



QUARTERLY STATEMENT

AS OF MARCH 31, 2017
OF THE CONDITION AND AFFAIRS OF THE

GRANGE INDEMNITY INSURANCE COMPANY

NAIC Group Code 00267 , 00267 NAIC Company Code 10322 Employer's ID Number 31-1432675
(Current Period) (Prior Period)

Organized under the Laws of Ohio , State of Domicile or Port of Entry Ohio
Country of Domicile United States

Incorporated/Organized 03/10/1995 Commenced Business 08/03/1995

Statutory Home Office 671 South High Street , Columbus, OH, US 43206-1014
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 671 South High Street Columbus, OH, US 43206-1014 614-445-2900
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 671 South High Street, P.O. Box 1218 , Columbus, OH, US 43216-1218
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 671 South High Street Columbus, OH, US 43206-1014 614-445-2900
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address www.grangeinsurance.com

Statutory Statement Contact David Sidney Ackermann 614-445-2900
(Name) (Area Code) (Telephone Number) (Extension)
ackermannnd@grangeinsurance.com 614-449-3757
(E-Mail Address) (Fax Number)

OFFICERS

| Name | Title | Name | Title |
|-----------------------------|----------------------------|---------------------------|----------------------------|
| <u>JOHN (NMN) AMMENDOLA</u> | <u>PRESIDENT & CEO</u> | <u>LAVAWN DEE COLEMAN</u> | <u>EVP & SECRETARY</u> |
| <u>TERESA JEAN DALENTA</u> | <u>EVP & CFO</u> | | |

OTHER OFFICERS

| | | | |
|------------------------------------|-------------------------|--|--|
| <u>JOHN CHRISTOPHER MONTGOMERY</u> | <u>VP - INVESTMENTS</u> | | |
|------------------------------------|-------------------------|--|--|

DIRECTORS OR TRUSTEES

| | | | |
|-------------------------------|--------------------------------|-------------------------------|-----------------------------|
| <u>JOHN (NMN) AMMENDOLA</u> | <u>MARK LEWIS BOXER</u> | <u>DOUGLAS PAUL BUTH</u> | <u>GLENN EUGENE CORLETT</u> |
| <u>TERESA JEAN DALENTA</u> | <u>MICHAEL DESMOND FRAIZER</u> | <u>ROBERT ENLOW HOYT</u> | <u>MARY MARNETTE PERRY</u> |
| <u>THOMAS SIMRALL STEWART</u> | <u>DAVID CHARLES WETMORE</u> | <u>CHRISTIANNA (NMN) WOOD</u> | |

State ofOhio.....

County ofFranklin.....ss

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

JOHN (NMN) AMMENDOLA
PRESIDENT & CEO

LAVAWN DEE COLEMAN
EVP & SECRETARY

TERESA JEAN DALENTA
EVP & CFO

a. Is this an original filing? Yes [X] No []

Subscribed and sworn to before me this
11th day of May, 2017

- b. If no:
1. State the amendment number _____
 2. Date filed _____
 3. Number of pages attached _____

Teresa J. Burchwell, Notary Public
April 28, 2022

STATEMENT AS OF MARCH 31, 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

ASSETS

| | Current Statement Date | | | 4 December 31 Prior Year Net Admitted Assets |
|---|------------------------|-------------------------|---|---|
| | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | |
| 1. Bonds | 95,202,277 | | 95,202,277 | 94,410,858 |
| 2. Stocks: | | | | |
| 2.1 Preferred stocks | | | 0 | 0 |
| 2.2 Common stocks | | | 0 | 0 |
| 3. Mortgage loans on real estate: | | | | |
| 3.1 First liens | | | 0 | 0 |
| 3.2 Other than first liens | | | 0 | 0 |
| 4. Real estate: | | | | |
| 4.1 Properties occupied by the company (less \$ encumbrances) | | | 0 | 0 |
| 4.2 Properties held for the production of income (less \$ encumbrances) | | | 0 | 0 |
| 4.3 Properties held for sale (less \$ encumbrances) | | | 0 | 0 |
| 5. Cash (\$ 1,606,784), cash equivalents (\$ 0) and short-term investments (\$ 0) | 1,606,784 | | 1,606,784 | 692,901 |
| 6. Contract loans (including \$ premium notes) | | | 0 | 0 |
| 7. Derivatives | 0 | | 0 | 0 |
| 8. Other invested assets | 0 | | 0 | 0 |
| 9. Receivables for securities | 2,284 | | 2,284 | 0 |
| 10. Securities lending reinvested collateral assets | 266,439 | | 266,439 | 0 |
| 11. Aggregate write-ins for invested assets | 0 | 0 | 0 | 0 |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) | 97,077,784 | 0 | 97,077,784 | 95,103,759 |
| 13. Title plants less \$ charged off (for Title insurers only) | | | 0 | 0 |
| 14. Investment income due and accrued | 1,032,800 | | 1,032,800 | 962,755 |
| 15. Premiums and considerations: | | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection | | | 0 | 9,407,013 |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums) | | | 0 | 37,290 |
| 15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$) | | | 0 | 0 |
| 16. Reinsurance: | | | | |
| 16.1 Amounts recoverable from reinsurers | | | 0 | 0 |
| 16.2 Funds held by or deposited with reinsured companies | | | 0 | 0 |
| 16.3 Other amounts receivable under reinsurance contracts | | | 0 | 0 |
| 17. Amounts receivable relating to uninsured plans | | | 0 | 0 |
| 18.1 Current federal and foreign income tax recoverable and interest thereon | 1,427,493 | | 1,427,493 | 0 |
| 18.2 Net deferred tax asset | (154,943) | | (154,943) | 1,468,833 |
| 19. Guaranty funds receivable or on deposit | | | 0 | 0 |
| 20. Electronic data processing equipment and software | | | 0 | 0 |
| 21. Furniture and equipment, including health care delivery assets (\$) | | | 0 | 0 |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates | | | 0 | 0 |
| 23. Receivables from parent, subsidiaries and affiliates | | | 0 | 928,602 |
| 24. Health care (\$) and other amounts receivable | | | 0 | 0 |
| 25. Aggregate write-ins for other-than-invested assets | 0 | 0 | 0 | 38,636 |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) | 99,383,134 | 0 | 99,383,134 | 107,946,888 |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | 0 | 0 |
| 28. Total (Lines 26 and 27) | 99,383,134 | 0 | 99,383,134 | 107,946,888 |
| DETAILS OF WRITE-INS | | | | |
| 1101. | | | 0 | 0 |
| 1102. | | | 0 | 0 |
| 1103. | | | 0 | 0 |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | 0 | 0 | 0 | 0 |
| 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) | 0 | 0 | 0 | 0 |
| 2501. Equities in Pools | | | 0 | 38,636 |
| 2502. | | | 0 | 0 |
| 2503. | | | 0 | 0 |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 | 0 | 0 |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) | 0 | 0 | 0 | 38,636 |

STATEMENT AS OF MARCH 31, 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

LIABILITIES, SURPLUS AND OTHER FUNDS

| | 1 Current Statement Date | 2 December 31, Prior Year |
|--|--------------------------------|---------------------------------|
| 1. Losses (current accident year \$) | | 21,420,510 |
| 2. Reinsurance payable on paid losses and loss adjustment expenses | | 0 |
| 3. Loss adjustment expenses | | 6,434,298 |
| 4. Commissions payable, contingent commissions and other similar charges | | 972,844 |
| 5. Other expenses (excluding taxes, licenses and fees) | 3,864 | 1,580,268 |
| 6. Taxes, licenses and fees (excluding federal and foreign income taxes) | | 514,027 |
| 7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses)) | | 2,279,990 |
| 7.2 Net deferred tax liability | | 0 |
| 8. Borrowed money \$ and interest thereon \$ | | 0 |
| 9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ 48,203,690 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act) | | 18,688,843 |
| 10. Advance premium | | 311,775 |
| 11. Dividends declared and unpaid: | | |
| 11.1 Stockholders | | 0 |
| 11.2 Policyholders | | 97,714 |
| 12. Ceded reinsurance premiums payable (net of ceding commissions) | | 0 |
| 13. Funds held by company under reinsurance treaties | | 0 |
| 14. Amounts withheld or retained by company for account of others | | 0 |
| 15. Remittances and items not allocated | | 0 |
| 16. Provision for reinsurance (including \$ certified) | | 0 |
| 17. Net adjustments in assets and liabilities due to foreign exchange rates | | 0 |
| 18. Drafts outstanding | | 0 |
| 19. Payable to parent, subsidiaries and affiliates | 42,853,730 | 0 |
| 20. Derivatives | 0 | 0 |
| 21. Payable for securities | | 0 |
| 22. Payable for securities lending | 266,439 | 0 |
| 23. Liability for amounts held under uninsured plans | | 0 |
| 24. Capital notes \$ and interest thereon \$ | | 0 |
| 25. Aggregate write-ins for liabilities | 0 | 0 |
| 26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) | 43,124,033 | 52,300,270 |
| 27. Protected cell liabilities | | 0 |
| 28. Total liabilities (Lines 26 and 27) | 43,124,033 | 52,300,270 |
| 29. Aggregate write-ins for special surplus funds | 0 | 0 |
| 30. Common capital stock | 2,000,000 | 2,000,000 |
| 31. Preferred capital stock | | 0 |
| 32. Aggregate write-ins for other than special surplus funds | 0 | 0 |
| 33. Surplus notes | | 0 |
| 34. Gross paid in and contributed surplus | 5,000,000 | 5,000,000 |
| 35. Unassigned funds (surplus) | 49,259,101 | 48,646,618 |
| 36. Less treasury stock, at cost: | | |
| 36.1 shares common (value included in Line 30 \$) | | 0 |
| 36.2 shares preferred (value included in Line 31 \$) | | 0 |
| 37. Surplus as regards policyholders (Lines 29 to 35, less 36) | 56,259,101 | 55,646,618 |
| 38. Totals (Page 2, Line 28, Col. 3) | 99,383,134 | 107,946,888 |
| DETAILS OF WRITE-INS | | |
| 2501. | | 0 |
| 2502. | | 0 |
| 2503. | | 0 |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) | 0 | 0 |
| 2901. | | 0 |
| 2902. | | 0 |
| 2903. | | 0 |
| 2998. Summary of remaining write-ins for Line 29 from overflow page | 0 | 0 |
| 2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above) | 0 | 0 |
| 3201. | | 0 |
| 3202. | | 0 |
| 3203. | | 0 |
| 3298. Summary of remaining write-ins for Line 32 from overflow page | 0 | 0 |
| 3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above) | 0 | 0 |

