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## AMENDED FILING EXPLANATION

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The original filing PDF version cut off a portion of the pages. The amended filing is to correct this error.



ANNUAL STATEMENT

For the Year Ended December 31, 2015  
of the Condition and Affairs of the

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NAIC Group Code.....155, 155  
(Current Period) (Prior Period)

Organized under the Laws of OH  
Incorporated/Organized..... September 13, 1992

Statutory Home Office  
6300 WILSON MILLS ROAD, W33..... CLEVELAND ..... OH ..... US ..... 44143-2182  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office  
6300 WILSON MILLS ROAD, W33..... CLEVELAND ..... OH ..... US..... 44143-2182 440-461-5000  
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address  
P.O. BOX 89490..... CLEVELAND ..... OH ..... US ..... 44101-6490  
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records  
6300 WILSON MILLS ROAD, W33..... CLEVELAND ..... OH ..... US ..... 44143-2182 440-395-4460  
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address  
PROGRESSIVE.COM

Statutory Statement Contact  
MARY BETH ANDREANO  
(Name) 440-395-4460  
(Area Code) (Telephone Number) (Extension)  
FINANCIAL\_REPORTING@PROGRESSIVE.COM  
(E-Mail Address) 440-603-5500  
(Fax Number)

POLICYHOLDER SERVICES AND CLAIMS REPORTING -- 1-800-PROGRESSIVE (1-800-776-4737)

OFFICERS

<b>Name</b>	<b>Title</b>	<b>Name</b>	<b>Title</b>
PATRICK KEVIN CALLAHAN	PRESIDENT	MICHAEL ROBERT UTH	SECRETARY
DANIEL JOSEPH WITALEC	TREASURER		

OTHER

SCOTT EDWARD COLEMAN	(ASST. TREASURER)	CHRISTINE ANN JOHNSON #	(VICE PRESIDENT)
KAREN ANN KOSUDA	(ASST. SECRETARY)	MARIANN WOJKUN MARSHALL	(VICE PRESIDENT)

DIRECTORS OR TRUSTEES

PATRICK KEVIN CALLAHAN	JOHN ALLEN CURTISS JR. #	BRIAN JACOB GURA #	CHRISTINE ANN JOHNSON #
SCOTT WESLEY ZIEGLER			

State of..... OHIO  
County of..... CUYAHOGA

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.

(Signature) PATRICK KEVIN CALLAHAN	(Signature) KAREN ANN KOSUDA	(Signature) SCOTT EDWARD COLEMAN
1. (Printed Name) PRESIDENT	2. (Printed Name) ASSISTANT SECRETARY	3. (Printed Name) ASSISTANT TREASURER
(Title)	(Title)	(Title)

Subscribed and sworn to before me	a. Is this an original filing?	Yes [ X ] No [ ]
This 16TH day of FEBRUARY, 2016	b. If no	1. State the amendment number
		2. Date filed
		3. Number of pages attached

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D).....	113,672,055		113,672,055	121,821,218
2. Stocks (Schedule D):				
2.1 Preferred stocks.....			.0	
2.2 Common stocks.....			.0	
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....			.0	
3.2 Other than first liens.....			.0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			.0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			.0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			.0	
5. Cash (\$.....0, Schedule E-Part 1), cash equivalents (\$.....0, Schedule E-Part 2) and short-term investments (\$.....27,636,220, Schedule DA).....	27,636,220		27,636,220	2,581,204
6. Contract loans (including \$.....0 premium notes).....			.0	
7. Derivatives (Schedule DB).....			.0	
8. Other invested assets (Schedule BA).....	357,476	357,476	.0	
9. Receivables for securities.....			.0	
10. Securities lending reinvested collateral assets (Schedule DL).....			.0	
11. Aggregate write-ins for invested assets.....	.0	.0	.0	.0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	141,665,751	357,476	141,308,275	124,402,422
13. Title plants less \$.....0 charged off (for Title insurers only).....			.0	
14. Investment income due and accrued.....	2,210,110		2,210,110	1,955,171
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	13,618,813	4,301,437	9,317,376	7,788,169
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	68,763,360		68,763,360	54,938,351
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			.0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	5,018,760		5,018,760	3,377,736
16.2 Funds held by or deposited with reinsured companies.....			.0	
16.3 Other amounts receivable under reinsurance contracts.....			.0	
17. Amounts receivable relating to uninsured plans.....			.0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			.0	
18.2 Net deferred tax asset.....	5,671,039	4,661	5,666,378	4,645,307
19. Guaranty funds receivable or on deposit.....			.0	
20. Electronic data processing equipment and software.....			.0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....			.0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			.0	
23. Receivables from parent, subsidiaries and affiliates.....			.0	
24. Health care (\$.....0) and other amounts receivable.....			.0	
25. Aggregate write-ins for other than invested assets.....	1,580,041	25,328	1,554,713	1,215,392
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	238,527,874	4,688,902	233,838,972	198,322,548
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.0	
28. TOTALS (Lines 26 and 27).....	238,527,874	4,688,902	233,838,972	198,322,548

DETAILS OF WRITE-INS				
1101. ....			.0	
1102. ....			.0	
1103. ....			.0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	.0	.0	.0	.0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	.0	.0	.0	.0
2501. STATE TAX CREDITS.....	797,328		797,328	683,060
2502. STATE UNEARNED SURCHARGE RECOVERABLE.....	757,385		757,385	532,332
2503. MISCELLANEOUS OTHER ASSETS.....	19,405	19,405	.0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	5,923	5,923	.0	.0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	1,580,041	25,328	1,554,713	1,215,392

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8).....	44,663,091	39,410,483
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6).....	240,540	659,945
3. Loss adjustment expenses (Part 2A, Line 35, Column 9).....	9,975,407	8,597,778
4. Commissions payable, contingent commissions and other similar charges.....	23,333	10,909
5. Other expenses (excluding taxes, licenses and fees).....	332,266	371,344
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	1,236,992	1,139,753
7.1 Current federal and foreign income taxes (including \$.....99 on realized capital gains (losses)).....	656,279	636,975
7.2 Net deferred tax liability.....		
8. Borrowed money \$.....0 and interest thereon \$.....0.....		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$.....106,965,155 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	38,743,974	33,671,252
10. Advance premium.....	1,206,193	1,081,859
11. Dividends declared and unpaid:		
11.1 Stockholders.....		1,000,000
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....	5,495,731	6,714,813
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19).....		
14. Amounts withheld or retained by company for account of others.....		
15. Remittances and items not allocated.....		
16. Provision for reinsurance (including \$.....0 certified) (Schedule F, Part 8).....		
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....	14,128,584	12,238,582
19. Payable to parent, subsidiaries and affiliates.....	21,358,955	19,391,564
20. Derivatives.....		
21. Payable for securities.....		
22. Payable for securities lending.....		
23. Liability for amounts held under uninsured plans.....		
24. Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	36,254,185	22,294,498
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	174,315,530	147,219,755
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	174,315,530	147,219,755
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....	2,500,400	2,500,400
31. Preferred capital stock.....		
32. Aggregate write-ins for other than special surplus funds.....	0	0
33. Surplus notes.....		
34. Gross paid in and contributed surplus.....	15,749,600	12,249,600
35. Unassigned funds (surplus).....	41,273,442	36,352,793
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39).....	59,523,442	51,102,793
38. TOTALS (Page 2, Line 28, Col. 3).....	233,838,972	198,322,548

DETAILS OF WRITE-INS		
2501. RECEIVABLE FACTORING LIABILITY.....	34,700,000	21,000,000
2502. MISCELLANEOUS OTHER LIABILITIES.....	1,219,645	927,809
2503. ESCHEATABLE PROPERTY.....	198,176	176,638
2598. Summary of remaining write-ins for Line 25 from overflow page.....	136,364	190,051
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	36,254,185	22,294,498
2901. ....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201. ....		
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
STATEMENT OF INCOME

			1	2
			Current Year	Prior Year
UNDERWRITING INCOME				
1.	Premiums earned (Part 1, Line 35, Column 4).....	DEDUCTIONS	137,425,718	125,110,878
2.	Losses incurred (Part 2, Line 35, Column 7).....		86,817,451	79,253,136
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....		15,575,207	13,741,174
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2).....		27,787,063	25,650,719
5.	Aggregate write-ins for underwriting deductions.....		0	0
6.	Total underwriting deductions (Lines 2 through 5).....		130,179,721	118,645,029
7.	Net income of protected cells.....			
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7).....		7,245,997	6,465,849
INVESTMENT INCOME				
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17).....		1,720,173	1,852,540
10.	Net realized capital gains (losses) less capital gains tax of \$.....(14,574) (Exhibit of Capital Gains (Losses)).....		15,027	521,338
11.	Net investment gain (loss) (Lines 9 + 10).....		1,735,200	2,373,878
OTHER INCOME				
12.	Net gain (loss) from agents' or premium balances charged off (amount recovered \$.....293,144 amount charged off \$.....7,435,122).....		(7,141,978)	(6,346,165)
13.	Finance and service charges not included in premiums.....		6,221,927	5,537,868
14.	Aggregate write-ins for miscellaneous income.....		33,047	31,931
15.	Total other income (Lines 12 through 14).....		(887,004)	(776,366)
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....		8,094,193	8,063,361
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).....		8,094,193	8,063,361
19.	Federal and foreign income taxes incurred.....		2,867,990	2,303,100
20.	Net income (Line 18 minus Line 19) (to Line 22).....		5,226,203	5,760,261
CAPITAL AND SURPLUS ACCOUNT				
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....		51,102,793	46,186,403
22.	Net income (from Line 20).....		5,226,203	5,760,261
23.	Net transfers (to) from Protected Cell accounts.....			
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$.....0.....			
25.	Change in net unrealized foreign exchange capital gain (loss).....			
26.	Change in net deferred income tax.....		1,025,732	228,833
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3).....		(1,331,286)	(72,704)
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.....		3,500,000	
33.2	Transferred to capital (Stock Dividend).....			
33.3.	Transferred from capital.....			
34.	Net remittances from or (to) Home Office.....			
35.	Dividends to stockholders.....			(1,000,000)
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.....		0	0
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37).....		8,420,649	4,916,390
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....		59,523,442	51,102,793
DETAILS OF WRITE-INS				
0501.	.....			
0502.	.....			
0503.	.....			
0598.	Summary of remaining write-ins for Line 5 from overflow page.....		0	0
0599.	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....		0	0
1401.	MISCELLANEOUS OTHER INCOME.....		36,645	34,083
1402.	INTEREST INCOME ON INTERCOMPANY BALANCES.....		10,829	4,724
1403.	LOSS ON RECEIVABLE FACTORING.....		(14,427)	(6,876)
1498.	Summary of remaining write-ins for Line 14 from overflow page.....		0	0
1499.	Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....		33,047	31,931
3701.	.....			
3702.	.....			
3703.	.....			
3798.	Summary of remaining write-ins for Line 37 from overflow page.....		0	0
3799.	Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....		0	0

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
CASH FLOW

		1	2
		Current Year	Prior Year
CASH FROM OPERATIONS			
1.	Premiums collected net of reinsurance.....	124,451,012	123,616,592
2.	Net investment income.....	4,265,877	4,265,501
3.	Miscellaneous income.....	(262,310)	(569,906)
4.	Total (Lines 1 through 3).....	128,454,579	127,312,186
5.	Benefit and loss related payments.....	83,625,272	75,240,021
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7.	Commissions, expenses paid and aggregate write-ins for deductions.....	41,913,928	38,441,614
8.	Dividends paid to policyholders.....		
9.	Federal and foreign income taxes paid (recovered) net of \$.....(28,696) tax on capital gains (losses).....	2,834,112	2,437,476
10.	Total (Lines 5 through 9).....	128,373,312	116,119,111
11.	Net cash from operations (Line 4 minus Line 10).....	81,267	11,193,076
CASH FROM INVESTMENTS			
12.	Proceeds from investments sold, matured or repaid:		
12.1	Bonds.....	41,004,386	44,279,602
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).....	41,004,386	44,279,602
13.	Cost of investments acquired (long-term only):		
13.1	Bonds.....	35,655,543	51,417,717
13.2	Stocks.....		
13.3	Mortgage loans.....		
13.4	Real estate.....		
13.5	Other invested assets.....	357,476	
13.6	Miscellaneous applications.....		
13.7	Total investments acquired (Lines 13.1 to 13.6).....	36,013,019	51,417,717
14.	Net increase (decrease) in contract loans and premium notes.....		
15.	Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	4,991,367	(7,138,115)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16.	Cash provided (applied):		
16.1	Surplus notes, capital notes.....		
16.2	Capital and paid in surplus, less treasury stock.....	3,500,000	
16.3	Borrowed funds.....		
16.4	Net deposits on deposit-type contracts and other insurance liabilities.....		
16.5	Dividends to stockholders.....	1,000,000	2,000,000
16.6	Other cash provided (applied).....	17,482,382	526,243
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	19,982,382	(1,473,757)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	25,055,016	2,581,204
19.	Cash, cash equivalents and short-term investments:		
19.1	Beginning of year.....	2,581,204	(0)
19.2	End of year (Line 18 plus Line 19.1).....	27,636,220	2,581,204

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

20.0001		
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PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

Line of Business		1  Net Premiums Written per Column 6, Part 1B	2  Unearned Premiums December 31 Prior Year- per Col. 3, Last Year's Part 1	3  Unearned Premiums December 31 Current Year- per Col. 5, Part 1A	4  Premiums Earned During Year (Cols. 1 + 2 - 3)
1.	Fire.....				.....0
2.	Allied lines.....				.....0
3.	Farmowners multiple peril.....				.....0
4.	Homeowners multiple peril.....	.....(10)	.....53		.....43
5.	Commercial multiple peril.....				.....0
6.	Mortgage guaranty.....				.....0
8.	Ocean marine.....				.....0
9.	Inland marine.....	.....1,519,638	.....635,837	.....708,815	.....1,446,661
10.	Financial guaranty.....				.....0
11.1	Medical professional liability - occurrence.....				.....0
11.2	Medical professional liability - claims-made.....				.....0
12.	Earthquake.....				.....0
13.	Group accident and health.....				.....0
14.	Credit accident and health (group and individual).....				.....0
15.	Other accident and health.....				.....0
16.	Workers' compensation.....				.....0
17.1	Other liability - occurrence.....	.....534,535	.....237,125	.....249,440	.....522,220
17.2	Other liability - claims-made.....	.....100	.....8	.....8	.....100
17.3	Excess workers' compensation.....				.....0
18.1	Products liability - occurrence.....				.....0
18.2	Products liability - claims-made.....				.....0
19.1, 19.2	Private passenger auto liability.....	.....91,516,947	.....21,077,582	.....24,131,773	.....88,462,757
19.3, 19.4	Commercial auto liability.....	.....718,531	.....300,915	.....352,415	.....667,031
21.	Auto physical damage.....	.....48,208,699	.....11,419,732	.....13,301,523	.....46,326,908
22.	Aircraft (all perils).....				.....0
23.	Fidelity.....				.....0
24.	Surety.....				.....0
26.	Burglary and theft.....				.....0
27.	Boiler and machinery.....				.....0
28.	Credit.....				.....0
29.	International.....				.....0
30.	Warranty.....				.....0
31.	Reinsurance - nonproportional assumed property.....				.....0
32.	Reinsurance - nonproportional assumed liability.....				.....0
33.	Reinsurance - nonproportional assumed financial lines.....				.....0
34.	Aggregate write-ins for other lines of business.....	.....0	.....0	.....0	.....0
35.	TOTALS.....	.....142,498,441	.....33,671,252	.....38,743,974	.....137,425,719

