ .....
1.72 Total incurred claims .....		\$ .....
1.73 Number of covered lives .....		.....
All years prior to most current three years		
1.74 Total premium earned .....		\$ .....
1.75 Total incurred claims .....		\$ .....
1.76 Number of covered lives .....		.....

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator .....		
2.2 Premium Denominator .....		
2.3 Premium Ratio (2.1/2.2) .....	0.000	0.000
2.4 Reserve Numerator .....		
2.5 Reserve Denominator .....		
2.6 Reserve Ratio (2.4/2.5) .....	0.000	0.000

3.1 Does the reporting entity issue both participating and non-participating policies? ..... Yes [ ] No [ X ]

3.2 If yes, state the amount of calendar year premiums written on:

3.21 Participating policies .....		\$ .....
3.22 Non-participating policies .....		\$ .....

4. For mutual reporting Entities and Reciprocal Exchanges Only:

4.1 Does the reporting entity issue assessable policies? ..... Yes [ ] No [ ]

4.2 Does the reporting entity issue non-assessable policies? ..... Yes [ ] No [ ]

4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? ..... % \_\_\_\_\_

4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. .... \$ \_\_\_\_\_

5. For Reciprocal Exchanges Only:

5.1 Does the Exchange appoint local agents? ..... Yes [ ] No [ ]

5.2 If yes, is the commission paid:

5.21 Out of Attorney's-in-fact compensation.....	Yes [ ] No [ ] N/A [ ]	
5.22 As a direct expense of the exchange.....	Yes [ ] No [ ] N/A [ ]	

5.3 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?  
 .....

5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? ..... Yes [ ] No [ ]

5.5 If yes, give full information  
 .....

# GENERAL INTERROGATORIES

## PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?  
Not applicable
- 6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process.  
Amica relies on our catastrophe reinsurance brokers, Aon benfield and GenRe Intermediaries, for modeling services. This year, they provided calculations of our PML using RiskLink (v13.0) and AIR (v.1.5). Our largest exposure would occur on comprehensive coverage resulting from a hurricane in New Jersey.
- 6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?  
The Company is party to an 100% quota share reinsurance agreement with its parent.
- 6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? Yes [ ] No [ X ]
- 6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss.  
All losses are reinsured at 100% under the Company's quota share reinsurance agreement.
- 7.1 Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss ratio cap, an aggregate limit or any similar provisions)? Yes [ ] No [ X ]
- 7.2 If yes, indicate the number of reinsurance contracts containing such provisions:
- 7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)? Yes [ ] No [ ]
- 8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes [ ] No [ X ]
- 8.2 If yes, give full information
- 9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:  
(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;  
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;  
(c) Aggregate stop loss reinsurance coverage;  
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;  
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or  
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. Yes [ ] No [ X ]
- 9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:  
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or  
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes [ ] No [ X ]
- 9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:  
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;  
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and  
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.
- 9.4 Except for transactions meeting the requirements of paragraph 32 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:  
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or  
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes [ ] No [ X ]
- 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.
- 9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:  
(a) The entity does not utilize reinsurance; or, Yes [ ] No [ X ]  
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or Yes [ X ] No [ ]  
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. Yes [ ] No [ X ]
10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Yes [ ] No [ ] N/A [ X ]

# GENERAL INTERROGATORIES

## PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

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

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

\* Disclose type of coverage:  
.....

# GENERAL INTERROGATORIES

## PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that it excludes from Schedule F - Part 5? ..... Yes [ ] No [ X ]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F - Part 5. Provide the following information for this exemption:

17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 excluded from Schedule F - Part 5 ..... \$ .....  
 17.12 Unfunded portion of Interrogatory 17.11 ..... \$ .....  
 17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11...\$ .....  
 17.14 Case reserves portion of Interrogatory 17.11 ..... \$ .....  
 17.15 Incurred but not reported portion of Interrogatory 17.11 ..... \$ .....  
 17.16 Unearned premium portion of Interrogatory 17.11 ..... \$ .....  
 17.17 Contingent commission portion of Interrogatory 17.11 ..... \$ .....

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

17.18 Gross amount of unauthorized reinsurance in Schedule F - Part 3 excluded from Schedule F - Part 5 ..... \$ .....  
 17.19 Unfunded portion of Interrogatory 17.18 ..... \$ .....  
 17.20 Paid losses and loss adjustment expenses portion of Interrogatory 17.18...\$ .....  
 17.21 Case reserves portion of Interrogatory 17.18 ..... \$ .....  
 17.22 Incurred but not reported portion of Interrogatory 17.18 ..... \$ .....  
 17.23 Unearned premium portion of Interrogatory 17.18 ..... \$ .....  
 17.24 Contingent commission portion of Interrogatory 17.18 ..... \$ .....

