







ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
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35. TOTALS (a)												
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3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ .....

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
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3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ .....

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
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**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
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ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
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ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
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ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
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**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2016

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(a) Finance and service charges not included in Lines 1 to 35 \$ .....

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....												
2.1 Allied lines .....												
2.2 Multiple peril crop .....												
2.3 Federal flood .....												
2.4. Private crop .....												
2.5 Private flood .....												
3. Farmowners multiple peril .....												
4. Homeowners multiple peril .....												
5.1 Commercial multiple peril (non-liability portion) .....												
5.2 Commercial multiple peril (liability portion) .....												
6. Mortgage guaranty .....												
8. Ocean marine .....												
9. Inland marine .....												
10. Financial guaranty .....												
11. Medical professional liability .....												
12. Earthquake .....												
13. Group accident and health (b) .....												
14. Credit accident and health (group and individual) .....												
15.1 Collectively renewable accident and health (b) .....												
15.2 Non-cancellable accident and health(b) .....												
15.3 Guaranteed renewable accident and health(b) .....												
15.4 Non-renewable for stated reasons only (b) .....												
15.5 Other accident only .....												
15.6 Medicare Title XVIII exempt from state taxes or fees .....												
15.7 All other accident and health (b) .....												
15.8 Federal employees health benefits plan premium (b) .....												
16. Workers' compensation .....												
17.1 Other Liability - occurrence .....												
17.2 Other Liability - claims made .....												
17.3 Excess workers' compensation .....												
18. Products liability .....												
19.1 Private passenger auto no-fault (personal injury protection) .....	8,584,680	11,767,435		3,405,029	8,896,428	7,888,618	5,343,845	148,170	203,641	206,283	1,031,591	139,692
19.2 Other private passenger auto liability .....												
19.3 Commercial auto no-fault (personal injury protection) .....												
19.4 Other commercial auto liability .....												
21.1 Private passenger auto physical damage .....	2,974,249	3,972,054		1,161,044	2,208,783	2,056,634	186,668	42,721	27,104	10,502	357,405	.48,398
21.2 Commercial auto physical damage .....												
22. Aircraft (all perils) .....												
23. Fidelity .....												
24. Surety .....												
26. Burglary and theft .....												
27. Boiler and machinery .....												
28. Credit .....												
30. Warranty .....												
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a) .....	11,558,929	15,739,489	0	4,566,073	11,105,211	9,945,252	5,530,513	190,891	230,745	216,785	1,388,996	188,090
<b>DETAILS OF WRITE-INS</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	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	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,716,761

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....												
2.1 Allied lines .....												
2.2 Multiple peril crop .....												
2.3 Federal flood .....												
2.4. Private crop .....												
2.5 Private flood .....												
3. Farmowners multiple peril .....												
4. Homeowners multiple peril .....												
5.1 Commercial multiple peril (non-liability portion) .....												
5.2 Commercial multiple peril (liability portion) .....												
6. Mortgage guaranty .....												
8. Ocean marine .....												
9. Inland marine .....												
10. Financial guaranty .....												
11. Medical professional liability .....												
12. Earthquake .....												
13. Group accident and health (b) .....												
14. Credit accident and health (group and individual) .....												
15.1 Collectively renewable accident and health (b) .....												
15.2 Non-cancellable accident and health(b) .....												
15.3 Guaranteed renewable accident and health(b) .....												
15.4 Non-renewable for stated reasons only (b) .....												
15.5 Other accident only .....												
15.6 Medicare Title XVIII exempt from state taxes or fees .....												
15.7 All other accident and health (b) .....												
15.8 Federal employees health benefits plan premium (b) .....												
16. Workers' compensation .....												
17.1 Other Liability - occurrence .....												
17.2 Other Liability - claims made .....												
17.3 Excess workers' compensation .....												
18. Products liability .....												
19.1 Private passenger auto no-fault (personal injury protection) .....												
19.2 Other private passenger auto liability .....												
19.3 Commercial auto no-fault (personal injury protection) .....												
19.4 Other commercial auto liability .....												
21.1 Private passenger auto physical damage .....												
21.2 Commercial auto physical damage .....												
22. Aircraft (all perils) .....												
23. Fidelity .....												
24. Surety .....												
26. Burglary and theft .....												
27. Boiler and machinery .....												
28. Credit .....												
30. Warranty .....												
34. Aggregate write-ins for other lines of business .....												
35. TOTALS (a)												
<b>DETAILS OF WRITE-INS</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ .....

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....												
2.1 Allied lines .....												
2.2 Multiple peril crop .....												
2.3 Federal flood .....												
2.4. Private crop .....												
2.5 Private flood .....												
3. Farmowners multiple peril .....												
4. Homeowners multiple peril .....												
5.1 Commercial multiple peril (non-liability portion) .....												
5.2 Commercial multiple peril (liability portion) .....												
6. Mortgage guaranty .....												
8. Ocean marine .....												
9. Inland marine .....												
10. Financial guaranty .....												
11. Medical professional liability .....												
12. Earthquake .....												
13. Group accident and health (b) .....												
14. Credit accident and health (group and individual) .....												
15.1 Collectively renewable accident and health (b) .....												
15.2 Non-cancellable accident and health(b) .....												
15.3 Guaranteed renewable accident and health(b) .....												
15.4 Non-renewable for stated reasons only (b) .....												
15.5 Other accident only .....												
15.6 Medicare Title XVIII exempt from state taxes or fees .....												
15.7 All other accident and health (b) .....												
15.8 Federal employees health benefits plan premium (b) .....												
16. Workers' compensation .....												
17.1 Other Liability - occurrence .....												
17.2 Other Liability - claims made .....												
17.3 Excess workers' compensation .....												
18. Products liability .....												
19.1 Private passenger auto no-fault (personal injury protection) .....	2,695,288	2,122,570		1,226,198	1,531,043	2,279,363	949,587	92,798	71,006	37,209	323,884	.40,681
19.2 Other private passenger auto liability .....	9,942,133	8,130,736		4,347,826	3,908,426	6,310,915	3,476,574	58,440	118,663	142,533	1,194,712	150,061
19.3 Commercial auto no-fault (personal injury protection) .....												
19.4 Other commercial auto liability .....												
21.1 Private passenger auto physical damage .....	2,465,630	1,882,617		1,103,913	1,540,641	1,692,473	188,300	9,643	12,202	4,977	296,286	.37,215
21.2 Commercial auto physical damage .....												
22. Aircraft (all perils) .....												
23. Fidelity .....												
24. Surety .....												
26. Burglary and theft .....												
27. Boiler and machinery .....												
28. Credit .....												
30. Warranty .....												
34. Aggregate write-ins for other lines of business .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
35. TOTALS (a) .....	15,103,051	12,135,923	0	6,677,937	6,980,110	10,282,751	4,614,461	160,881	201,871	184,719	1,814,882	227,957
<b>DETAILS OF WRITE-INS</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page .....	.0	.0	.0	.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	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,076,391

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....												
2.1 Allied lines .....												
2.2 Multiple peril crop .....												
2.3 Federal flood .....												
2.4. Private crop .....												
2.5 Private flood .....												
3. Farmowners multiple peril .....												
4. Homeowners multiple peril .....												
5.1 Commercial multiple peril (non-liability portion) .....												
5.2 Commercial multiple peril (liability portion) .....												
6. Mortgage guaranty .....												
8. Ocean marine .....												
9. Inland marine .....												
10. Financial guaranty .....												
11. Medical professional liability .....												
12. Earthquake .....												
13. Group accident and health (b) .....												
14. Credit accident and health (group and individual) .....												
15.1 Collectively renewable accident and health (b) .....												
15.2 Non-cancellable accident and health(b) .....												
15.3 Guaranteed renewable accident and health(b) .....												
15.4 Non-renewable for stated reasons only (b) .....												
15.5 Other accident only .....												
15.6 Medicare Title XVIII exempt from state taxes or fees .....												
15.7 All other accident and health (b) .....												
15.8 Federal employees health benefits plan premium (b) .....												
16. Workers' compensation .....												
17.1 Other Liability - occurrence .....												
17.2 Other Liability - claims made .....												
17.3 Excess workers' compensation .....												
18. Products liability .....												
19.1 Private passenger auto no-fault (personal injury protection) .....	2,827,992	950,836		.1,877,156	228,088	634,158	406,070	.0	16,668	16,668	339,830	.58,847
19.2 Other private passenger auto liability .....												
19.3 Commercial auto no-fault (personal injury protection) .....												
19.4 Other commercial auto liability .....												
21.1 Private passenger auto physical damage .....	975,521	.314,150		.661,371	219,192	366,238	147,046	.0	831	831	117,225	20,299
21.2 Commercial auto physical damage .....												
22. Aircraft (all perils) .....												
23. Fidelity .....												
24. Surety .....												
26. Burglary and theft .....												
27. Boiler and machinery .....												
28. Credit .....												
30. Warranty .....												
34. Aggregate write-ins for other lines of business .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
35. TOTALS (a) .....	3,803,513	1,264,986	0	2,538,527	447,280	1,000,396	553,116	0	17,499	17,499	457,055	79,146
<b>DETAILS OF WRITE-INS</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page .....	.0	.0	.0	.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	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 126,157