DETAILS OF WRITE-INS

3401.	.....				.....0
3402.	.....				.....0
3403.	.....				.....0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	.....0	.....0	.....0	.....0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	.....0	.....0	.....0	.....0

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business		1	2	3	4	5
		Amount Unearned (Running One Year or Less from Date of Policy) (a)	Amount Unearned (Running More Than One Year from Date of Policy) (a)	Earned But Unbilled Premium	Reserve for Rate Credits and Retrospective Adjustments Based on Experience	Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1.	Fire.....	.....	.....	.....	.....	.....0
2.	Allied lines.....	.....	.....	.....	.....	.....0
3.	Farmowners multiple peril.....	.....	.....	.....	.....	.....0
4.	Homeowners multiple peril.....	.....	.....	.....	.....	.....0
5.	Commercial multiple peril.....	.....	.....	.....	.....	.....0
6.	Mortgage guaranty.....	.....	.....	.....	.....	.....0
8.	Ocean marine.....	.....	.....	.....	.....	.....0
9.	Inland marine.....	.....708,815	.....	.....	.....	.....708,815
10.	Financial guaranty.....	.....	.....	.....	.....	.....0
11.1	Medical professional liability - occurrence.....	.....	.....	.....	.....	.....0
11.2	Medical professional liability - claims-made.....	.....	.....	.....	.....	.....0
12.	Earthquake.....	.....	.....	.....	.....	.....0
13.	Group accident and health.....	.....	.....	.....	.....	.....0
14.	Credit accident and health (group and individual).....	.....	.....	.....	.....	.....0
15.	Other accident and health.....	.....	.....	.....	.....	.....0
16.	Workers' compensation.....	.....	.....	.....	.....	.....0
17.1	Other liability - occurrence.....	.....249,440	.....	.....	.....	.....249,440
17.2	Other liability - claims-made.....	.....8	.....	.....	.....	.....8
17.3	Excess workers' compensation.....	.....	.....	.....	.....	.....0
18.1	Products liability - occurrence.....	.....	.....	.....	.....	.....0
18.2	Products liability - claims-made.....	.....	.....	.....	.....	.....0
19.1, 19.2	Private passenger auto liability.....	.....24,131,773	.....	.....	.....	.....24,131,773
19.3, 19.4	Commercial auto liability.....	.....352,415	.....	.....	.....	.....352,415
21.	Auto physical damage.....	.....13,301,523	.....	.....	.....	.....13,301,523
22.	Aircraft (all perils).....	.....	.....	.....	.....	.....0
23.	Fidelity.....	.....	.....	.....	.....	.....0
24.	Surety.....	.....	.....	.....	.....	.....0
26.	Burglary and theft.....	.....	.....	.....	.....	.....0
27.	Boiler and machinery.....	.....	.....	.....	.....	.....0
28.	Credit.....	.....	.....	.....	.....	.....0
29.	International.....	.....	.....	.....	.....	.....0
30.	Warranty.....	.....	.....	.....	.....	.....0
31.	Reinsurance - nonproportional assumed property.....	.....	.....	.....	.....	.....0
32.	Reinsurance - nonproportional assumed liability.....	.....	.....	.....	.....	.....0
33.	Reinsurance - nonproportional assumed financial lines.....	.....	.....	.....	.....	.....0
34.	Aggregate write-ins for other lines of business.....	.....0	.....0	.....0	.....0	.....0
35.	TOTALS.....	.....38,743,974	.....0	.....0	.....0	.....38,743,974
36.	Accrued retrospective premiums based on experience.....					.....
37.	Earned but unbilled premiums.....					.....0
38.	Balance (sum of Lines 35 through 37).....					.....38,743,974

DETAILS OF WRITE-INS

3401.	.....	.....	.....	.....	.....0
3402.	.....	.....	.....	.....	.....0
3403.	.....	.....	.....	.....	.....0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	.....0	.....0	.....0	.....0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	.....0	.....0	.....0	.....0

(a) State here basis of computation used in each case: Pro Rata



PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
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.....						.....0
2.	Allied lines.....						.....0
3.	Farmowners multiple peril.....						.....0
4.	Homeowners multiple peril.....		(10)				.....(10)
5.	Commercial multiple peril.....						.....0
6.	Mortgage guaranty.....						.....0
8.	Ocean marine.....						.....0
9.	Inland marine.....	.....2,022,781	.....1,519,638		.....2,022,781		.....1,519,638
10.	Financial guaranty.....						.....0
11.1	Medical professional liability - occurrence.....						.....0
11.2	Medical professional liability - claims-made.....						.....0
12.	Earthquake.....						.....0
13.	Group accident and health.....						.....0
14.	Credit accident and health (group and individual).....						.....0
15.	Other accident and health.....						.....0
16.	Workers' compensation.....						.....0
17.1	Other liability - occurrence.....	.....884,420	.....534,535		.....867,323	.....17,097	.....534,535
17.2	Other liability - claims-made.....		.....100				.....100
17.3	Excess workers' compensation.....						.....0
18.1	Products liability - occurrence.....						.....0
18.2	Products liability - claims-made.....						.....0
19.1, 19.2	Private passenger auto liability.....	.....239,315,160	.....91,516,946		.....201,797,965	.....37,517,194	.....91,516,947
19.3, 19.4	Commercial auto liability.....	.....1,392,964	.....718,531		.....1,392,964		.....718,531
21.	Auto physical damage.....	.....149,530,394	.....48,208,699		.....149,530,394		.....48,208,699
22.	Aircraft (all perils).....						.....0
23.	Fidelity.....						.....0
24.	Surety.....						.....0
26.	Burglary and theft.....						.....0
27.	Boiler and machinery.....						.....0
28.	Credit.....						.....0
29.	International.....						.....0
30.	Warranty.....						.....0
31.	Reinsurance - nonproportional assumed property.....	.....XXX					.....0
32.	Reinsurance - nonproportional assumed liability.....	.....XXX					.....0
33.	Reinsurance - nonproportional assumed financial lines.....	.....XXX					.....0
34.	Aggregate write-ins for other lines of business.....	.....0	.....0	.....0	.....0	.....0	.....0
35.	TOTALS.....	.....393,145,719	.....142,498,440	.....0	.....355,611,427	.....37,534,291	.....142,498,441

DETAILS OF WRITE-INS

3401.	.....						.....0
3402.	.....						.....0
3403.	.....						.....0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	.....0	.....0	.....0	.....0	.....0	.....0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	.....0	.....0	.....0	.....0	.....0	.....0

(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 \$.....0.  
2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$.....0.

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2 - LOSSES PAID AND INCURRED**

		Losses Paid Less Salvage				5	6	7	8
		1	2	3	4				
Line of Business		Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1.	Fire.....				0			0	0.0
2.	Allied lines.....				0			0	0.0
3.	Farmowners multiple peril.....				0			0	0.0
4.	Homeowners multiple peril.....		611		611	237	2,110	(1,263)	(2,914.8)
5.	Commercial multiple peril.....				0			0	0.0
6.	Mortgage guaranty.....				0			0	0.0
8.	Ocean marine.....				0			0	0.0
9.	Inland marine.....	745,236	635,108	745,236	635,108	67,607	68,622	634,093	43.8
10.	Financial guaranty.....				0			0	0.0
11.1	Medical professional liability - occurrence.....				0			0	0.0
11.2	Medical professional liability - claims-made.....				0			0	0.0
12.	Earthquake.....				0			0	0.0
13.	Group accident and health.....				0			0	0.0
14.	Credit accident and health (group and individual).....				0			0	0.0
15.	Other accident and health.....				0			0	0.0
16.	Workers' compensation.....				0			0	0.0
17.1	Other liability - occurrence.....	154,972	135,055	154,972	135,055	173,430	174,232	134,253	25.7
17.2	Other liability - claims-made.....		141,000		141,000	14,504	21,365	134,140	134,516.2
17.3	Excess workers' compensation.....				0			0	0.0
18.1	Products liability - occurrence.....				0			0	0.0
18.2	Products liability - claims-made.....				0			0	0.0
19.1, 19.2	Private passenger auto liability.....	137,023,111	46,938,775	137,023,110	46,938,776	43,953,686	38,563,316	52,329,146	59.2
19.3, 19.4	Commercial auto liability.....	706,569	437,456	706,569	437,456	475,098	542,436	370,119	55.5
21.	Auto physical damage.....	91,121,581	33,276,839	91,121,581	33,276,839	(21,472)	38,403	33,216,965	71.7
22.	Aircraft (all perils).....				0			0	0.0
23.	Fidelity.....				0			0	0.0
24.	Surety.....				0			0	0.0
26.	Burglary and theft.....				0			0	0.0
27.	Boiler and machinery.....				0			0	0.0
28.	Credit.....				0			0	0.0
29.	International.....				0			0	0.0
30.	Warranty.....				0			0	0.0
31.	Reinsurance - nonproportional assumed property.....	XXX			0			0	0.0
32.	Reinsurance - nonproportional assumed liability.....	XXX			0			0	0.0
33.	Reinsurance - nonproportional assumed financial lines.....	XXX			0			0	0.0
34.	Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0.0
35.	TOTALS.....	229,751,469	81,564,844	229,751,468	81,564,845	44,663,091	39,410,483	86,817,452	63.2
DETAILS OF WRITE-INS									
3401.	.....				0			0	0.0
3402.	.....				0			0	0.0
3403.	.....				0			0	0.0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	XXX
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0.0

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES**

		Reported Losses				Incurred But Not Reported			8	9
		1	2	3	4	5	6	7		
Line of Business		Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excluding Incurred but not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1.	Fire.....				.0				.0	
2.	Allied lines.....				.0				.0	
3.	Farmowners multiple peril.....				.0				.0	
4.	Homeowners multiple peril.....				.0		237		237	79
5.	Commercial multiple peril.....				.0				.0	
6.	Mortgage guaranty.....				.0				.0	
8.	Ocean marine.....				.0				.0	
9.	Inland marine.....	56,102	36,525	56,102	36,525	45,881	31,082	45,881	67,607	13,419
10.	Financial guaranty.....				.0				.0	
11.1	Medical professional liability - occurrence.....				.0				.0	
11.2	Medical professional liability - claims-made.....				.0				.0	
12.	Earthquake.....				.0				.0	
13.	Group accident and health.....				.0				(a).0	
14.	Credit accident and health (group and individual).....				.0				.0	
15.	Other accident and health.....				.0				(a).0	
16.	Workers' compensation.....				.0				.0	
17.1	Other liability - occurrence.....	88,989	124,974	88,989	124,974	86,107	48,456	86,107	173,430	30,465
17.2	Other liability - claims-made.....				.0		14,504		14,504	2,376
17.3	Excess workers' compensation.....				.0				.0	
18.1	Products liability - occurrence.....				.0				.0	
18.2	Products liability - claims-made.....				.0				.0	
19.1, 19.2	Private passenger auto liability.....	90,005,716	34,597,579	90,005,716	34,597,579	21,837,791	9,356,108	21,837,791	43,953,686	9,429,782
19.3, 19.4	Commercial auto liability.....	1,197,246	382,953	1,197,246	382,953	182,200	92,145	182,200	475,098	66,277
21.	Auto physical damage.....	4,963,481	1,840,384	4,963,481	1,840,384	(4,614,491)	(1,861,856)	(4,614,491)	(21,472)	433,011
22.	Aircraft (all perils).....				.0				.0	
23.	Fidelity.....				.0				.0	
24.	Surety.....				.0				.0	
26.	Burglary and theft.....				.0				.0	
27.	Boiler and machinery.....				.0				.0	
28.	Credit.....				.0				.0	
29.	International.....				.0				.0	
30.	Warranty.....				.0				.0	
31.	Reinsurance - nonproportional assumed property.....	.XXX.			.0	.XXX			.0	
32.	Reinsurance - nonproportional assumed liability.....	.XXX.			.0	.XXX			.0	
33.	Reinsurance - nonproportional assumed financial lines.....	.XXX.			.0	.XXX			.0	
34.	Aggregate write-ins for other lines of business.....	0	0	0	.0	.0	.0	.0	.0	.0
35.	TOTALS.....	96,311,534	36,982,415	96,311,534	36,982,415	17,537,488	7,680,676	17,537,488	44,663,091	9,975,407
DETAILS OF WRITE-INS										
3401.	.....				.0				.0	
3402.	.....				.0				.0	
3403.	.....				.0				.0	
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	.0	.0	.0	.0	.0	.0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	.0	.0	.0	.0	.0	.0

(a) Including \$.0 for present value of life indemnity claims.