18.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [ X ]

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

18.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [ X ]

18.4 If yes, please provide the balance of funds administered as of the reporting date. .... \$ .....

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY

**FIVE-YEAR HISTORICAL DATA**

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

	1 2014	2 2013	3 2012	4 2011	5 2010
<b>Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 &amp; 3)</b>					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	13,634,451	36,795,392	35,456,292	33,279,732	30,595,578
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	5,279,037	14,786,760	13,994,367	13,197,306	12,059,363
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)	18,913,488	51,582,152	49,450,659	46,477,038	42,654,941
<b>Net Premiums Written (Page 8, Part 1B, Col. 6)</b>					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)		(3,496,439)	6,928,985	6,542,279	5,982,280
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)		(1,404,409)	2,798,874	2,639,461	2,411,872
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12. Total (Line 35)		(4,900,848)	9,727,859	9,181,740	8,394,152
<b>Statement of Income (Page 4)</b>					
13. Net underwriting gain (loss) (Line 8)	(1,014,644)	(463,947)	(4,335,453)	(2,347,091)	(2,273,019)
14. Net investment gain or (loss) (Line 11)	229,243	274,759	356,138	471,052	489,316
15. Total other income (Line 15)	(102,952)	19,190	59,719	108,169	157,315
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	(813,067)	(831,277)	(1,159,431)	(532,053)	(425,384)
18. Net income (Line 20)	(75,286)	661,279	(2,760,165)	(1,235,817)	(1,201,004)
<b>Balance Sheet Lines (Pages 2 and 3)</b>					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	28,899,968	32,530,770	31,202,307	29,532,303	30,171,231
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	1,154,048	2,737,622	2,664,504	2,353,880	2,173,013
20.2 Deferred and not yet due (Line 15.2)	6,200,210	14,605,542	13,886,035	13,637,245	12,604,107
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	3,014,763	5,341,607	23,243,638	19,855,000	19,265,098
22. Losses (Page 3, Line 1)			12,118,166	9,809,585	8,990,665
23. Loss adjustment expenses (Page 3, Line 3)			2,101,179	1,571,304	1,971,145
24. Unearned premiums (Page 3, Line 9)			4,900,848	4,736,833	4,352,716
25. Capital paid up (Page 3, Lines 30 & 31)	3,500,000	3,500,000	3,500,000	3,500,000	3,500,000
26. Surplus as regards policyholders (Page 3, Line 37)	25,885,205	27,189,163	7,958,669	9,677,303	10,906,133
<b>Cash Flow (Page 5)</b>					
27. Net cash from operations (Line 11)	7,394,656	(20,153,471)	(530,816)	(1,165,364)	(1,280,113)
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital	25,885,205	27,189,163	7,958,669	9,677,303	10,906,133
29. Authorized control level risk-based capital	83,065	51,275	909,688	722,170	828,652
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0</b>					
30. Bonds (Line 1)	80.1	90.4	92.5	94.7	92.2
31. Stocks (Lines 2.1 & 2.2)					
32. Mortgage loans on real estate (Lines 3.1 and 3.2)					
33. Real estate (Lines 4.1, 4.2 & 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)	19.9	9.6	7.5	5.3	7.8
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)					
38. Receivables for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)					
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47					
49. Total Investment in Parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)					

**FIVE-YEAR HISTORICAL DATA**

(Continued)