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....												
2.1 Allied lines .....												
2.2 Multiple peril crop .....												
2.3 Federal flood .....												
2.4. Private crop .....												
2.5 Private flood .....												
3. Farmowners multiple peril .....												
4. Homeowners multiple peril .....												
5.1 Commercial multiple peril (non-liability portion) .....												
5.2 Commercial multiple peril (liability portion) .....												
6. Mortgage guaranty .....												
8. Ocean marine .....												
9. Inland marine .....												
10. Financial guaranty .....												
11. Medical professional liability .....												
12. Earthquake .....												
13. Group accident and health (b) .....												
14. Credit accident and health (group and individual) .....												
15.1 Collectively renewable accident and health (b) .....												
15.2 Non-cancellable accident and health(b) .....												
15.3 Guaranteed renewable accident and health(b) .....												
15.4 Non-renewable for stated reasons only (b) .....												
15.5 Other accident only .....												
15.6 Medicare Title XVIII exempt from state taxes or fees .....												
15.7 All other accident and health (b) .....												
15.8 Federal employees health benefits plan premium (b) .....												
16. Workers' compensation .....												
17.1 Other Liability - occurrence .....												
17.2 Other Liability - claims made .....												
17.3 Excess workers' compensation .....												
18. Products liability .....												
19.1 Private passenger auto no-fault (personal injury protection) .....	1,108,350	1,448,888		445,270	.1,136,989	1,045,190	725,333	52,178	.66,352	.25,399	133,187	.30,032
19.2 Other private passenger auto liability .....												
19.3 Commercial auto no-fault (personal injury protection) .....												
19.4 Other commercial auto liability .....												
21.1 Private passenger auto physical damage .....	629,223	.842,275		258,176	.480,225	.456,869	31,348	2,992	-(2,170)	.2,227	.75,612	.17,050
21.2 Commercial auto physical damage .....												
22. Aircraft (all perils) .....												
23. Fidelity .....												
24. Surety .....												
26. Burglary and theft .....												
27. Boiler and machinery .....												
28. Credit .....												
30. Warranty .....												
34. Aggregate write-ins for other lines of business .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
35. TOTALS (a) .....	1,737,573	2,291,163	0	703,446	1,617,214	1,502,059	756,681	55,170	64,182	27,626	208,799	47,082
<b>DETAILS OF WRITE-INS</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page .....	.0	.0	.0	.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	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 130,609

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....												
2.1 Allied lines .....												
2.2 Multiple peril crop .....												
2.3 Federal flood .....												
2.4. Private crop .....												
2.5 Private flood .....												
3. Farmowners multiple peril .....												
4. Homeowners multiple peril .....												
5.1 Commercial multiple peril (non-liability portion) .....												
5.2 Commercial multiple peril (liability portion) .....												
6. Mortgage guaranty .....												
8. Ocean marine .....												
9. Inland marine .....												
10. Financial guaranty .....												
11. Medical professional liability .....												
12. Earthquake .....												
13. Group accident and health (b) .....												
14. Credit accident and health (group and individual) .....												
15.1 Collectively renewable accident and health (b) .....												
15.2 Non-cancellable accident and health(b) .....												
15.3 Guaranteed renewable accident and health(b) .....												
15.4 Non-renewable for stated reasons only (b) .....												
15.5 Other accident only .....												
15.6 Medicare Title XVIII exempt from state taxes or fees .....												
15.7 All other accident and health (b) .....												
15.8 Federal employees health benefits plan premium (b) .....												
16. Workers' compensation .....												
17.1 Other Liability - occurrence .....												
17.2 Other Liability - claims made .....												
17.3 Excess workers' compensation .....												
18. Products liability .....												
19.1 Private passenger auto no-fault (personal injury protection) .....	182,522	192,965		55,435	71,244	82,236	27,144	0	(351)	3,383	21,933	3,039
19.2 Other private passenger auto liability .....	17,501,120	20,004,353		5,570,338	13,174,656	16,610,499	8,141,418	120,361	314,199	350,679	2,103,049	291,394
19.3 Commercial auto no-fault (personal injury protection) .....												
19.4 Other commercial auto liability .....												
21.1 Private passenger auto physical damage .....	9,919,371	11,352,136		2,913,965	7,988,282	8,212,117	722,956	27,677	.52,606	.30,014	1,191,977	165,158
21.2 Commercial auto physical damage .....												
22. Aircraft (all perils) .....												
23. Fidelity .....												
24. Surety .....												
26. Burglary and theft .....												
27. Boiler and machinery .....												
28. Credit .....												
30. Warranty .....												
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a) .....	27,603,013	31,549,454	0	8,539,738	21,234,182	24,904,852	8,891,518	148,038	366,454	384,076	3,316,959	459,591
<b>DETAILS OF WRITE-INS</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	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	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,775,597

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....												
2.1 Allied lines .....												
2.2 Multiple peril crop .....												
2.3 Federal flood .....												
2.4. Private crop .....												
2.5 Private flood .....												
3. Farmowners multiple peril .....												
4. Homeowners multiple peril .....												
5.1 Commercial multiple peril (non-liability portion) .....												
5.2 Commercial multiple peril (liability portion) .....												
6. Mortgage guaranty .....												
8. Ocean marine .....												
9. Inland marine .....												
10. Financial guaranty .....												
11. Medical professional liability .....												
12. Earthquake .....												
13. Group accident and health (b) .....												
14. Credit accident and health (group and individual) .....												
15.1 Collectively renewable accident and health (b) .....												
15.2 Non-cancellable accident and health(b) .....												
15.3 Guaranteed renewable accident and health(b) .....												
15.4 Non-renewable for stated reasons only (b) .....												
15.5 Other accident only .....												
15.6 Medicare Title XVIII exempt from state taxes or fees .....												
15.7 All other accident and health (b) .....												
15.8 Federal employees health benefits plan premium (b) .....												
16. Workers' compensation .....												
17.1 Other Liability - occurrence .....												
17.2 Other Liability - claims made .....												
17.3 Excess workers' compensation .....												
18. Products liability .....												
19.1 Private passenger auto no-fault (personal injury protection) .....	16,523,756	15,433,104		7,385,733	7,918,519	11,533,786	5,673,950	49,069	262,271	270,544	1,985,603	415,442
19.2 Other private passenger auto liability .....												
19.3 Commercial auto no-fault (personal injury protection) .....												
19.4 Other commercial auto liability .....												
21.1 Private passenger auto physical damage .....	7,214,127	6,768,485		3,107,287	5,961,609	6,354,417	700,819	12,659	24,975	17,895	866,897	181,379
21.2 Commercial auto physical damage .....												
22. Aircraft (all perils) .....												
23. Fidelity .....												
24. Surety .....												
26. Burglary and theft .....												
27. Boiler and machinery .....												
28. Credit .....												
30. Warranty .....												
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a) .....	23,737,883	22,201,589	0	10,493,020	13,880,128	17,888,203	6,374,769	61,728	287,246	288,439	2,852,500	596,821
<b>DETAILS OF WRITE-INS</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	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	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,675,848

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0473

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2016

NAIC Company Code 13703

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4. Private crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine .....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability .....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit accident and health (group and individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable accident and health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancellable accident and health(b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable accident and health(b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees .....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other accident and health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits plan premium (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - claims made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection) .....	2,877,810	2,315,535	0	1,281,633	.1,602,287	2,361,599	976,731	92,798	70,655	.40,592	345,817	.43,720
19.2 Other private passenger auto liability .....	56,488,031	57,735,352	0	23,031,352	35,263,106	44,023,166	23,767,190	428,218	981,794	1,012,106	6,787,972	1,085,468
19.3 Commercial auto no-fault (personal injury protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage .....	24,178,121	25,131,717	0	9,205,756	18,398,732	19,138,748	1,977,137	.95,692	115,548	.66,446	2,905,402	.469,499
21.2 Commercial auto physical damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a) .....	83,543,962	85,182,604	0	33,518,741	55,264,125	65,523,513	26,721,058	616,708	1,167,997	1,119,144	10,039,191	1,598,687
<b>DETAILS OF WRITE-INS</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page .....	.0	.0	.0	.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	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 6,501,363

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0.

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

## SCHEDULE F - PART 1

Assumed Reinsurance as of December 31, Current Year (000 OMITTED)

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8	9	10	11	12	13	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE								
13-2960609 ..37648 ..	Permanent General Assurance Corporation .....	OH ..	OH ..	97,172 ..	.....	22,489 ..	22,489 ..	.....	.....	43,229 ..	.....	.....	.....	.....
62-1482846 ..22906 ..	Permanent General Assurance Corporation of Ohio .....	OH ..	.....	.....	.....	0 ..	0 ..	.....	3,224 ..	.....	.....	.....	.....	.....
0199999. Affiliates - U.S. Intercompany Pooling	.....	.....	97,172 ..	0 ..	22,489 ..	22,489 ..	0 ..	0 ..	3,224 ..	43,229 ..	0 ..	0 ..	0 ..	0 ..
0499999. Total - U.S. Non-Pool	.....	.....	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..
0799999. Total - Other (Non-U.S.)	.....	.....	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..
0899999. Total - Affiliates	.....	.....	97,172 ..	0 ..	22,489 ..	22,489 ..	0 ..	0 ..	3,224 ..	43,229 ..	0 ..	0 ..	0 ..	0 ..
0999998. Other U.S. Unaffiliated Insurers Reinsurance for which the total of Column 8 is less than \$100,000	.....	.....	.....	.....	.....	0 ..	.....	.....	.....	.....	.....	.....	.....	.....
0999999. Total Other U.S. Unaffiliated Insurers	.....	.....	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..
1099998. Pools and Associations - Reinsurance for which the total of Column 8 is less than \$100,000 - Mandatory Pools	.....	.....	.....	.....	.....	0 ..	.....	.....	.....	.....	.....	.....	.....	.....
1099999. Total Pools, Associations or Other Similar Facilities - Mandatory Pools	.....	.....	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..
1199998. Pools and Associations - Reinsurance for which the total of Column 8 is less than \$100,000 - Voluntary Pools	.....	.....	.....	.....	.....	0 ..	.....	.....	.....	.....	.....	.....	.....	.....
1199999. Total Pools, Associations or Other Similar Facilities - Voluntary Pools	.....	.....	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..
1299999. Total - Pools and Associations	.....	.....	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..
1399998. Other Non-U.S. Insurers - Reinsurance for which the total of Column 8 is less than \$100,000	.....	.....	.....	.....	.....	0 ..	.....	.....	.....	.....	.....	.....	.....	.....
1399999. Total Other Non-U.S. Insurers	.....	.....	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..	0 ..
9999999 Totals	.....	.....	97,172 ..	0 ..	22,489 ..	22,489 ..	0 ..	0 ..	3,224 ..	43,229 ..	0 ..	0 ..	0 ..	0 ..

