



## PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

**ANNUAL STATEMENT**  
For the Year Ended December 31, 2017  
OF THE CONDITION AND AFFAIRS OF THE  
**GRANGE INDEMNITY INSURANCE COMPANY**

NAIC Group Code	00267 (Current Period)	00267 (Prior Period)	NAIC Company Code	10322	Employer's ID Number	31-1432675
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 (Street and Number)		Columbus, OH, US 43206-1014 (City or Town, State, Country and Zip Code)			
Main Administrative Office	671 South High Street (Street and Number)		Columbus, OH, US 43206-1014 (City or Town, State, Country and Zip Code)		614-445-2900 (Area Code) (Telephone Number)	
Mail Address	671 South High Street, P.O. Box 1218 (Street and Number or P.O. Box)		Columbus, OH, US 43216-1218 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	671 South High Street (Street and Number)		Columbus, OH, US 43206-1014 (City or Town, State, Country and Zip Code)		614-445-2900 (Area Code) (Telephone Number)	
Internet Web Site Address	www.grangeinsurance.com					
Statutory Statement Contact	David Sidney Ackermann (Name)		614-445-2900 (Area Code) (Telephone Number) (Extension)			
	ackermannd@grangeinsurance.com (E-Mail Address)		614-449-3757 (Fax Number)			

## OFFICERS

Name	Title	Name	Title
JOHN (NMN) AMMENDOLA	PRESIDENT & CEO	LAVAWN DEE COLEMAN	EVP & SECRETARY
TERESA JEAN DALENTA	EVP & CFO		

## OTHER OFFICERS

JOHN CHRISTOPHER MONTGOMERY, VP - INVESTMENTS, DIRECTORS OR TRUSTEES

## **DIRECTORS OR TRUSTEES**

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TERESA JEAN DALENTA      MICHAEL DESMOND FRAIZER      ROBERT ENLOW HOYT      MARY MARNETTE PERRY  
THOMAS SIMRALL STEWART      DAVID CHARLES WETMORE      CHRISTIANNA (NMN) WOOD

State of Ohio  
County of Franklin

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

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TERESA JEAN DALENTA  
EVP & CFO

Subscribed and sworn to before me  
this 22nd day of February, 2018

a. Is this an original filing? Yes [  ] No [  ]  
b. If no:  
1. State the amendment number \_\_\_\_\_  
2. Date filed \_\_\_\_\_  
3. Number of pages attached \_\_\_\_\_

Teresa J. Burchwell, Notary Public  
April 28, 2022



# ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Georgia				DURING THE YEAR 2017						NAIC Company Code 10322		
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees	
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)	3,600	444			.3,156				.5			.612	
5.2	Commercial multiple peril (liability portion)	1,124	139			.985				.2			.191	
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 A & H (group and individual)													
15.1	Collectively renewable A & H (b)													
15.2	Non-cancelable A & H (b)													
15.3	Guaranteed renewable A & H (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 A & H (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	1,253,446	1,394,885		294,163	.1,731,213	1,185,976	.973,592	.81,978	.3,114	124,066	148,019	.82,444	
19.3	Commercial auto no-fault (personal injury protection)													
19.4	Other commercial auto liability	2,804,121	2,812,862		.1,451,687	.3,112,582	1,687,130	6,496,586	.349,775	.360,239	1,328,596	310,086	.184,438	
21.1	Private passenger auto physical damage	.592,577	.670,683		.148,293	.266,392	.287,687	.7,817			(429)	.584	.70,552	
21.2	Commercial auto physical damage	.716,406	.691,713		.374,500	.338,790	.354,434	.54,396			(10)	1,665	.81,498	
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.	TOTAL (a)	5,371,274	5,570,725	0	2,272,786	5,448,977	3,515,228	7,532,392	431,759	362,920	1,454,910	610,958	353,289	
DETAILS OF WRITE-INS														
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 through 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 \$ 125,891

(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 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Illinois				DURING THE YEAR 2017						NAIC Company Code 10322			
		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	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	Unearned Premium Reserves											
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	527,622	255,322		272,300	98,072	132,518	34,446	.701	.5,183	4,482	.82,651	.11,883		
5.1	Commercial multiple peril (non-liability portion)	.8,187	.493		.7,694								1,392	.184	
5.2	Commercial multiple peril (liability portion)	1,181	.71		1,109								.198	.27	
6.	Mortgage guaranty														
8.	Ocean marine														
9.	Inland marine	.7,012	3,307		3,704		.77	.77		.19	.19		1,220	.158	
10.	Financial guaranty														
11.	Medical professional liability														
12.	Earthquake	408	221		.188									73	.9
13.	Group accident and health (b)														
14.	Credit A & H (group and individual)														
15.1	Collectively renewable A & H (b)														
15.2	Non-cancelable A & H (b)														
15.3	Guaranteed renewable A & H (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 A & H (b)														
15.8	Federal Employees Health Benefits Plan premium (b)														
16.	Workers' compensation														
17.1	Other liability-Occurrence	.6,662	2,803		3,859		1,735	1,735		.44	.44		1,247	.150	
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	625,246	656,367		163,354	.652,074	520,774	367,557	.29,815	.23,015	.57,862		.75,454	.14,082	
19.3	Commercial auto no-fault (personal injury protection)														
19.4	Other commercial auto liability	2,822,529	3,554,480		.1,441,159	.5,418,783	1,848,655	.11,733,662	.1,347,211	.735,041	.1,710,537		.281,176	.63,569	
21.1	Private passenger auto physical damage	.378,666	.402,303		.95,604	.245,663	.263,898	.15,804	.900	.895	.303		.45,564	.8,528	
21.2	Commercial auto physical damage	.915,384	1,133,092		.452,621	.381,176	.360,448	.47,955	.1,492	.676	2,361		.91,904	.20,616	
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	0
35.	TOTAL (a)	5,292,896	6,008,459	0	2,441,592	6,795,767	3,128,104	12,201,235	1,380,119	764,873	1,775,607		580,878	119,206	
DETAILS OF WRITE-INS															
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 through 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 \$ 91,848