	1 2014	2 2013	3 2012	4 2011	5 2010
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24) .....		(22,284)	4,289	6,753	2,218
52. Dividends to stockholders (Line 35) .....					
53. Change in surplus as regards policyholders for the year (Line 38) .....	(1,303,958)	19,230,494	(1,718,634)	(1,228,830)	(1,844,496)
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....	29,766,077	27,578,171	25,004,171	27,104,587	18,722,936
55. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	6,223,213	8,948,118	11,421,000	9,193,957	8,008,060
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....					
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....					
58. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....					
59. Total (Line 35) .....	35,989,290	36,526,289	36,425,171	36,298,544	26,730,996
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....			5,000,834	5,420,917	3,744,587
61. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....			2,284,200	1,838,792	1,601,612
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....					
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....					
65. Total (Line 35) .....			7,285,034	7,259,709	5,346,199
<b>Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0</b>					
66. Premiums earned (Line 1) .....	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2) .....			100.3	91.8	85.4
68. Loss expenses incurred (Line 3) .....			20.5	11.4	13.3
69. Other underwriting expenses incurred (Line 4) .....			24.5	23.4	30.2
70. Net underwriting gain (loss) (Line 8) .....			(45.3)	(26.7)	(28.9)
<b>Other Percentages</b>					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0) .....		(299.2)	23.5	21.3	26.4
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0) .....			120.8	103.3	98.7
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0) .....		(18.0)	122.2	94.9	77.0
<b>One Year Loss Development (000 omitted)</b>					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11) .....		(13,927)	926	993	213
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) .....		(175.0)	9.6	9.1	1.7
<b>Two Year Loss Development (000 omitted)</b>					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) .....	(13,927)	(7,236)	303	416	8
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0) .....	(175.0)	(74.8)	2.8	3.3	0.1

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors? Yes [ ] No [ ]  
 If no, please explain: .....

**SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES**

**SCHEDULE P - PART 1 - SUMMARY**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX								XXX	
2. 2005											XXX	
3. 2006	15,814	12,678	3,136	7,328	5,860	920	736	4,211	3,368	1,304	2,495	XXX
4. 2007	37,318	30,031	7,287	26,509	21,347	2,713	2,186	5,264	4,213	3,121	6,740	XXX
5. 2008	35,757	28,720	7,037	25,603	20,567	2,406	1,942	3,969	3,179	3,234	6,291	XXX
6. 2009	36,101	28,980	7,121	29,675	24,139	3,153	2,587	4,164	3,345	3,329	6,921	XXX
7. 2010	40,027	32,158	7,869	33,163	27,933	3,509	3,015	4,241	3,426	4,867	6,539	XXX
8. 2011	44,556	35,758	8,798	35,785	30,642	3,233	2,873	3,867	3,168	4,680	6,202	XXX
9. 2012	48,381	38,817	9,564	33,432	29,449	2,436	2,297	3,507	3,033	5,253	4,596	XXX
10. 2013	50,348	50,348		26,142	26,142	1,346	1,346	3,479	3,479	4,645		XXX
11. 2014	35,153	35,153		12,660	12,660	499	499	1,570	1,570	2,436		XXX
12. Totals	XXX	XXX	XXX	230,297	198,739	20,215	17,481	34,273	28,782	32,869	39,783	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior													XXX
2. 2005													XXX
3. 2006	15	15			2	2			1	1			XXX
4. 2007	270	270			44	44			2	2			XXX
5. 2008	385	385			63	63			4	4			XXX
6. 2009	988	988			161	161			10	10			XXX
7. 2010	1,242	1,242	155	155	203	203	29	29	22	22			XXX
8. 2011	4,569	4,569	463	463	742	742	88	88	65	65			XXX
9. 2012	8,667	8,667	1,395	1,395	1,412	1,412	263	263	170	170			XXX
10. 2013	7,014	7,014	4,218	4,218	1,143	1,143	791	791	342	342			XXX
11. 2014	6,123	6,123	10,411	10,411	915	915	1,877	1,877	647	647			XXX
12. Totals	29,273	29,273	16,642	16,642	4,685	4,685	3,048	3,048	1,263	1,263			XXX

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2005											
3. 2006	12,477	9,982	2,495	78.9	78.7	79.5					
4. 2007	34,802	28,062	6,740	93.3	93.4	92.5					
5. 2008	32,430	26,139	6,291	90.7	91.0	89.4					
6. 2009	38,151	31,230	6,921	105.7	107.8	97.2					
7. 2010	42,564	36,026	6,539	106.3	112.0	83.1					
8. 2011	48,813	42,611	6,202	109.6	119.2	70.5					
9. 2012	51,282	46,686	4,596	106.0	120.3	48.1					
10. 2013	44,476	44,476		88.3	88.3						
11. 2014	34,702	34,702		98.7	98.7						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE AMICA PROPERTY AND CASUALTY INSURANCE COMPANY