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
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.....	5,241,834			5,241,834
1.2 Reinsurance assumed.....	2,389,892			2,389,892
1.3 Reinsurance ceded.....	5,241,834			5,241,834
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3).....	2,389,892	0	0	2,389,892
2. Commission and brokerage:				
2.1 Direct, excluding contingent.....		1,208,882		1,208,882
2.2 Reinsurance assumed, excluding contingent.....		149,281		149,281
2.3 Reinsurance ceded, excluding contingent.....		1,208,882		1,208,882
2.4 Contingent - direct.....		58,242		58,242
2.5 Contingent - reinsurance assumed.....		27,321		27,321
2.6 Contingent - reinsurance ceded.....		58,242		58,242
2.7 Policy and membership fees.....				0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7).....	0	176,602	0	176,602
3. Allowances to manager and agents.....		45		45
4. Advertising.....	1,906	10,289,019		10,290,925
5. Boards, bureaus and associations.....	41,590	44,243		85,832
6. Surveys and underwriting reports.....		1,084,291		1,084,291
7. Audit of assureds' records.....				0
8. Salary and related items:				
8.1 Salaries.....	8,840,586	7,823,884	87,490	16,751,959
8.2 Payroll taxes.....	619,382	579,669	2,738	1,201,789
9. Employee relations and welfare.....	1,550,603	1,196,364	3,537	2,750,503
10. Insurance.....	27,246	25,387		52,633
11. Directors' fees.....				0
12. Travel and travel items.....	399,145	182,538	476	582,160
13. Rent and rent items.....	553,076	736,855	1,999	1,291,930
14. Equipment.....	54,247	173,124		227,370
15. Cost or depreciation of EDP equipment and software.....	519,981	1,069,966	1,290	1,591,237
16. Printing and stationery.....	54,717	134,350	204	189,272
17. Postage, telephone and telegraph, exchange and express.....	406,300	1,052,981	539	1,459,821
18. Legal and auditing.....	83,679	137,488	9,119	230,286
19. Totals (Lines 3 to 18).....	13,152,458	24,530,202	107,392	37,790,052
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$.....661.....		2,253,364		2,253,364
20.2 Insurance department licenses and fees.....	19,463	120,059		139,522
20.3 Gross guaranty association assessments.....		3,137		3,137
20.4 All other (excluding federal and foreign income and real estate).....	3,126	602,920		606,046
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4).....	22,589	2,979,479	0	3,002,069
21. Real estate expenses.....				0
22. Real estate taxes.....				0
23. Reimbursements by uninsured plans.....				0
24. Aggregate write-ins for miscellaneous expenses.....	10,268	100,780	19,163	130,210
25. Total expenses incurred.....	15,575,207	27,787,064	126,555	(a).....43,488,825
26. Less unpaid expenses - current year.....	9,975,407	1,591,369	1,223	11,567,999
27. Add unpaid expenses - prior year.....	8,597,778	1,520,655	1,351	10,119,784
28. Amounts receivable relating to uninsured plans, prior year.....				0
29. Amounts receivable relating to uninsured plans, current year.....				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29).....	14,197,578	27,716,350	126,683	42,040,611

DETAILS OF WRITE-INS

2401. MISCELLANEOUS EXPENSES.....	10,268	100,780	19,163	130,210
2402. ....				0
2403. ....				0
2498. Summary of remaining write-ins for Line 24 from overflow page.....	0	0	0	0
2499. Totals (Lines 2401 thru 2403 plus 2498) (Line 24 above).....	10,268	100,780	19,163	130,210

(a) Includes management fees of \$.....37,920,263 to affiliates and \$.....0 to non-affiliates.

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
1.	U.S. government bonds.....	(a).....59,343	.....45,815
1.1	Bonds exempt from U.S. tax.....	(a).....2,095,781	.....1,760,914
1.2	Other bonds (unaffiliated).....	(a).....	.....
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).....(563,334)	.....39,999
7.	Derivative instruments.....	(f).....	.....
8.	Other invested assets.....	.....	.....
9.	Aggregate write-ins for investment income.....	.....0	.....0
10.	Total gross investment income.....	.....1,591,790	.....1,846,728
11.	Investment expenses.....		(g).....126,555
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).....0
15.	Aggregate write-ins for deductions from investment income.....		.....0
16.	Total deductions (Lines 11 through 15).....		.....126,555
17.	Net investment income (Line 10 minus Line 16).....		.....1,720,173

DETAILS OF WRITE-INS		
0901.	.....	.....
0902.	.....	.....
0903.	.....	.....
0998.	Summary of remaining write-ins for Line 9 from overflow page.....	.....0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0
1501.	.....	.....
1502.	.....	.....
1503.	.....	.....
1598.	Summary of remaining write-ins for Line 15 from overflow page.....	.....0
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above).....	.....0
(a)	Includes \$.....852 accrual of discount less \$.....2,801,623 amortization of premium and less \$.....165,456 paid for accrued interest on purchases.	
(b)	Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.	
(c)	Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.	
(d)	Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.	
(e)	Includes \$.....0 accrual of discount less \$....688,334 amortization of premium and less \$.....0 paid for accrued interest on purchases.	
(f)	Includes \$.....0 accrual of discount less \$.....0 amortization of premium.	
(g)	Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.	
(h)	Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.	
(i)	Includes \$.....0 depreciation on real estate and \$.....0 depreciation on other invested assets.	

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. government bonds.....	.....	.....0	.....	.....
1.1	Bonds exempt from U.S. tax.....	.....453	.....453	.....	.....
1.2	Other bonds (unaffiliated).....	.....	.....0	.....	.....
1.3	Bonds of affiliates.....	.....	.....0	.....	.....
2.1	Preferred stocks (unaffiliated).....	.....	.....0	.....	.....
2.11	Preferred stocks of affiliates.....	.....	.....0	.....	.....
2.2	Common stocks (unaffiliated).....	.....	.....0	.....	.....
2.21	Common stocks of affiliates.....	.....	.....0	.....	.....
3.	Mortgage loans.....	.....	.....0	.....	.....
4.	Real estate.....	.....	.....0	.....	.....
5.	Contract loans.....	.....	.....0	.....	.....
6.	Cash, cash equivalents and short-term investments.....	.....	.....0	.....	.....
7.	Derivative instruments.....	.....	.....0	.....	.....
8.	Other invested assets.....	.....	.....0	.....	.....
9.	Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0
10.	Total capital gains (losses).....	.....453	.....453	.....0	.....0
DETAILS OF WRITE-INS					
0901.	.....	.....	.....0	.....	.....
0902.	.....	.....	.....0	.....	.....
0903.	.....	.....	.....0	.....	.....
0998.	Summary of remaining write-ins for Line 9 from overflow page....	.....0	.....0	.....0	.....0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0	.....0	.....0

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			.....0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			.....0
2.2 Common stocks.....			.....0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			.....0
3.2 Other than first liens.....			.....0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			.....0
4.2 Properties held for the production of income.....			.....0
4.3 Properties held for sale.....			.....0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			.....0
6. Contract loans.....			.....0
7. Derivatives (Schedule DB).....			.....0
8. Other invested assets (Schedule BA).....	.....357,476		.....(357,476)
9. Receivables for securities.....			.....0
10. Securities lending reinvested collateral assets (Schedule DL).....			.....0
11. Aggregate write-ins for invested assets.....	.....0	.....0	.....0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	.....357,476	.....0	.....(357,476)
13. Title plants (for Title insurers only).....			.....0
14. Investment income due and accrued.....			.....0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....	.....4,301,437	.....3,327,667	.....(973,770)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			.....0
15.3 Accrued retrospective premiums and contracts subject to redetermination.....			.....0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....			.....0
16.2 Funds held by or deposited with reinsured companies.....			.....0
16.3 Other amounts receivable under reinsurance contracts.....			.....0
17. Amounts receivable relating to uninsured plans.....			.....0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			.....0
18.2 Net deferred tax asset.....	.....4,661		.....(4,661)
19. Guaranty funds receivable or on deposit.....			.....0
20. Electronic data processing equipment and software.....			.....0
21. Furniture and equipment, including health care delivery assets.....			.....0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			.....0
23. Receivables from parent, subsidiaries and affiliates.....			.....0
24. Health care and other amounts receivable.....			.....0
25. Aggregate write-ins for other than invested assets.....	.....25,328	.....29,949	.....4,621
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	.....4,688,902	.....3,357,616	.....(1,331,286)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.....0
28. TOTALS (Lines 26 and 27).....	.....4,688,902	.....3,357,616	.....(1,331,286)

DETAILS OF WRITE-INS

1101. ....			.....0
1102. ....			.....0
1103. ....			.....0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	.....0	.....0	.....0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	.....0	.....0	.....0
2501. MISCELLANEOUS OTHER ASSETS.....	.....19,405	.....23,539	.....4,134
2502. PREPAID EXPENSES.....	.....5,923	.....6,410	.....487
2503. ....			.....0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	.....0	.....0	.....0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	.....25,328	.....29,949	.....4,621

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies

A. Accounting Practices

The accompanying statutory-basis financial statements of Progressive Premier Insurance Company of Illinois (the “Company”) were prepared on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance (“DOI”).

The Ohio DOI requires insurance companies domiciled in the state of Ohio to prepare their statutory-basis 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 Ohio DOI. No deviations from NAIC statutory accounting practices (“NAIC SAP”) were used in preparing these statutory-basis financial statements as illustrated in the table below:

Description	State of Domicile	2015	2014
Net income			
(1) Net income, state basis	OH	\$ 5,226,203	\$ 5,760,261
(2) Effect of state prescribed practices			
(3) Effect of state permitted practices			
(4) Net income, NAIC SAP basis (1-2-3=4)	OH	\$ 5,226,203	\$ 5,760,261
Surplus			
(5) Policyholders' surplus, state basis	OH	\$ 59,523,442	\$ 51,102,793
(6) Effect of state prescribed practices			
(7) Effect of state permitted practices			
(8) Policyholders' surplus, NAIC SAP basis (5-6-7=8)	OH	\$ 59,523,442	\$ 51,102,793

B. Use of Estimates

The Company is required to make estimates and assumptions when preparing its financial statements and accompanying notes in conformity with NAIC SAP. Actual results may differ from those estimates. Material estimates that are susceptible to significant changes in the near term include the loss and loss adjustment expense (“LAE”) reserves.

C. Accounting Policies

Insurance premiums written are being earned into income on a pro-rata basis over the period of risk based on a daily earnings convention. Unearned premiums are established to cover the unexpired portion of premiums written. The Company offers a variety of payment plans to meet individual customer needs. Generally, insurance premiums are collected in advance of providing risk coverage, minimizing the Company’s exposure to credit risk.

Acquisition costs, such as agents’ commissions, premium taxes, and other policy initiation costs, are charged to operations as incurred. Advertising costs are expensed as incurred.

Certain assets designated as “nonadmitted assets”, in accordance with Statement of Statutory Accounting Principles (“SSAP”) No. 4, Assets and Nonadmitted Assets, are reported on page 13, Exhibit of Nonadmitted Assets. The change in nonadmitted assets is charged directly against surplus as regards policyholders on page 4, Statement of Income, capital and surplus section.

In addition, the Company uses the following accounting policies:

Investments

- Cash and cash equivalents include bank accounts and certificates of deposit as well as short-term investments with original maturities of three months or less that are reported at amortized cost which approximates market value.
- Short-term investments include securities acquired within one year of maturity except for those with original maturities of three months or less (see cash and cash equivalents above) and are reported at amortized cost which approximates market value.
- Investment grade bond valuations are based on NAIC designations or NAIC Credit Rating Provider (“CRP”) designations from the Acceptable Rating Organization (“ARO”) list and are reported at amortized cost using the scientific method which closely approximates the effective interest method. Non-investment grade bond valuations are also based on NAIC designations or NAIC CRP-ARO designations and are reported at the lower of amortized cost or fair market value. Loan-backed and structured securities follow the guidance prescribed by SSAP No. 43R, Loan-backed and Structured Securities (“SSAP No. 43R”), for the determination of the bond valuation and reporting designation. The difference between the original cost and redemption value of these securities is recognized over the lives of the respective issues and included in net investment gain.
- Common stocks, other than investments in stocks of subsidiaries and affiliates, are reported at fair market values based on active market closing quotations from a regulated exchange. Changes in the fair market values of these securities are reflected directly as unrealized gains or losses in statutory surplus, net of deferred income taxes.
- Non-redeemable preferred stocks are reported at fair market values. Changes in the fair market values of these securities are reflected directly as unrealized gains or losses in statutory surplus, net of deferred income taxes. Investment grade redeemable preferred stocks are reported at amortized cost, while non-investment grade redeemable preferred stocks are reported at the lower of amortized cost or fair market value. The difference between the original cost and redemption value of the redeemable preferred securities is recognized using the scientific method, which closely approximates the effective interest method, over the lives of the respective issues and included in net investment gain.
- The fair market values reported are derived from independent and observable market input evaluations provided by reputable pricing services, independent broker/dealer bid lists, independent broker/dealer quotations, independent broker/dealer pricing services, or active market closing quotations from a regulated exchange. In very rare cases, if none of the aforementioned primary sources are available, matrix pricing using the reporting entity’s own market based assumptions may be utilized. The approved methods for computation of fair market value are prescribed in Part Five of the Securities Valuation Office Purposes and Procedures Manual.
- The Company has no investments in mortgage loans.
- Loan-backed and structured securities are accounted for as prescribed by SSAP No. 43R. These securities are generally stated at amortized cost as determined by the estimated value of future cash flows. Prepayment assumptions for loan-backed and structured debt securities are obtained from available market data, broker/dealers, and/or internal estimates, and are consistent with current interest rate and economic trends.
- The Company has no investments in joint ventures, partnerships, or limited liability companies.
- The Company has no investments in derivatives.

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NOTES TO FINANCIAL STATEMENTS

- The Company owns 36.1% interest of the Churchill Stateside North Carolina Tax Credit Fund IV, LLC., a non-insurance affiliate incorporated in Florida. In accordance with SSAP No. 4 – Assets and Nonadmitted Assets, this investment is reported as other invested assets in the Company’s statutory-basis financial statements (see Schedule BA). This investment is reported on the equity basis as prescribed in the *Accounting Practices and Procedures Manual* of the NAIC. See Note 21.C.1.
- The Company may enter into repurchase agreements in which it borrows cash by providing certain underlying securities as collateral for the arrangement. The cash borrowed is invested in cash equivalents and an offsetting liability is established. The cash equivalent investment maturities and the term of the borrowing arrangement on the collateralized securities match, eliminating duration risk exposure to the Company. The Company did not have any open repurchase agreements at December 31, 2015 and December 31, 2014.
- Realized gains and losses on sales of securities are computed based on the first-in, first-out method.
- The Company’s management routinely monitors individual securities in its investment portfolio for pricing changes that might indicate potential impairments and performs detailed reviews of securities with unrealized losses based on predetermined guidelines to determine whether a decline in the value of a security is other-than-temporary. A review for other-than-temporary impairment (“OTTI”) requires making certain judgments regarding the materiality of the decline, its effect on the financial statements, the probability, extent, and timing of a valuation recovery, and the Company’s ability and intent to hold the security. The scope of this review is broad and requires a forward-looking assessment of the fundamental characteristics of a security, as well as the market-related prospects of the issuer and its industry.

Management assesses valuation declines to determine the extent to which such changes are attributable to (i) fundamental factors specific to the issuer, such as financial conditions, business prospects or other factors, or (ii) market-related factors such as interest rates or equity market declines (i.e., negative returns at either a sector index level or the broader market level), or (iii) credit-related losses where the present value of cash flows expected to be collected are lower than the amortized cost basis of the security (includes only those securities covered under SSAP No. 43R). This evaluation reflects management’s assessment of current conditions, as well as predictions of uncertain future events that may have a material effect on the financial statements related to security valuation.

When persuasive evidence exists that causes management to conclude that a decline in fair value is other-than-temporary, the book value of such security is written down and recognized as a realized loss. All other unrealized gains or losses are reflected in statutory surplus.