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

## **SCHEDULE F - PART 2**

### Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

# NONE

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**SCHEDULE F - PART 3**

Ceded Reinsurance as of December 31, Current Year (000 OMITTED)

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Cols. 15 - [16 + 17]	19 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 thru 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			
13-2960609	37648	Permanent General Assurance Corporation	OH	2	83,544	1,145		21,568		5,216	1,119	33,519		62,567			62,567		
62-1482846	22906	Permanent General Assurance Corporation of Ohio	OH												0		0		
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling					83,544	1,145	0	21,568	0	5,216	1,119	33,519	0	62,567	0	0	62,567	0	
0499999. Total Authorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0899999. Total Authorized - Affiliates					83,544	1,145	0	21,568	0	5,216	1,119	33,519	0	62,567	0	0	62,567	0	
43-1898350	11054	Maiden Reinsurance N. America Inc.	MO												(63)		(63)		
0999998. Total Authorized - Other U.S. Unaffiliated Insurers (Under \$100,000)															0		0		
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					0	0	0	0	0	(63)	0	0	0	(63)	0	0	(63)	0	
1099999. Total Authorized - Pools - Mandatory Pools					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
1299998. Total Authorized - Other Non-U.S. Insurers (Under \$100,000)															0		0		
1299999. Total Authorized - Other Non-U.S. Insurers					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
1399999. Total Authorized					83,544	1,145	0	21,568	0	5,153	1,119	33,519	0	62,504	0	0	62,504	0	
1799999. Total Unauthorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2099999. Total Unauthorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2199999. Total Unauthorized - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2299998. Total Unauthorized - Other U.S. Unaffiliated Insurers (Under \$100,000)															0		0		
2299999. Total Unauthorized - Other U.S. Unaffiliated Insurers					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2599998. Total Unauthorized - Other Non-U.S. Insurers (Under \$100,000)															0		0		
2599999. Total Unauthorized - Other Non-U.S. Insurers					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2699999. Total Unauthorized					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3099999. Total Certified - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3399999. Total Certified - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3499999. Total Certified - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3599998. Total Certified - Other U.S. Unaffiliated Insurers (Under \$100,000)															0		0		
3599999. Total Certified - Other U.S. Unaffiliated Insurers					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3899998. Total Certified - Other Non-U.S. Insurers (Under \$100,000)															0		0		
3899999. Total Certified - Other Non-U.S. Insurers					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3999999. Total Certified					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4099999. Total Authorized, Unauthorized and Certified					83,544	1,145	0	21,568	0	5,153	1,119	33,519	0	62,504	0	0	62,504	0	
4199999. Total Protected Cells															0		0		
9999999 Totals					83,544	1,145	0	21,568	0	5,153	1,119	33,519	0	62,504	0	0	62,504	0	

NOTE: A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties.

The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

1 Name of Reinsurer	2 Commission Rate	3 Ceded Premium
1.		
2.		
3.		
4.		
5.		

B. Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on the total recoverables, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated
1. Permanent General Assurance Corporation	62,567	83,544	Yes [ X ] No [ ]
2. Maiden Reinsurance N. America Inc.	(63)		Yes [ ] No [ X ]
3.			Yes [ ] No [ ]
4.			Yes [ ] No [ ]
5.			Yes [ ] No [ ]

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**SCHEDULE F - PART 4**

Aging of Ceded Reinsurance as of December 31, Current Year (000 OMITTED)

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						11 Total Due Cols. 5 + 10	12 Percentage Overdue Col. 10/Col. 11	13 Percentage More Than 120 Days Overdue Col. 9/Col. 11	
				5 Current	Overdue								
					6 1 to 29 Days	7 30 to 90 Days	8 91 to 120 Days	9 Over 120 Days	10 Total Overdue Cols. 6 + 7 + 8 + 9				
13-2960609	37648	Permanent General Assurance Corporation	OH	1,145					0	1,145	0.0	0.0	
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling				1,145	0	0	0	0	0	1,145	0.0	0.0	
0499999. Total Authorized - Affiliates - U.S. Non-Pool				0	0	0	0	0	0	0	0.0	0.0	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				0	0	0	0	0	0	0	0.0	0.0	
0899999. Total Authorized - Affiliates				1,145	0	0	0	0	0	1,145	0.0	0.0	
43-1898350	11054	Maiden Reinsurance N. America Inc.	MO							0	0.0	0.0	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers				0	0	0	0	0	0	0	0.0	0.0	
1399999. Total Authorized				1,145	0	0	0	0	0	1,145	0.0	0.0	
1799999. Total Unauthorized - Affiliates - U.S. Non-Pool				0	0	0	0	0	0	0	0.0	0.0	
2099999. Total Unauthorized - Affiliates - Other (Non-U.S.)				0	0	0	0	0	0	0	0.0	0.0	
2199999. Total Unauthorized - Affiliates				0	0	0	0	0	0	0	0.0	0.0	
2699999. Total Unauthorized				0	0	0	0	0	0	0	0.0	0.0	
3099999. Total Certified - Affiliates - U.S. Non-Pool				0	0	0	0	0	0	0	0.0	0.0	
3399999. Total Certified - Affiliates - Other (Non-U.S.)				0	0	0	0	0	0	0	0.0	0.0	
3499999. Total Certified - Affiliates				0	0	0	0	0	0	0	0.0	0.0	
3999999. Total Certified				0	0	0	0	0	0	0	0.0	0.0	
4099999. Total Authorized, Unauthorized and Certified				1,145	0	0	0	0	0	1,145	0.0	0.0	
4199999. Total Protected Cells										0	0.0	0.0	
9999999 Totals				1,145	0	0	0	0	0	1,145	0.0	0.0	

Schedule F - Part 5

**N O N E**

Schedule F - Part 5 - Bank Footnote

**N O N E**

Schedule F - Part 6 - Section 1 - Provision for Reinsurance Ceded to Certified Reinsurers

**N O N E**

Schedule F - Part 6 - Section 1 - Bank Footnote

**N O N E**

Schedule F - Part 6 - Section 2 - Provision for Overdue Reinsurance Ceded to Certified Reinsurers

**N O N E**

Schedule F - Part 7 - Provision for Overdue Authorized Reinsurance

**N O N E**

Schedule F - Part 8 - Provision for Overdue Reinsurance

**N O N E**

**SCHEDULE F - PART 9**

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	77,047,236		77,047,236
2. Premiums and considerations (Line 15) .....	33,975,683		33,975,683
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) .....	1,145,314	(1,145,314)	0
4. Funds held by or deposited with reinsured companies (Line 16.2) .....	0		0
5. Other assets .....	6,473,495		6,473,495
6. Net amount recoverable from reinsurers .....		62,504,258	62,504,258
7. Protected cell assets (Line 27) .....	0		0
8. <b>Totals (Line 28)</b> .....	<b>118,641,728</b>	<b>61,358,944</b>	<b>180,000,672</b>
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	35,707,360	27,840,201	63,547,561
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	1,222,369		1,222,369
11. Unearned premiums (Line 9) .....	43,229,434	33,518,743	76,748,177
12. Advance premiums (Line 10) .....	45,908		45,908
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) .....	0		0
15. Funds held by company under reinsurance treaties (Line 13) .....	0		0
16. Amounts withheld or retained by company for account of others (Line 14) .....			0
17. Provision for reinsurance (Line 16) .....			0
18. Other liabilities .....	1,801,680		1,801,680
19. Total liabilities excluding protected cell business (Line 26) .....	82,006,751	61,358,944	143,365,695
20. Protected cell liabilities (Line 27) .....			0
21. Surplus as regards policyholders (Line 37)	36,634,977	XXX	36,634,977
<b>22. Totals (Line 38)</b>	<b>118,641,728</b>	<b>61,358,944</b>	<b>180,000,672</b>

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? \_\_\_\_\_

Yes [ ] No [ X ]