STATEMENT OF INCOME

| | 1 Current Year to Date | 2 Prior Year to Date | 3 Prior Year Ended December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| UNDERWRITING INCOME | | | |
| 1. Premiums earned: | | | |
| 1.1 Direct (written \$ 31,731,487) | 25,564,523 | 20,448,336 | 88,979,921 |
| 1.2 Assumed (written \$ (18,660,059)) | 60,854 | 11,944,932 | 47,510,786 |
| 1.3 Ceded (written \$ 31,760,271) | 25,625,377 | 20,477,948 | 89,177,683 |
| 1.4 Net (written \$ (18,688,843)) | 0 | 11,915,320 | 47,313,024 |
| DEDUCTIONS: | | | |
| 2. Losses incurred (current accident year \$): | | | |
| 2.1 Direct | 15,643,250 | 11,145,321 | 56,451,778 |
| 2.2 Assumed | 76,499 | 5,522,156 | 23,715,645 |
| 2.3 Ceded | 15,719,749 | 11,160,676 | 56,660,651 |
| 2.4 Net | 0 | 5,506,801 | 23,506,772 |
| 3. Loss adjustment expenses incurred | | 1,341,344 | 5,953,435 |
| 4. Other underwriting expenses incurred | | 3,703,175 | 15,155,564 |
| 5. Aggregate write-ins for underwriting deductions | 0 | 0 | 0 |
| 6. Total underwriting deductions (Lines 2 through 5) | 0 | 10,551,320 | 44,615,771 |
| 7. Net income of protected cells | | 0 | 0 |
| 8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7) | 0 | 1,364,000 | 2,697,253 |
| INVESTMENT INCOME | | | |
| 9. Net investment income earned | 754,510 | 708,407 | 2,969,840 |
| 10. Net realized capital gains (losses) less capital gains tax of \$ | | (32,951) | (19,805) |
| 11. Net investment gain (loss) (Lines 9 + 10) | 754,510 | 675,456 | 2,950,035 |
| OTHER INCOME | | | |
| 12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$) | | (85,561) | (263,208) |
| 13. Finance and service charges not included in premiums | | 516,962 | 2,211,543 |
| 14. Aggregate write-ins for miscellaneous income | 0 | 32,702 | 140,501 |
| 15. Total other income (Lines 12 through 14) | 0 | 464,103 | 2,088,836 |
| 16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15) | 754,510 | 2,503,559 | 7,736,124 |
| 17. Dividends to policyholders | | 37,800 | 144,336 |
| 18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17) | 754,510 | 2,465,759 | 7,591,788 |
| 19. Federal and foreign income taxes incurred | (1,427,493) | 767,375 | 2,290,655 |
| 20. Net income (Line 18 minus Line 19)(to Line 22) | 2,182,003 | 1,698,384 | 5,301,133 |
| CAPITAL AND SURPLUS ACCOUNT | | | |
| 21. Surplus as regards policyholders, December 31 prior year | 55,646,618 | 50,375,405 | 50,375,405 |
| 22. Net income (from Line 20) | 2,182,003 | 1,698,384 | 5,301,133 |
| 23. Net transfers (to) from Protected Cell accounts | | 0 | 0 |
| 24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ | (2,984) | 0 | 0 |
| 25. Change in net unrealized foreign exchange capital gain (loss) | | 0 | 0 |
| 26. Change in net deferred income tax | (1,623,776) | (21,471) | (30,828) |
| 27. Change in nonadmitted assets | 57,240 | (5,872) | 908 |
| 28. Change in provision for reinsurance | | 0 | 0 |
| 29. Change in surplus notes | | 0 | 0 |
| 30. Surplus (contributed to) withdrawn from protected cells | | 0 | 0 |
| 31. Cumulative effect of changes in accounting principles | | 0 | 0 |
| 32. Capital changes: | | | |
| 32.1 Paid in | | 0 | 0 |
| 32.2 Transferred from surplus (Stock Dividend) | | 0 | 0 |
| 32.3 Transferred to surplus | | 0 | 0 |
| 33. Surplus adjustments: | | | |
| 33.1 Paid in | | 0 | 0 |
| 33.2 Transferred to capital (Stock Dividend) | | 0 | 0 |
| 33.3 Transferred from capital | | 0 | 0 |
| 34. Net remittances from or (to) Home Office | | 0 | 0 |
| 35. Dividends to stockholders | | 0 | 0 |
| 36. Change in treasury stock | | 0 | 0 |
| 37. Aggregate write-ins for gains and losses in surplus | 0 | 0 | 0 |
| 38. Change in surplus as regards policyholders (Lines 22 through 37) | 612,483 | 1,671,041 | 5,271,213 |
| 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) | 56,259,101 | 52,046,445 | 55,646,618 |
| DETAILS OF WRITE-INS | | | |
| 0501. | | 0 | 0 |
| 0502. | | 0 | 0 |
| 0503. | | 0 | 0 |
| 0598. Summary of remaining write-ins for Line 5 from overflow page | 0 | 0 | 0 |
| 0599. TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above) | 0 | 0 | 0 |
| 1401. Miscellaneous Income..... | | 32,702 | 140,501 |
| 1402. | | 0 | 0 |
| 1403. | | 0 | 0 |
| 1498. Summary of remaining write-ins for Line 14 from overflow page | 0 | 0 | 0 |
| 1499. TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above) | 0 | 32,702 | 140,501 |
| 3701. | | 0 | 0 |
| 3702. | | 0 | 0 |
| 3703. | | 0 | 0 |
| 3798. Summary of remaining write-ins for Line 37 from overflow page | 0 | 0 | 0 |
| 3799. TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above) | 0 | 0 | 0 |

STATEMENT AS OF MARCH 31, 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

CASH FLOW

| | 1 Current Year To Date | 2 Prior Year To Date | 3 Prior Year Ended December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| Cash from Operations | | | |
| 1. Premiums collected net of reinsurance..... | (9,499,075) | 12,165,451 | 47,298,622 |
| 2. Net investment income..... | 867,346 | 737,241 | 3,470,773 |
| 3. Miscellaneous income..... | 0 | 464,103 | 2,088,836 |
| 4. Total (Lines 1 to 3)..... | (8,631,729) | 13,366,795 | 52,858,232 |
| 5. Benefit and loss related payments..... | 21,420,510 | 5,951,421 | 23,305,226 |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts..... | 0 | 0 | 0 |
| 7. Commissions, expenses paid and aggregate write-ins for deductions..... | 9,497,573 | 5,514,383 | 19,982,419 |
| 8. Dividends paid to policyholders..... | 97,714 | 36,317 | 126,590 |
| 9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)..... | 2,279,990 | 1,255,582 | 1,255,582 |
| 10. Total (Lines 5 through 9)..... | 33,295,787 | 12,757,703 | 44,669,817 |
| 11. Net cash from operations (Line 4 minus Line 10)..... | (41,927,517) | 609,092 | 8,188,415 |
| Cash from Investments | | | |
| 12. Proceeds from investments sold, matured or repaid: | | | |
| 12.1 Bonds..... | 2,255,933 | 806,597 | 13,210,096 |
| 12.2 Stocks..... | 0 | 0 | 0 |
| 12.3 Mortgage loans..... | 0 | 0 | 0 |
| 12.4 Real estate..... | 0 | 0 | 0 |
| 12.5 Other invested assets..... | 0 | 0 | 0 |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments..... | 0 | 0 | 0 |
| 12.7 Miscellaneous proceeds..... | 0 | 301,293 | 0 |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7)..... | 2,255,933 | 1,107,890 | 13,210,096 |
| 13. Cost of investments acquired (long-term only): | | | |
| 13.1 Bonds..... | 3,233,216 | 3,376,112 | 22,816,044 |
| 13.2 Stocks..... | 0 | 0 | 0 |
| 13.3 Mortgage loans..... | 0 | 0 | 0 |
| 13.4 Real estate..... | 0 | 0 | 0 |
| 13.5 Other invested assets..... | 0 | 0 | 0 |
| 13.6 Miscellaneous applications..... | 2,284 | 0 | 0 |
| 13.7 Total investments acquired (Lines 13.1 to 13.6)..... | 3,235,500 | 3,376,112 | 22,816,044 |
| 14. Net increase (or decrease) in contract loans and premium notes..... | 0 | 0 | 0 |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)..... | (979,567) | (2,268,222) | (9,605,948) |
| Cash from Financing and Miscellaneous Sources | | | |
| 16. Cash provided (applied): | | | |
| 16.1 Surplus notes, capital notes..... | 0 | 0 | 0 |
| 16.2 Capital and paid in surplus, less treasury stock..... | 0 | 0 | 0 |
| 16.3 Borrowed funds..... | 0 | 0 | 0 |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities..... | 0 | 0 | 0 |
| 16.5 Dividends to stockholders..... | 0 | 0 | 0 |
| 16.6 Other cash provided (applied)..... | 43,820,967 | 1,884,765 | 721,080 |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)..... | 43,820,967 | 1,884,765 | 721,080 |
| RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS | | | |
| 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)..... | 913,883 | 225,635 | (696,453) |
| 19. Cash, cash equivalents and short-term investments: | | | |
| 19.1 Beginning of year..... | 692,901 | 1,389,354 | 1,389,354 |
| 19.2 End of period (Line 18 plus Line 19.1)..... | 1,606,784 | 1,614,989 | 692,901 |