Loss, Loss Adjustment Expense, and Premium Deficiency Reserves

- Loss reserves represent the estimated liability on claims reported to the Company, plus reserves for losses incurred but not yet reported (“IBNR”). These estimates are reported net of amounts recoverable from salvage and subrogation. LAE reserves represent the estimated expenses required to settle reported claims and IBNR losses. Such loss and LAE reserves could be susceptible to significant change in the near term. The Company conducts extensive reviews each month on portions of its business to help ensure that the Company is meeting its objective of always having reserves that are adequate with minimal variation. Results would differ if different assumptions were made (see Note 25).
- The Company does anticipate investment income when evaluating the need for premium deficiency reserves. See Note 30.

Capitalization of Assets

- Prepaid assets above a \$100,000 threshold are capitalized. Under certain circumstances, the Company may decide to establish a prepaid expense for amounts less than the threshold. Prepaid assets are nonadmitted. There have been no changes to the written policy or predefined capitalization threshold from the prior year.

Pharmaceutical Rebate Receivables

- The Company does not write medical insurance or prescription drug coverage.

D. Going Concern

Management continuously monitors the Company’s financial results and compliance with regulatory requirements and found no reason to expect the Company to not continue as a going concern.

2. Accounting Changes and Corrections of Errors

Not applicable

3. Business Combinations and Goodwill

Not applicable

4. Discontinued Operations

Not applicable

5. Investments

A. Mortgage Loans, Including Mezzanine Real Estate Loans

Not applicable

B. Troubled Debt Restructuring for Creditors

Not applicable

C. Reverse Mortgages

Not applicable

D. Loan-Backed Securities

The Company does not own any loan-backed or structured debt securities.

E. Repurchase Agreements and/or Securities Lending Transactions

Not applicable (see Note 1.C Investments)



PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NOTES TO FINANCIAL STATEMENTS

- F. Real Estate
- Not applicable
- G. Low Income Housing Tax Credits
- Not applicable
- H. Restricted assets (including pledged) summarized by restricted asset category are as follows:

	Gross Restricted								Percentage	
	Current Year					6	7	8	9	10
	1	2	3	4	5					
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1plus 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%
b. Collateral held under security lending agreements	--	--	--	--	--	--	--	--	0%	0%
c. Subject to repurchase agreements	--	--	--	--	--	--	--	--	0%	0%
d. Subject to reverse repurchase agreements	--	--	--	--	--	--	--	--	0%	0%
e. Subject to dollar repurchase agreements	--	--	--	--	--	--	--	--	0%	0%
f. Subject to dollar reverse repurchase agreements	--	--	--	--	--	--	--	--	0%	0%
g. Placed under option contracts	--	--	--	--	--	--	--	--	0%	0%
h. Letter stock or securities restricted as to sale – excluding FHLB capital stock	--	--	--	--	--	--	--	--	0%	0%
i. FHLB capital	--	--	--	--	--	--	--	--	0%	0%
j. On deposit with states	3,614,938	--	--	--	3,614,938	3,549,148	65,790	3,614,938	1.52%	1.55%
k. On deposit with other regulatory bodies	--	--	--	--	--	--	--	--	0%	0%
l. Pledged as collateral to FHLB (including assets backing funding agreements)	--	--	--	--	--	--	--	--	0%	0%
m. Pledged as collateral not captured in other categories	--	--	--	--	--	--	--	--	0%	0%
n. Other restricted assets	--	--	--	--	--	--	--	--	0%	0%
o. Total Restricted Assets	\$ 3,614,938	\$ --	\$ --	\$ --	\$ 3,614,938	\$ 3,549,148	\$ 65,790	\$ 3,614,938	1.52%	1.55%

(a) Subset of column 1

(b) Subset of column 3

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (from above table)
- 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

6. Joint Ventures, Partnerships and Limited Liability Companies

- A. Detail for Those Greater than 10% of Admitted Assets
- The Company has an investment in a limited liability company (“LLC”) but it does not exceed 10% of the Company’s admitted assets (see Note 1.C).
- B. Write-downs for Impairment of Joint Ventures, Partnerships, and LLC’s
- The Company did not recognize any impairment write-down for its investment in the LLC during the statement periods.

7. Investment Income

- A. Accrued Investment Income
- The Company nonadmits investment income due and accrued if the amounts are greater than 90 days past due.

- B.           Amounts Nonadmitted
- Not applicable
8.           Derivative Instruments
- Not applicable
9.           Income Taxes
- A.           Components of the net deferred tax asset (liability) ("DTA"/"(DTL)")
1.           The components of the net DTA/(DTL) at December 31 are as follows:

Description	December 31, 2015			December 31, 2014			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary Income	Capital Gain (Loss)	(Col 1+2) Total	Ordinary Income	Capital Gain (Loss)	(Col 4+5) Total	(Col 1-4) Ordinary Income	(Col 2-5) Capital Gain (Loss)	(Col 7+8) Total
(a) Gross deferred tax assets	\$ 5,708,302	\$ --	\$ 5,708,302	\$ 4,693,490	\$ --	\$ 4,693,490	\$ 1,014,812	\$ --	\$ 1,014,812
(b) Statutory valuation allowance adjustment	--	--	--	--	--	--	--	--	--
(c) Adjusted gross deferred tax assets (1a-1b)	\$ 5,708,302	\$ --	\$ 5,708,302	\$ 4,693,490	\$ --	\$ 4,693,490	\$ 1,014,812	\$ --	\$ 1,014,812
(d) Deferred tax assets nonadmitted	4,661	--	4,661	--	--	--	4,661	--	4,661
(e) Subtotal (net deferred tax asset) (1c-1d)	\$ 5,703,641	\$ --	\$ 5,703,641	\$ 4,693,490	\$ --	\$ 4,693,490	\$ 1,010,151	\$ --	\$ 1,010,151
(f) Deferred tax liabilities	36,426	837	37,263	42,643	5,540	48,183	(6,217)	(4,703)	(10,920)
(g) Net admitted deferred tax assets (net deferred tax liability) (1e-1f)	\$ 5,667,215	\$ (837)	\$ 5,666,378	\$ 4,650,847	\$ (5,540)	\$ 4,645,307	\$ 1,016,368	\$ 4,703	\$ 1,021,071

2.           The admission calculation components of the DTA in accordance with SSAP No. 101, Income Taxes, are as follows:

Description	December 31, 2015			December 31, 2014			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary Income	Capital Gain (Loss)	(Col 1+2) Total	Ordinary Income	Capital Gain (Loss)	(Col 4+5) Total	(Col 1-4) Ordinary Income	(Col 2-5) Capital Gain (Loss)	(Col 7+8) Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ 5,402,592	\$ --	\$ 5,402,592	\$ 4,591,542	\$ --	\$ 4,591,542	\$ 811,050	\$ --	\$ 811,050
(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)	263,786	--	263,786	59,618	--	59,618	204,168	--	204,168
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	263,786	--	263,786	59,618	--	59,618	204,168	--	204,168
2. Adjusted gross deferred tax assets allowed per limitation threshold			8,078,560			6,968,623			1,109,937
(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	37,263	--	37,263	42,330	--	42,330	(5,067)	--	(5,067)
(d) Deferred tax assets admitted as result of application of SSAP No. 101.									
Total (2(a)+2(b)+2(c))	\$ 5,703,641	\$ --	\$ 5,703,641	\$ 4,693,490	\$ --	\$ 4,693,490	\$ 1,010,151	\$ --	\$ 1,010,151

3.           Recovery period and threshold limitation information is as follows:

Description	2015	2014
(a) Ratio percentage used to determine recovery period and threshold limitation amount	1235%	1020%
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$ 53,857,064	\$ 46,457,486

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NOTES TO FINANCIAL STATEMENTS

4. The impact of tax planning strategies is as follows:

	December 31, 2015		December 31, 2014		Change	
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	(Col 1-3)	(Col 2-4)
	Income	Gain (Loss)	Income	Gain (Loss)	Ordinary Income	Capital Gain (Loss)
Description						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage						
1. Adjusted gross DTAs	\$ 5,708,302	\$ --	\$ 4,693,490	\$ --	\$ 1,014,812	\$ --
2. %of adjusted gross DTAs attributable to the impact of tax planning strategies	0%	0%	0%	0%	0%	0%
3. Net admitted adjusted gross DTAs	\$ 5,703,641	\$ --	\$ 4,693,490	\$ --	\$ 1,010,151	\$ --
4. %of net admitted adjusted gross DTAs admitted due to tax planning strategies	0%	0%	0%	0%	0%	0%
(b) Does the Company's tax planning strategies include the use of reinsurance? Yes ____ No <u>X</u>						

B. Regarding deferred tax liabilities that are not recognized:

Not applicable

C. Current and deferred income taxes consist of the following major components:

1. Current Income Tax:

Description	(1) December 31, 2015	(2) December 31, 2014	(3) (Col 1-2) Change
(a) Federal	\$ 2,867,990	\$ 2,303,100	\$ 564,890
(b) Foreign	--	--	--
(c) Subtotal	\$ 2,867,990	\$ 2,303,100	\$ 564,890
(d) Federal income tax on net capital gains	(14,574)	258,129	(272,703)
(e) Utilization of capital loss carry-forwards	--	--	--
(f) Other	--	--	--
(g) Federal and foreign income taxes incurred	\$ 2,853,416	\$ 2,561,229	\$ 292,187

2. Deferred Tax Assets:

Description	(1) December 31, 2015	(2) December 31, 2014	(3) (Col 1-2) Change
(a) Ordinary			
(1) Discounting of unpaid losses	\$ 480,753	\$ 505,182	\$ (24,429)
(2) Unearned premium reserve	2,729,796	2,372,910	356,886
(3) Policyholder reserves	--	--	--
(4) Investments	--	--	--
(5) Deferred acquisition costs	--	--	--
(6) Policyholder dividend accrual	--	--	--
(7) Fixed assets	45	32	13
(8) Compensation and benefits accrual	736	1,749	(1,013)
(9) Pension accrual	--	--	--
(10) Receivables - nonadmitted	1,505,503	1,164,684	340,819
(11) Net operating loss carry-forward	--	--	--
(12) Tax credit carry-forward	--	--	--
(13) Other - bad debt reserve	856,308	637,665	218,643
(14) Other - foreign currency translation	--	--	--
(15) Other (including items <5% of total ordinary tax assets)	135,161	11,268	123,893
(99) Subtotal	\$ 5,708,302	\$ 4,693,490	\$ 1,014,812
(b) Statutory valuation allowance adjustment	--	--	--
(c) Nonadmitted	4,661	--	4,661
(d) Admitted ordinary deferred tax assets (2a99-2b-2c)	\$ 5,703,641	\$ 4,693,490	\$ 1,010,151
(e) Capital			
(1) Investments	--	--	--
(2) Net capital loss carry-forward	--	--	--
(3) Real estate	--	--	--
(4) Other (including items <5% of total capital tax assets)	--	--	--
(99) Subtotal	\$ --	\$ --	\$ --
(f) Statutory valuation allowance adjustment	--	--	--
(g) Nonadmitted	--	--	--
(h) Admitted capital deferred tax assets (2e99-2f-2g)	\$ --	\$ --	\$ --
(i) Admitted deferred tax assets (2d+2h)	\$ 5,703,641	\$ 4,693,490	\$ 1,010,151

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NOTES TO FINANCIAL STATEMENTS

3. Deferred Tax Liabilities:

Description	(1) December 31, 2015	(2) December 31, 2014	(3) (Col 1-2) Change
(a) Ordinary			
(1) Investments	\$ --	\$ --	\$ --
(2) Fixed assets	235	276	(41)
(3) Deferred and uncollected premium	--	--	--
(4) Policyholder reserves	--	--	--
(5) Other liabilities - prepaid expenses	2,364	4,430	(2,066)
(6) Other liabilities - salvage and subrogation	33,827	37,937	(4,110)
(7) Other liabilities - foreign currency translation	--	--	--
(8) Other (including items <5% of total ordinary tax liabilities)	--	--	--
(99) Subtotal	\$ 36,426	\$ 42,643	\$ (6,217)
(b) Capital			
(1) Investments	837	5,540	(4,703)
(2) Real estate	--	--	--
(3) Other (including items <5% of total capital tax liabilities)	--	--	--
(99) Subtotal	\$ 837	\$ 5,540	\$ (4,703)
(c) Deferred tax liabilities (3a99+3b99)	\$ 37,263	\$ 48,183	\$ (10,920)

4. Net Deferred Tax Asset (Liability) (2i – 3c):

Description	(1) December 31, 2015	(2) December 31, 2014	(3) (Col 1-2) Change
Net deferred tax asset (liability) (2i-3c)	\$ 5,666,378	\$ 4,645,307	\$ 1,021,071

The change in net deferred income tax is comprised of the following (this analysis excludes nonadmitted assets; the change in nonadmitted assets is reported separately from the change in net deferred income tax in the Statement of Income, Surplus section):

Description	December 31, 2015	December 31, 2014	Change
Total deferred tax assets	\$ 5,708,302	\$ 4,693,490	\$ 1,014,812
Total deferred tax liabilities	37,263	48,183	(10,920)
Net deferred tax asset (liability)	\$ 5,671,039	\$ 4,645,307	\$ 1,025,732
Tax effect of unrealized gains (losses)			--
Change in net deferred income tax			\$ 1,025,732

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

The provision for Federal income taxes is different than that which would be obtained by applying the statutory Federal income tax rate to pre-tax income. The significant book to tax adjustments causing this difference are as follows:

Description	Tax Effect Amount	Effective Tax Rate
Provision computed at statutory rate	\$ 2,827,867	35%
Exempt interest income	(535,772)	-6%
Impact of nonadmitted assets	(464,318)	-6%
Other	(93)	0%
Total	\$ 1,827,684	23%
Federal and foreign income taxes incurred	\$ 2,853,416	
Change in net deferred income tax	(1,025,732)	
Total statutory income taxes	\$ 1,827,684	

E. Operating Loss and Tax Credit Carryforwards

1. The Company has no operating loss or tax credit carryforwards available.
2. The amount of Federal income taxes incurred and available for recoupment by the Company in the event of future net losses is equal to approximately:

Period	Amount
Current tax year:	\$ 2,838,253
First preceding tax year:	\$ 2,564,339

The amounts that can be recouped may be subject to the alternative minimum tax rules, and therefore may be limited.

3. Protective Tax Deposits
- Not applicable

F. Consolidated Federal Income Tax Return

1. The Company’s Federal income tax return is consolidated with The Progressive Corporation (“TPC”), a publicly traded holding company incorporated in Ohio, and all of its wholly-owned United States subsidiaries (the “Group”) as detailed in Schedule Y, Part 1.