If yes, give full explanation: \_\_\_\_\_

Schedule H - Part 1

**N O N E**

Schedule H - Part 2 - Reserves and Liabilities

**N O N E**

Schedule H - Part 3 - Prior Year's Claim Reserves and Liabilities

**N O N E**

Schedule H - Part 4 - Reinsurance

**N O N E**

Schedule H - Part 5 - Health Claims

**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

## SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX									XXX	
2. 2007													
3. 2008													
4. 2009													
5. 2010													
6. 2011													
7. 2012													
8. 2013													
9. 2014													
10. 2015													
11. 2016													
12. Totals	XXX	XXX	XXX									XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	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													
2. 2007													
3. 2008													
4. 2009													
5. 2010													
6. 2011													
7. 2012													
8. 2013													
9. 2014													
10. 2015													
11. 2016													
12. Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2007											
3. 2008											
4. 2009											
5. 2010											
6. 2011											
7. 2012											
8. 2013											
9. 2014											
10. 2015											
11. 2016											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX	(12)	(2)	0	0	0	0	11	(10)	XXX	
2. 2007	24,055	115	23,940	15,490	150	611	4	1,449	0	213	17,396	4,250	
3. 2008	24,860	111	24,749	15,474	66	568	3	1,265	0	204	17,238	4,128	
4. 2009	26,328	32	26,296	17,402	44	768	5	1,892	0	223	20,013	4,279	
5. 2010	33,387	0	33,387	22,036	0	1,340	0	2,309	0	296	25,685	5,400	
6. 2011	36,772	0	36,772	23,756	0	1,115	0	2,651	0	367	27,522	5,858	
7. 2012	35,649	198	35,451	22,027	106	698	4	2,472	0	284	25,087	5,579	
8. 2013	39,504	73	39,431	24,447	146	713	9	2,677	0	266	27,682	6,054	
9. 2014	41,209	45	41,164	23,723	25	500	1	2,678	0	278	26,875	6,059	
10. 2015	50,129	4	50,125	29,303	4	334	0	3,457	0	305	33,090	7,482	
11. 2016	64,124	91	64,033	21,828	60	97	0	3,439	0	241	25,304	9,666	
12. Totals	XXX	XXX	XXX	215,474	599	6,744	26	24,289	0	2,688	245,882	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Case Basis							
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.	0	0	0	0	0	0	0	0	0	0	0	0	0			
2. 2007	4	0	(1)	0	0	0	0	0	0	0	1	3	0			
3. 2008	0	0	(2)	0	0	0	0	0	1	0	2	(1)	1			
4. 2009	3	0	(9)	0	0	0	0	0	0	0	7	(6)	0			
5. 2010	19	0	(24)	0	0	0	0	3	0	2	11	0	2			
6. 2011	.54	0	(50)	0	0	0	16	0	3	0	18	23	4			
7. 2012	79	0	70	8	0	0	37	0	5	0	20	183	6			
8. 2013	434	4	(38)	50	0	0	98	0	12	0	28	452	14			
9. 2014	876	2	7	0	0	0	203	0	39	0	39	1,123	.47			
10. 2015	3,712	.0	537	0	0	0	543	0	190	0	91	4,982	231			
11. 2016	15,204	55	8,903	0	0	0	1,172	0	1,619	0	376	26,843	1,968			
12. Totals	20,385	61	9,393	58	0	0	2,072	0	1,870	0	593	33,601	2,273			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2007	17,553	154	17,399	73.0	133.9	72.7	0	0	17.0	3	0
3. 2008	17,306	69	17,237	69.6	62.2	69.6	0	0	17.0	(2)	1
4. 2009	20,056	49	20,007	76.2	153.1	76.1	0	0	17.0	(6)	0
5. 2010	25,685	0	25,685	76.9	0.0	76.9	0	0	17.0	(5)	5
6. 2011	27,545	0	27,545	74.9	0.0	74.9	0	0	17.0	4	19
7. 2012	25,388	118	25,270	71.2	59.6	71.3	0	0	17.0	141	42
8. 2013	28,342	209	28,133	71.7	286.3	71.3	0	0	17.0	342	110
9. 2014	28,025	28	27,997	68.0	62.2	68.0	0	0	17.0	881	242
10. 2015	38,076	4	38,072	76.0	100.0	76.0	0	0	17.0	4,249	733
11. 2016	52,262	115	52,147	81.5	126.4	81.4	0	0	17.0	24,052	2,791
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	29,659	3,942

Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical  
**N O N E**

Schedule P - Part 1D - Workers' Compensation (Excluding Excess Workers' Compensation)  
**N O N E**

Schedule P - Part 1E - Commercial Multiple Peril  
**N O N E**

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence  
**N O N E**

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made  
**N O N E**

Schedule P - Part 1G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)  
**N O N E**

Schedule P - Part 1H - Section 1 - Other Liability - Occurrence  
**N O N E**

Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made  
**N O N E**

Schedule P - Part 1I - Special Property (Fire, Allied Lines...)  
**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	(45)	(1)	6	0	1	0	74	(37)	XXX	
2. 2015	17,493	0	17,493	10,331	0	76	0	1,474	0	1,653	11,881	4,478	
3. 2016	24,915	0	24,915	14,717	0	39	0	1,578	0	1,333	16,334	6,889	
4. Totals	XXX	XXX	XXX	25,003	(1)	121	0	3,053	0	3,060	28,178	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior	0	0	(73)	0	0	0	6	0	0	0	78	(67)	0			
2. 2015	.9	0	(57)	0	0	0	21	0	1	0	85	(26)	4			
3. 2016	2,155	0	(178)	0	0	0	93	0	129	0	1,381	2,199	543			
4. Totals	2,164	0	(308)	0	0	0	120	0	130	0	1,544	2,106	547			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
2. 2015	11,855	0	11,855	.67.8	0.0	67.8	0	0	17.0	(48)	22
3. 2016	18,533	0	18,533	74.4	0.0	74.4	0	0	17.0	1,977	222
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,856	250

Schedule P - Part 1K - Fidelity/Surety

**N O N E**

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

**N O N E**

Schedule P - Part 1M - International

**N O N E**

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

**N O N E**

Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability

**N O N E**

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

**N O N E**

Schedule P - Part 1R - Section 1 - Products Liability - Occurrence

**N O N E**

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

**N O N E**

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

**N O N E**

Schedule P - Part 1T - Warranty

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

## **SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$'000 OMITTED)										DEVELOPMENT	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	11 One Year	12 Two Year
1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XX	XX							
8. 2013	XXX	XXX	XXX	XX	XX	XX						
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

1. Prior	2,568	2,364	2,407	2,464	2,472	2,460	2,439	2,432	2,417	2,407	(10)	(25)
2. 2007	15,703	15,713	15,673	15,790	15,871	15,928	15,942	15,950	15,948	15,950	2	0
3. 2008	XXX	15,918	15,622	15,838	15,920	15,944	15,960	15,967	15,970	15,971	1	4
4. 2009	XXX	XXX	16,542	17,631	17,846	17,997	18,021	18,116	18,129	18,115	(14)	(1)
5. 2010	XXX	XXX	XXX	21,195	22,606	22,994	23,122	23,243	23,437	23,374	(63)	131
6. 2011	XXX	XXX	XXX	XXX	24,980	24,690	24,781	24,906	24,965	24,891	(74)	(15)
7. 2012	XXX	XXX	XXX	XXX	XXX	22,503	22,643	22,708	22,824	22,793	(31)	85
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	24,906	24,916	25,492	25,445	(47)	529
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25,410	25,254	25,281	.27	(129)
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31,823	34,425	2,602	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	47,089	XXX	XXX	
										12. Totals	2,393	579

**SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

## **SCHEDULE P - PART 2D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)**

SCHEDULE P - PART 2E - COMMERCIAL MUI TIPI E PERBII

Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence

**N O N E**

Schedule P - Part 2F - Section 2 - Medical Professional Liability - Claims-Made

**N O N E**

Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

**N O N E**

Schedule P - Part 2H - Section 1 - Other Liability - Occurrence

**N O N E**

Schedule P - Part 2H - Section 2- Other Liability - Claims-Made

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	11 One Year	12 Two Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
											4. Totals	

**NONE**

**SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE**

1. Prior	XXX	550	543	483	(60)	(67)						
2. 2015	XXX	9,685	10,380	695	XXX							
3. 2016	XXX	16,826	XXX	XXX	XXX							
										4. Totals	635	(67)

**SCHEDULE P - PART 2K - FIDELITY/SURETY**

1. Prior	XXX											
2. 2015	XXX					XXX						
3. 2016	XXX				XXX	XXX						
										4. Totals		

**NONE**

**SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**

1. Prior	XXX											
2. 2015	XXX					XXX						
3. 2016	XXX				XXX	XXX						
										4. Totals		

**NONE**

**SCHEDULE P - PART 2M - INTERNATIONAL**

1. Prior												
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX	XX							
8. 2013	XXX	XXX	XXX	XXX	XX	XX	XX					
9. 2014	XXX	XXX	XXX	XXX	XXX	XX	XX	XX				
10. 2015	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals	

**NONE**

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property

**N O N E**

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

**N O N E**

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

**N O N E**

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

**N O N E**

Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made

**N O N E**

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty

**N O N E**

Schedule P - Part 2T - Warranty

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XX								
7. 2012	XXX	XXX	XXX	XX	XX							
8. 2013	XXX	XXX	XXX	XXX	XX	XX						
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

**NONE**

**SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

1. Prior	.000	1,728	2,264	2,427	2,446	2,454	2,438	2,431	2,417	2,407	(385)	(165)
2. 2007	7,873	13,965	15,237	15,651	15,822	15,871	15,936	15,946	15,949	15,947	3,085	1,165
3. 2008	XXX	8,709	14,234	15,482	15,822	15,919	15,958	15,973	15,978	15,973	3,062	1,065
4. 2009	XXX	XXX	9,575	16,093	17,328	17,776	17,979	18,108	18,120	18,121	3,261	1,018
5. 2010	XXX	XXX	XXX	12,149	20,161	22,120	22,806	23,110	23,289	23,376	4,116	1,282
6. 2011	XXX	XXX	XXX	XXX	13,485	21,635	23,734	24,475	24,701	24,871	4,446	1,408
7. 2012	XXX	XXX	XXX	XXX	XXX	11,990	19,970	21,809	22,488	22,615	4,160	1,413
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	12,946	21,891	24,370	25,005	4,509	1,531
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,091	22,146	24,197	4,304	1,708
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,361	29,633	5,079	2,172
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,865	4,948	2,750

**SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XX	XX	XX	XX	XX	XX	XX		
9. 2014	XXX	XXX	XXX	XX								
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

**NONE**

**SCHEDULE P - PART 3D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XX	XX	XX	XX	XX	XX	XX		
9. 2014	XXX	XXX	XXX	XX								
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

**NONE**

**SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL**

1. Prior	.000											
2. 2007												
3. 2008	XXX											
4. 2009	XXX	XXX										
5. 2010	XXX	XXX	XXX									
6. 2011	XXX	XXX	XXX	XXX								
7. 2012	XXX	XXX	XXX	XXX								
8. 2013	XXX	XXX	XXX	XX	XX	XX	XX	XX	XX	XX		
9. 2014	XXX	XXX	XXX	XX								
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

**NONE**

Schedule P - Part 3F - Section 1 - Medical Professional Liability - Occurrence

**N O N E**

Schedule P - Part 3F - Section 2 - Medical Professional Liability - Claims-Made

**N O N E**

Schedule P - Part 3G - Special Liability

**N O N E**

Schedule P - Part 3H - Section 1 - Other Liability - Occurrence

**N O N E**

Schedule P - Part 3H - Section 2 - Other Liability - Claims-Made

**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior	XXX	XXX	XXX	XX	XX	XX	XX	000			XXX	XXX
2. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE**

1. Prior	XXX	000	588	550	162	69						
2. 2015	XXX	8,792	10,407	2,873	1,601							
3. 2016	XXX	14,756	14,756	3,912	2,434							

**SCHEDULE P - PART 3K - FIDELITY/SURETY**

1. Prior	XXX	000			XXX	XXX						
2. 2015	XXX				XXX	XXX						
3. 2016	XXX	XXX	XXX	XX	XX	XX	XX	XXX	XXX		XXX	XXX

**NONE**

**SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**

1. Prior	XXX				XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
2. 2015	XXX	XXX	XXX	XX	XX	XX	XX	XXX			XXX	XXX
3. 2016	XXX	XXX	XXX	XX	XX	XX	XX	XXX	XXX		XXX	XXX

**NONE**

**SCHEDULE P - PART 3M - INTERNATIONAL**

1. Prior	000										XXX	XXX
2. 2007											XXX	XXX
3. 2008	XXX										XXX	XXX
4. 2009	XXX	XXX									XXX	XXX
5. 2010	XXX	XXX	XXX								XXX	XXX
6. 2011	XXX	XXX	XXX	XXX							XXX	XXX
7. 2012	XXX	XXX	XXX	XX	XX						XXX	XXX
8. 2013	XXX	XXX	XXX	XX	XX	XX					XXX	XXX
9. 2014	XXX				XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2015	XXX			XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE**

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property

**N O N E**

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability

**N O N E**

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

**N O N E**

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence

**N O N E**

Schedule P - Part 3R - Section 2 - Product Liability - Claims-Made

**N O N E**

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty

**N O N E**

Schedule P - Part 3T - Warranty

**N O N E**

**SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS**

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 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XX	XX						
6. 2011	XXX	XXX	XX	XX	XX					
7. 2012	XXX	XXX	XX	XX	XX	XX				
8. 2013	XXX	XXX	XX	XXX	XX	XX	XX			
9. 2014	XXX	XXX	XX	XXX	XXX	XXX	XXX	XXX		
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE****SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

1. Prior	623	.72	(28)	(19)	(12)	(7)	(4)	.0	0	0
2. 2007	2,509	.372	13	(22)	(14)	(11)	(8)	(5)	(7)	(1)
3. 2008	XXX	2,303	125	51	7	(2)	(13)	(7)	(8)	(2)
4. 2009	XXX	XXX	1,698	263	84	51	6	(6)	(6)	(9)
5. 2010	XXX	XXX	XXX	2,672	649	262	46	.28	26	(21)
6. 2011	XXX	XXX	XXX	XXX	4,426	929	257	130	.108	(34)
7. 2012	XXX	XXX	XXX	XXX	XXX	3,604	562	214	.152	.99
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	3,473	292	.371	10
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,632	.675	210
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,918	1,080
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,075

**SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XX	XXX	XX					
8. 2013	XXX	XXX	XX	XXX	XX	XX				
9. 2014	XXX	XXX	XX	XXX	XX	XX	XX	XXX		
10. 2015	XXX	XXX	XX	XXX	XX	XX	XX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE****SCHEDULE P - PART 4D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XX	XXX	XX					
8. 2013	XXX	XXX	XX	XXX	XX	XX				
9. 2014	XXX	XXX	XX	XXX	XX	XX	XX	XXX		
10. 2015	XXX	XXX	XX	XXX	XX	XX	XX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE****SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL**

1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XXX	XXX						
7. 2012	XXX	XXX	XX	XXX	XX					
8. 2013	XXX	XXX	XX	XXX	XX	XX				
9. 2014	XXX	XXX	XX	XXX	XX	XX	XX	XXX		
10. 2015	XXX	XXX	XX	XXX	XX	XX	XX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence

**N O N E**

Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made

**N O N E**

Schedule P - Part 4G - Special Liability

**N O N E**

Schedule P - Part 4H - Section 1 - Other Liability - Occurrence

**N O N E**

Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made

**N O N E**

**SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)**

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 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior	XXX	XXX	XX	XXX	XX	X	XXX			
2. 2015	XXX	XXX	XX	XXX	XXX	X	XX	XXX		
3. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE****SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE**

1. Prior	XXX	(275)	(59)	(67)						
2. 2015	XXX	(433)	(36)							
3. 2016	XXX	XXX	(85)							

**SCHEDULE P - PART 4K - FIDELITY/SURETY**

1. Prior	XXX									
2. 2015	XXX									
3. 2016	XXX	XXX	XX	XXX	XX	X	XXX	XXX	XXX	

**NONE****SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2015	XXX	XXX	XX	XXX	XXX	X	XXX	XXX		
3. 2016	XXX	XXX	XX	XXX	XX	X	XX	XXX	XXX	

**NONE****SCHEDULE P - PART 4M - INTERNATIONAL**

1. Prior										
2. 2007										
3. 2008	XXX									
4. 2009	XXX	XXX								
5. 2010	XXX	XXX	XXX							
6. 2011	XXX	XXX	XX	XXX						
7. 2012	XXX	XXX	XX	XXX	XX					
8. 2013	XXX	XXX	XX	XXX	XX	X				
9. 2014	XXX	XXX	XX	XXX	XXX	X	X			
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property  
**NONE**

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability  
**NONE**

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines  
**NONE**

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence  
**NONE**

Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made  
**NONE**

Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty  
**NONE**

Schedule P - Part 4T - Warranty  
**NONE**

Schedule P - Part 5A - Homeowners/Farmowners - Section 1  
**NONE**

Schedule P - Part 5A - Homeowners/Farmowners - Section 2  
**NONE**

Schedule P - Part 5A - Homeowners/Farmowners - Section 3  
**NONE**

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**SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL  
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior	923	146	36	(614)	12	11	14	10	0	
2. 2007	2,718	3,621	3,727	3,075	3,081	3,084	3,085	3,085	3,085	3,085
3. 2008	XXX	2,832	3,605	3,038	3,055	3,060	3,061	3,062	3,062	3,062
4. 2009	XXX	XXX	3,030	3,153	3,225	3,248	3,257	3,260	3,260	3,261
5. 2010	XXX	XXX	XXX	3,169	3,959	4,069	4,100	4,111	4,114	4,116
6. 2011	XXX	XXX	XXX	XXX	3,409	4,262	4,395	4,430	4,443	4,446
7. 2012	XXX	XXX	XXX	XXX	XXX	3,109	3,998	4,121	4,155	4,160
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	3,335	4,334	4,481	4,509
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,287	4,195	4,304
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,831	5,079
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,948

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior	196	54	16	3	2	2	1	0	0	
2. 2007	960	136	37	11	4	1	1	1		
3. 2008	XXX	813	122	24	8	2	1	1	1	1
4. 2009	XXX	XXX	818	98	31	12	3	1	1	
5. 2010	XXX	XXX	XXX	796	145	45	16	7	3	2
6. 2011	XXX	XXX	XXX	XXX	904	166	48	16	7	4
7. 2012	XXX	XXX	XXX	XXX	XXX	970	159	45	12	6
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	1,106	180	40	14
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,012	151	47
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,379	231
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,968

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior	242	13	4	(845)	16	14	14	12	0	0
2. 2007	4,912	5,168	5,182	4,249	4,250	4,250	4,250	4,250	4,250	4,250
3. 2008	XXX	4,801	5,020	4,124	4,126	4,126	4,127	4,128	4,128	4,128
4. 2009	XXX	XXX	4,964	4,264	4,273	4,277	4,278	4,279	4,279	4,279
5. 2010	XXX	XXX	XXX	5,135	5,379	5,393	5,396	5,399	5,399	5,400
6. 2011	XXX	XXX	XXX	XXX	5,595	5,830	5,848	5,853	5,858	5,858
7. 2012	XXX	XXX	XXX	XXX	XXX	5,306	5,559	5,574	5,579	5,579
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	5,763	6,036	6,049	6,054
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,800	6,044	6,059
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,053	7,482
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,666