**SCHEDULE P - PART 2 - SUMMARY**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT		
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	11 One Year	12 Two Year	
1. Prior.....													
2. 2005.....													
3. 2006.....	XXX	1,793	2,250	1,971	1,882	1,753	1,677	1,662	1,652	1,652		(10)	
4. 2007.....	XXX	XXX	5,779	5,854	6,750	6,626	6,184	5,973	5,689	5,689		(284)	
5. 2008.....	XXX	XXX	XXX	6,827	6,257	6,281	6,093	5,724	5,500	5,500		(224)	
6. 2009.....	XXX	XXX	XXX	XXX	6,485	6,927	7,836	7,094	6,102	6,102		(992)	
7. 2010.....	XXX	XXX	XXX	XXX	XXX	7,106	7,896	8,543	5,724	5,724		(2,819)	
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	7,720	9,336	5,503	5,503		(3,833)	
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,887	4,122	4,122		(5,765)	
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	
												12. Totals	(13,927)

**SCHEDULE P - PART 3 - SUMMARY**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014			
1. Prior.....	.000											XXX	XXX
2. 2005.....												XXX	XXX
3. 2006.....	XXX	750	1,152	1,326	1,460	1,624	1,649	1,652	1,652	1,652		XXX	XXX
4. 2007.....	XXX	XXX	2,499	3,914	4,568	5,110	5,638	5,689	5,689	5,689		XXX	XXX
5. 2008.....	XXX	XXX	XXX	2,355	3,836	4,561	5,241	5,500	5,500	5,500		XXX	XXX
6. 2009.....	XXX	XXX	XXX	XXX	2,694	4,046	5,347	6,102	6,102	6,102		XXX	XXX
7. 2010.....	XXX	XXX	XXX	XXX	XXX	3,083	4,826	5,724	5,724	5,724		XXX	XXX
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	3,617	5,503	5,503	5,503		XXX	XXX
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,122	4,122	4,122		XXX	XXX
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX

**SCHEDULE P - PART 4 - SUMMARY**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior.....										
2. 2005.....										
3. 2006.....	XXX	470	719	278	115	58				
4. 2007.....	XXX	XXX	1,360	507	603	383	200			
5. 2008.....	XXX	XXX	XXX	2,392	860	442	267			
6. 2009.....	XXX	XXX	XXX	XXX	1,939	797	704	122		
7. 2010.....	XXX	XXX	XXX	XXX	XXX	1,959	870	407		
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	1,999	1,060		
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,743		
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	



**SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

States, Etc.	1 Active Status	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	N							
2. Alaska	AK	N							
3. Arizona	AZ	N							
4. Arkansas	AR	N							
5. California	CA	N							
6. Colorado	CO	N							
7. Connecticut	CT	N							
8. Delaware	DE	N							
9. District of Columbia	DC	N							
10. Florida	FL	N							
11. Georgia	GA	N							
12. Hawaii	HI	N							
13. Idaho	ID	N							
14. Illinois	IL	N							
15. Indiana	IN	N							
16. Iowa	IA	N							
17. Kansas	KS	N							
18. Kentucky	KY	N							
19. Louisiana	LA	N							
20. Maine	ME	N							
21. Maryland	MD	N							
22. Massachusetts	MA	N							
23. Michigan	MI	N							
24. Minnesota	MN	N							
25. Mississippi	MS	N							
26. Missouri	MO	N							
27. Montana	MT	N							
28. Nebraska	NE	N							
29. Nevada	NV	N							
30. New Hampshire	NH	N							
31. New Jersey	NJ	L	17,060,769	34,646,467	35,828,084	19,773,376	45,706,889	164,115	
32. New Mexico	NM	N							
33. New York	NY	L	1,852,719	506,150	161,206	369,630	208,424	2,137	
34. North Carolina	NC	N							
35. North Dakota	ND	N							
36. Ohio	OH	N							
37. Oklahoma	OK	N							
38. Oregon	OR	N							
39. Pennsylvania	PA	N							
40. Rhode Island	RI	L							
41. South Carolina	SC	N							
42. South Dakota	SD	N							
43. Tennessee	TN	N							
44. Texas	TX	N							
45. Utah	UT	N							
46. Vermont	VT	N							
47. Virginia	VA	N							
48. Washington	WA	N							
49. West Virginia	WV	N							
50. Wisconsin	WI	N							
51. Wyoming	WY	N							
52. American Samoa	AS	N							
53. Guam	GU	N							
54. Puerto Rico	PR	N							
55. U.S. Virgin Islands	VI	N							
56. Northern Mariana Islands	MP	N							
57. Canada	CAN	N							
58. Aggregate other alien	OT	XXX							
59. Totals	(a)	3	18,913,488	35,152,617	35,989,290	20,143,006	45,915,313	166,252	
DETAILS OF WRITE-INS									
58001.		XXX							
58002.		XXX							
58003.		XXX							
58998. Summary of remaining write-ins for Line 58 from overflow page		XXX							
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX							

