

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Patrick Nails


NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. $\S 437 \mathrm{~g}$.

| L | $\begin{aligned} & \text { Office } \\ & \text { Use } \\ & \text { Only } \end{aligned}$ |  |  |  |  |  |  |  | FEC FORM 3X <br> Rev. 12/2004 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

FEC Form 3X (Rev. 02/2003)

## Write or Type Committee Name <br> Arch Capital Group (US) Inc. Political Action Committee



| COLUMN A | COLUMN B |
| :---: | :---: |
| This Period | Calendar Year-to-Date |

6. (a) Cash on Hand January 1,

| Y-r |
| :---: |
| 2015 |

(b) Cash on Hand at

Beginning of Reporting Period. $\qquad$

(c) Total Receipts (from Line 19) $\qquad$

$\square 10484.96$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines
6(a) and 6(c) for Column B) $\qquad$
$\square 35887.40$
$\square, 35887.40$
7. Total Disbursements (from Line 31) $\qquad$
10000.00
10000.00
$\square 25887.40$

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
0.00
10. Debts and Obligations Owed BY the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
0.00

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission 999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

## Write or Type Committee Name

## Arch Capital Group (US) Inc. Political Action Committee

| I. Receipts |
| :--- |
| Report Covering the Period: From: |

19. Total Receipts (add Lines 11(d), $12,13,14,15,16,17$, and $18(\mathrm{c})) \ldots \ldots \ldots$ $\square$

|  | 10484.96 |
| :---: | :---: |
| $-\quad, \quad 10484.96$ |  |

20. Total Federal Receipts
(subtract Line 18(c) from Line 19) ..........


FEC Form 3X (Rev. 02/2003)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$
(ii) Non-Federal Share. $\qquad$
(b) Other Federal Operating Expenditures $\qquad$
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) $\qquad$
22. Transfers to Affiliated/Other Party Committees
23. Contributions to

Federal Candidates/Committees and Other Political Committees. $\qquad$
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(2 U.S.C. §441a(d))
(use Schedule F)... $\qquad$
26. Loan Repayments Made $\qquad$
27. Loans Made
28. Refunds of Contributions To:
(a) Individuals/Persons Other Than Political Committees $\qquad$
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs)..
(d) Total Contribution Refunds
(add Lines 28(a), (b), and (c))...........
29. Other Disbursements $\qquad$

|  | 0.00 |
| :---: | :---: |
| ,$\quad 5000.00$ |  |


|  | 0.00 |
| :---: | :---: |
|  | 5000.00 |

30. Federal Election Activity (2 U.S.C. §431(20))
(a) Allocated Federal Election Activity (from Schedule H6)
(i) Federal Share $\qquad$
(ii) "Levin" Share. $\qquad$
(b) Federal Election Activity Paid Entirely With Federal Funds $\qquad$
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).
.... $\downarrow$

|  | 0.00 |
| :---: | :---: |
|  | , 0.00 |
|  | , 0.00 |
|  | , 0.00 |


|  | 0.00 |
| :---: | :---: |
|  | 0.00 |
|  | , 0.00 |
|  | , 0.00 |

31. Total Disbursements (add Lines 21 (c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..

$\square 10000.00$
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).............................................


DETAILED SUMMARY PAGE
of Disbursements

Page 5
FEC Form 3X (Rev. 02/2003)

## III. Net Contributions/Operating Expenditures

33. Total Contributions (other than loans) (from Line 11(d), page 3)
34. Total Contribution Refunds (from Line 28(d))
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... $\downarrow$
37. Offsets to Operating Expenditures (from Line 15, page 3) $\qquad$
38. Net Operating Expenditures (subtract Line 37 from Line 36) $\qquad$

COLUMN A Total This Period

COLUMN B Calendar Year-to-Date


## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 11 (check only one)


Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.
nAME OF COMmItTEE (In Full)
Arch Capital Group (US) Inc. Political Action Committee
Full Name (Last, First, Middle Initial)