**STATEMENT AS OF MARCH 31, 2017 OF THE
GRANGE INDEMNITY INSURANCE COMPANY**

NOTES TO FINANCIAL STATEMENTS

1. SUMMARY OF SIGNIFICANT ACCOUNT POLICIES

A. Accounting Practices:

The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the State of Ohio. The State of Ohio requires that insurance companies domiciled in the State prepare their statutory basis financial statements in accordance with the NAIC Accounting Practices and Procedures manual subject to any deviations prescribed or permitted by the State of Ohio insurance commissioner. The Company does not employ accounting practices that depart from the NAIC Accounting Practices and Procedures Manual.

| | SSAP # | F/S Page | F/S Line Number | 2017 | 2016 |
|---|-----------|-------------|--------------------|----------------------|----------------------|
| NET INCOME | | | | | |
| (1) Grange Indemnity Insurance Company state basis (Page 4, Line 20, Columns 1 & 2) | xxx | xxx | xxx | \$ 2,182,003 | \$ 5,301,134 |
| (2) State Prescribed Practices that increase/(decrease) NAIC SAP | | | | 0 | 0 |
| (3) State Permitted Practices that increase/(decrease) NAIC SAP | | | | 0 | 0 |
| (4) NAIC SAP (1-2-3=4) | xxx | xxx | xxx | <u>\$ 2,182,003</u> | <u>\$ 5,301,134</u> |
| SURPLUS | | | | | |
| (5) Grange Indemnity Insurance Company state basis (Page 3, Line 37, Columns 1 & 2) | xxx | xxx | xxx | \$ 56,259,101 | \$ 55,646,618 |
| (6) State Prescribed Practices that increase/(decrease) NAIC SAP | | | | 0 | 0 |
| (7) State Permitted Practices that increase/(decrease) NAIC SAP | | | | 0 | 0 |
| (8) NAIC SAP (5-6-7=8) | xxx | xxx | xxx | <u>\$ 56,259,101</u> | <u>\$ 55,646,618</u> |

C. Accounting Policy

6. Loan-backed securities are stated at either amortized cost or the lower of amortized cost or fair market value. The retrospective adjustment method is used to value all securities except for interest only securities or securities where the yield had become negative, those are valued using the prospective method.

D. Going Concern: None

2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS
NONE

3. BUSINESS COMBINATIONS AND GOODWILL
NONE

4. DISCONTINUED OPERATIONS
NO CHANGE

5. INVESTMENTS

D. LOAN-BACKED SECURITIES

- 1) Prepayment assumptions for single class and multi-class mortgage-backed/asset-backed securities were obtained from Bloomberg. These assumptions are consistent with the current interest rate and economic environment.
- 2) NONE
- 3) NONE
- 4) Impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a.

Aggregate Amount of Unrealized Losses:

| | |
|--------------------------|----------|
| 1 Less than 12 Months | (95,089) |
| 2 Greater than 12 Months | (16,648) |

b.

The Aggregate Related Fair Value of Securities with Unrealized Losses:

| | |
|--------------------------|-----------|
| 1 Less than 12 Months | 6,314,258 |
| 2 Greater than 12 Months | 403,098 |

5. According to SSAP 43R, loan-backed and structured securities with an unrealized loss position were reviewed for impairment. The best estimate of future cash flows using the appropriate discount rate was calculated for each affected security, with other-than-temporary impairments realized to the extent that present value was less than amortized cost. Securities with a present value greater than amortized cost were not other-than-temporarily impaired.

E. REPURCHASE AGREEMENTS AND SECURITIES LENDING TRANSACTIONS

3. COLLATERAL RECEIVED

The fair value of that collateral and of the portion of that collateral that it has sold or re-pledged.

| | Fair Value |
|---------------------------|----------------|
| Open | 266,437 |
| 30 Days or Less | 0 |
| 31 to 60 Days | 0 |
| 61 to 90 Days | 0 |
| Greater than 90 Days | 0 |
| Sub-Total | 266,437 |
| Securities Received | 0 |
| Total Collateral Received | <u>266,437</u> |

I. WORKING CAPITAL FINANCE INVESTMENTS

The Company has no working capital finance investments.

J. OFFSETTING AND NETTING OF LIABILITIES

The Company does not offset or net liabilities.

6. JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES
NO CHANGE

**STATEMENT AS OF MARCH 31, 2017 OF THE
GRANGE INDEMNITY INSURANCE COMPANY**

NOTES TO FINANCIAL STATEMENTS

7. INVESTMENT INCOME
NO CHANGE

8. DERIVATIVE INSTRUMENTS
NONE

9. FEDERAL INCOME TAXES

A. The components of the net deferred tax assets at March 31, 2017 and December 31, 2016 are as follows:

| | <u>3/31/2017</u> | <u>12/31/2016</u> |
|--|------------------|-------------------|
| Gross Deferred Tax Assets | \$ - | \$ 1,653,653 |
| Gross Deferred Tax Liabilities | 154,943 | 184,820 |
| Net Deferred Tax Asset (Liability) | (154,943) | 1,468,833 |
| Nonadmitted Deferred Tax Assets | - | - |
| Admitted Deferred Tax Asset | <u>(154,943)</u> | <u>1,468,833</u> |
| (Increase) Decrease in Deferred Tax Assets Nonadmitted | \$ - | \$ - |

B. The Company has no deferred tax liabilities that are not recognized

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

| | <u>3/31/2017</u> | <u>12/31/2016</u> |
|---|-----------------------|---------------------|
| Current Income Tax Expense | \$ (1,427,493) | \$ 2,263,537 |
| Tax on Capital Gains/(Losses) | - | (10,667) |
| Prior Year Under Accrual (Over Accrual) | - | 27,118) |
| Federal Income Taxes Incurred | <u>\$ (1,427,493)</u> | <u>\$ 2,279,990</u> |

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES AND AFFILIATES
NO CHANGE

11. DEBT
B. FHLB
NONE

12. RETIREMENT PLANS, DEFERRED COMPENSATION, AND POSTRETIREMENT BENEFIT PLANS
No Pension, Postretirement or Postemployment and Compensated Absence Benefit Plans

13. CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS AND QUSAI-REORGANIZATIONS
NO CHANGE

14. CONTINGENCIES
NO CHANGE

15. LEASES
NO CHANGE

16. INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATION OF CREDIT RISK.
NONE

17. SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES

B. Transfer and Servicing of Financial Assets

2. For all servicing assets and servicing liabilities:

b) None

4. For securitizations, asset-backed financing arrangements and similar transfers accounted for as sales when the transferor has continuing involvement (as defined in the Accounting Practices and Procedures Manual) with the transferred financial assets:

a) None

b) None

C. Wash Sales

None

18. GAINS OR LOSS TO THE REPORTING ENTITY FROM UNINSURED A&H PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS.

NONE

19. DIRECT PREMIUM WRITTEN / PRODUCED BY MANAGING GENERAL AGENTS / THIRD PARTY ADMINISTRATORS
NONE

**STATEMENT AS OF MARCH 31, 2017 OF THE
GRANGE INDEMNITY INSURANCE COMPANY**

NOTES TO FINANCIAL STATEMENTS

20. FAIR VALUE MEASUREMENTS

- A.
1. NONE
 2. NONE
 3. The Company's policy is to recognize transfers in and out as of the end of the reporting period.
 4. As of March 31, 2017, the reported fair value of the entity's investments categorized within Level 2 and Level 3 of the fair value hierarchy are as follows:

According to statutory accounting rules, fixed income securities with a rating of NAIC 1 or 2 are reported at amortized cost. Securities with a rating of NAIC 3 thru 6, or non-investment grade ratings, are measured and reported at the lower of amortized cost or fair value on the statement of financial position. As of March 31, 2017, the Company did not have any bonds rated NAIC 3 thru 6, and therefore did not report any securities at fair value.

- B. Not Required

C.