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NOTES TO FINANCIAL STATEMENTS

	2.	The method of allocation between the companies is subject to written agreement and is jointly approved by an officer of TPC and the Company. The allocation is based upon separate tax return calculations with current credit for net losses or other items utilized in the consolidated tax return. Intercompany tax balances are settled quarterly.
	G.	Federal or Foreign 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.
10.		Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties
	A.	Nature of Relationships
		The Company is wholly owned by Progressive Direct Holdings, Inc. ("PDH"), a holding company incorporated in Delaware. The structure of the holding company organization is shown on Schedule Y, Part 1.
	B.	Detail of Transactions Greater than 1/2% of Admitted Assets
		The Company received a capital contribution of \$3,500,000 from PDH in 2015.
		All significant 2015 transactions by the Company or any affiliated insurer with any affiliate are summarized in Schedule Y, Part 2.
		See Notes 13.4 and 17.B.
	C.	Change in Terms of Intercompany Arrangements
		Not applicable
	D.	Amounts Due to or from Related Parties
		The Company reported a \$21,358,955 and \$19,391,564 payable to parent, subsidiaries, and affiliates at December 31, 2015 and 2014 respectively. These balances are due to the timing of security purchases and cash collections and disbursements under the Group's centralized cash management system and the reinsurance and management agreements in which the Company participates. The Company also reported a \$656,279 and \$636,975 current Federal income taxes payable at December 31, 2015 and 2014, respectively. These balances are due to TPC for the Company's Federal income tax liability. The intercompany balances are settled by the end of the following quarter depending on the timing of investment transactions. These transactions are dependent upon market timing, investment needs and overall portfolio strategy as to the timing of such settlement transactions.
	E.	Guarantees or Contingencies for Related Parties
		Not applicable
	F.	Management, Service Contracts, Cost Sharing Arrangements
		The Company does not have employees or facilities. Management, operations and claims services are provided under a management agreement with Progressive Direct Insurance Company ("Progressive Direct"), an insurance affiliate domiciled in Ohio. Under the terms of the agreement, the Company is provided underwriting and loss adjustment services for business produced in exchange for a management fee based on the Company's use of services.
		The Company participates in an investment services agreement with Progressive Capital Management Corp., a non-insurance affiliate. Under the terms of the agreement, the Company is provided investment and capital management services in exchange for an investment management fee based on its use of services.
		All intercompany agreements are approved by the participating insurance companies' states of domicile when established. Upon redomestication, intercompany agreements are not required to be approved by the new state of domicile.
	G.	Nature of Relationships that Could Affect Operations
		All outstanding shares of the Company are owned by PDH.
	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.	Write-Downs for Impairments of Investments in Affiliates
		Not applicable
	K.	Investment in Foreign Insurance Subsidiary
		Not applicable
	L.	Investment in Downstream Non-Insurance Holding Company
		Not applicable
	M.	Subsidiary, Controlled and Affiliated Entities (except insurance subsidiary, controlled and affiliated entities) Value
		Not applicable
	N.	Insurance Subsidiary, Controlled and Affiliated Entities Valuation That Departs From NAIC Statutory Accounting Practices and Procedures
		Not applicable
11.		Debt
		Not applicable
12.		Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans
		The Company has no direct payroll (see Note 10.F).

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NOTES TO FINANCIAL STATEMENTS

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

1. Outstanding Shares

The Company has 893 shares of \$2,800 par value common stock authorized and 893 shares issued and outstanding. The Company has no preferred stock authorized, issued, or outstanding.

2. Dividend Rate of Preferred Stock

Not applicable

3,4,5,6. Dividends

The maximum amount of dividends the Company can pay to PDH in 2016 without prior regulatory approval is limited by insurance laws in Ohio. Based on the dividend laws currently in effect, the Company may pay dividends of \$5,952,344 in 2016 without prior approval from the Ohio DOI, provided the dividend payment is not made within 12 months of the previous payment.

Within the limitations described above, there are no additional restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.

The Company paid dividends to PDH as follows:

Date Paid	Amount Paid	Dividend Type
January 13, 2015	\$ 1,000,000	Ordinary
January 13, 2014	\$ 2,000,000	Ordinary

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 (Surplus)

As of December 31, 2015, the portion of unassigned funds (surplus) represented or reduced by each item below is as follows:

Description	Cumulative Increase (Decrease) in Surplus
Unrealized gain (loss)	\$ --
Nonadmitted assets	(4,688,902)
Provision for reinsurance	--
Total	<u>\$ (4,688,902)</u>

11. Surplus Notes

Not applicable

12,13. Quasi Reorganizations

Not applicable

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

Not applicable

B. Assessments

The Company is subject to state guaranty fund and other assessments by the states in which it writes business. State guaranty fund assessments are accrued at the time of any known insolvencies. Other assessments are accrued either at the time of assessment or at the time the premiums are written. These accruals are based on information received from the states in which the Company writes business and may change due to many factors including the Company's share of the ultimate cost of current insolvencies.

As of December 31, 2015 and 2014, the Company's estimated liability for state guaranty fund and other assessments was \$140,511 and \$147,222, respectively. The Company did not recognize any premium tax benefit associated with its various assessments.

As of December 31, 2015 and 2014, the Company's estimated liability for various surcharges was \$407,004 and \$395,476, respectively.

C. Gain Contingencies

Not applicable

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

The Company paid the following amounts in 2015 to settle claims related extra contractual obligations ("ECO") or bad faith claims stemming from lawsuits:

Description	Direct
Claims related ECO and bad faith losses paid in 2015	\$ 59,325

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NOTES TO FINANCIAL STATEMENTS

The table below indicates the number of claims where amounts were paid to settle claims related ECO or bad faith claims resulting from lawsuits during 2015.

(a)	(b)	(c)	(d)	(e)
0-25 Claims	26-50 Claims	51-100 Claims	101-500 Claims	More than 500 Claims
x				

(f) Per Claim [ ] (g) Per Claimant [x]

E. Product Warranties

Not applicable

F. Joint and Several Liabilities

Not applicable

G. All Other Contingencies

The Company routinely assesses the collectibility of premiums and agents' balances receivable and records a bad debt reserve for amounts exceeding the nonadmitted balance that the Company believes are uncollectible.

The Company is named as defendant in various lawsuits arising out of its insurance operations. All legal actions relating to claims made under insurance policies are considered by the Company in establishing its loss and LAE reserves. The Company also has, on a net basis, potential exposure relating to lawsuits due to its participation in the 100% pooling reinsurance agreement for which it is allocated litigation expenses (see Note 26).

The following is a discussion of a potentially significant pending case at December 31, 2015. The Company does not consider a loss from this case to be probable and is unable to estimate a range of loss, if any, at this time.

As of December 31, 2015 there was one case consolidated into multi-district proceedings alleging that the Company improperly steers automobile repair work to certain auto body repair shops and challenging the labor rates the Company pays to auto body repair shops.

15. Leases

Not applicable

16. Information about Financial Instruments with Off-Balance Sheet Risk and with Concentrations of Credit Risk

Not applicable

17. Sale, Transfer, and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

Not applicable

B. Transfers and Servicing of Financial Assets

The Company transferred \$132,700,000 and \$100,000,000 of premiums receivable to Progressive Investment Company, Inc. ("PICI"), a non-insurance affiliate, for \$132,685,573 and \$99,993,124 in cash and/or securities in 2015 and 2014, respectively. The related premiums receivable remained in the Company's assets, and a corresponding liability was established. As the related cash was collected, it was transferred to PICI and the liability was reduced. These premium receivable transactions were approved by the Ohio DOI.

C. Wash Sales

The Company had no wash sales of securities with a NAIC rating of 3 or below during the year.

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

Not applicable

19. Direct Premiums Written / Produced by Managing General Agents / Third Party Administrators

Not applicable

20. Fair Value Measurements

A. Inputs Used for Assets and Liabilities Measured at Fair Value in the Company's Financial Statements

1. Fair Value Measurements by Levels 1, 2 and 3

The Company categorizes its financial instruments, based on the degree of subjectivity inherent in the method by which they are valued, into a fair value hierarchy of three levels, as follows:

Level 1 - Inputs are unadjusted, quoted prices in active markets for identical instruments at the measurement date (e.g., active exchange-traded equity securities).

Level 2 - Inputs (other than quoted prices included within Level 1) that are observable for the instrument either directly or indirectly. This includes: (i) quoted prices for similar instruments in active markets, (ii) quoted prices for identical or similar instruments in markets that are not active, (iii) inputs other than quoted prices that are observable for the instruments, and (iv) inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Level 3 - Inputs that are unobservable. Unobservable inputs reflect the Company's subjective evaluation about the assumptions market participants would use in pricing the financial instrument.

See Note 1, Investment Policies section for further information regarding methods used to determine fair market value.

The Company's management evaluated whether the market was distressed or inactive in determining the fair value of the Company's securities and reviewed certain market level inputs to evaluate whether sufficient activity, volume, and new issuances existed to create an active market. Based on this evaluation, management concluded that there was sufficient activity in determining the fair market value of the Company's securities.



PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NOTES TO FINANCIAL STATEMENTS

As of December 31, 2015, the Company did not measure and report any securities at fair value on the balance sheet. All bonds were carried at amortized cost.

2. Roll forward of Level 3 Items
- Not applicable
3. Policy on Transfers Into and Out of Level 3
- At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred into or out of Level 3.
4. Inputs and Techniques Used for Level 2 and Level 3 Fair Values
- See Note 20.A.1 above.
5. Derivative Fair Values
- Not applicable
- B. Other Fair Value Disclosures
- Not applicable
- C. Fair Values for all Financial Instruments by Levels 1, 2, and 3

The table below represents the fair value of all financial instruments at December 31, 2015, however, not all financial instruments are reported at fair value in the Company's financial statements.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Not Practicable (Carrying Value)
Bonds	\$ 115,600,625	\$ 113,672,055	\$ 3,605,832	\$ 111,994,793	\$ --	\$ --
Cash equivalents	--	--	--	--	--	--
Common stock	--	--	--	--	--	--
Preferred stock	--	--	--	--	--	--
Short-term investments	27,636,220	27,636,220	--	27,636,220	--	--
Total	\$ 143,236,845	\$ 141,308,275	\$ 3,605,832	\$ 139,631,013	\$ --	\$ --

- D. Financial Instruments for Which it is Not Practicable to Estimate Fair Values
- Not applicable

21. Other Items

- A. Unusual or Infrequent Items
- Not applicable
- B. Troubled Debt Restructuring for Debtors
- Not applicable
- C. Other Disclosures
1. Nonadmitted Other Invested Assets
- In accordance with reporting and admissibility requirements of SSAP No. 48, Joint Ventures, Partnerships, and Limited Liability Companies and SSAP No. 97, Investments in Subsidiary, Controlled, and Affiliated Entities, the Company nonadmits its investment in Churchill Stateside North Carolina Tax Credit Fund IV, LLC., (see Note 1C).
- D. Business Interruption Insurance Recoveries
- Not applicable
- E. State Transferable and Non-transferable Tax Credits

1. The carrying value of transferable and non-transferable state tax credits, gross of any related tax liabilities, and total unused transferable and non-transferable state tax credits by state and in total at December 31, 2015 are as follows:

Description of state transferable ("T") and non-transferable ("NT") tax credits	State	Carrying Value	Unused Amount
Low Income Housing Tax Credit (NT)	GA	\$ 797,328	\$ 1,470,000
Total		\$ 797,328	\$ 1,470,000

2. The Company estimated the utilization of the remaining transferable and non-transferable state tax credits by projecting future premium, taking into account policy growth and rate changes, projecting the future tax liability based on projected premium, tax rates, and tax credits, and comparing the projected future tax liability to the availability of remaining transferable and non-transferable state tax credits.
3. The Company recognized an impairment loss of \$0 related to write-downs as a result of impairment analysis of the carrying amount for transferable and non-transferable state tax credits.



PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NOTES TO FINANCIAL STATEMENTS

4. State tax credits admitted and nonadmitted are as follows:

Type	Total Admitted	Total Nonadmitted
Transferable	\$ --	\$ --
Non-transferable	\$ 797,328	\$ --

F. Subprime Mortgage Related Risk Exposure

1. Exposure to Subprime Mortgage Related Risk

The following subprime disclosure and the review and procedures described within are completed at a consolidated level for all the Progressive companies. To the extent the Company had any direct subprime exposure, those securities would be listed in Note 21.F.3.

Management's review of the investment portfolio for securities with direct subprime exposure, such as Alt-A residential mortgage loan-backed bonds and home equity loan-backed bonds is performed in conjunction with the OTTI analysis and procedures (see Note 1.C). Additionally, securities that were determined to have an indirect subprime exposure were also reviewed as part of the OTTI process.

The Company's management continues to perform a detailed review of its investment portfolio, paying particular attention to the credit profile of the issuers to identify the extent to which any asset values may have been impacted by direct or indirect exposure to the subprime mortgage loan disruption, as well as broader credit and financial market events.

In 2015, the Company recorded no OTTI write-downs on any securities as a result of direct subprime exposure.

2. Direct Investment in Subprime Mortgage Loans

Not applicable

3. Direct Investment in Securities with Underlying Subprime Exposure

Not applicable

4. Mortgage or Financial Guaranty Subprime Exposure

Not applicable

G. Insurance-Linked Securities

Not applicable

22. Events Subsequent

The Company was not impacted by any subsequent events. Subsequent events have been considered through February 15, 2016 for the statutory statement that was available for issuance by March 1, 2016.

The Company does not write health insurance and therefore has no premiums subject to assessment under section 9010 of the Affordable Care Act for either the current or prior years.

23. Reinsurance

A. Unsecured Reinsurance Recoverable

At December 31, 2015, the Company had the following unsecured reinsurance recoverable balances which exceeded 3% of policyholders' surplus:

Reinsurer	NAIC Code	Federal ID#	Amount
Progressive Direct Insurance Company	16322	34- 1524319	\$ 218,591,000
North Carolina Reinsurance Facility		AA- 9991139	28,614,000
Total			\$ 247,205,000

B. Reinsurance Recoverable in Dispute

Not applicable

C. Reinsurance Assumed and Ceded

1. The table below summarizes ceded and assumed unearned premiums and the related commission equity at December 31, 2015.