(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 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Indiana				DURING THE YEAR 2017					NAIC Company Code 10322		
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3	4	5	6	7	8	9	10	
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	
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 A & H (group and individual)												
15.1	Collectively renewable A & H (b)												
15.2	Non-cancellable A & H (b)												
15.3	Guaranteed renewable A & H (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 A & H (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	3,275,213	3,430,381		.840,485	2,875,008	1,998,837	1,610,768	.96,376	.50,254	.331,065	.457,967	.65,968
19.3	Commercial auto no-fault (personal injury protection)												
19.4	Other commercial auto liability	1,032,964	1,215,447		.556,604	.1,655,324	.1,355,011	2,103,860	.69,570	.92,440	.579,507	.104,852	.20,805
21.1	Private passenger auto physical damage	2,199,488	2,324,263		.560,359	.1,198,764	1,140,833	.31,093	.1,454	.1,148	.1,635	.310,660	.44,301
21.2	Commercial auto physical damage	346,139	422,245		.177,208	.150,334	.176,817	.28,720	.1,541	.1,543	.908	.35,531	.6,972
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.	TOTAL (a)	6,853,804	7,392,336	0	2,134,656	5,879,430	4,671,499	3,774,441	168,941	145,385	913,116	909,011	138,045
DETAILS OF WRITE-INS													
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 through 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 \$ 327,551

(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 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Iowa				DURING THE YEAR 2017					NAIC Company Code 10322	
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3	4	5	6	7	8	9	10
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses
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 A & H (group and individual)											
15.1	Collectively renewable A & H (b)											
15.2	Non-cancellable A & H (b)											
15.3	Guaranteed renewable A & H (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 A & H (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	0	0	.0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS												
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
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0

(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 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Kansas				DURING THE YEAR 2017					NAIC Company Code 10322			
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 1 Direct Premiums Written	4 2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	5 Unearned Premium Reserves	6 Direct Losses Paid (deducting salvage)	7 Direct Losses Incurred	8 Direct Losses Unpaid	9 Direct Defense and Cost Containment Expense Paid	10 Direct Defense and Cost Containment Expense Incurred	11 Direct Defense and Cost Containment Expense Unpaid
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 A & H (group and individual)													
15.1	Collectively renewable A & H (b)													
15.2	Non-cancellable A & H (b)													
15.3	Guaranteed renewable A & H (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 A & H (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	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	0	0	0	0	0	0	0	0	0	0	0	0	0
<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	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

**NONE**

..... and number of persons insured under indemnity only products .....



# ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Kentucky				DURING THE YEAR 2017						NAIC Company Code 10322	
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3	4	5	6	7	8	9	10	11
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												(2,410)
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)	33,971	1,571			32,400			1	1		5,774	3,402
5.2	Commercial multiple peril (liability portion)	5,617	292			5,324			0	0		952	154
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 A & H (group and individual)												
15.1	Collectively renewable A & H (b)												
15.2	Non-cancelable A & H (b)												
15.3	Guaranteed renewable A & H (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 A & H (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)	176,399	193,680		45,895	51,759	(324)	(53,302)	2,935	.4,407	.6,047	21,873	17,737
19.2	Other private passenger auto liability	681,227	737,873		187,191	1,236,611	450,159	478,941	34,259	.9,321	.75,476	85,577	(22,597)
19.3	Commercial auto no-fault (personal injury protection)	96,663	98,536		47,006	77,827	.60,500	4,957	.4,283	.22,066	.45,609	9,913	9,719
19.4	Other commercial auto liability	1,478,256	1,547,201		742,947	1,761,458	106,876	2,883,965	121,609	.57,446	.740,425	149,861	19,442
21.1	Private passenger auto physical damage	316,731	338,137		103,946	157,758	154,579	(1,643)	2,481	.2,400	313	41,303	31,847
21.2	Commercial auto physical damage	580,160	596,756		268,839	153,773	136,255	.18,354	2,855	.2,937	1,447	.59,689	58,334
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.	TOTAL (a)	3,369,024	3,514,047	0	1,433,547	3,439,187	908,045	3,331,273	168,422	98,577	869,316	374,942	115,627
DETAILS OF WRITE-INS													
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 through 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 \$ 72,852