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | Level 1 | Level 2 | Level 3 | Not Practicable (CV) |
|------------------------------|----------------------|-------------------|------------------|-------------------|----------|----------------------|
| Bonds | 96,556,308 | 95,202,277 | 4,140,642 | 92,415,666 | 0 | 0 |
| Common Stock | 0 | 0 | 0 | 0 | 0 | 0 |
| Perpetual Preferred | 0 | 0 | 0 | 0 | 0 | 0 |
| Mortgage Loans | 0 | 0 | 0 | 0 | 0 | 0 |
| Money Market | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 96,556,308 | 95,202,277 | 4,140,642 | 92,415,666 | 0 | 0 |

- D. NONE

21. OTHER ITEMS

- G. Offsetting and Netting of Assets and Liabilities
NONE
- I. Risk Sharing Provisions of the Affordable Care Act (ACA)
NONE

22. EVENTS SUBSEQUENT
NO CHANGE

23. REINSURANCE
NO CHANGE

24. RETROSPECTIVELY RATED CONTRACTS & CONTRACTS SUBJECT TO REDETERMINATION
NONE

25. CHANGES IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES

As a result of the change to the Intercompany Pooling Agreement (See FN 26), all reserves have been ceded to the lead company of the pooling agreement.

| LOSSES AND LAE | March 31, 2017 | December 31, 2016 |
|-------------------------------|----------------|-------------------|
| BALANCE JANUARY 1 | 37,654,317 | 38,384,617 |
| LESS REINSURANCE RECOVERABLES | 9,799,510 | 11,423,478 |
| NET BALANCE JANUARY 1 | 27,854,807 | 26,961,139 |
| INCURRED RELATED TO: | | |
| CURRENT YEAR | 0 | 31,065,246 |
| PRIOR YEAR | 0 | (1,605,038) |
| TOTAL INCURRED | 0 | 29,460,208 |
| PAID RELATED TO: | | |
| CURRENT YEAR | 0 | 18,196,138 |
| PRIOR YEAR | 27,854,807 | 10,370,402 |
| TOTAL PAID | 27,854,807 | 28,566,540 |
| NET BALANCE AT DECEMBER 31 | 0 | 27,854,807 |
| PLUS REINSURANCE RECOVERABLES | 0 | 9,799,510 |
| BALANCE AT DECEMBER 31 | 0 | 37,654,317 |

26. INTERCOMPANY POOLING AGREEMENTS

Effective January 1, 2017 the pooling agreement was modified to have the pooling percentages as follows:

| | NAIC # | Pool | | |
|---------------|---|------------|------------|-------|
| | | Share | | |
| | | 12/31/2017 | 12/31/2016 | |
| Lead Company: | Grange Mutual Casualty Company | 14060 | 96.0% | 84.0% |
| Affiliates: | Trustgard Insurance Company | 40118 | 0.0% | 3.5% |
| | Grange Indemnity Insurance Company | 10322 | 0.0% | 4.0% |
| | Grange Insurance Company of Michigan | 11136 | 0.0% | 2.5% |
| | Grange Property & Casualty Insurance Company | 11982 | 0.0% | 2.0% |
| | Integrity Mutual Insurance Company | 14303 | 4.0% | 3.3% |
| | Integrity Property & Casualty Insurance Company | 12986 | 0.0% | 0.7% |
| | Integrity Select Insurance Company | 10288 | 0.0% | n/a |

The purpose of the pooling agreement change was to add a new stock company, Integrity Select Insurance Company, to the agreement, as well as to create operational efficiencies and simplify reporting of financial results for the companies in the pool. The intercompany pooling agreement now cedes

**STATEMENT AS OF MARCH 31, 2017 OF THE
GRANGE INDEMNITY INSURANCE COMPANY**

NOTES TO FINANCIAL STATEMENTS

underwriting results back only to the two mutual parent companies, Grange Mutual Casualty Company and Integrity Mutual Insurance Company, with their respective stock subsidiary companies receiving 0% from the pool. Grange Mutual Casualty Company remains the lead company.

27. STRUCTURED SETTLEMENTS
NO CHANGE.

28. HEALTH CARE RECEIVABLES
NONE

29. PARTICIPATING POLICIES
NONE

30. PREMIUM DEFICIENCY RESERVES
NO CHANGE

31. HIGH DEDUCTIBLES
NONE

32. DISCOUNTING OF LIABILITIES FOR UNPAID LOSSES OR UNPAID LOSS ADJUSTMENT EXPENSES
NONE

33. ASBESTOS/ENVIRONMENTAL RESERVES
NONE

34. SUBSCRIBER SAVINGS ACCOUNTS
NOT APPLICABLE

35. MULTIPLE PERIL CROP INSURANCE
NONE

36. FINANCIAL GUARANTY INSURANCE
No Financial Guaranty Insurance

37. CATASTROPHIC PLANNING
NO CHANGE

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:01/01/3000
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [X] No []
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.
INTEGRITY MUTUAL INSURANCE COMPANY FORMED AND CAPITALIZED A WHOLLY OWNED STOCK SUBSIDIARY, INTEGRITY SELECT INSURANCE COMPANY, EFFECTIVE JANUARY 1, 2017.....

- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

| 1 Name of Entity | 2 NAIC Company Code | 3 State of Domicile |
|---------------------|------------------------|------------------------|
| | | |

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] NA []
If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.12/31/2014
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.12/31/2014
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).11/24/2015
- 6.4 By what department or departments?
Ohio.....
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] NA [X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] NA []
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 7.2 If yes, give full information:
.....
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?..... Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?..... Yes [] No [X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

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

GENERAL INTERROGATORIES

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes No
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 (c) Compliance with applicable governmental laws, rules and regulations;
 (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 (e) Accountability for adherence to the code.

9.11 If the response to 9.1 is No, please explain:

- 9.2 Has the code of ethics for senior managers been amended? Yes No

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes No

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes No

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$0

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes No

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

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$0

13. Amount of real estate and mortgages held in short-term investments: \$0

- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes No

14.2 If yes, please complete the following:

| | 1 Prior Year-End Book/Adjusted Carrying Value | 2 Current Quarter Book/Adjusted Carrying Value |
|---|--|---|
| 14.21 Bonds | \$ | \$ |
| 14.22 Preferred Stock | \$ | \$ |
| 14.23 Common Stock | \$ | \$ |
| 14.24 Short-Term Investments | \$ | \$ |
| 14.25 Mortgage Loans on Real Estate | \$ | \$ |
| 14.26 All Other | \$ | \$ |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)..... | \$0 | \$0 |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | \$ | \$ |

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes No

- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes No

If no, attach a description with this statement.

GENERAL INTERROGATORIES

- 16 For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$266,437
 - 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$266,439
 - 16.3 Total payable for securities lending reported on the liability page \$266,439

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

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

| 1 Name of Custodian(s) | 2 Custodian Address |
|--------------------------------|---|
| JP Morgan Chase Bank, N.A..... | 4 Chase Metrotech Center, Floor 16, Brooklyn, NY 11245..... |

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]

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

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

17.5 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. [“...that have access to the investment accounts”; “...handle securities”]

| 1 Name of Firm or Individual | 2 Affiliation |
|---------------------------------|------------------|
| J. Christopher Montgomery..... | |
| James Habegger..... | |
| John Ammendola..... | |
| Teresa Dalenta..... | |

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) manage more than 10% of the reporting entity's assets? Yes [] No [X]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets? Yes [] No [X]

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of “A” (affiliated) or “U” (unaffiliated), provide the information for the table below.

| 1 Central Registration Depository Number | 2 Name of Firm or Individual | 3 Legal Entity Identifier (LEI) | 4 Registered With | 5 Investment Management Agreement (IMA) Filed |
|---|---------------------------------|------------------------------------|----------------------|--|
| | | | | |
| | | | | |
| | | | | |

18.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? Yes [X] No []

18.2 If no, list exceptions:
.....

STATEMENT AS OF MARCH 31, 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

GENINTPT2 - Attachment

Effective January 1, 2017 the pooling agreement was modified as follows:

| | Pooling % 12/31/2016 | Pooling % 1/1/2017 |
|------------------------------------|---------------------------------|-------------------------------|
| Grange Mutual Insurance Company | 84.0% | 96% |
| Grange Indemnity Insurance Company | 4.0% | 0% |
| Trustgard Insurance Company | 3.5% | 0% |
| Grange Michigan Insurance Company | 2.5% | 0% |
| Grange P&C Insurance Company | 2.0% | 0% |
| Integrity Mutual Insurance Company | 3.3% | 4% |
| Integrity P&C Insurance Company | 0.7% | 0% |
| Integrity Select Insurance Company | NA | 0% |

The purpose of the pooling agreement change was to add a new stock company, Integrity Select Insurance Company, to the agreement, as well as to create operational efficiencies and simplify reporting of financial results for the companies in the pool. The intercompany pooling agreement now cedes underwriting results back only to the two mutual parent companies, Grange Mutual Casualty Company and Integrity Mutual Insurance Company, with their respective stock subsidiary companies receiving 0% from the pool. Grange Mutual Casualty Company remains the lead company.