	Assumed		Ceded		Net	
	Unearned Premiums	Commission Equity	Unearned Premiums	Commission Equity	Unearned Premiums	Commission Equity
(a) Affiliates	\$ 38,744,000	\$ --	\$ 96,656,000	\$ --	\$ (57,912,000)	\$ --
(b) All Other	--	--	10,309,000	2,814,000	(10,309,000)	(2,814,000)
(c) Totals	\$ 38,744,000	\$ --	\$ 106,965,000	\$ 2,814,000	\$ (68,221,000)	\$ (2,814,000)
(d) Direct Unearned Premium Reserve is \$106,965,000						

2. The Company has no return commission or profit sharing arrangements.

D. Uncollectible Reinsurance

Not applicable

E. Commutation of Ceded Reinsurance

Not applicable

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NOTES TO FINANCIAL STATEMENTS

- 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 Downgraded or Status Subject to Revocation

Not applicable
- J.

Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not applicable

24.

Retrospectively Rated Contracts and Contracts Subject to Redetermination

Not applicable

25.

Changes in Incurred Losses and Loss Adjustment Expenses

Incurred losses and LAE attributable to insured events of prior accident years decreased by \$1,725,041 in 2015 which is 3.6% of the total prior year net unpaid losses and LAE of \$48,008,261. The favorable development is primarily due to private passenger auto liability originally anticipated severity for accident year 2014 decreasing by 3.0% and less late reported losses than anticipated for auto physical damage. LAE reserves developed unfavorably in both defense and cost containment and adjusting and other expense reserves.

26.

Intercompany Pooling Arrangements

The Company participates in a pooling reinsurance agreement with the property-casualty affiliates listed below (the “Direct Pool”) under which 100% of the underwriting business of each member company, net of external reinsurance, is ceded to Progressive Direct, the Direct Pool manager and a Direct Pool participant. The combined premiums, losses, and expenses are then retroceded to each Direct Pool member based on pre-determined pooling percentages.

Mountain Laurel Assurance Company (“Mountain Laurel”), an insurance affiliate domiciled in Ohio, terminated its future participation in the Direct Pool effective November 5, 2005. Mountain Laurel has a zero percent retrocession participation in the Direct Pool for all policies written prior to that date.

The pooling percentages for each Direct Pool member as of December 31, 2015 and 2014 were as follows:

Company	NAIC Code	2015 Pool %	2014 Pool %
Progressive Direct Insurance Company (Lead)	16322	77.5%	77.5%
Progressive Marathon Insurance Company	37605	6.0	6.0
Progressive Max Insurance Company	24279	6.0	6.0
Progressive Advanced Insurance Company	11851	4.0	4.0
Progressive Universal Insurance Company	21727	4.0	4.0
Progressive Premier Insurance Company of Illinois	21735	2.0	2.0
Progressive Paloverde Insurance Company	44695	0.5	0.5
Mountain Laurel Assurance Company	44180	--	--
		100.0%	100.0%

All business written by each Direct Pool member is subject to pooling with the exception of loss reserves from Progressive Max Insurance Company’s assumed asbestos and environmental claims, for which the Company has no exposure. Business ceded by Direct Pool members to non-affiliated reinsurers prior to pooling, is primarily due to state-provided reinsurance programs. The Direct Pool does not participate in any intercompany sharing of the provision for reinsurance and the write-offs of uncollectible reinsurance.

At December 31, 2015, amounts recoverable from and payable to Progressive Direct and all affiliates participating in the Direct Pool are as follows:

Company	Amounts Recoverable	Amounts Payable
Progressive Direct Insurance Company (Lead)	\$ 12,156,109	\$ 7,387,260
Progressive Marathon Insurance Company	281,349	844,457
Progressive Max Insurance Company	1,381,019	7,188,669
Progressive Advanced Insurance Company	255,682	2,015,905
Progressive Universal Insurance Company	3,447,547	481,078
Progressive Premier Insurance Company of Illinois	915,004	1,565,356
Progressive Paloverde Insurance Company	1,106,659	60,133
Mountain Laurel Assurance Company	--	511
Total	\$ 19,543,369	\$ 19,543,369

27.

Structured Settlements

Not applicable
28.

Health Care Receivables

Not applicable
29.

Participating Accident and Health Policies

Not applicable

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NOTES TO FINANCIAL STATEMENTS

30.	Premium Deficiency Reserves	
1.	Liability carried for premium deficiency reserves	\$0
2.	Date of most recent evaluation of this liability	December 31, 2015
3.	Was anticipated investment income utilized in the calculation?	Yes [X] No [ ]
31.	High Deductibles	
	Not applicable	
32.	Discounting of Liabilities for Unpaid Losses and Unpaid Loss Adjustment Expenses	
	Not applicable	
33.	Asbestos and Environmental Reserves	
	Not applicable	
34.	Subscriber Savings Accounts	
	Not applicable	
35.	Multiple Peril Crop Insurance	
	Not applicable	
36.	Financial Guaranty Insurance	
	Not applicable	

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
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?  
If yes, complete Schedule Y, Parts 1, 1A and 2.

Yes [ X ]    No [   ]

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?            OHIO

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.

12/31/2012

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.

12/31/2012

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).

08/06/2013

3.4

By what department or departments?  
OHIO

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with departments?

Yes [   ]    No [   ]    N/A [ X ]

3.6

Have all of the recommendations within the latest financial examination report been complied with?

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

1	2
Nationality	Type of Entity

8.1

Is the company a subsidiary of a bank holding company regulated with 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 the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial 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	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
PRICEWATERHOUSECOOPERS, LLP 200 PUBLIC SQUARE, 18TH FLOOR CLEVELAND, OH 44114-2301

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 other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A 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:

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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?  
GARY S. TRAICOFF, FCAS, MAAA CORPORATE ACTUARY 6300 WILSON MILLS ROAD MAYFIELD VILLAGE, OH 44143-2182
- 12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes [ ☐ ]    No [ ☒ X ]
- 12.11

Name of real estate holding company
- 12.12

Number of parcels involved

0
- 12.13

Total book/adjusted carrying value

\$ 0
- 12.2

If yes, provide explanation
13.

FOR UNITED STATES BRANCES 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?  
N/A
- 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).
- 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 subordinator committee thereof?

Yes [ ☒ X ]    No [ ☐ ]
17.

Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors an all subordinator 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 or is likely to 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

\$ 0
- 20.12

To stockholders not officers

\$ 0
- 20.13

Trustees, supreme or grand (Fraternal only)

\$ 0
- 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

\$ 0
- 20.22

To stockholders not officers

\$ 0
- 20.23

Trustees, supreme or grand (Fraternal only)

\$ 0
- 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 reporting 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

\$ 0
- 21.22

Borrowed from others

\$ 0
- 21.23

Leased from others

\$ 0
- 21.24

Other

\$ 0
- 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

\$ 0
- 22.22

Amount paid as expenses

\$ 0
- 22.23

Other amounts paid

\$ 0
- 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:

\$ 0

INVESTMENT

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

24.01

Were all of 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).  
N/A

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.

\$ 0

24.06

If answer to 24.04 is no, report amount of collateral for other programs

\$ 0

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 ]

24.10

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

24.101

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$ 0

24.102

Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$ 0

24.103

Total payable for securities lending reported on the liability page:

\$ 0

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 current 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 of the current year:

25.21

Subject to repurchase agreements

\$ 0

25.22

Subject to reverse repurchase agreements

\$ 0

25.23

Subject to dollar repurchase agreements

\$ 0

25.24

Subject to reverse dollar repurchase agreements

\$ 0

25.25

Placed under option agreements

\$ 0

25.26

Letter stock or securities restricted as sale – excluding FHLB Capital Stock

\$ 0

25.27

FHLB Capital Stock

\$ 0

25.28

On deposit with states

\$ 3,614,938

25.29

On deposit with other regulatory bodies

\$ 0

25.30

Pledged as collateral – excluding collateral pledged to an FHLB

\$ 0

25.31

Pledged as collateral to FHLB – including assets backing funding agreements

\$ 0

25.32

Other

\$ 0

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?  
If no, attach a description with this statement.

Yes [   ]    No [   ]    N/A [ X ]

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 of the current year:

\$ 0

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

1 Name of Custodian(s)	2 Custodian Address
CITIBANK, N.A.	338 GREENWICH STREET, NEW YORK, NY 10013

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)
NONE		

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
NONE			

28.05

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

1 Central Registration Depository	2 Name(s)	3 Address
NONE		

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 ]

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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 Holdings	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	141,308,275	143,236,845	1,928,570
30.2	Preferred Stocks	0	0	0
30.3	Totals	141,308,275	143,236,845	1,928,570

30.4 Describe the sources or methods utilized in determining fair values:  
THE FAIR MARKET VALUES REPORTED ARE DERIVED FROM INDEPENDENT AND OBSERVABLE MARKET INPUT EVALUATIONS PROVIDED BY WIDELY UTILIZED REPUTABLE PRICING SERVICES, INDEPENDENT BROKER/DEALER BID LISTS, INDEPENDENT BROKER/DEALER QUOTATIONS, INDEPENDENT BROKER/DEALER PRICING SERVICES, OR ACTIVE MARKET CLOSING QUOTATIONS FROM A REGULATED EXCHANGE. IN VERY RARE CASES, IF NONE OF THE AFOREMENTIONED PRIMARY SOURCES ARE AVAILABLE, MATRIX PRICING USING THE REPORTING ENTITY'S OWN MARKET BASED ASSUMPTIONS MAY BE UTILIZED. THE APPROVED METHODS FOR COMPUTATION OF FAIR MARKET VALUE ARE PRESCRIBED IN PART FIVE OF THE SECURITIES VALUATION OFFICE PURPOSES AND PROCEDURES MANUAL.

- 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 [ ☒ ]
- 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 reliance 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 Investment Analysis Office* been followed?

Yes [ ☒ ] No [ ☐ ]
- 32.2

If no, list exceptions:

OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ 17,599

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.				
	<table><tr><th>1 Name</th><th>2 Amount Paid</th></tr><tr><td>INDEPENDENT STATISTICAL SVCS</td><td>\$ 17,599</td></tr></table>	1 Name	2 Amount Paid	INDEPENDENT STATISTICAL SVCS	\$ 17,599
1 Name	2 Amount Paid				
INDEPENDENT STATISTICAL SVCS	\$ 17,599				

34.1 Amount of payments for legal expenses, if any? \$ 0

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.				
	<table><tr><th>1 Name</th><th>2 Amount Paid</th></tr><tr><td>NONE</td><td>\$</td></tr></table>	1 Name	2 Amount Paid	NONE	\$
1 Name	2 Amount Paid				
NONE	\$				

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ 0

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.				
	<table><tr><th>1 Name</th><th>2 Amount Paid</th></tr><tr><td>NONE</td><td>\$</td></tr></table>	1 Name	2 Amount Paid	NONE	\$
1 Name	2 Amount Paid				
NONE	\$				

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?		Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> X ]	
1.2	If yes, indicate premium earned on U.S. business only.	\$		0	
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$		0	
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.	\$		0	
1.5	Indicate total incurred claims on all Medicare Supplement insurance.	\$		0	
1.6	Individual policies:				
	Most current three years:				
1.61	Total premium earned	\$		0	
1.62	Total incurred claims	\$		0	
1.63	Number of covered lives			0	
	All years prior to most current three years:				
1.64	Total premium earned	\$		0	
1.65	Total incurred claims	\$		0	
1.66	Number of covered lives			0	
1.7	Group policies:				
	Most current three years:				
1.71	Total premium earned	\$		0	
1.72	Total incurred claims	\$		0	
1.73	Number of covered lives			0	
	All years prior to most current three years:				
1.74	Total premium earned	\$		0	
1.75	Total incurred claims	\$		0	
1.76	Number of covered lives			0	
2.	Health Test:				
		1	2		
		Current Year	Prior Year		
2.1	Premium Numerator	\$	0	\$	0
2.2	Premium Denominator	\$	137,425,718	\$	125,110,878
2.3	Premium Ratio (2.1/2.2)				
2.4	Reserve Numerator	\$	0	\$	0
2.5	Reserve Denominator	\$	93,623,012	\$	82,339,458
2.6	Reserve Ratio (2.4/2.5)				
3.1	Does the reporting entity issue both participating and non-participating policies?			Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> X ]
3.2	If yes, state the amount of calendar year premiums written on:				
3.21	Participating policies	\$			0
3.22	Non-participating policies	\$			0
4.	FOR MUTUAL REPORTING ENTITIES AND RECIPROCAL EXCHANGES ONLY:				
4.1	Does the reporting entity issue assessable policies?			Yes [ <input type="checkbox"/> ]	No [ <input type="checkbox"/> ]
4.2	Does the reporting entity issue non-assessable policies?			Yes [ <input type="checkbox"/> ]	No [ <input type="checkbox"/> ]
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.	\$			0
5.	FOR RECIPROCAL EXCHANGES ONLY:				
5.1	Does the exchange appoint local agents?			Yes [ <input type="checkbox"/> ]	No [ <input type="checkbox"/> ]
5.2	If yes, is the commission paid:				
5.21	Out of Attorney's-in-fact compensation			Yes [ <input type="checkbox"/> ]	No [ <input type="checkbox"/> ] N/A [ <input type="checkbox"/> ]
5.22	As a direct expense of the exchange			Yes [ <input type="checkbox"/> ]	No [ <input type="checkbox"/> ] N/A [ <input type="checkbox"/> ]
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 fulfillments of certain conditions, been deferred?			Yes [ <input type="checkbox"/> ]	No [ <input type="checkbox"/> ]
5.5	If yes, give full information:				
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?				
	THE COMPANY DOES NOT WRITE WORKERS' COMPENSATION INSURANCE.				
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:				
	THE COMPANY'S PROBABLE MAXIMUM LOSS (PML) IS ESTIMATED BY ANALYZING HISTORICAL MAJOR OCCURRENCES AND ESTIMATING FREQUENCY OF LOSS AND SEVERITY BASED ON THE POTENTIAL FORCE OF AN OCCURRENCE AND THE TOTAL NUMBER OF AUTOS AND BOATS EXPOSED. THE ESTIMATE OF THE PML WAS COMPLETED BY PROGRESSIVE EMPLOYEES. THE COMPANY'S NET COMPREHENSIVE EXPOSURE IN THE CATASTROPHE PRONE STATES OF FLORIDA, LOUISIANA, TEXAS, CALIFORNIA, ALABAMA, NEW YORK, AND NEW JERSEY IS LIMITED SINCE THE COMPANY IS A MEMBER OF A 100% POOLING REINSURANCE ARRANGEMENT WITH 6 OF ITS PROPERTY AND CASUALTY AFFILIATES. THE PRIMARY PROPERTY COVERAGE SOLD BY THE COMPANY IS COMPREHENSIVE FOR AUTOMOBILE AND INLAND MARINE FOR BOATS. THE ESTIMATE OF THE PML IS 6% OF THE SURPLUS.				
6.3	What provision has this reporting entity made (such as 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'S ESTIMATED PML IS 6% OF THE SURPLUS. THE COMPANY CARRIES NO EXTERNAL CATASTROPHE REINSURANCE TO COVER ITS LIMITED CATASTROPHE EXPOSURE. THE COMPANY PARTICIPATES IN A POOLING ARRANGEMENT WHICH SPREADS THE UNDERWRITING RISK INCLUDING THE CATASTROPHE EXPOSURE AMONG ALL PARTIES TO THE POOLING AGREEMENT.				
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 [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> X ]





PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

12.62	Collateral and other funds		\$	0			
13.1	Largest net aggregate amount insured in any one risk (excluding workers' compensation):		\$	400,000			
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	2	3	4	5	
		Direct Losses	Direct Losses	Direct Written	Direct Premium	Direct Premium	
		Incurred	Unpaid	Premium	Unearned	Earned	
16.11	Home	\$ 0	\$ 0	\$ 0	\$ 0	0	
16.12	Products	\$ 0	\$ 0	\$ 0	\$ 0	0	
16.13	Automobile	\$ 0	\$ 0	\$ 0	\$ 0	0	
16.14	Other*	\$ 0	\$ 0	\$ 0	\$ 0	0	
	* Disclose type of coverage:						
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				\$	0	
17.12	Unfunded portion of Interrogatory 17.11				\$	0	
17.13	Paid losses and loss adjustment expenses portion of Interrogatory 17.11				\$	0	
17.14	Case reserves portion of Interrogatory 17.11				\$	0	
17.15	Incurred but not reported portion of Interrogatory 17.11				\$	0	
17.16	Unearned premium portion of Interrogatory 17.11				\$	0	
17.17	Contingent commission portion of Interrogatory 17.11				\$	0	
	Provide the following information for all other amounts included in Schedule F – Part 3 and excluded from Schedule F – Part 5, not included above.						
17.18	Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5				\$	0	
17.19	Unfunded portion of Interrogatory 17.18				\$	0	
17.20	Paid losses and loss adjustment expenses portion of Interrogatory 17.18				\$	0	
17.21	Case reserves portion of Interrogatory 17.18				\$	0	
17.22	Incurred but not reported portion of Interrogatory 17.18				\$	0	
17.23	Unearned premium portion of Interrogatory 17.18				\$	0	
17.24	Contingent commission portion of Interrogatory 17.18				\$	0	
18.1	Do you act as a custodian for health savings accounts?					Yes [ ]	No [X]
18.2	If yes, please provide the amount of custodial funds held as of the reporting date.				\$	0	
18.3	Do you act as an administrator for health savings accounts?					Yes [ ]	No [X]
18.4	If yes, please provide the balance of the funds administered as of the reporting date.				\$	0	

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
FIVE-YEAR HISTORICAL DATA

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

	1 2015	2 2014	3 2013	4 2012	5 2011
<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).....	334,362,657	289,950,038	264,297,904	237,093,414	214,757,614
2. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	201,281,512	173,880,669	151,186,938	140,086,729	131,128,652
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	(10)	1,709	77,109	70,794	66,141
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).....	535,644,159	463,832,417	415,561,951	377,250,938	345,952,407
<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).....	92,770,114	84,149,015	76,341,118	72,640,011	67,350,780
8. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	49,728,337	44,020,085	38,425,893	36,882,231	34,667,666
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	(10)	1,709	77,109	70,794	66,141
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).....	142,498,441	128,170,810	114,844,120	109,593,037	102,084,587
<b>Statement of Income (Page 4)</b>					
13. Net underwriting gain (loss) (Line 8).....	7,245,997	6,465,849	7,424,951	4,607,523	5,219,015
14. Net investment gain (loss) (Line 11).....	1,735,200	2,373,878	1,806,640	2,945,769	1,868,506
15. Total other income (Line 15).....	(887,004)	(776,366)	(470,401)	241,711	399,195
16. Dividends to policyholders (Line 17).....					
17. Federal and foreign income taxes incurred (Line 19).....	2,867,990	2,303,100	2,627,871	1,964,543	2,231,987
18. Net income (Line 20).....	5,226,203	5,760,261	6,133,319	5,830,460	5,254,729
<b>Balance Sheet Lines (Pages 2 and 3)</b>					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3).....	233,838,972	198,322,548	184,026,188	167,037,162	159,202,143
20. Premiums and considerations (Page 2, Col. 3):					
20.1 In course of collection (Line 15.1).....	9,317,376	7,788,169	7,916,992	7,223,243	6,689,380
20.2 Deferred and not yet due (Line 15.2).....	68,763,360	54,938,351	47,375,221	43,129,202	37,309,992
20.3 Accrued retrospective premiums (Line 15.3).....					
21. Total liabilities excluding protected cell business (Page 3, Line 26).....	174,315,530	147,219,755	137,839,785	124,784,534	120,847,028
22. Losses (Page 3, Line 1).....	44,663,091	39,410,483	37,298,422	36,052,287	32,695,139
23. Loss adjustment expenses (Page 3, Line 3).....	9,975,407	8,597,778	7,873,330	7,512,914	7,170,759
24. Unearned premiums (Page 3, Line 9).....	38,743,974	33,671,252	30,611,320	28,545,039	27,106,737
25. Capital paid up (Page 3, Lines 30 & 31).....	2,500,400	2,500,400	2,500,400	2,500,400	2,500,400
26. Surplus as regards policyholders (Page 3, Line 37).....	59,523,442	51,102,793	46,186,403	42,252,628	38,355,115
<b>Cash Flow (Page 5)</b>					
27. Net cash from operations (Line 11).....	81,267	11,193,076	5,059,298	4,415,055	8,753,685
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital.....	59,523,442	51,102,793	46,186,403	42,252,628	38,355,115
29. Authorized control level risk-based capital.....	4,362,121	4,553,612	4,159,615	4,019,209	4,058,836
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b> (Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1).....	80.4	97.9	100.0	100.0	100.0
31. Stocks (Lines 2.1 & 2.2).....					
32. Mortgage loans on real estate (Lines 3.1 & 3.2).....					
33. Real estate (Lines 4.1, 4.2 & 4.3).....					
34. Cash, cash equivalents and short-term investments (Line 5).....	19.6	2.1			
35. Contract loans (Line 6).....					
36. Derivatives (Line 7).....					
37. Other invested assets (Line 8).....					
38. Receivable 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 (Sch. D, Summary, Line 12, Col. 1).....					
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1).....					
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1).....					
45. Affiliated short-term investments (subtotals included in Schedule DA, Verification, Column 5, Line 10).....					
46. Affiliated mortgage loans on real estate.....					
47. All other affiliated.....					
48. Total of above lines 42 to 47.....	0	0	0	0	0
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).....	0.0				

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
FIVE-YEAR HISTORICAL DATA

(Continued)

	1	2	3	4	5
	2015	2014	2013	2012	2011
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24).....					
52. Dividends to stockholders (Line 35).....		.....(1,000,000)	.....(2,000,000)	.....(2,000,000)	.....(3,500,000)
53. Change in surplus as regards policyholders for the year (Line 38).....	.....8,420,649	.....4,916,390	.....3,933,775	.....3,897,513	.....1,682,822
<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).....	.....185,536,938	.....171,516,121	.....147,050,113	.....134,744,779	.....120,223,071
55. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	.....125,778,764	.....115,375,278	.....105,434,723	.....88,417,009	.....84,306,993
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	.....611	.....26,490	.....36,787	.....46,746	.....46,331
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).....	.....311,316,313	.....286,917,889	.....252,521,623	.....223,208,534	.....204,576,395
<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).....	.....47,652,287	.....45,629,601	.....41,191,816	.....39,172,649	.....35,020,777
61. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	.....33,911,947	.....31,484,985	.....26,878,337	.....25,968,118	.....23,969,423
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	.....611	.....26,490	.....36,787	.....46,746	.....46,331
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).....	.....81,564,845	.....77,141,076	.....68,106,940	.....65,187,513	.....59,036,531
<b>Operating Percentages</b> (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1).....	.....100.0	.....100.0	.....100.0	.....100.0	.....100.0
67. Losses incurred (Line 2).....	.....63.2	.....63.3	.....61.5	.....63.4	.....60.6
68. Loss expenses incurred (Line 3).....	.....11.3	.....11.0	.....10.9	.....10.8	.....11.2
69. Other underwriting expenses incurred (Line 4).....	.....20.2	.....20.5	.....21.1	.....21.5	.....23.1
70. Net underwriting gain (loss) (Line 8).....	.....5.3	.....5.2	.....6.6	.....4.3	.....5.2
<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).....	.....20.1	.....20.6	.....21.1	.....21.0	.....22.2
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0).....	.....74.5	.....74.3	.....72.4	.....74.2	.....71.7
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).....	.....239.4	.....250.8	.....248.7	.....259.4	.....266.2
<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).....	.....(1,693)	.....(51)	.....(644)	.....(245)	.....(1,957)
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).....	.....(3.3)	.....(0.1)	.....(1.5)	.....(0.6)	.....(5.3)
<b>Two Year Loss Development (000 omitted)</b>					
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12).....	.....(296)	.....(673)	.....(452)	.....(2,385)	.....(3,177)
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).....	.....(0.6)	.....(1.6)	.....(1.2)	.....(6.5)	.....(9.7)

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	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....20.....	.....6.....	.....2.....	.....0.....	.....1.....	.....	.....6.....	.....18.....	.....XXX.....
2. 2006.....	.....66,825.....	.....512.....	.....66,314.....	.....37,330.....	.....263.....	.....1,021.....	.....1.....	.....7,978.....	.....0.....	.....4,103.....	.....46,065.....	.....XXX.....
3. 2007.....	.....71,248.....	.....648.....	.....70,600.....	.....41,818.....	.....325.....	.....1,096.....	.....1.....	.....7,943.....	.....	.....4,938.....	.....50,530.....	.....XXX.....
4. 2008.....	.....74,728.....	.....676.....	.....74,052.....	.....44,483.....	.....345.....	.....1,084.....	.....0.....	.....8,580.....	.....	.....5,161.....	.....53,802.....	.....XXX.....
5. 2009.....	.....84,068.....	.....840.....	.....83,229.....	.....49,596.....	.....399.....	.....1,296.....	.....1.....	.....8,537.....	.....	.....5,796.....	.....59,030.....	.....XXX.....
6. 2010.....	.....93,394.....	.....1,018.....	.....92,376.....	.....57,881.....	.....708.....	.....1,552.....	.....1.....	.....9,546.....	.....	.....6,564.....	.....68,269.....	.....XXX.....
7. 2011.....	.....101,399.....	.....1,305.....	.....100,094.....	.....62,073.....	.....579.....	.....1,602.....	.....0.....	.....9,745.....	.....	.....7,330.....	.....72,840.....	.....XXX.....
8. 2012.....	.....109,516.....	.....1,361.....	.....108,155.....	.....67,423.....	.....591.....	.....1,448.....	.....1.....	.....9,971.....	.....	.....8,096.....	.....78,250.....	.....XXX.....
9. 2013.....	.....114,404.....	.....1,626.....	.....112,778.....	.....66,837.....	.....687.....	.....1,161.....	.....1.....	.....10,008.....	.....	.....7,784.....	.....77,318.....	.....XXX.....
10. 2014.....	.....127,100.....	.....1,989.....	.....125,111.....	.....69,213.....	.....569.....	.....715.....	.....1.....	.....10,387.....	.....	.....8,358.....	.....79,745.....	.....XXX.....
11. 2015.....	.....139,792.....	.....2,366.....	.....137,426.....	.....60,139.....	.....439.....	.....220.....	.....0.....	.....9,617.....	.....	.....5,772.....	.....69,537.....	.....XXX.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....556,813.....	.....4,912.....	.....11,196.....	.....7.....	.....92,314.....	.....0.....	.....63,909.....	.....655,404.....	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding- Direct and Assumed
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	.....86.....	.....49.....	.....12.....	.....	.....2.....	.....	.....	.....	.....1.....	.....	.....	.....52.....	.....XXX.....
2. 2006.....	.....51.....	.....47.....	.....3.....	.....	.....1.....	.....	.....	.....	.....2.....	.....	.....	.....10.....	.....XXX.....
3. 2007.....	.....193.....	.....150.....	.....24.....	.....20.....	.....4.....	.....	.....	.....	.....8.....	.....	.....	.....59.....	.....XXX.....
4. 2008.....	.....339.....	.....304.....	.....105.....	.....89.....	.....7.....	.....	.....	.....	.....6.....	.....	.....	.....64.....	.....XXX.....
5. 2009.....	.....308.....	.....213.....	.....141.....	.....105.....	.....20.....	.....	.....	.....	.....18.....	.....	.....	.....169.....	.....XXX.....
6. 2010.....	.....1,096.....	.....877.....	.....221.....	.....184.....	.....55.....	.....	.....	.....	.....41.....	.....	.....	.....352.....	.....XXX.....
7. 2011.....	.....880.....	.....362.....	.....182.....	.....178.....	.....102.....	.....	.....	.....	.....60.....	.....	.....	.....683.....	.....XXX.....
8. 2012.....	.....2,741.....	.....1,448.....	.....816.....	.....308.....	.....226.....	.....	.....133.....	.....	.....181.....	.....	.....276.....	.....2,340.....	.....XXX.....
9. 2013.....	.....4,094.....	.....1,001.....	.....866.....	.....286.....	.....583.....	.....	.....165.....	.....0.....	.....369.....	.....	.....312.....	.....4,790.....	.....XXX.....
10. 2014.....	.....7,963.....	.....378.....	.....3,103.....	.....1,477.....	.....1,074.....	.....	.....295.....	.....0.....	.....959.....	.....	.....697.....	.....11,540.....	.....XXX.....
11. 2015.....	.....24,460.....	.....399.....	.....6,476.....	.....1,619.....	.....1,731.....	.....	.....593.....	.....0.....	.....3,339.....	.....	.....3,961.....	.....34,580.....	.....XXX.....
12. Totals...	.....42,210.....	.....5,228.....	.....11,949.....	.....4,268.....	.....3,804.....	.....0.....	.....1,186.....	.....0.....	.....4,985.....	.....0.....	.....5,246.....	.....54,638.....	.....XXX.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....XXX.....	.....49.....	.....3.....
2. 2006.	.....46,385.....	.....310.....	.....46,075.....	.....69.4.....	.....60.6.....	.....69.5.....	.....	.....	.....2.00.....	.....7.....	.....3.....
3. 2007.	.....51,085.....	.....496.....	.....50,589.....	.....71.7.....	.....76.6.....	.....71.7.....	.....	.....	.....2.00.....	.....47.....	.....12.....
4. 2008.	.....54,604.....	.....739.....	.....53,865.....	.....73.1.....	.....109.3.....	.....72.7.....	.....	.....	.....2.00.....	.....51.....	.....13.....
5. 2009.	.....59,916.....	.....718.....	.....59,199.....	.....71.3.....	.....85.5.....	.....71.1.....	.....	.....	.....2.00.....	.....131.....	.....38.....
6. 2010.	.....70,391.....	.....1,770.....	.....68,622.....	.....75.4.....	.....173.8.....	.....74.3.....	.....	.....	.....2.00.....	.....257.....	.....96.....
7. 2011.	.....74,644.....	.....1,121.....	.....73,523.....	.....73.6.....	.....85.9.....	.....73.5.....	.....	.....	.....2.00.....	.....521.....	.....162.....
8. 2012.	.....82,938.....	.....2,349.....	.....80,589.....	.....75.7.....	.....172.5.....	.....74.5.....	.....	.....	.....2.00.....	.....1,800.....	.....540.....
9. 2013.	.....84,083.....	.....1,976.....	.....82,107.....	.....73.5.....	.....121.5.....	.....72.8.....	.....	.....	.....2.00.....	.....3,672.....	.....1,117.....
10. 2014.	.....93,710.....	.....2,425.....	.....91,285.....	.....73.7.....	.....121.9.....	.....73.0.....	.....	.....	.....2.00.....	.....9,211.....	.....2,328.....
11. 2015.	.....106,576.....	.....2,458.....	.....104,118.....	.....76.2.....	.....103.9.....	.....75.8.....	.....	.....	.....2.00.....	.....28,918.....	.....5,663.....
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....44,663.....	.....9,975.....