(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 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Minnesota				DURING THE YEAR 2017						NAIC Company Code 10322			
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 1 Direct Premiums Written	4 2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	5 Unearned Premium Reserves	6 Direct Losses Paid (deducting salvage)	7 Direct Losses Incurred	8 Direct Losses Unpaid	9 Direct Defense and Cost Containment Expense Paid	10 Direct Defense and Cost Containment Expense Incurred	11 Direct Defense and Cost Containment Expense Unpaid	12 Commissions and Brokerage Expenses
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 A & H (group and individual)														
15.1	Collectively renewable A & H (b)														
15.2	Non-cancellable A & H (b)														
15.3	Guaranteed renewable A & H (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 A & H (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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS															
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	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(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 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Missouri				DURING THE YEAR 2017					NAIC Company Code 10322	
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3	4	5	6	7	8	9	10
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses
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 A & H (group and individual)											
15.1	Collectively renewable A & H (b)											
15.2	Non-cancellable A & H (b)											
15.3	Guaranteed renewable A & H (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 A & H (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	0	0	.0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS												
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
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0

(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 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Ohio				DURING THE YEAR 2017					NAIC Company Code 10322	
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3	4	5	6	7	8	9	10
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses
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	19,388,055	8,977,370		10,779,517	3,129,066	4,564,413	1,435,948	23,892	91,389	67,686	3,347,112
5.1	Commercial multiple peril (non-liability portion)	8,816	743		8,073				11	11		1,498
5.2	Commercial multiple peril (liability portion)	6,360	433		5,927				7	7		1,076
6.	Mortgage guaranty											
8.	Ocean marine											
9.	Inland marine	364,676	170,340		200,492	24,573	34,930	10,367	211	1,166	958	65,160
10.	Financial guaranty											
11.	Medical professional liability											
12.	Earthquake	73,881	32,104		42,470				40	40		13,148
13.	Group accident and health (b)											1,155
14.	Credit A & H (group and individual)											
15.1	Collectively renewable A & H (b)											
15.2	Non-cancelable A & H (b)											
15.3	Guaranteed renewable A & H (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 A & H (b)											
15.8	Federal Employees Health Benefits Plan premium (b)											
16.	Workers' compensation											
17.1	Other liability-Occurrence	443,643	200,114		249,439		126,881	127,188		3,235	3,244	82,190
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	47,635,668	39,971,908		20,666,092	18,348,891	31,691,998	24,732,379	539,920	2,128,623	3,315,468	7,643,501
19.3	Commercial auto no-fault (personal injury protection)											
19.4	Other commercial auto liability	3,908,145	4,124,484		1,888,782	3,939,292	1,373,707	7,601,838	186,021	310,756	1,915,828	410,246
21.1	Private passenger auto physical damage	44,768,016	37,377,427		19,509,425	20,393,575	20,718,826	365,820	12,107	16,426	11,283	7,202,613
21.2	Commercial auto physical damage	1,423,447	1,504,860		676,899	935,626	866,841	40,600	7,015	7,275	3,474	148,732
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
35.	TOTAL (a)	118,020,706	92,359,784	0	54,027,116	46,771,023	59,377,596	34,314,140	769,224	2,558,928	5,317,941	18,915,277
DETAILS OF WRITE-INS												
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
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,631,353

(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 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Pennsylvania				DURING THE YEAR 2017					NAIC Company Code 10322				
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3	4	5	6	7	8	9	10	11		
		1	2	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	
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)	730	.66				.664						.124	31	
5.2	Commercial multiple peril (liability portion)	500	.45				.455						.85	21	
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 A & H (group and individual)														
15.1	Collectively renewable A & H (b)														
15.2	Non-cancelable A & H (b)														
15.3	Guaranteed renewable A & H (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 A & H (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)	90,254	.93,593			20,730	26,957	26,894	(14,853)	.406	.1,641	2,861	9,731	3,789	
19.2	Other private passenger auto liability	483,605	.485,058			118,561	308,273	321,218	312,324	.23,212	.22,934	29,036	52,101	20,305	
19.3	Commercial auto no-fault (personal injury protection)	74,020	.80,212			37,617	43,459	22,186	3,226	.2,179	.13,301	.37,079	.7,749	.3,108	
19.4	Other commercial auto liability	982,768	.1,168,403			474,607	.1,008,352	.525,154	2,614,148	.262,322	.216,208	.561,449	101,420	41,263	
21.1	Private passenger auto physical damage	275,610	.283,063			64,411	.100,835	108,564	.25,056		(21)	.189	.29,643	11,572	
21.2	Commercial auto physical damage	379,398	.450,307			175,118	.320,871	.303,582	.10,528		.(41)	.931	.39,389	15,930	
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.	TOTAL (a)	2,286,885	2,560,747	0	892,163	1,808,747	1,307,596	2,950,430	288,119	254,021	631,544	240,242	96,019		
DETAILS OF WRITE-INS															
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 through 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 \$ 86,050

(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 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Tennessee				DURING THE YEAR 2017					NAIC Company Code 10322			
		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	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	719	.97										.122	
2.1	Allied lines	943	.127										.160	
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	1,800,673	1,188,883										.47,061	
5.1	Commercial multiple peril (non-liability portion)	8,754	988										.229	
5.2	Commercial multiple peril (liability portion)	40,651	5,458										1,488	
6.	Mortgage guaranty												6,904	
8.	Ocean marine													
9.	Inland marine	22,340	.14,598										.584	
10.	Financial guaranty													
11.	Medical professional liability													
12.	Earthquake	9,171	6,603											
13.	Group accident and health (b)													
14.	Credit A & H (group and individual)													
15.1	Collectively renewable A & H (b)													
15.2	Non-cancelable A & H (b)													
15.3	Guaranteed renewable A & H (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 A & H (b)													
15.8	Federal Employees Health Benefits Plan premium (b)													
16.	Workers' compensation													
17.1	Other liability-Occurrence	34,151	.18,444										.893	
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	1,216,293	1,254,762											
19.3	Commercial auto no-fault (personal injury protection)													
19.4	Other commercial auto liability	1,941,893	.2,135,085											
21.1	Private passenger auto physical damage	.764,955	.785,515											
21.2	Commercial auto physical damage	616,463	.671,361											
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	
35.	TOTAL (a)	6,457,007	6,081,919	0	2,882,307	2,680,456	2,109,157	5,230,494	124,328	181,002	1,128,425	811,518	168,754	
DETAILS OF WRITE-INS														
3401.														
3402.														
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	.0									.0	
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0									0	