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1

**N O N E**

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2

**N O N E**

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3

**N O N E**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

**N O N E**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

**N O N E**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 3

**N O N E**

Schedule P - Part 5E - Commercial Multiple Peril - Section 1

**N O N E**

Schedule P - Part 5E - Commercial Multiple Peril - Section 2

**N O N E**

Schedule P - Part 5E - Commercial Multiple Peril - Section 3

**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A

**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B

**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B

**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B

**N O N E**

Schedule P - Part 5H - Other Liability - Occurrence - Section 1A

**N O N E**

Schedule P - Part 5H - Other Liability - Occurrence - Section 2A

**N O N E**

Schedule P - Part 5H - Other Liability - Occurrence - Section 3A

**N O N E**

Schedule P - Part 5H - Other Liability - Claims-Made - Section 1B

**N O N E**

Schedule P - Part 5H - Other Liability - Claims-Made - Section 2B

**N O N E**

Schedule P - Part 5H - Other Liability - Claims-Made - Section 3B

**N O N E**

Schedule P - Part 5R - Products Liability - Occurrence - Section 1A

**N O N E**

Schedule P - Part 5R - Products Liability - Occurrence - Section 2A

**N O N E**

Schedule P - Part 5R - Products Liability - Occurrence - Section 3A

**N O N E**

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B

**N O N E**

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B

**N O N E**

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B

**N O N E**

Schedule P - Part 5T - Warranty - Section 1

**N O N E**

Schedule P - Part 5T - Warranty - Section 2

**N O N E**

Schedule P - Part 5T - Warranty - Section 3

**N O N E**

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1

**N O N E**

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2

**N O N E**

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

**N O N E**

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

**N O N E**

Schedule P - Part 6E - Commercial Multiple Peril - Section 1

**N O N E**

Schedule P - Part 6E - Commercial Multiple Peril - Section 2

**N O N E**

Schedule P - Part 6H - Other Liability - Occurrence - Section 1A

**N O N E**

Schedule P - Part 6H - Other Liability - Occurrence - Section 2A

**N O N E**

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B

**N O N E**

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B

**N O N E**

Schedule P - Part 6M - International - Section 1

**N O N E**

Schedule P - Part 6M - International - Section 2

**N O N E**

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1

**N O N E**

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2

**N O N E**

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1

**N O N E**

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2

**N O N E**

Schedule P - Part 6R - Products Liability - Occurrence - Section 1A

**N O N E**

Schedule P - Part 6R - Products Liability - Occurrence - Section 2A

**N O N E**

Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B

**N O N E**

Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B

**N O N E**

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**SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)**

**SECTION 1**

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners .....			0.0	.0		0.0
2. Private Passenger Auto Liability/ Medical .....	33,601		0.0	69,418		0.0
3. Commercial Auto/Truck Liability/ Medical .....			0.0	.0		0.0
4. Workers' Compensation .....			0.0	.0		0.0
5. Commercial Multiple Peril .....			0.0	.0		0.0
6. Medical Professional Liability - Occurrence .....			0.0	.0		0.0
7. Medical Professional Liability - Claims - Made .....			0.0	.0		0.0
8. Special Liability .....			0.0	.0		0.0
9. Other Liability - Occurrence .....			0.0	.0		0.0
10. Other Liability - Claims-Made .....			0.0	.0		0.0
11. Special Property .....			0.0	0		0.0
12. Auto Physical Damage .....	2,106		0.0	27,753		0.0
13. Fidelity/Surety .....			0.0	.0		0.0
14. Other .....			0.0	.0		0.0
15. International .....			0.0	.0		0.0
16. Reinsurance - Nonproportional Assumed Property .....	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - Nonproportional Assumed Liability .....	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX	XXX	XXX	XXX
19. Products Liability - Occurrence .....			0.0	.0		0.0
20. Products Liability - Claims-Made .....			0.0	.0		0.0
21. Financial Guaranty/Mortgage Guaranty .....			0.0	.0		0.0
22. Warranty .....			0.0	.0		0.0
23. Totals .....	35,707	0	0.0	97,172	0	0.0

**SECTION 2**

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										
	1 2007	2	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015	2016
1. Prior .....											
2. 2007 .....											
3. 2008 .....	XXX										
4. 2009 .....	XXX	XXX									
5. 2010 .....	XXX	XXX	XX								
6. 2011 .....	XXX	XXX	XX	XX							
7. 2012 .....	XXX	XXX	XX	XX	XX						
8. 2013 .....	XXX	XXX	XX	XXX	XXX	XX					
9. 2014 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2015 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2016 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

**SECTION 3**

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)										
	1 2007	2	3 2008	4 2009	5 2010	6 2011	7 2012	8 2013	9 2014	10 2015	2016
1. Prior .....											
2. 2007 .....											
3. 2008 .....	XXX										
4. 2009 .....	XXX	XXX									
5. 2010 .....	XXX	XXX	XX								
6. 2011 .....	XXX	XXX	XX	XX							
7. 2012 .....	XXX	XXX	XX	XX	XX						
8. 2013 .....	XXX	XXX	XX	XXX	XXX	XX					
9. 2014 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2015 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2016 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

**N O N E**

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**SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)**

**SECTION 1**

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners .....			0.0	0		0.0
2. Private Passenger Auto Liability/Medical .....	33,601		0.0	69,418		0.0
3. Commercial Auto/Truck Liability/Medical .....			0.0	0		0.0
4. Workers' Compensation .....			0.0	0		0.0
5. Commercial Multiple Peril .....			0.0	0		0.0
6. Medical Professional Liability - Occurrence .....			0.0	0		0.0
7. Medical Professional Liability - Claims - Made .....			0.0	0		0.0
8. Special Liability .....			0.0	0		0.0
9. Other Liability - Occurrence .....			0.0	0		0.0
10. Other Liability - Claims-Made .....			0.0	0		0.0
11. Special Property .....			0.0	0		0.0
12. Auto Physical Damage .....	2,106		0.0	27,753		0.0
13. Fidelity/Surety .....			0.0	0		0.0
14. Other .....			0.0	0		0.0
15. International .....			0.0	0		0.0
16. Reinsurance - Nonproportional Assumed Property .....			0.0	0		0.0
17. Reinsurance - Nonproportional Assumed Liability .....			0.0	0		0.0
18. Reinsurance - Nonproportional Assumed Financial Lines .....			0.0	0		0.0
19. Products Liability - Occurrence .....			0.0	0		0.0
20. Products Liability - Claims-Made .....			0.0	0		0.0
21. Financial Guaranty/Mortgage Guaranty .....			0.0	0		0.0
22. Warranty .....			0.0	0		0.0
23. Totals .....	35,707	0	0.0	97,172	0	0.0

**SECTION 2**

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2007	2	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior .....										
2. 2007 .....										
3. 2008 .....	XXX									
4. 2009 .....	XXX	XXX								
5. 2010 .....	XXX	XXX	XX							
6. 2011 .....	XXX	XXX	XX	XX						
7. 2012 .....	XXX	XXX	XX	XX	XX					
8. 2013 .....	XXX	XXX	XX	XXX	XXX	XX				
9. 2014 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3**

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1 2007	2	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016
1. Prior .....										
2. 2007 .....										
3. 2008 .....	XXX									
4. 2009 .....	XXX	XXX								
5. 2010 .....	XXX	XXX	XX							
6. 2011 .....	XXX	XXX	XX	XX						
7. 2012 .....	XXX	XXX	XX	XX	XX					
8. 2013 .....	XXX	XXX	XX	XXX	XXX	XX				
9. 2014 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2015 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2016 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts

**N O N E**

**SCHEDULE P INTERROGATORIES**

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.

1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? ..... Yes [ ] No [ X ]  
If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:

1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? ..... \$ ..... 0

1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? ..... Yes [ ] No [ X ]

1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? ..... Yes [ ] No [ X ]

1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? ..... Yes [ ] No [ ] N/A [ X ]

1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior .....	0	0
1.602 2007 .....	0	0
1.603 2008 .....	0	0
1.604 2009 .....	0	0
1.605 2010 .....	0	0
1.606 2011 .....	0	0
1.607 2012 .....	0	0
1.608 2013.....	0	0
1.609 2014.....	0	0
1.610 2015.....	0	0
1.611 2016.....	0	0
1.612 Totals .....	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? ..... Yes [ X ] No [ ]

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? ..... Yes [ X ] No [ ]

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? ..... Yes [ ] No [ X ]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for:

(in thousands of dollars) ..... 5.1 Fidelity ..... 0  
..... 5.2 Surety ..... 0

6. Claim count information is reported per claim or per claimant (Indicate which). ..... per claimant.....  
If not the same in all years, explain in Interrogatory 7.

7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? ..... Yes [ ] No [ X ]

7.2 (An extended statement may be attached.)

N/A .....