STATEMENT AS OF MARCH 31, 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date – Allocated by States and Territories

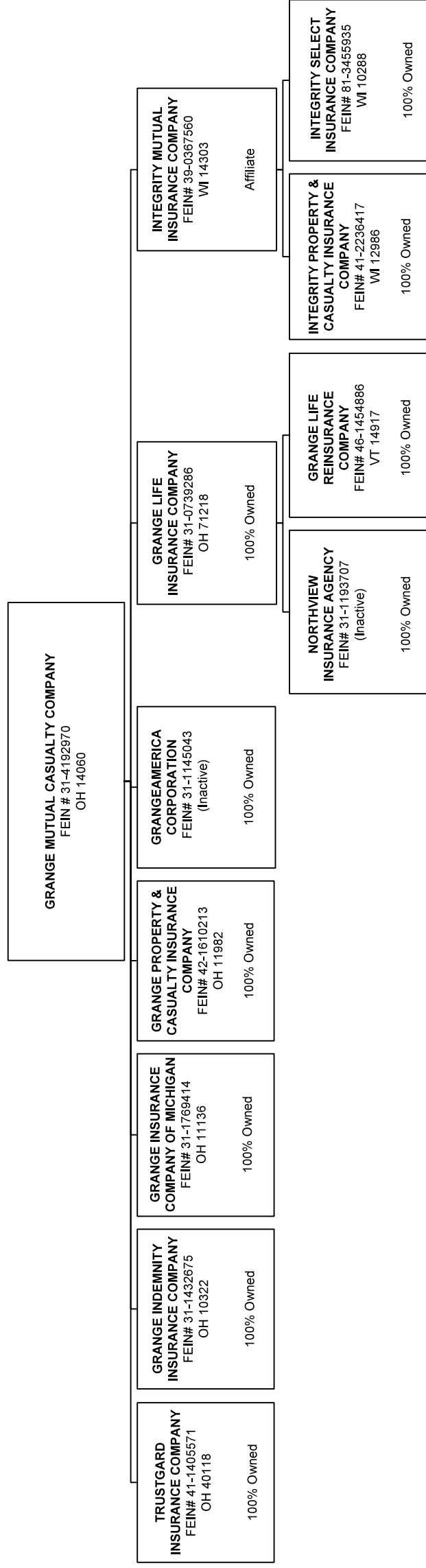
| States, etc. | 1 Active Status | Direct Premiums Written | | Direct Losses Paid (Deducting Salvage) | | Direct Losses Unpaid | | |
|---|--------------------|---------------------------|-------------------------|--|-------------------------|---------------------------|-------------------------|------------|
| | | 2 Current Year To Date | 3 Prior Year To Date | 4 Current Year To Date | 5 Prior Year To Date | 6 Current Year To Date | 7 Prior Year To Date | |
| 1. Alabama | AL | N | 0 | 0 | 0 | 0 | 0 | |
| 2. Alaska | AK | N | 0 | 0 | 0 | 0 | 0 | |
| 3. Arizona | AZ | N | 0 | 0 | 0 | 0 | 0 | |
| 4. Arkansas | AR | N | 0 | 0 | 0 | 0 | 0 | |
| 5. California | CA | N | 0 | 0 | 0 | 0 | 0 | |
| 6. Colorado | CO | N | 0 | 0 | 0 | 0 | 0 | |
| 7. Connecticut | CT | N | 0 | 0 | 0 | 0 | 0 | |
| 8. Delaware | DE | N | 0 | 0 | 0 | 0 | 0 | |
| 9. Dist. Columbia | DC | N | 0 | 0 | 0 | 0 | 0 | |
| 10. Florida | FL | N | 0 | 0 | 0 | 0 | 0 | |
| 11. Georgia | GA | L | 1,645,044 | 1,852,220 | 1,509,323 | 1,956,094 | 9,088,032 | 11,546,928 |
| 12. Hawaii | HI | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 13. Idaho | ID | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 14. Illinois | IL | L | 1,377,221 | 1,452,397 | 1,314,608 | 1,170,190 | 14,924,443 | 17,074,160 |
| 15. Indiana | IN | L | 1,881,159 | 2,195,853 | 1,319,721 | 2,643,871 | 4,754,451 | 5,523,851 |
| 16. Iowa | IA | L | 0 | 0 | 0 | 0 | 0 | 0 |
| 17. Kansas | KS | L | 0 | 0 | 0 | 0 | 0 | 0 |
| 18. Kentucky | KY | L | 934,204 | 1,617,703 | 712,274 | 834,634 | 5,813,817 | 5,429,913 |
| 19. Louisiana | LA | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 20. Maine | ME | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 21. Maryland | MD | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 22. Massachusetts | MA | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 23. Michigan | MI | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 24. Minnesota | MN | L | 0 | 0 | 0 | 0 | 0 | 0 |
| 25. Mississippi | MS | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 26. Missouri | MO | L | 0 | 0 | 0 | 0 | 0 | 0 |
| 27. Montana | MT | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 28. Nebraska | NE | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 29. Nevada | NV | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 30. New Hampshire | NH | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 31. New Jersey | NJ | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 32. New Mexico | NM | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 33. New York | NY | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 34. No. Carolina | NC | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 35. No. Dakota | ND | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 36. Ohio | OH | L | 23,733,200 | 11,883,690 | 9,295,886 | 3,948,412 | 23,867,805 | 14,073,940 |
| 37. Oklahoma | OK | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 38. Oregon | OR | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 39. Pennsylvania | PA | L | 654,878 | 730,284 | 408,963 | 383,483 | 3,440,350 | 3,639,664 |
| 40. Rhode Island | RI | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 41. So. Carolina | SC | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 42. So. Dakota | SD | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 43. Tennessee | TN | L | 1,505,780 | 1,326,705 | 645,288 | 1,084,984 | 5,689,054 | 5,810,337 |
| 44. Texas | TX | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 45. Utah | UT | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 46. Vermont | VT | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 47. Virginia | VA | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 48. Washington | WA | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 49. West Virginia | WV | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 50. Wisconsin | WI | L | 0 | 0 | 0 | 0 | 0 | 0 |
| 51. Wyoming | WY | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 52. American Samoa | AS | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 53. Guam | GU | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 54. Puerto Rico | PR | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 55. U.S. Virgin Islands | VI | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 56. Northern Mariana Islands | MP | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 57. Canada | CAN | N | 0 | 0 | 0 | 0 | 0 | 0 |
| 58. Aggregate Other Alien | OT | XXX | 0 | 0 | 0 | 0 | 0 | 0 |
| 59. Totals | (a) 12 | | 31,731,487 | 21,058,853 | 15,206,062 | 12,021,668 | 67,577,953 | 63,098,794 |
| DETAILS OF WRITE-INS | | | | | | | | |
| 58001. | XXX | | | | | | | |
| 58002. | XXX | | | | | | | |
| 58003. | XXX | | | | | | | |
| 58998. Summary of remaining write-ins for Line 58 from overflow page. | XXX | | 0 | 0 | 0 | 0 | 0 | 0 |
| 58999. TOTALS (Lines 58001 through 58003 plus 58998) (Line 58 above) | XXX | | 0 | 0 | 0 | 0 | 0 | 0 |

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile – see DSLI); (D) DSLI – Domestic Surplus Lines Insurer (DSLI) – Reporting entities authorized to write Surplus Lines in the state of domicile; (N) None of the above - Not allowed to write business in the state.

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

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

PART 1 – ORGANIZATIONAL CHART



STATEMENT AS OF MARCH 31, 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|------------------------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Y/N) | * |
| 00267 | GRANGE MUTUAL CASUALTY GROUP | 14060 | 31-4192970 | | | | GRANGE MUTUAL CASUALTY COMPANY | .OH | UDP | GRANGE MUTUAL CASUALTY COMPANY | BOARD | 0.0 | GRANGE MUTUAL CASUALTY COMPANY | N | .0 |
| 00267 | GRANGE MUTUAL CASUALTY GROUP | 71218 | 31-0739286 | | | | GRANGE LIFE INSURANCE COMPANY | .OH | IA | GRANGE MUTUAL CASUALTY COMPANY | OWNERSHIP | 100.0 | GRANGE MUTUAL CASUALTY COMPANY | N | .0 |
| 00267 | GRANGE MUTUAL CASUALTY GROUP | 40118 | 41-1405571 | | | | TRUSTGARD INSURANCE COMPANY | .OH | IA | GRANGE MUTUAL CASUALTY COMPANY | OWNERSHIP | 100.0 | GRANGE MUTUAL CASUALTY COMPANY | N | .0 |
| 00267 | GRANGE MUTUAL CASUALTY GROUP | 10322 | 31-1432675 | | | | GRANGE INDEMNITY INSURANCE COMPANY | .OH | RE | GRANGE MUTUAL CASUALTY COMPANY | OWNERSHIP | 100.0 | GRANGE MUTUAL CASUALTY COMPANY | N | .0 |
| 00267 | GRANGE MUTUAL CASUALTY GROUP | 11136 | 31-1769414 | | | | GRANGE INSURANCE COMPANY OF MICHIGAN | .OH | IA | GRANGE MUTUAL CASUALTY COMPANY | OWNERSHIP | 100.0 | GRANGE MUTUAL CASUALTY COMPANY | N | .0 |
| 00267 | GRANGE MUTUAL CASUALTY GROUP | 14303 | 39-0367560 | | | | INTEGRITY MUTUAL INSURANCE COMPANY | .WI | IA | GRANGE MUTUAL CASUALTY COMPANY | BOARD | 0.0 | GRANGE MUTUAL CASUALTY COMPANY | N | .0 |
| 00267 | GRANGE MUTUAL CASUALTY GROUP | 11982 | 42-1610213 | | | | GRANGE PROPERTY & CASUALTY INSURANCE COMPANY | .OH | IA | GRANGE MUTUAL CASUALTY COMPANY | OWNERSHIP | 100.0 | GRANGE MUTUAL CASUALTY COMPANY | N | .0 |
| 00267 | GRANGE MUTUAL CASUALTY GROUP | 10288 | 81-3455935 | | | | INTEGRITY SELECT INSURANCE COMPANY | .WI | IA | INTEGRITY MUTUAL INSURANCE COMPANY | OWNERSHIP | 100.0 | GRANGE MUTUAL CASUALTY COMPANY | N | .0 |
| 00267 | GRANGE MUTUAL CASUALTY GROUP | 12986 | 41-2236417 | | | | INTEGRITY PROPERTY & CASUALTY INSURANCE COMPANY | .WI | IA | INTEGRITY MUTUAL INSURANCE COMPANY | OWNERSHIP | 100.0 | GRANGE MUTUAL CASUALTY COMPANY | N | .0 |
| 00267 | GRANGE MUTUAL CASUALTY GROUP | 14917 | 46-1454886 | | | | GRANGE LIFE REINSURANCE COMPANY | .VT | IA | GRANGE LIFE INSURANCE COMPANY | OWNERSHIP | 100.0 | GRANGE MUTUAL CASUALTY COMPANY | N | .0 |
| | | 00000 | 31-1145043 | | | | GRANGEAMERICA | .OH | NIA | GRANGE MUTUAL CASUALTY COMPANY | OWNERSHIP | 100.0 | GRANGE MUTUAL CASUALTY COMPANY | N | .0 |
| | | 00000 | 31-1193707 | | | | NORTHVIEW INSURANCE AGENCY | .OH | NIA | GRANGE LIFE INSURANCE COMPANY | OWNERSHIP | 100.0 | GRANGE MUTUAL CASUALTY COMPANY | N | .0 |
| | | | | | | | | | | | | 0.0 | | N | .0 |