(a) Finance and service charges not included in Lines 1 to 35 \$ 189,962

(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 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

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

NAIC Group Code 0026

## **BUSINESS IN THE STATE OF Wisconsin**

## **DURING THE YEAR 2017**

NAIC Company Code 10322

(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 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Consolidated				DURING THE YEAR 2017						NAIC Company Code 10322		
		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	5 Direct Losses (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	719	.97	0	622	0	4	.4	0	1	1	122	(2,392)	
2.1	Allied lines	943	.127	0	816	0	5	.5	0	1	1	.160	25	
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	21,716,350	10,421,575	0	12,129,317	3,731,261	5,283,505	1,556,857	33,418	114,788	.83,219	3,708,818	362,081	
5.1	Commercial multiple peril (non-liability portion)	64,058	4,306	0	59,752	0	5	.5	16	.19	.3	10,888	.4,221	
5.2	Commercial multiple peril (liability portion)	55,432	6,438	0	48,994	0	1,447	1,447	.8	1,312	1,304	9,406	1,437	
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	394,027	188,245	0	218,276	27,885	38,612	10,780	211	1,263	1,069	.69,987	6,444	
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	83,460	.38,927	0	47,951	0	0	0	40	40	0	0	14,761	
13.	Group accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0	
14.	Credit A & H (group and individual)	0	0	0	0	0	0	0	0	0	0	0	0	
15.1	Collectively renewable A & H (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.2	Non-cancelable A & H (b)	0	0	0	0	0	0	0	0	0	0	0	0	
15.3	Guaranteed renewable A & H (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 A & H (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	484,455	.221,361	0	273,831	0	139,165	141,492	0	3,571	3,635	.89,615	7,979	
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)	266,653	.287,272	0	66,625	78,716	26,570	(68,154)	3,341	.6,047	.8,907	.31,604	21,526	
19.2	Other private passenger auto liability	55,170,698	.47,931,233	0	22,597,498	25,758,304	36,742,715	29,010,611	835,421	2,256,089	4,040,426	8,615,768	936,785	
19.3	Commercial auto no-fault (personal injury protection)	170,683	.178,749	0	84,624	121,286	.82,685	.8,183	.6,462	.35,367	.82,688	.17,661	.12,827	
19.4	Other commercial auto liability	14,970,676	.16,557,962	0	7,461,839	.17,760,734	.7,086,098	.37,983,406	2,420,910	.1,913,203	.7,842,311	.1,556,679	441,373	
21.1	Private passenger auto physical damage	49,296,044	.42,181,391	0	20,695,450	22,659,561	22,991,509	.477,959	.16,942	.20,384	.14,948	7,796,863	855,175	
21.2	Commercial auto physical damage	4,977,397	.5,470,333	0	2,398,572	2,685,840	2,624,907	.211,811	.14,144	.13,619	.12,348	520,493	.187,339	
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.	TOTAL (a)	147,651,596	123,488,017	0	66,084,167	72,823,587	75,017,226	69,334,404	3,330,913	4,365,706	12,090,860	22,442,827	2,836,224	
DETAILS OF WRITE-INS														
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 through 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 \$ 2,525,507

(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 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

**SCHEDULE F - PART 1**

**Assumed Reinsurance as of December 31, Current Year (\$000 Omitted)**

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	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	8 Cols. 6 +7							
Affiliates - U.S. Intercompany Pooling														
31-4192970	14060	GRANGE MUT CAS CO	OH	(18,689)			0							
0199999 - Total Affiliates - U.S. Intercompany Pooling				(18,689)	0	0	0	0	0	0	0	0	0	0
0899999 - Total Affiliates - Total Affiliates				(18,689)	0	0	0	0	0	0	0	0	0	0
Pools and Associations - Mandatory Pools														
AA-9991141	00000	OHIO COMMERCIAL AUTO INS PROCEDURE	OH	232	329	329				130				
1099999 - Pools and Associations - Mandatory Pools - Pools, Associations or Other Similar Facilities				232	0	329	329	0	0	130	0	0	0	0
1299999 - Pools and Associations - Total Pools and Associations				232	0	329	329	0	0	130	0	0	0	0
9999999 Totals														
				(18,456)	0	329	329	0	0	130	0	0	0	0