## Full Name (Last, First, Middle Initial)

B. Peder F. Moeller

Mailing Address 15 N. Summit Ave

| City Chatham | State Zip Code <br> NJ 07928 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Arch Insurance Group | Occupation <br> Managing Director |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date <br> 240.00 |

Date of Receipt


Transaction ID : PR125554018057
Amount of Each Receipt this Period


P/R Deduction (\$20.00 Semi-Monthly)

Full Name (Last, First, Middle Initial)
C. Matthew Shulman

Mailing Address 786 Cheese Spring Rd

| City <br> New Canaan | State <br> CT | Zip Code <br> 06840 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| Arch Insurance Group | Executive Vice President |  |

Date of Receipt

| 06 | D ${ }^{\text {D }}$ ( <br> 0 | $2015$ |
| :---: | :---: | :---: |

Transaction ID : PR125563118057
Amount of Each Receipt this Period
300.00

P/R Deduction (\$25.00 Semi-Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $1044.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... |  |

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: $\quad$ PAGE 7 OF 11 (check only one)


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NAME OF COMMITTEE (In Full)
Arch Capital Group (US) Inc. Political Action Committee


## Full Name (Last, First, Middle Initial)

B. David Gansberg

Mailing Address 33 Brightwood Ln E

| City Danville | State Zip Code <br> CA 94506 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Arch Insurance Group | Occupation <br> President \& CEO |
|  | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : PR125563418057
Amount of Each Receipt this Period


P/R Deduction (\$125.00 Semi-Monthly)

## Full Name (Last, First, Middle Initial)

C. Rhiannon Bolen

Mailing Address 101 Tuesday Haas Ln

| City <br> Highland Village | State Zip Code <br> TX 75077 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Arch Insurance Group | Occupation <br> RVP South Region |
|  | Aggregate Year-to-Date <br> 600.00 |

Date of Receipt


Transaction ID : PR127626518057
Amount of Each Receipt this Period
600.00

P/R Deduction (\$50.00 Semi-Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | 2850.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | , |

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 11 (check only one)


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NAME OF COMMITTEE (In Full)
Arch Capital Group (US) Inc. Political Action Committee


Full Name (Last, First, Middle Initial)
B. Louis DeCree

Mailing Address 13037 Lindsay Street

| City <br> Phildelphia | State Zip Code <br> PA 19116 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Arch Insurance Group | Occupation <br> VP, Ceded Reinsurance Claims |
|  | Aggregate Year-to-Date <br> 300.00 |

Date of Receipt

| $\begin{gathered} M-M \\ 06 \end{gathered}$ | D $\quad \mathrm{D}$ <br> 30 | $2015$ |
| :---: | :---: | :---: |

Transaction ID : PR130004518057
Amount of Each Receipt this Period


P/R Deduction (\$25.00 Semi-Monthly)

Full Name (Last, First, Middle Initial)
C. Constantine Iordanou

Mailing Address 2 Colonial Dr

| City <br> Glen Head | State <br> NY | Zip Code <br> $11545-2800$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| Arch Capital Group Ltd. | President \& CEO |  |
| Receipt For: |  |  |
| $\square$ Primary $\square$ General |  | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |
| $\square$ Other (specify) $\nabla$ |  | 2499.96 |

Date of Receipt

| $06$ | D <br> 30 | 2015 |
| :---: | :---: | :---: |

Transaction ID : PR77204118057
Amount of Each Receipt this Period
2499.96

> P/R Deduction (\$416.66 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $3495.96$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 11 (check only one)


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nAME OF COMmItTEE (In Full)
Arch Capital Group (US) Inc. Political Action Committee
Full Name (Last, First, Middle Initial)