**SCHEDULE T - PART 2**  
**INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama .....	AL					
2. Alaska .....	AK					
3. Arizona .....	AZ					
4. Arkansas .....	AR					
5. California .....	CA					
6. Colorado .....	CO					
7. Connecticut .....	CT					
8. Delaware .....	DE					
9. District of Columbia .....	DC					
10. Florida .....	FL					
11. Georgia .....	GA					
12. Hawaii .....	HI					
13. Idaho .....	ID					
14. Illinois .....	IL					
15. Indiana .....	IN					
16. Iowa .....	IA					
17. Kansas .....	KS					
18. Kentucky .....	KY					
19. Louisiana .....	LA					
20. Maine .....	ME					
21. Maryland .....	MD					
22. Massachusetts .....	MA					
23. Michigan .....	MI					
24. Minnesota .....	MN					
25. Mississippi .....	MS					
26. Missouri .....	MO					
27. Montana .....	MT					
28. Nebraska .....	NE					
29. Nevada .....	NV					
30. New Hampshire .....	NH					
31. New Jersey .....	NJ					
32. New Mexico .....	NM					
33. New York .....	NY					
34. North Carolina .....	NC					
35. North Dakota .....	ND					
36. Ohio .....	OH					
37. Oklahoma .....	OK					
38. Oregon .....	OR					
39. Pennsylvania .....	PA					
40. Rhode Island .....	RI					
41. South Carolina .....	SC					
42. South Dakota .....	SD					
43. Tennessee .....	TN					
44. Texas .....	TX					
45. Utah .....	UT					
46. Vermont .....	VT					
47. Virginia .....	VA					
48. Washington .....	WA					
49. West Virginia .....	WV					
50. Wisconsin .....	WI					
51. Wyoming .....	WY					
52. American Samoa .....	AS					
53. Guam .....	GU					
54. Puerto Rico .....	PR					
55. U.S. Virgin Islands .....	VI					
56. Northern Mariana Islands .....	MP					
57. Canada .....	CAN					
58. Aggregate Other Alien .....	OT					
59. Total .....						

NONE

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**SCHEDULE Y**  
**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domi- ciliary Loca- tion	10 Relation- ship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percen- tage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
..0473	American Family Insurance Group	19275	39-0273710			American Family Mutual Insurance Company	WI	UIP	American Family Mutual Insurance Company - Board of Directors	Board of Directors	0.000	American Family Mutual Insurance Company - Board of Directors		N	
			39-1508124			American Family Brokerage, Inc.	WI	NIA	American Family Mutual Insurance Company	Ownership	100.000	American Family Mutual Insurance Company		Y	
			39-1391393			AMFAM, Inc.	WI	UDP	American Family Mutual Insurance Company	Ownership	100.000	American Family Mutual Insurance Company		Y	
			46-3538161			The AssureStart Insurance Agency, LLC	WI	NIA	American Family Mutual Insurance Company	Ownership	100.000	American Family Mutual Insurance Company		N	
..0473	American Family Insurance Group	19283	39-6040366			American Standard Insurance Co. of WI	WI	IA	AMFAM, Inc.	Ownership	100.000	American Family Mutual Insurance Company		N	
..0473	American Family Insurance Group	10386	39-1835307			American Family Insurance Company	WI	IA	AMFAM, Inc.	Ownership	100.000	American Family Mutual Insurance Company		N	
..0473	American Family Insurance Group	10387	39-1835305			American Standard Insurance Co. of OH	WI	IA	AMFAM, Inc.	Ownership	100.000	American Family Mutual Insurance Company		N	
..0473	American Family Insurance Group	60399	39-6040365			American Family Life Insurance Co.	WI	IA	AMFAM, Inc.	Ownership	100.000	American Family Mutual Insurance Company		N	
..0473	American Family Insurance Group	27138	36-2705935			Midvale Indemnity Company	IL	IA	AMFAM, Inc.	Ownership	100.000	American Family Mutual Insurance Company		N	
			39-6040596			American Family Financial Services, Inc.	WI	NIA	AMFAM, Inc.	Ownership	100.000	American Family Mutual Insurance Company		N	
			36-4681910			New Ventures, LLC	WI	NIA	AMFAM, Inc.	Ownership	99.000	American Family Mutual Insurance Company		N	
			36-4681910			New Ventures, LLC	WI	NIA	American Family Life Insurance Co.	Ownership	1.000	American Family Mutual Insurance Company		N	
			86-1101013			PGC Holdings Corporation	DE	NIA	AMFAM, Inc.	Ownership	100.000	American Family Mutual Insurance Company		N	
			42-6653388			PGC Holdings Statutory Trust 1	DE	NIA	PGC Holdings Corporation	Ownership	100.000	American Family Mutual Insurance Company		N	
			20-1980130			PGC Holdings Statutory Trust 2	DE	NIA	PGC Holdings Corporation	Ownership	100.000	American Family Mutual Insurance Company		N	
..0473	Permanent General Holdings	22906	62-1482846			PGAC of Ohio	OH	IA	PGC Holdings Corporation	Ownership	100.000	American Family Mutual Insurance Company		N	
..0473	Permanent General Holdings	37648	13-2960609			Permanent General Assurance Corporation	OH	IA	Permanent General Companies, Inc.	Ownership	100.000	American Family Mutual Insurance Company		N	
			62-1336831			Permanent General Companies, Inc.	TN	NIA	PGC Holdings Corporation	Ownership	100.000	American Family Mutual Insurance Company		N	
			62-1383711			PGA Service Corporation	TN	NIA	Permanent General Assurance Corporation	Ownership	100.000	American Family Mutual Insurance Company		N	
			62-1684228			The General Auto Insurance Services of Ohio, Inc.	OH	NIA	PGA Service Corporation	Ownership	100.000	American Family Mutual Insurance Company		N	
			62-1684225			The General Auto Insurance Services of California, Inc.	CA	NIA	PGA Service Corporation	Ownership	100.000	American Family Mutual Insurance Company		N	
			62-1758317			The General Auto Insurance Services of Louisiana, Inc.	LA	NIA	PGA Service Corporation	Ownership	100.000	American Family Mutual Insurance Company		N	
..0473	Permanent General Holdings	13703	26-2465659			The General Automobile Insurance Company, Inc.	OH	RE	PGAC of Ohio	Ownership	100.000	American Family Mutual Insurance Company		N	
			62-1820203			The General Auto Insurance Services of Georgia, Inc.	GA	NIA	PGA Service Corporation	Ownership	100.000	American Family Mutual Insurance Company		N	
			62-1812273			The General Auto Insurance Services of Texas, Inc.	TX	NIA	PGA Service Corporation	Ownership	100.000	American Family Mutual Insurance Company		N	
			04-3361207			Homesite Group Incorporated	DE	NIA	AMFAM, Inc.	Ownership	100.000	American Family Mutual Insurance Company		N	
			04-3441403			Homesite Securities Company LLC	DE	NIA	Homesite Group Incorporated	Ownership	100.000	American Family Mutual Insurance Company		N	

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**SCHEDULE Y**  
**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- iliary Loca- tion	10 Relation- ship to Reportin g Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
..0473	American Family Insurance Group .....	13927	45-0282873	.....	.....	Homesite Insurance Company of the Midwest .....	WI.....IA.....	Homesite Securities Company LLC .....	Ownership.....	100.000	American Family Mutual Insurance Company .....	N.....			
..0473	American Family Insurance Group .....	17221	06-1125462	.....	.....	Homesite Insurance Company .....	WI.....IA.....	Homesite Securities Company LLC .....	Ownership.....	100.000	American Family Mutual Insurance Company .....	N.....			
..0473	American Family Insurance Group .....	20419	48-1156645	.....	.....	Homesite Indemnity Company .....	WI.....IA.....	Homesite Group Incorporated .....	Ownership.....	100.000	American Family Mutual Insurance Company .....	N.....			
..0473	American Family Insurance Group .....	11005	68-0426201	.....	.....	Homesite Insurance Company of California .....	CA.....IA.....	Homesite Securities Company LLC .....	Ownership.....	100.000	American Family Mutual Insurance Company .....	N.....			
..0473	American Family Insurance Group .....	10986	16-1559926	.....	.....	Homesite Insurance Company of New York .....	NY.....IA.....	Homesite Securities Company LLC .....	Ownership.....	100.000	American Family Mutual Insurance Company .....	N.....			
..0473	American Family Insurance Group .....	10745	23-2980263	.....	.....	Homesite Insurance Company of Georgia .....	GA.....IA.....	Homesite Securities Company LLC .....	Ownership.....	100.000	American Family Mutual Insurance Company .....	N.....			
..0473	American Family Insurance Group .....	11016	52-2176786	.....	.....	Homesite Insurance Company of Illinois .....	IL.....IA.....	Homesite Securities Company LLC .....	Ownership.....	100.000	American Family Mutual Insurance Company .....	N.....			
..0473	American Family Insurance Group .....	11156	04-3489719	.....	.....	Homesite Insurance Company of Florida .....	IL.....IA.....	Homesite Securities Company LLC .....	Ownership.....	100.000	American Family Mutual Insurance Company .....	N.....			
..0473	American Family Insurance Group .....	11237	74-2987795	.....	.....	Homesite Lloyds's of Texas .....	TX.....IA.....	Texas-South of Homesite, Inc. .....	Attorney-In-Fact.....	0.000	American Family Mutual Insurance Company .....	N.....			
			23-3011415	.....	.....	Homesite Insurance Agency, Inc. .....	MA.....NIA.....	Homesite Securities Company LLC .....	Ownership.....	100.000	American Family Mutual Insurance Company .....	N.....			
			04-3506712	.....	.....	Texas-South of Homesite, Inc. .....	TX.....NIA.....	Homesite Securities Company LLC .....	Ownership.....	100.000	American Family Mutual Insurance Company .....	N.....			
			46-5039052	.....	.....	Homesite General Agent, LLC .....	DE.....NIA.....	Homesite Group Incorporated .....	Ownership.....	100.000	American Family Mutual Insurance Company .....	N.....			
			47-4532240	.....	.....	Midvale Life Insurance Company of New York .....	NY.....IA.....	AMFAM, Inc. .....	Ownership.....	100.000	American Family Mutual Insurance Company .....	N.....			
			45-3695870	.....	.....	MoveIn, Inc. .....	WI.....OTH.....	New Ventures, LLC .....	Ownership.....	18.900	MoveIn, Inc. .....	N.....	0.000001		
			46-1991111	.....	.....	Quietyme, Inc. .....	WI.....OTH.....	New Ventures, LLC .....	Ownership.....	21.800	Quietyme, Inc. .....	N.....	0.000001		
			47-4493142	.....	.....	American Family Insurance Dreams Foundation, Inc .....	WI.....OTH.....	American Family Mutual Insurance Company .....	Board of Directors.....	0.000	American Family Insurance Dreams Foundation, Inc .....	N.....	0.000002		
			45-5384507	.....	.....	Review Trackers, Inc. .....	DE.....OTH.....	New Ventures, LLC .....	Ownership.....	16.500	Review Trackers, Inc. .....	N.....	0.000001		
			47-4384551	.....	.....	Functor Reality, Inc. .....	DE.....OTH.....	New Ventures, LLC .....	Ownership.....	43.800	Functor Reality, Inc. .....	N.....	0.000001		
			45-4942793	.....	.....	Cozy Services Ltd. .....	DE.....OTH.....	New Ventures, LLC .....	Ownership.....	15.300	Cozy Services Ltd. .....	N.....	0.000001		
			81-3825981	.....	.....	Clearcover, Inc. .....	DE.....OTH.....	New Ventures, LLC .....	Ownership.....	41.700	Clearcover, Inc. .....	N.....	0.000001		