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

## **SCHEDULE F - PART 2**

**Premium Portfolio Reinsurance Effectuated or (Canceled) during Current Year**

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

**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	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 Cols. 7 through 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			
<b>Authorized - Affiliates - U.S. Intercompany Pooling</b>																			
31-4192970	14060	GRANGE MUT CAS CO	OH		146,389			37,295	8,568	32,426	7,449	66,197		151,936			151,936		
0199999	<b>- Total Authorized - Affiliates - U.S. Intercompany Pooling</b>					146,389	0	0	37,295	8,568	32,426	7,449	66,197	0	151,936	0	0	151,936	0
0899999	<b>- Total Authorized - Affiliates - Total Authorized - Affiliates</b>					146,389	0	0	37,295	8,568	32,426	7,449	66,197	0	151,936	0	0	151,936	0
<b>Authorized - Other U.S. Unaffiliated Insurers</b>																			
06-1430254	10348	ARCH REINS CO		DE											0			0	
47-0574325	32603	BERKLEY INS CO		DE		0									0			0	
42-0234980	21415	EMPLOYERS MUT CAS CO		IA		.10									0			0	
35-2293075	11551	ENDURANCE ASSUR CORP		DE		.91									0			0	
22-2005057	26921	EVEREST REINS CO		DE		.83									0			0	
13-2673100	22039	GENERAL REINS CORP		DE		.28									0			0	
06-0384680	11452	HARTFORD STEAM BOIL INSP& INS CO		CT		.26									1		1		
13-4924125	10227	MUNICH REINS AMER INC		DE		.270									.16		.16		
13-3138390	42307	NAVIGATORS INS CO		NY		.12									0		0		
23-1641984	10219	QBE REINS CORP		PA		.4									0		0		
52-1952955	10357	RENAISSANCE REINS US INC		MD		.114									0		0		
43-0727872	15105	SAFETY NATL CAS CORP		MO		.21									0		0		
13-1675535	25364	SWISS REINS AMER CORP		NY		.250									0		0		
13-5616275	19453	TRANSATLANTIC REINS CO		NY		.27									0		0		
13-1290712	20583	XI REINS AMER INC		NY											0		0		
0999999	<b>- Total Authorized - Other U.S. Unaffiliated Insurers</b>					935	0	0	0	0	0	0	0	0	17	0	17	0	17
<b>Authorized - Pools - Mandatory Pools</b>																			
AA-9991500	00000	ILLINOIS MINE SUBSIDENCE FUND		IL											0			0	
AA-9991501	00000	INDIANA MINE SUBSIDENCE FUND		IN											0		0		
AA-9991502	00000	KENTUCKY MINE SUBSIDENCE FUND		KY											0		0		
<b>Authorized - Other Non-U.S. Insurers</b>																			
AA-1126033	00000	LLOYD'S SYNDICATE NUMBER 33		GBR		.37									0			0	
AA-1126435	00000	LLOYD'S SYNDICATE NUMBER 435		GBR		.18									0			0	
AA-1126510	00000	LLOYD'S SYNDICATE NUMBER 510		GBR		.4									0			0	
AA-1126566	00000	LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)		GBR		.1									0			0	
AA-1126623	00000	LLOYD'S SYNDICATE NUMBER 623		GBR		.3									0			0	
AA-1126780	00000	LLOYD'S SYNDICATE NUMBER 780		GBR		.4									0			0	
AA-1127084	00000	LLOYD'S SYNDICATE NUMBER 1084		GBR		.23									0			0	
AA-1127414	00000	Lloyd's Syndicate Number 1414		GBR											0			0	
AA-1120157	00000	LLOYD'S SYNDICATE NUMBER 1729		GBR		.2									0			0	
AA-1120171	00000	Lloyd's Syndicate Number 1856		GBR		.2									0			0	
AA-1120084	00000	Lloyd's Syndicate Number 1955		GBR		.4									0			0	
AA-1128001	00000	LLOYD'S SYNDICATE NUMBER 2001		GBR		.36									0			0	
AA-1128003	00000	LLOYD'S SYNDICATE NUMBER 2003		GBR		.33									0			0	
AA-1120071	00000	Lloyd's Syndicate Number 2007		GBR		.3									0			0	
AA-1128010	00000	LLOYD'S SYNDICATE NUMBER 2010		GBR		.6									0			0	
AA-1120158	00000	LLOYD'S SYNDICATE NUMBER 2014		GBR		.3									0			0	
AA-1128623	00000	Lloyd's Syndicate Number 2623		GBR		.14									0			0	
AA-1128791	00000	LLOYD'S SYNDICATE NUMBER 2791		GBR		.17									0			0	
AA-1128987	00000	Lloyd's Syndicate Number 2987		GBR											0			0	
AA-1126006	00000	Lloyd's Syndicate Number 4472		GBR		.2									0			0	
AA-1120181	00000	Lloyd's Syndicate Number 5886		GBR		.1									0			0	
AA-3194168	00000	Aspen Bermuda Ltd		BMU		.62									0			0	
AA-1340125	00000	HANNOVER RUECK SE		DEU		.29									0			0	
AA-1840000	00000	MAPFRE RE COMPANIA DE REASEGUROS SA		ESP		.8									0			0	
AA-3190829	00000	Markel Bermuda Ltd		BMU		.1									0			0	
1299999	<b>- Total Authorized - Other Non-U.S. Insurers</b>					316	0	0	0	0	0	0	0	0	0	0	0	0	0
1399999	<b>- Total Authorized - Total Authorized</b>					147,640	0	0	37,295	8,568	32,426	7,449	66,215	0	151,953	0	0	0	151,953
<b>Unauthorized - Other non-U.S. Insurers</b>																			
AA-1460019	00000	MS Am in AG		CHE		.30									0			0	
AA-3194126	00000	Arch Reins Ltd		BMU		.44									0			0	
AA-3190770	00000	Chubb Tempest Reins Ltd		BMU		.30									0			0	