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.

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	2	3	4	5	6	7	8	9	10	11	12
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	One Year	Two Year
1. Prior.....	.....8,125	.....8,155	.....7,847	.....7,674	.....7,679	.....7,754	.....7,778	.....7,797	.....7,830	.....7,833	.....3	.....35
2. 2006.....	.....38,357	.....38,231	.....38,553	.....38,300	.....38,072	.....38,041	.....38,065	.....38,067	.....38,088	.....38,096	.....8	.....29
3. 2007.....	.....XXX	.....43,173	.....42,987	.....42,909	.....42,683	.....42,325	.....42,362	.....42,384	.....42,490	.....42,638	.....148	.....254
4. 2008.....	.....XXX	.....XXX	.....46,463	.....46,094	.....45,918	.....45,536	.....45,220	.....45,255	.....45,273	.....45,279	.....6	.....24
5. 2009.....	.....XXX	.....XXX	.....XXX	.....53,198	.....51,697	.....51,343	.....50,979	.....50,582	.....50,613	.....50,644	.....31	.....62
6. 2010.....	.....XXX	.....XXX	.....XXX	.....XXX	.....60,132	.....59,224	.....59,391	.....59,378	.....59,008	.....59,035	.....27	.....(343)
7. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....63,928	.....64,110	.....64,235	.....64,216	.....63,717	.....(499)	.....(517)
8. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....70,553	.....70,117	.....70,268	.....70,437	.....169	.....320
9. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....71,889	.....71,867	.....71,730	.....(137)	.....(159)
10. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....81,387	.....79,938	.....(1,448)	.....XXX
11. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....91,161	.....XXX	.....XXX
12. Totals.....											.....(1,693)	.....(296)

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	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015		
1. Prior.....	.....000	.....4,254	.....6,396	.....7,121	.....7,413	.....7,596	.....7,659	.....7,741	.....7,765	.....7,782	.....XXX	.....XXX
2. 2006.....	.....26,493	.....32,806	.....35,655	.....37,146	.....37,722	.....37,906	.....37,989	.....38,024	.....38,069	.....38,088	.....XXX	.....XXX
3. 2007.....	.....XXX	.....29,428	.....36,889	.....39,908	.....41,336	.....41,975	.....42,175	.....42,280	.....42,419	.....42,587	.....XXX	.....XXX
4. 2008.....	.....XXX	.....XXX	.....30,871	.....39,700	.....42,643	.....44,100	.....44,769	.....45,069	.....45,168	.....45,221	.....XXX	.....XXX
5. 2009.....	.....XXX	.....XXX	.....XXX	.....34,141	.....43,603	.....47,201	.....49,205	.....50,016	.....50,382	.....50,493	.....XXX	.....XXX
6. 2010.....	.....XXX	.....XXX	.....XXX	.....XXX	.....38,835	.....50,248	.....54,903	.....57,295	.....58,366	.....58,724	.....XXX	.....XXX
7. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....42,839	.....54,854	.....59,831	.....62,236	.....63,095	.....XXX	.....XXX
8. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....47,028	.....60,682	.....66,023	.....68,278	.....XXX	.....XXX
9. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....47,445	.....62,243	.....67,309	.....XXX	.....XXX
10. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....54,647	.....69,358	.....XXX	.....XXX
11. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....59,920	.....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	2	3	4	5	6	7	8	9	10
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
1. Prior.....	.....1,355	.....550	.....182	.....19	.....22	.....5	.....9	.....11	.....14	.....12
2. 2006.....	.....3,039	.....1,043	.....534	.....205	.....3	.....2	.....4	.....3	.....5	.....3
3. 2007.....	.....XXX	.....3,406	.....1,122	.....571	.....303	.....4	.....4	.....3	.....5	.....3
4. 2008.....	.....XXX	.....XXX	.....4,006	.....1,262	.....688	.....317	.....4	.....3	.....5	.....16
5. 2009.....	.....XXX	.....XXX	.....XXX	.....4,340	.....1,463	.....785	.....458	.....10	.....4	.....36
6. 2010.....	.....XXX	.....XXX	.....XXX	.....XXX	.....4,522	.....1,548	.....730	.....522	.....7	.....38
7. 2011.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....4,570	.....1,713	.....672	.....530	.....3
8. 2012.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....5,438	.....1,646	.....668	.....640
9. 2013.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....5,536	.....1,815	.....745
10. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....5,274	.....1,922
11. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....5,449

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS  
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

		1	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4	5	6	7	8	9
			2	3						
States, Etc.		Active Status	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Losses Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Finance and Service Charges not Included in Premiums	Direct Premiums Written for Federal Purchasing Groups (Incl. in Col. 2)
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	...L....	285,418,681	276,092,779		176,088,163	188,481,467	89,979,974	4,161,212	
12.	Hawaii.....HI	...L....								
13.	Idaho.....ID	...L....								
14.	Illinois.....IL	...L....	1,912,670	2,082,455		967,681	563,970	1,401,197	12,481	
15.	Indiana.....IN	...N....								
16.	Iowa.....IA	...N....								
17.	Kansas.....KS	...N....								
18.	Kentucky.....KY	...N....								
19.	Louisiana.....LA	...N....								
20.	Maine.....ME	...L....	83,726	89,215		39,471	39,619	35,985	1,467	
21.	Maryland.....MD	...N....								
22.	Massachusetts.....MA	...N....								
23.	Michigan.....MI	...N....								
24.	Minnesota.....MN	...L....								
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	...N....								
32.	New Mexico.....NM	...N....								
33.	New York.....NY	...N....								
34.	North Carolina.....NC	...L....	105,730,641	95,352,895		52,656,155	60,388,739	22,431,866	2,046,767	
35.	North Dakota.....ND	...N....								
36.	Ohio.....OH	...L....								
37.	Oklahoma.....OK	...L....								
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	...L....								
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.	US Virgin Islands.....VI	...N....								
56.	Northern Mariana Islands...MP	...N....								
57.	Canada.....CAN	...N....								
58.	Aggregate Other Alien.....OT	XXX	0	0	0	0	0	0	0	0
59.	Totals.....	(a) ...11	393,145,718	373,617,344	0	229,751,470	249,473,795	113,849,022	6,221,927	0

DETAILS OF WRITE-INS

58001. ....	XXX								
58002. ....	XXX								
58003. ....	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0

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

(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.

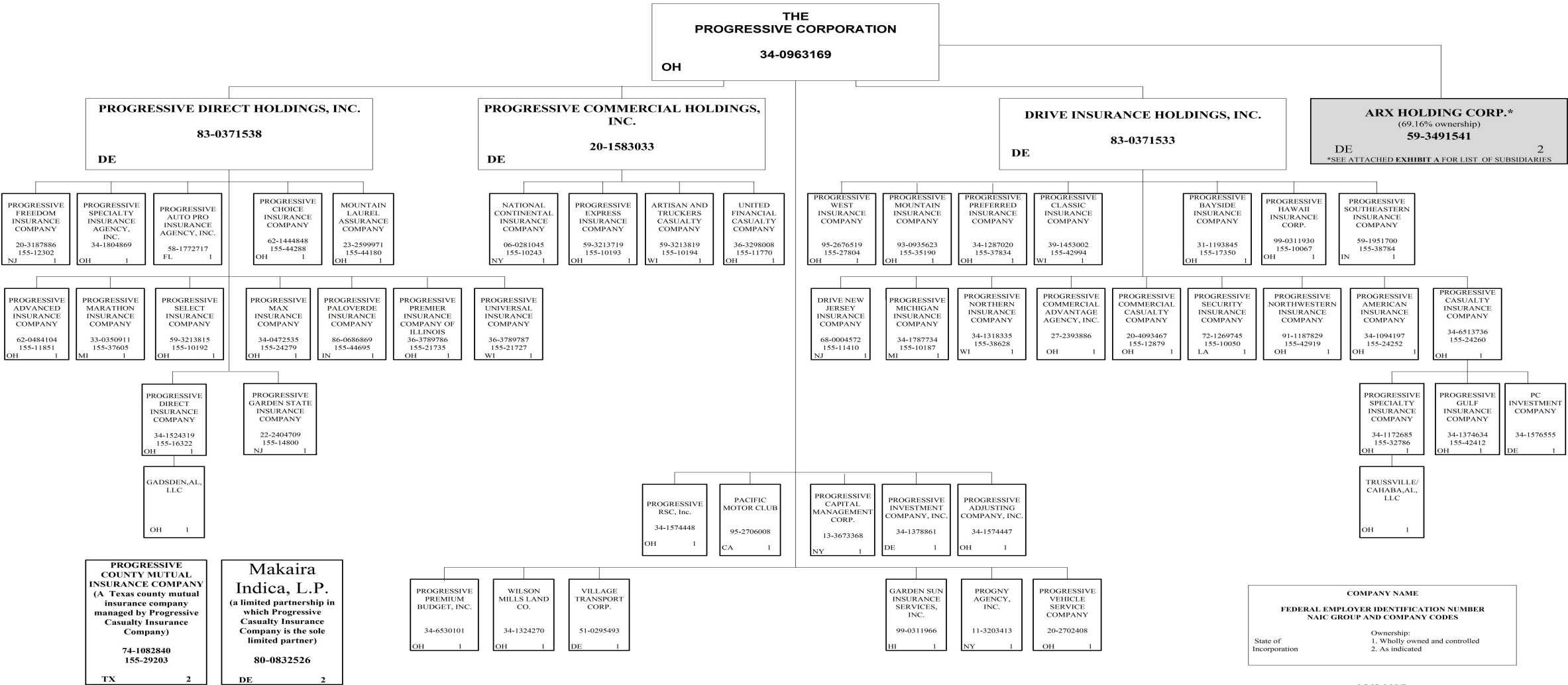
Explanation of Basis of Allocation of Premiums by States, etc.

Allocation on the basis of the location where the vehicle is principally garaged and used.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

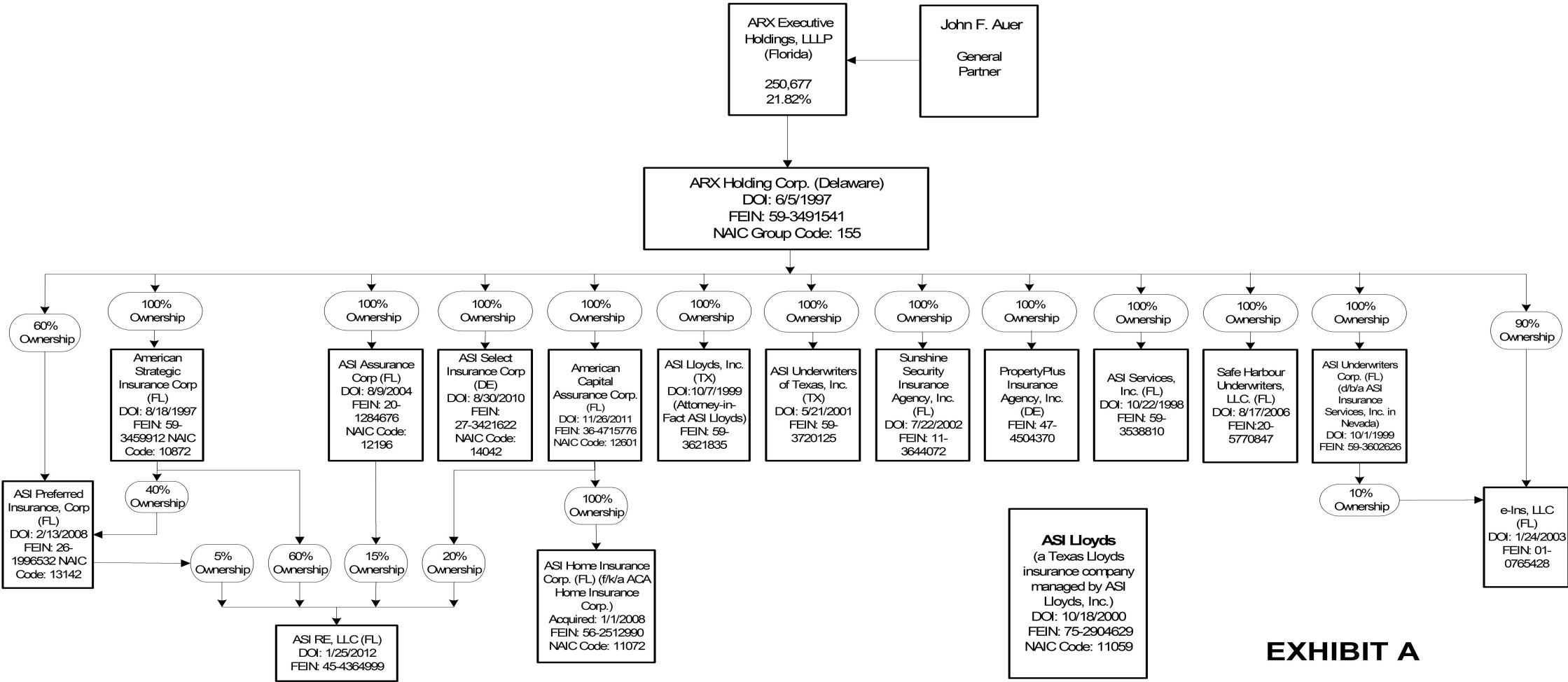


EXHIBIT A