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| Asterisk | Explanation |
|----------|-------------|
| | |

STATEMENT AS OF MARCH 31, 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

PART 1 - LOSS EXPERIENCE

| Line of Business | Current Year to Date | | | 4 Prior Year to Date Direct Loss Percentage |
|--|--------------------------------|--------------------------------|--------------------------------|--|
| | 1 Direct Premiums Earned | 2 Direct Losses Incurred | 3 Direct Loss Percentage | |
| 1. Fire | | | 0.0 | 0.0 |
| 2. Allied lines | | | 0.0 | 0.0 |
| 3. Farmowners multiple peril | | | 0.0 | 0.0 |
| 4. Homeowners multiple peril | 558,283 | 735,925 | 131.8 | 0.0 |
| 5. Commercial multiple peril | | | 0.0 | 0.0 |
| 6. Mortgage guaranty | | | 0.0 | 0.0 |
| 8. Ocean marine | | | 0.0 | 0.0 |
| 9. Inland marine | 9,408 | 131 | 1.4 | 0.0 |
| 10. Financial guaranty | | | 0.0 | 0.0 |
| 11.1 Medical professional liability -occurrence | | | 0.0 | 0.0 |
| 11.2 Medical professional liability -claims made | | | 0.0 | 0.0 |
| 12. Earthquake | 2,250 | | 0.0 | 0.0 |
| 13. Group accident and health | | | 0.0 | 0.0 |
| 14. Credit accident and health | | | 0.0 | 0.0 |
| 15. Other accident and health | | | 0.0 | 0.0 |
| 16. Workers' compensation | | | 0.0 | 0.0 |
| 17.1 Other liability occurrence | 9,650 | 4,330 | 44.9 | 0.0 |
| 17.2 Other liability-claims made | | | 0.0 | 0.0 |
| 17.3 Excess Workers' Compensation | | | 0.0 | 0.0 |
| 18.1 Products liability-occurrence | | | 0.0 | 0.0 |
| 18.2 Products liability-claims made | | | 0.0 | 0.0 |
| 19.1,19.2 Private passenger auto liability | 10,262,417 | 7,643,974 | 74.5 | 63.4 |
| 19.3,19.4 Commercial auto liability | 4,480,020 | 1,924,143 | 42.9 | 48.1 |
| 21. Auto physical damage | 10,242,495 | 5,334,746 | 52.1 | 52.6 |
| 22. Aircraft (all perils) | | | 0.0 | 0.0 |
| 23. Fidelity | | | 0.0 | 0.0 |
| 24. Surety | | | 0.0 | 0.0 |
| 26. Burglary and theft | | | 0.0 | 0.0 |
| 27. Boiler and machinery | | | 0.0 | 0.0 |
| 28. Credit | | | 0.0 | 0.0 |
| 29. International | | | 0.0 | 0.0 |
| 30. Warranty | | | 0.0 | 0.0 |
| 31. Reinsurance - Nonproportional Assumed Property | XXX | XXX | XXX | XXX |
| 32. Reinsurance - Nonproportional Assumed Liability | XXX | XXX | XXX | XXX |
| 33. Reinsurance - Nonproportional Assumed Financial Lines | XXX | XXX | XXX | XXX |
| 34. Aggregate write-ins for other lines of business | 0 | 0 | 0.0 | 0.0 |
| 35. TOTALS | 25,564,523 | 15,643,250 | 61.2 | 54.5 |
| DETAILS OF WRITE-INS | | | | |
| 3401. | | | 0.0 | 0.0 |
| 3402. | | | 0.0 | 0.0 |
| 3403. | | | 0.0 | 0.0 |
| 3498. Sum. of remaining write-ins for Line 34 from overflow page | 0 | 0 | 0.0 | 0.0 |
| 3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34) | 0 | 0 | 0.0 | 0.0 |

PART 2 - DIRECT PREMIUMS WRITTEN

| Line of Business | 1 | 2 | 3 |
|--|--------------------|-------------------------|----------------------------|
| | Current Quarter | Current Year to Date | Prior Year Year to Date |
| 1. Fire | 0 | | 0 |
| 2. Allied lines | 0 | | 0 |
| 3. Farmowners multiple peril | 0 | | 0 |
| 4. Homeowners multiple peril | 3,334,193 | 3,334,193 | 0 |
| 5. Commercial multiple peril | 0 | | 0 |
| 6. Mortgage guaranty | 0 | | 0 |
| 8. Ocean marine | 0 | | 0 |
| 9. Inland marine | 59,610 | 59,610 | 0 |
| 10. Financial guaranty | 0 | | 0 |
| 11.1 Medical professional liability-occurrence | 0 | | 0 |
| 11.2 Medical professional liability-claims made | 0 | | 0 |
| 12. Earthquake | 12,536 | 12,536 | 0 |
| 13. Group accident and health | 0 | | 0 |
| 14. Credit accident and health | 0 | | 0 |
| 15. Other accident and health | 0 | | 0 |
| 16. Workers' compensation | 0 | | 0 |
| 17.1 Other liability occurrence | 66,051 | 66,051 | 0 |
| 17.2 Other liability-claims made | 0 | | 0 |
| 17.3 Excess Workers' Compensation | 0 | | 0 |
| 18.1 Products liability-occurrence | 0 | | 0 |
| 18.2 Products liability-claims made | 0 | | 0 |
| 19.1,19.2 Private passenger auto liability | 12,197,659 | 12,197,659 | 8,313,491 |
| 19.3,19.4 Commercial auto liability | 4,168,776 | 4,168,776 | 4,537,287 |
| 21. Auto physical damage | 11,892,661 | 11,892,661 | 8,208,075 |
| 22. Aircraft (all perils) | 0 | | 0 |
| 23. Fidelity | 0 | | 0 |
| 24. Surety | 0 | | 0 |
| 26. Burglary and theft | 0 | | 0 |
| 27. Boiler and machinery | 0 | | 0 |
| 28. Credit | 0 | | 0 |
| 29. International | 0 | | 0 |
| 30. Warranty | 0 | | 0 |
| 31. Reinsurance - Nonproportional Assumed Property | XXX | XXX | XXX |
| 32. Reinsurance - Nonproportional Assumed Liability | XXX | XXX | XXX |
| 33. Reinsurance - Nonproportional Assumed Financial Lines | XXX | XXX | XXX |
| 34. Aggregate write-ins for other lines of business | 0 | 0 | 0 |
| 35. TOTALS | 31,731,487 | 31,731,487 | 21,058,853 |
| DETAILS OF WRITE-INS | | | |
| 3401. | 0 | | 0 |
| 3402. | 0 | | 0 |
| 3403. | 0 | | 0 |
| 3498. Sum. of remaining write-ins for Line 34 from overflow page | 0 | 0 | 0 |
| 3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34) | 0 | 0 | 0 |