| Full Name (Last, First, Middle Initial) <br> A. Louis Petrillo |  | Date of Receipt |
| :---: | :---: | :---: |
| Mailing Address 333 E 69th St \# PHF |  |  |
| City | State Zip Code |  |
| New York | NY 10021-5549 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $1200.00$ |
| Name of Employer <br> Arch Capital Group Ltd. | Occupation <br> President | P/R Deduction (\$100.00 Semi-Monthly) |
|  | Aggregate Year-to-Date |  |
| Full Name (Last, First, Middle Initial) <br> B. John T Richardson |  | Date of Receipt |
| Mailing Address 7407 Kessel St |  |  |
| City | State Zip Code | Transaction ID : PR77205518057 |
| Forest Hills | NY 11375-6840 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $240.00$ |
| Name of Employer Arch Insurance Group | Occupation <br> VP \& Deputy General Counsel | P/R Deduction (\$20.00 Semi-Monthly) |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ Other (specify) $\nabla$ | Aggregate Year-to-Date $\square$ <br> 240.00 |  |


| Full Name (Last, First, Middle Initial) <br> C. John Edack |  |
| :---: | :---: |
| Mailing Address 914 Rosemount Rd |  |
| City Oakland | State Zip Code <br> CA 94610 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Arch Insurance Group | Occupation <br> EVP |
|  | Aggregate Year-to-Date $\square$ <br> 600.00 |

Date of Receipt

| $\begin{gathered} M \\ 06 \end{gathered}$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $2015$ |
| :---: | :---: | :---: |

Transaction ID : PR77206418057
Amount of Each Receipt this Period
600.00

P/R Deduction (\$50.00 Semi-Monthly)


## SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

| Use separate schedule(s) | FOR LINE NUMBER: (check only one) |  |  |  |  |  | E | 10 | OF |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| for each category of the Detailed Summary Page | $\square{ }^{21 \mathrm{~b}}$ |  | $x^{2}$ | 23 |  | 24 |  | 25 |  |  |  |
|  | 27 | 28a |  | 28b |  | 28c |  | 29 |  |  | 30b |

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NAME OF COMMITTEE (In Full)
Arch Capital Group (US) Inc. Political Action Committee

| A. American Insurance Association Fed PAC |  |  |  | Date of Disbursement |
| :---: | :---: | :---: | :---: | :---: |
| Mailing Address 2101 L St NW Ste 400 |  |  |  |  |
| City State Zip Code <br> Washington DC 20037-1542 |  |  |  | Transaction ID : 9205222 <br> Amount of Each Disbursement this Period |
|  |  |  |  |  |
| Purpose of Disbursement Direct Contribution |  |  | 011 |  |
| Candidate Nan American | surance As | iation Fed PAC | Category/ | 5000.00 |
| Office Sought: <br> State: | $\square$ House <br> Senate  <br>   <br> President  | Disbursement For: $\square$ Primary General <br> Other (specify) |  | Direct Contribution |

Full Name (Last, First, Middle Initial)
B.


## SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

| Use separate schedule(s) | FOR LINE NUMBER: (check only one) |  |  | PAGE |  | 11 | OF |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| for each category of the | $\square$ 21b |  | $23$ | 24 |  | 25 |  |  | 6 |
| etailed Summary Page | 27 | 28a | 28b | 28c | $\times$ | 29 |  |  | 30b |

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NAME OF COMMITTEE (In Full)
Arch Capital Group (US) Inc. Political Action Committee

| A. American Insurance Association State PAC |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | Date of Disbursement |
| Mailing Address 2101 L St NW Ste 400 |  |  |  |  |
| City State Zip Code |  |  |  | Transaction ID : 9205223 |
|  |  |  |  |  |
| Purpose of Dis Direct Contribu | rsement <br> n |  | 011 | Amount of Each Disbursement this Period |
| Candidate Nam |  |  | Category/ Type | $5000.00$ |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  | Direct Contribution |

Full Name (Last, First, Middle Initial)
B.

| Mailing Address |  |  |  |
| :---: | :---: | :---: | :---: |
| City |  | State Zip Code |  |
| Purpose of Disbursement |  |  |  |
| Candidate Nam |  |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |

## Date of Disbursement



Amount of Each Disbursement this Period
$\qquad$

Date of Disbursement

| Mailing Address |  |  |  |
| :---: | :---: | :---: | :---: |
| City |  | State Zip Code |  |
| Purpose of Disbursement |  |  |  |
| Candidate Name |  |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Sonate <br> Sent  <br> President  |  |  |