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

**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										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 Cols. 7 through 14 Totals	16 Ceded Balances Payable		
AA-3194130.....00000	.....	Endurance Specialty Ins Ltd.....	.....	BMU.....	3	.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....	0
AA-3191289.....00000	.....	Fidelis Ins Bermuda Ltd.....	.....	BMU.....	0	.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....	0
AA-5340310.....00000	.....	GEN INS CORP OF INDIA.....	.....	IND.....	2	.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....	0
AA-3191190.....00000	.....	Hamilton Re Ltd.....	.....	BMU.....	8	.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....	0
AA-3190875.....00000	.....	Hiscox Ins Co (Bermuda) Ltd.....	.....	BMU.....	.66	.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....	0
AA-3191298.....00000	.....	Qatar Reins Co Ltd.....	.....	BMU.....	.9	.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....	0
AA-3190757.....00000	.....	XL Re Ltd.....	.....	BMU.....	.30	.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....	0
AA-1440076.....00000	.....	SIRIUS INTL INS CORP.....	.....	SWE.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....	0
AA-5324100.....00000	.....	TAIPING REINS CO LTD.....	.....	HKG.....	.5	.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....	0
AA-1460023.....00000	.....	Tokio Millennium Re AG.....	.....	CHE.....	.16	.....	.....	.....	.....	.....	.....	.....	.....	.....	0	.....	0
2599999 - Total Unauthorized - Other Non-U.S. Insurers					244	0	0	0	0	0	0	0	0	0	0	0	0
2699999 - Total Unauthorized - Total Unauthorized					244	0	0	0	0	0	0	0	0	0	0	0	0
4099999 - Total Authorized, Unauthorized and Certified					147,884	0	0	37,295	8,568	32,426	7,449	66,215	0	151,953	0	0	151,953
9999999 Totals					147,884	0	0	37,295	8,568	32,426	7,449	66,215	0	151,953	0	0	151,953

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. GRANGE MUT CAS CO.....	.....	146,389,008
2. MUNICH REINS AMER INC.....	.....	269,901
3. SWISS REINS AMER CORP.....	.....	250,044
4. RENAISSANCE REINS US INC.....	.....	113,864
5. ENDURANCE ASSUR CORP.....	.....	91,328

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. GRANGE MUT CAS CO.....	151,935,849	146,389,008	Yes [ X ] No [ ]
2. HARTFORD STEAM BOIL INSPEC & INS CO.....	15,990	26,114	Yes [ ] No [ X ]
3. GENERAL REINS CORP.....	1,229	27,934	Yes [ ] No [ X ]
4. .....	.....	.....	Yes [ ] No [ ]
5. .....	.....	.....	Yes [ ] No [ ]

Schedule F - Part 4

**NONE**

Schedule F - Part 5

**NONE**

Schedule F - Part 6 - Section 1

**NONE**

Schedule F - Part 6 - Section 2

**NONE**

Schedule F - Part 7

**NONE**

Schedule F - Part 8

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

**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) .....	55,962,900		55,962,900
2. Premiums and considerations (Line 15) .....	0		0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	0		0
4. Funds held by or deposited with reinsured companies (Line 16.2).....	0		0
5. Other assets .....	2,490,025		2,490,025
6. Net amount recoverable from reinsurers .....	151,822,630		151,822,630
7. Protected cell assets (Line 27) .....	0		0
8. Totals (Line 28) .....	58,452,926	151,822,630	210,275,556
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	0	85,738,463	85,738,463
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	130,585		130,585
11. Unearned premiums (Line 9) .....	0	66,084,167	66,084,167
12. Advance premiums (Line 10) .....	0		0
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		0
17. Provision for reinsurance (Line 16) .....	0		0
18. Other liabilities .....	0		0
19. Total liabilities excluding protected cell business (Line 26) .....	130,585	151,822,630	151,953,215
20. Protected cell liabilities (Line 27) .....	0		0
21. Surplus as regards policyholders (Line 37) .....	58,322,341	XXX	58,322,341
22. Totals (Line 38) .....	58,452,926	151,822,630	210,275,556

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? Yes [ X ] No [ ]

If yes, give full explanation:

The Company participates in a 100% pooling agreement with Grange Mutual Casualty Company (Parent) .....