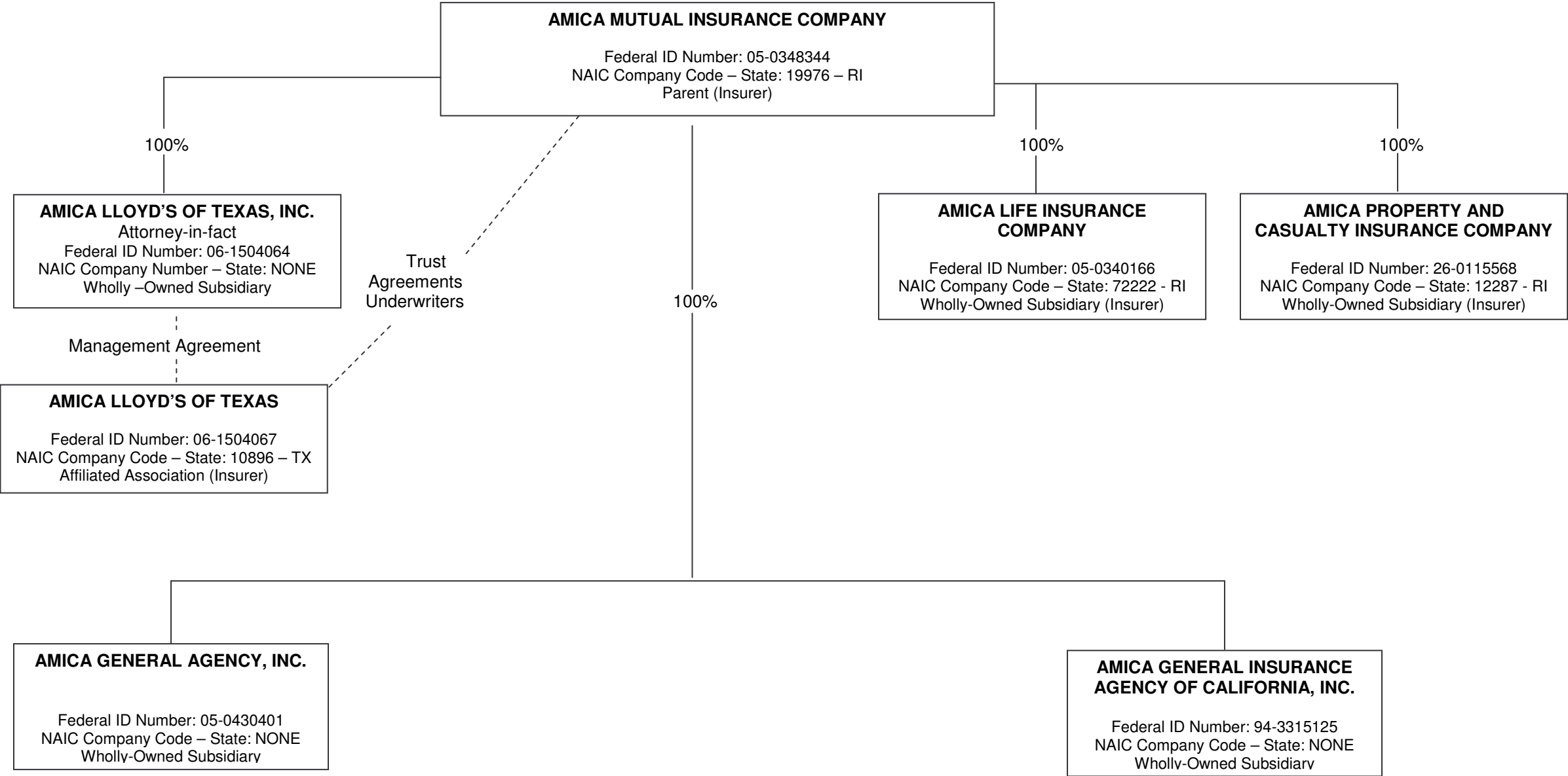
(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business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

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

All Automobile lines of business are allocated to the state in which the automobile is garaged.

(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**



**NONE**

## ALPHABETICAL INDEX

### ANNUAL STATEMENT BLANK

Assets .....	2
Cash Flow .....	5
Exhibit of Capital Gains (Losses) .....	12
Exhibit of Net Investment Income .....	12
Exhibit of Nonadmitted Assets .....	13
Exhibit of Premiums and Losses (State Page) .....	19
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