STATEMENT AS OF MARCH 31, 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
|---|---|---|--|--|--|--|---|--|--------------------------------------|---|--|--|---|
| Years in Which Losses Occurred | Prior Year-End Known Case Loss and LAE Reserves | Prior Year-End IBNR Loss and LAE Reserves | Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2) | 2017 Loss and LAE Payments on Claims Reported as of Prior Year-End | 2017 Loss and LAE Payments on Claims Unreported as of Prior Year-End | Total 2017 Loss and LAE Payments (Cols. 4 + 5) | Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End | Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End | Q.S. Date IBNR Loss and LAE Reserves | Total Q.S. Loss and LAE Reserves (Cols.7 + 8 + 9) | Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 4 + 7 minus Col. 1) | Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5 + 8 + 9 minus Col. 2) | Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11 + 12) |
| 1. 2014 + Prior | 4,010 | 3,577 | 7,587 | 7,587 | 0 | 7,587 | 0 | 0 | 0 | 0 | 3,577 | (3,577) | 0 |
| 2. 2015 | 3,884 | 3,515 | 7,399 | 7,399 | 0 | 7,399 | 0 | 0 | 0 | 0 | 3,515 | (3,515) | 0 |
| 3. Subtotals 2015 + prior | 7,894 | 7,092 | 14,986 | 14,986 | 0 | 14,986 | 0 | 0 | 0 | 0 | 7,092 | (7,092) | 0 |
| 4. 2016 | 5,739 | 7,131 | 12,869 | 12,869 | 0 | 12,869 | 0 | 0 | 0 | 0 | 7,131 | (7,131) | 0 |
| 5. Subtotals 2016 + prior | 13,632 | 14,222 | 27,855 | 27,855 | 0 | 27,855 | 0 | 0 | 0 | 0 | 14,222 | (14,222) | 0 |
| 6. 2017 | XXX | XXX | XXX | XXX | 0 | 0 | XXX | 0 | 0 | 0 | XXX | XXX | XXX |
| 7. Totals | 13,632 | 14,222 | 27,855 | 27,855 | 0 | 27,855 | 0 | 0 | 0 | 0 | 14,222 | (14,222) | 0 |
| 8. Prior Year-End Surplus As Regards Policy-holders | 55,647 | | | | | | | | | | | | |
| | | | | | | | | | | | Col. 11, Line 7 As % of Col. 1, Line 7 | Col. 12, Line 7 As % of Col. 2, Line 7 | Col. 13, Line 7 As % of Col. 3, Line 7 |
| | | | | | | | | | | | 1. 104.3 | 2. (100.0) | 3. 0.0 |
| | | | | | | | | | | | | | Col. 13, Line 7 Line 8 |
| | | | | | | | | | | | | | 4. 0.0 |

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES





The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

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

Explanation:

- 1.
- 2.
- 3.
- 4.

Bar Code:

| | |
|----|--|
| 1. |  1 0 3 2 2 2 0 1 7 4 9 0 0 0 0 0 1 |
| 2. |  1 0 3 2 2 2 0 1 7 4 5 5 0 0 0 0 1 |
| 3. |  1 0 3 2 2 2 0 1 7 3 6 5 0 0 0 0 1 |
| 4. |  1 0 3 2 2 2 0 1 7 5 0 5 0 0 0 0 1 |

OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A – VERIFICATION

Real Estate

| | 1 Year To Date | 2 Prior Year Ended December 31 |
|--|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value, December 31 of prior year | 0 | 0 |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | 0 |
| 2.2 Additional investment made after acquisition | | 0 |
| 3. Current year change in encumbrances | | 0 |
| 4. Total gain (loss) on disposals | | 0 |
| 5. Deduct amounts received on disposals | | 0 |
| 6. Total foreign exchange change in book/adjusted carrying value | | 0 |
| 7. Deduct current year's other-than-temporary impairment recognized | | 0 |
| 8. Deduct current year's depreciation | | 0 |
| 9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) | 0 | 0 |
| 10. Deduct total nonadmitted amounts | 0 | 0 |
| 11. Statement value at end of current period (Line 9 minus Line 10) | 0 | 0 |

NONE

SCHEDULE B – VERIFICATION

Mortgage Loans

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

NONE

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

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

NONE

SCHEDULE D – VERIFICATION

Bonds and Stocks

| | 1 Year To Date | 2 Prior Year Ended December 31 |
|---|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year | 94,410,858 | 85,419,665 |
| 2. Cost of bonds and stocks acquired | 3,233,216 | 22,816,044 |
| 3. Accrual of discount | 21,449 | 184,971 |
| 4. Unrealized valuation increase (decrease) | (2,983) | 0 |
| 5. Total gain (loss) on disposals | | 20,224 |
| 6. Deduct consideration for bonds and stocks disposed of | 2,255,933 | 13,210,096 |
| 7. Deduct amortization of premium | 204,330 | 769,256 |
| 8. Total foreign exchange change in book/adjusted carrying value | | 0 |
| 9. Deduct current year's other-than-temporary impairment recognized | | 50,694 |
| 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) | 95,202,277 | 94,410,858 |
| 11. Deduct total nonadmitted amounts | 0 | 0 |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 95,202,277 | 94,410,858 |

STATEMENT AS OF MARCH 31, 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

| NAIC Designation | 1 Book/Adjusted Carrying Value Beginning of Current Quarter | 2 Acquisitions During Current Quarter | 3 Dispositions During Current Quarter | 4 Non-Trading Activity During Current Quarter | 5 Book/Adjusted Carrying Value End of First Quarter | 6 Book/Adjusted Carrying Value End of Second Quarter | 7 Book/Adjusted Carrying Value End of Third Quarter | 8 Book/Adjusted Carrying Value December 31 Prior Year |
|-----------------------------------|---|--|--|---|---|--|---|---|
| BONDS | | | | | | | | |
| 1. NAIC 1 (a)..... | 79,136,794 | 2,218,716 | 1,729,413 | (658,413) | 78,967,684 | 0 | 0 | 79,136,794 |
| 2. NAIC 2 (a)..... | 15,274,064 | | 526,520 | 1,023,030 | 15,770,574 | 0 | 0 | 15,274,064 |
| 3. NAIC 3 (a)..... | 0 | | | 464,019 | 464,019 | 0 | 0 | 0 |
| 4. NAIC 4 (a)..... | 0 | | | | 0 | 0 | 0 | 0 |
| 5. NAIC 5 (a)..... | 0 | | | | 0 | 0 | 0 | 0 |
| 6. NAIC 6 (a)..... | 0 | | | | 0 | 0 | 0 | 0 |
| 7. Total Bonds | 94,410,858 | 2,218,716 | 2,255,933 | 828,636 | 95,202,277 | 0 | 0 | 94,410,858 |
| PREFERRED STOCK | | | | | | | | |
| 8. NAIC 1..... | 0 | | | | 0 | 0 | 0 | 0 |
| 9. NAIC 2..... | 0 | | | | 0 | 0 | 0 | 0 |
| 10. NAIC 3..... | 0 | | | | 0 | 0 | 0 | 0 |
| 11. NAIC 4..... | 0 | | | | 0 | 0 | 0 | 0 |
| 12. NAIC 5..... | 0 | | | | 0 | 0 | 0 | 0 |
| 13. NAIC 6..... | 0 | | | | 0 | 0 | 0 | 0 |
| 14. Total Preferred Stock..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 15. Total Bonds & Preferred Stock | 94,410,858 | 2,218,716 | 2,255,933 | 828,636 | 95,202,277 | 0 | 0 | 94,410,858 |

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$; NAIC 2 \$;
NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

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Schedule DA - Part 1

NONE

Schedule DA - Verification

NONE

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

Schedule E - Verification

NONE

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

STATEMENT AS OF MARCH 31, 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|--|---------|---------------|-----------------------|---------------------------|-------------|-----------|---|--|
| CUSIP Identification | Description | Foreign | Date Acquired | Name of Vendor | Number of Shares of Stock | Actual Cost | Par Value | Paid for Accrued Interest and Dividends | NAIC Designation or Market Indicator (a) |
| Bonds - U.S. Governments | | | | | | | | | |
| 3133EG-YZ-2 | Federal Farm Credit Bank Call 2.200% 1 | | 03/27/2017 | Stifel Nicolaus & Co. | | 944,370 | 1,000,000 | 9,656 | 1FE |
| 3136G3-JN-6 | FNMA Call 2.125% 04/25/30 | | 02/08/2017 | FTN Financial | | 490,781 | 500,000 | 3,069 | 1 |
| 0599999 - Bonds - U.S. Governments | | | | | | 1,435,151 | 1,500,000 | 12,725 | XXX |
| Bonds - U.S. States, Territories and Possessions | | | | | | | | | |
| 68609B-H6-7 | Oregon State Call 5.000% 08/01/25 | | 03/14/2017 | Tax Free Exchange | | 5,236 | 5,000 | 31 | 1 |
| 68609B-J4-0 | Oregon State Call 5.000% 08/01/25 | | 03/14/2017 | Tax Free Exchange | | 518,483 | 495,000 | 3,025 | 1 |
| 1799999 - Bonds - U.S. States, Territories and Possessions | | | | | | 523,719 | 500,000 | 3,056 | XXX |
| Bonds - U.S. Special Revenue | | | | | | | | | |
| 3136AU-U6-6 | FNMA 2016-104 LB 3.500% 08/25/45 | | 02/07/2017 | Stifel Nicolaus & Co. | | 725,254 | 698,304 | 611 | 1FE |
| 3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions | | | | | | 725,254 | 698,304 | 611 | XXX |
| Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | | | | | |
| 98385X-AM-8 | XT0 Energy Inc 6.750% 08/01/37 | | 02/14/2017 | Stifel Nicolaus & Co. | | 549,092 | 400,000 | 1,200 | 1FE |
| 3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | | 549,092 | 400,000 | 1,200 | XXX |
| 8399997 - Subtotals - Bonds - Part 3 | | | | | | 3,233,216 | 3,098,304 | 17,592 | XXX |
| 8399999 - Subtotals - Bonds | | | | | | 3,233,216 | 3,098,304 | 17,592 | XXX |
| 9999999 Totals | | | | | | 3,233,216 | XXX | 17,592 | XXX |