Schedule H - Part 1

**NONE**

Schedule H - Part 2

**NONE**

Schedule H - Part 3

**NONE**

Schedule H - Part 4

**NONE**

Schedule H - Part 5 - Health Claims

**NONE**

Schedule P - Part 1A - Home/Farm

**NONE**

Schedule P - Part 1B - Private Passenger

**NONE**

Schedule P - Part 1C - Comm Auto/Truck

**NONE**

Schedule P - Part 1D - Workers' Comp

**NONE**

Schedule P - Part 1E - Comm Multi Peril

**NONE**

Schedule P - Part 1F - Med Pro Liab Occ

**NONE**

Schedule P - Part 1F - Med Pro Liab Clm

**NONE**

Schedule P - Part 1G - Special Liability

**NONE**

Schedule P - Part 1H - Other Liab Occur

**NONE**

Schedule P - Part 1H - Other Liab Claims

**NONE**

Schedule P - Part 1I - Special Property

**NONE**

Schedule P - Part 1J - Auto Physical

**NONE**

Schedule P - Part 1K - Fidelity/Surety

**NONE**

Schedule P - Part 1L - Other

**NONE**

Schedule P - Part 1M - International

**NONE**

Schedule P - Part 1N - Reinsurance

**NONE**

Schedule P - Part 1O - Reinsurance

**NONE**

Schedule P - Part 1P - Reinsurance

**NONE**

Schedule P - Part 1R - Prod Liab Occur

**NONE**

Schedule P - Part 1R - Prod Liab Claims

**NONE**

Schedule P - Part 1S-Fin./Mtg. Guaranty

**NONE**

Schedule P - Part 1T - Warranty

**NONE**

Schedule P - Part 2A

**NONE**

Schedule P - Part 2B

**NONE**

Schedule P - Part 2C

**NONE**

Schedule P - Part 2D

**NONE**

Schedule P - Part 2E

**NONE**

Schedule P - Part 2F - Section 1

**NONE**

Schedule P - Part 2F - Med Pro Liab Clm

**NONE**

Schedule P - Part 2G

**NONE**

Schedule P - Part 2H - Other Liab Occur

**NONE**

Schedule P - Part 2H - Other Liab Claim

**NONE**

Schedule P - Part 2I

**NONE**

Schedule P - Part 2J

**NONE**

Schedule P - Part 2K

**NONE**

Schedule P - Part 2L

**NONE**

Schedule P - Part 2M

**NONE**

Schedule P - Part 2N

**NONE**

Schedule P - Part 2O

**NONE**

Schedule P - Part 2P

**NONE**

Schedule P - Part 2R - Prod Liab Occur

**NONE**

Schedule P - Part 2R - Prod Liab Claims

**NONE**

Schedule P - Part 2S

**NONE**

Schedule P - Part 2T

**NONE**

Schedule P - Part 3A

**NONE**

Schedule P - Part 3B

**NONE**

Schedule P - Part 3C

**NONE**

Schedule P - Part 3D

**NONE**

Schedule P - Part 3E

**NONE**

Schedule P - Part 3F - Med Pro Liab Occ

**NONE**

Schedule P - Part 3F - Med Pro Liab Clm

**NONE**

Schedule P - Part 3G

**NONE**

Schedule P - Part 3H - Other Liab Occur

**NONE**

Schedule P - Part 3H - Other Liab Claims

**NONE**

Schedule P - Part 3I

**NONE**

Schedule P - Part 3J

**NONE**

Schedule P - Part 3K

**NONE**

Schedule P - Part 3L

**NONE**

Schedule P - Part 3M

**NONE**

Schedule P - Part 3N

**NONE**

Schedule P - Part 3O

**NONE**

Schedule P - Part 3P

**NONE**

Schedule P - Part 3R - Prod Liab Occur

**NONE**

Schedule P - Part 3R - Prod Liab Claims

**NONE**

Schedule P - Part 3S

**NONE**

Schedule P - Part 3T

**NONE**

Schedule P - Part 4A

**NONE**

Schedule P - Part 4B

**NONE**

Schedule P - Part 4C

**NONE**

Schedule P - Part 4D

**NONE**

Schedule P - Part 4E

**NONE**

Schedule P - Part 4F - Med Pro Liab Occ

**NONE**

Schedule P - Part 4F - Med Pro Liab Clm

**NONE**

Schedule P - Part 4G

**NONE**

Schedule P - Part 4H - Other Liab Occur

**NONE**

Schedule P - Part 4H - Other Liab Claims

**NONE**

Schedule P - Part 4I

**NONE**

Schedule P - Part 4J

**NONE**

Schedule P - Part 4K

**NONE**

Schedule P - Part 4L

**NONE**

Schedule P - Part 4M

**NONE**

Schedule P - Part 4N

**NONE**

Schedule P - Part 4O

**NONE**

Schedule P - Part 4P

**NONE**

Schedule P - Part 4R - Prod Liab Occur

**NONE**

Schedule P - Part 4R - Prod Liab Claims

**NONE**

Schedule P - Part 4S

**NONE**

Schedule P - Part 4T - Warranty

**NONE**

Schedule P - Part 5A- SN1

**NONE**

Schedule P - Part 5A- SN2

**NONE**

Schedule P - Part 5A- SN3

**NONE**

Schedule P - Part 5B- SN1

**NONE**

Schedule P - Part 5B- SN2

**NONE**

Schedule P - Part 5B- SN3

**NONE**

Schedule P - Part 5C- SN1

**NONE**

Schedule P - Part 5C- SN2

**NONE**

Schedule P - Part 5C- SN3

**NONE**

Schedule P - Part 5D- SN1

**NONE**

Schedule P - Part 5D- SN2

**NONE**

Schedule P - Part 5D- SN3

**NONE**

Schedule P - Part 5E- SN1

**NONE**

Schedule P - Part 5E- SN2

**NONE**

Schedule P - Part 5E- SN3

**NONE**

Schedule P - Part 5F- SN1A

**NONE**

Schedule P - Part 5F- SN2A

**NONE**

Schedule P - Part 5F- SN3A

**NONE**

Schedule P - Part 5F- SN1B

**NONE**

Schedule P - Part 5F- SN2B

**NONE**

Schedule P - Part 5F- SN3B

**NONE**

Schedule P - Part 5H- SN1A

**NONE**

Schedule P - Part 5H- SN2A

**NONE**

Schedule P - Part 5H- SN3A

**NONE**

Schedule P - Part 5H- SN1B

**NONE**

Schedule P - Part 5H- SN2B