Asterisk	Explanation
0000001	Investments held by New Ventures, LLC where a controlling interest is presumed to exist due to a greater than 10% ownership interest
0000002	501(c)(3) organization with greater than 50% board of director control

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.

**SCHEDULE Y**  
**PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES**

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
19275	39-0273710	American Family Mutual Insurance Company	1,555,367	(84,404,855)			473,493,031	(100,808,920)			289,834,623	(1,875,160,834)
	39-1508124	American Family Brokerage, Inc.		4,000,000			(7,790,429)				(3,790,429)	
	39-1391393	AMFAM, Inc.	(1,539,813)	20,200,806			580,526				19,241,519	
19283	39-6040366	American Standard Insurance Co. of WI					(59,270,765)	(44,689,230)			(103,959,995)	337,030,000
10386	39-1835307	American Family Insurance Company					(229,527,201)	217,439,068			(12,088,133)	642,994,000
10387	39-1835305	American Standard Insurance Co. of OH					(14,965,228)	9,335,983			(5,629,245)	38,261,000
60399	39-6040365	American Family Life Insurance Co.	(15,554)	204,049			(131,026,883)	32,191,086			(98,647,302)	
27138	36-2705935	Midvale Indemnity Company					(44,703,571)	45,588,060			884,489	5,958,000
	39-6040596	American Family Financial Services, Inc.					(72,812)				(72,812)	
	86-1101013	PGC Holdings Corporation	2,000,000	(1,000,000)			559,332				1,559,332	
22906	62-1482846	PGAC of Ohio	(1,500,000)	15,500,000			36,746,628				50,746,628	34,149,654
37648	13-2960609	Permanent General Assurance Corporation		34,800,000			29,482,054		*		64,282,054	(35,106,616)
	62-1336831	Permanent General Companies, Inc.					(72,535,516)				(72,535,516)	
	62-1383711	PGA Service Corporation					2,897				2,897	
	62-1684228	The General Auto Insurance Services of Ohio, Inc.					(655,872)				(655,872)	
	62-1684225	The General Auto Insurance Services of California, Inc.					(159,986)				(159,986)	
	62-1758317	The General Auto Insurance Services of Louisiana, Inc.					(109,675)				(109,675)	
13703	26-2465659	The General Automobile Insurance Company, Inc.	(500,000)	10,700,000			20,336,670		*		30,536,670	956,962
	04-3361207	Homesite Group Incorporated		(10,000,000)			185,384,040				175,384,040	
13927	45-0282873	Homesite Insurance Company of the Midwest					(55,755,984)	(50,350,083)			(106,106,067)	319,744,430
	06-1125462	Homesite Insurance Company					(64,736,389)	(56,823,752)			(121,560,141)	270,676,109
20419	48-1156645	Homesite Indemnity Company					(16,271,982)	(22,769,705)			(39,041,687)	57,965,305
11005	68-0426201	Homesite Insurance Company of California					(14,536,677)	10,095			(14,526,582)	69,583,414
10986	16-1559926	Homesite Insurance Company of New York					(11,406,204)	(12,047,461)			(23,453,665)	36,194,018
10745	23-2980263	Homesite Insurance Company of Georgia		10,000,000			(5,494,754)	(2,171,048)			2,334,198	24,073,126
11016	52-2176786	Homesite Insurance Company of Illinois					(3,463,651)	(4,657,866)			(8,121,517)	12,311,733
11156	04-3489719	Homesite Insurance Company of Florida					(1,726,076)	(2,003,681)			(3,729,757)	9,765,328
11237	74-2987795	Homesite Lloyd's of Texas					(11,834,944)	(8,242,546)			(20,077,490)	50,604,371
	23-3011415	Homesite Insurance Agency, Inc.					(540,579)				(540,579)	
999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

\* PGC Group intercompany pooling arrangement: Permanent General Assurance Corporation - 58%, Permanent General Assurance Corporation of Ohio - 25%, The General Automobile Insurance Company, Inc. - 17%.

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

		Responses
	<b>MARCH FILING</b>	
1.	Will an actuarial opinion be filed by March 1? .....	YES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? .....	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1? .....	YES
	<b>APRIL FILING</b>	
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1? .....	YES
6.	Will Management's Discussion and Analysis be filed by April 1? .....	YES
7.	Will the Supplemental Investment Risk Interrogatories be filed by April 1? .....	YES
	<b>MAY FILING</b>	
8.	Will this company be included in a combined annual statement which is filed with the NAIC by May 1? .....	YES
	<b>JUNE FILING</b>	
9.	Will an audited financial report be filed by June 1? .....	YES
10.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? .....	YES

**AUGUST FILING**

11. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?

electronically with the NAIC (as a regulator-only non-public document) by August 1?  YES  
The following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplemental is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? .....

13. Will the Financial Guaranty Insurance Exhibit be filed by March 1? .....

14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?.....

15. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1? .....

16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? .....

17. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1? .....

18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? .....

19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....

20. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?.....

21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1? .....

22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1? .....

23. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1? .....

24. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1? .....

25. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? .....

26. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? .....

27. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?.....

28. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?.....

APRIL FILING

29. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? .....

30. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....

31. Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....

32. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? .....

33. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? .....

34. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1? .....

AUGUST FILING

35. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? ..... NO  
Explanations:

11. Bar Codes:  
12. SIS Stockholder Information Supplement [Document Identifier 420]



13. Financial Guaranty Insurance Exhibit [Document Identifier 240]



14. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]



16. Trusteed Surplus Statement [Document Identifier 400]



17 - Review - Audit of the Project - Quality



10. Medicare Part D Coverage Supplement [Document Identifier 865]



22. Exceptions to the Reinsurance Attestation Supplement  
[Document Identifier 400]



23. Bail Bond Supplement [Document Identifier 5001]



**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

- 24. Director and Officer Insurance Coverage Supplement [Document Identifier 505]
- 25. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- 26. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 27. Relief from the Requirements for Audit Committees [Document Identifier 226]
- 28. Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]
- 29. Credit Insurance Experience Exhibit [Document Identifier 230]
- 30. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 31. Accident and Health Policy Experience Exhibit [Document Identifier 210]
- 32. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
- 33. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
- 34. Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]
- 35. Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE COMPANY, INC.  
**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Statement of Income Line 14

	1 Current Year	2 Prior Year
1404. Legal Defense Fees .....		0
1497. Summary of remaining write-ins for Line 14 from overflow page	0	0

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 24

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
2404. Outside Services .....	30,146	96,006		126,152
2405. Payroll Processing .....	174,225	53,414		227,639
2406. Uncollectible Accounts .....		2,720,004		2,720,004
2497. Summary of remaining write-ins for Line 24 from overflow page	204,371	2,869,424	0	3,073,795



1 3 7 0 3 2 0 1 6 4 0 1 0 0 1 0 0

**SUPPLEMENT FOR THE YEAR 2016 OF THE THE GENERAL AUTOMOBILE INSURANCE  
COMPANY, INC.**

**REINSURANCE SUMMARY SUPPLEMENTAL FILING FOR GENERAL INTERROGATORY 9 (PART 2)**

**For The Year Ended December 31, 2016**

To Be Filed by March 1

#### (A) Financial Impact

	1 As Reported	2 Interrogatory 9 Reinsurance Effect	3 Restated Without Interrogatory 9 Reinsurance
A01. Assets .....	118,641,728	0	118,641,728
A02. Liabilities .....	82,006,751	0	82,006,751
A03. Surplus as regards to policyholders .....	36,634,977	0	36,634,977
A04. Income before taxes	(7,708,840)	0	(7,708,840)

(B) Summary of Reinsurance Contract Terms	(C) Management's Objectives
	</

D. If the response to General Interrogatory 9.4 (Part 2 Property & Casualty Interrogatories) is yes, explain below why the contracts are treated differently for GAAP and SAP.

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