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

E04

STATEMENT AS OF MARCH 31, 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Change in Book/Adjusted Carrying Value | | | | | 16 | 17 | 18 | 19 | 20 | 21 | 22 |
|---|-----------------------------------|---------|---------------|-------------------|---------------------------|---------------|-----------|-------------|---|--|---|---|--------------------------------------|--|---|--|----------------------------------|-------------------------------|--|---------------------------|--|
| | | | | | | | | | | 11 | 12 | 13 | 14 | 15 | | | | | | | |
| CUSIP Identification | Description | Foreign | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consideration | Par Value | Actual Cost | Prior Year Book/Adjusted Carrying Value | Unrealized Valuation Increase/(Decrease) | Current Year's (Amortization)/Accretion | Current Year's Other Than Temporary Impairment Recognized | Total Change in B./A.C.V. (11+12-13) | Total Foreign Exchange Change in B./A.C.V. | Book/Adjusted Carrying Value at Disposal Date | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Bond Interest/Stock Dividends Received During Year | Contractual Maturity Date | NAIC Designation or Market Indicator (a) |
| Bonds - U.S. Governments | | | | | | | | | | | | | | | | | | | | | |
| 36290S-RZ-6 | GNMA 616204 3.500% | | 01/20/17 | Paydown | | 2,563 | 2,563 | 2,666 | 2,661 | | (98) | | (98) | | 2,563 | | | 0 | 16 | 01/20/2042 | 1FE |
| 38376V-SB-4 | GNR 2010-21 NB 4.500% | | 03/01/17 | Paydown | | 48,930 | 48,930 | 50,031 | 49,013 | | (83) | | (83) | | 48,930 | | | 0 | 345 | 01/20/2037 | 1 |
| 38376Y-FF-3 | GNR 2010-46 CH 4.000% | | 03/01/17 | Paydown | | 8,976 | 8,976 | 9,505 | 9,355 | | (379) | | (379) | | 8,976 | | | 0 | 60 | 03/20/2039 | 1 |
| 38378D-VT-9 | GNR 2012-36 MA 3.000% | | 03/01/17 | Paydown | | 11,732 | 11,732 | 12,487 | 12,292 | | (560) | | (560) | | 11,732 | | | 0 | 54 | 06/20/2039 | 1FE |
| 38378V-XZ-3 | GNR 2013-119 TV 3.000% | | 03/01/17 | Paydown | | 4,319 | 4,319 | 4,406 | 4,366 | | (47) | | (47) | | 4,319 | | | 0 | 22 | 08/20/2043 | 1FE |
| 0599999 - Bonds - U.S. Governments | | | | | | 76,520 | 76,520 | 79,094 | 77,688 | 0 | (1,167) | 0 | (1,167) | 0 | 76,520 | 0 | 0 | 0 | 497 | XXX | XXX |
| Bonds - U.S. States, Territories and Possessions | | | | | | | | | | | | | | | | | | | | | |
| 68608K-ZD-3 | Oregon State Call 5.000% 08/01/25 | | 03/01/17 | Tax Free Exchange | | 523,719 | 500,000 | 563,740 | 525,039 | | (1,320) | | (1,320) | | 523,719 | | | 0 | 15,556 | 08/01/2025 | 1FE |
| 1799999 - Bonds - U.S. States, Territories and Possessions | | | | | | 523,719 | 500,000 | 563,740 | 525,039 | 0 | (1,320) | 0 | (1,320) | 0 | 523,719 | 0 | 0 | 0 | 15,556 | XXX | XXX |
| Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions | | | | | | | | | | | | | | | | | | | | | |
| 3136AB-CS-0 | FNR 2012-147 HV 3.500% | | 03/01/17 | Paydown | | 9,814 | 9,814 | 10,476 | 10,428 | | (615) | | (615) | | 9,814 | | | 0 | 57 | 04/25/2033 | 1FE |
| 3136AD-TB-5 | FNR 2013-35 KT 4.000% | | 03/01/17 | Paydown | | 13,792 | 13,792 | 14,788 | 14,707 | | (915) | | (915) | | 13,792 | | | 0 | 83 | 04/25/2033 | 1FE |
| 3136AD-Y4-5 | FNR 2013-43 MB 3.500% | | 03/01/17 | Paydown | | 15,129 | 15,129 | 15,933 | 15,891 | | (762) | | (762) | | 15,129 | | | 0 | 57 | 05/25/2033 | 1FE |
| 3136AM-4B-2 | FNR 2015-18 NV 3.500% | | 03/01/17 | Paydown | | 10,435 | 10,435 | 11,076 | 11,029 | | (594) | | (594) | | 10,435 | | | 0 | 61 | 01/25/2030 | 1FE |
| 3136AU-U6-6 | FNMA 2016-104 LB 3.500% | | 03/01/17 | Paydown | | 3,163 | 3,163 | 3,285 | | | (122) | | (122) | | 3,163 | | | 0 | 9 | 08/25/2045 | 1FE |
| 3137A0-EU-5 | FHR 3687 B 4.000% | | 03/01/17 | Paydown | | 11,123 | 11,123 | 11,605 | 11,321 | | (198) | | (198) | | 11,123 | | | 0 | 77 | 07/15/2030 | 1 |
| 3137A6-CA-6 | FHR 3947 BC 2.500% | | 03/01/17 | Paydown | | 4,665 | 4,665 | 4,825 | 4,770 | | (105) | | (105) | | 4,665 | | | 0 | 20 | 10/15/2026 | 1 |
| 3137A6-YX-2 | FHR 3940 PB 2.000% | | 03/01/17 | Paydown | | 19,684 | 19,684 | 19,487 | 19,510 | | 174 | | 174 | | 19,684 | | | 0 | 57 | 02/15/2041 | 1 |
| 3137AN-JP-1 | FHR 4013 WY 2.157% | | 03/01/17 | Paydown | | 5,496 | 5,496 | 5,650 | 5,613 | | (117) | | (117) | | 5,496 | | | 0 | 19 | 11/15/2040 | 1FE |
| 3137AS-EH-3 | FHR 4076 KC 2.000% | | 03/01/17 | Paydown | | 29,927 | 29,927 | 29,478 | 29,527 | | 400 | | 400 | | 29,927 | | | 0 | 79 | 05/15/2041 | 1FE |
| 3137AS-FL-3 | FHR 4076 QD 2.500% | | 03/01/17 | Paydown | | 28,268 | 28,268 | 26,899 | 27,010 | | 1,258 | | 1,258 | | 28,268 | | | 0 | 94 | 11/15/2041 | 1FE |
| 3137AS-O8-0 | FHR 4808 PA 3.000% | | 03/01/17 | Paydown | | 3,412 | 3,412 | 3,519 | 3,506 | | (95) | | (95) | | 3,412 | | | 0 | 18 | 12/15/2040 | 1FE |
| 3137AY-WS-6 | FHR 4170 JA 2.000% | | 03/01/17 | Paydown | | 11,122 | 11,122 | 11,074 | 11,078 | | 44 | | 44 | | 11,122 | | | 0 | 38 | 11/15/2032 | 1FE |
| 31392E-SX-9 | FNR 2002-59 B 5.500% | | 03/01/17 | Paydown | | 93 | 93 | 94 | 92 | | 0 | | 0 | | 93 | | | 0 | 1 | 09/25/2017 | 1FE |
| 31395B-D7-5 | FNR 2006-22 GE 4.500% | | 03/01/17 | Paydown | | 6,084 | 6,084 | 6,247 | 6,125 | | (42) | | (42) | | 6,084 | | | 0 | 43 | 08/25/2023 | 1FE |
| 31395J-5E-2 | FHR 2881 AG 4.500% | | 03/01/17 | Paydown | | 1,328 | 1,328 | 1,325 | 1,325 | | 3 | | 3 | | 1,328 | | | 0 | 6 | 08/15/2034 | 1 |
| 31395W-4L-8 | FHR 3003 LD 5.000% | | 03/01/17 | Paydown | | 3,667 | 3,667 | 3,850 | 3,793 | | (126) | | (126) | | 3,667 | | | 0 | 30 | 12/15/2034 | 1FE |
| 31398P-DU-0 | FNR 2010-38 B 4.000% | | 03/01/17 | Paydown | | 16,240 | 16,240 | 16,933 | 16,439 | | (199) | | (199) | | 16,240 | | | 0 | 98 | 04/25/2025 | 1FE |
| 31398S-SG-9 | FNMA Pool 725424 5.500% | | 03/01/17 | Paydown | | 3,833 | 3,833 | 3,968 | 3,928 | | (96) | | (96) | | 3,833 | | | 0 | 21 | 12/25/2030 | 1 |
| 31402C-4H-2 | FNMA Pool 744328 5.000% | | 03/01/17 | Paydown | | 2,131 | 2,131 | 2,108 | 2,109 | | 21 | | 21 | | 2,131 | | | 0 | 19 | 04/01/2034 | 1FE |
| 31403B-4M-2 | FNMA Pool 745516 5.500% | | 03/01/17 | Paydown | | 290 | 290 | 278 | 279 | | 11 | | 11 | | 290 | | | 0 | 2 | 09/01/2033 | 1FE |
| 31403D-GZ-6 | FNMA Pool 745516 5.500% | | 03/01/17 | Paydown | | 793 | 793 | 792 | 792 | | 1 | | 1 | | 793 | | | 0 | 7 | 05/01/2036 | 1 |

E05

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

STATEMENT AS OF MARCH 31, 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

| 1 Description | 2 Code | 3 Date Acquired | 4 Rate of Interest | 5 Maturity Date | 6 Book/Adjusted Carrying Value | 7 Amount of Interest Due & Accrued | 8 Amount Received During Year |
|--------------------------------|-----------|-----------------------|--------------------------|-----------------------|--------------------------------------|--|-------------------------------------|
| NONE | | | | | | | |
| 8699999 Total Cash Equivalents | | | | | 0 | 0 | 0 |