**NONE**

Schedule P - Part 5H- SN3B

**NONE**

Schedule P - Part 5R- SN1A

**NONE**

Schedule P - Part 5R- SN2A

**NONE**

Schedule P - Part 5R- SN3A

**NONE**

Schedule P - Part 5R- SN1B

**NONE**

Schedule P - Part 5R- SN2B

**NONE**

Schedule P - Part 5R- SN3B

**NONE**

Schedule P - Part 5T- SN1

**NONE**

Schedule P - Part 5T- SN2

**NONE**

Schedule P - Part 5T- SN3

**NONE**

Schedule P - Part 6C - SN1

**NONE**

Schedule P - Part 6C - SN2

**NONE**

Schedule P - Part 6D - SN1

**NONE**

Schedule P - Part 6D - SN2

**NONE**

Schedule P - Part 6E - SN1

**NONE**

Schedule P - Part 6E - SN2

**NONE**

Schedule P - Part 6H - SN1A

**NONE**

Schedule P - Part 6H - SN2A

**NONE**

Schedule P - Part 6H - SN1B

**NONE**

Schedule P - Part 6H - SN2B

**NONE**

Schedule P - Part 6M - SN1

**NONE**

Schedule P - Part 6M - SN2

**NONE**

Schedule P - Part 6N - SN1

**NONE**

Schedule P - Part 6N - SN2

**NONE**

Schedule P - Part 6O - SN1

**NONE**

Schedule P - Part 6O - SN2

**NONE**

Schedule P - Part 6R - SN1A

**NONE**

Schedule P - Part 6R - SN2A

**NONE**

Schedule P - Part 6R - SN1B

**NONE**

Schedule P - Part 6R - SN2B

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

**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	(6,060)		0.0
2. Private Passenger Auto Liability/Medical .....	0		0.0	(3,573)		0.0
3. Commercial Auto/Truck Liability/Medical .....	0		0.0	(1,416)		0.0
4. Workers' Compensation .....	0		0.0	(701)		0.0
5. Commercial Multiple Peril .....	0		0.0	(2,248)		0.0
6. Medical Professional Liability-Occurrence .....	0		0.0	0		0.0
7. Medical Professional Liability -Claims-Made .....	0		0.0	0		0.0
8. Special Liability .....	0		0.0	0		0.0
9. Other Liability-Occurrence .....	0		0.0	(358)		0.0
10. Other Liability-Claims-Made .....	0		0.0	(3)		0.0
11. Special Property .....	0		0.0	(799)		0.0
12. Auto Physical Damage .....	0		0.0	(3,531)		0.0
13. Fidelity/Surety .....	0		0.0	0		0.0
14. Other .....	0		0.0	0		0.0
15. International .....	0		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	(1)		0.0
20. Products Liability-Claims-Made .....	0		0.0	0		0.0
21. Financial Guaranty/Mortgage Guaranty .....	0		0.0	0		0.0
22. Warranty .....	0		0.0	0		0.0
23. Totals .....	0	0	0.0	(18,689)	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 2008	2	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior .....	0	0	0	0	0	0	0	0	0	0
2. 2008 .....	0	0	0	0	0	0	0	0	0	0
3. 2009 .....	XXX	0	0	0	0	0	0	0	0	0
4. 2010 .....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011 .....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012 .....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013 .....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014 .....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017 .....	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 2008	2	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior .....	0	0	0	0	0	0	0	0	0	0
2. 2008 .....	0	0	0	0	0	0	0	0	0	0
3. 2009 .....	XXX	0	0	0	0	0	0	0	0	0
4. 2010 .....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011 .....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012 .....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013 .....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014 .....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

**SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS  
(continued)**

**SECTION 4**

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**SECTION 5**

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

**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	(6,060)		0.0
2. Private Passenger Auto Liability/Medical .....	0		0.0	(3,573)		0.0
3. Commercial Auto/Truck Liability/Medical .....	0		0.0	(1,416)		0.0
4. Workers' Compensation .....	0		0.0	(701)		0.0
5. Commercial Multiple Peril .....	0		0.0	(2,248)		0.0
6. Medical Professional Liability-Occurrence .....	0		0.0	0		0.0
7. Medical Professional Liability -Claims- Made .....	0		0.0	0		0.0
8. Special Liability .....	0		0.0	0		0.0
9. Other Liability-Occurrence .....	0		0.0	(358)		0.0
10. Other Liability-Claims-made .....	0		0.0	(3)		0.0
11. Special Property .....	0		0.0	(799)		0.0
12. Auto Physical Damage .....	0		0.0	(3,531)		0.0
13. Fidelity/Surety .....	0		0.0	0		0.0
14. Other .....	0		0.0	0		0.0
15. International .....	0		0.0	0		0.0
16. Reinsurance-Nonproportional Assumed Property .....	0		0.0	0		0.0
17. Reinsurance-Nonproportional Assumed Liability .....	0		0.0	0		0.0
18. Reinsurance-Nonproportional Assumed Financial Lines .....	0		0.0	0		0.0
19. Products Liability-Occurrence .....	0		0.0	(1)		0.0
20. Products Liability-Claims-Made .....	0		0.0	0		0.0
21. Financial Guaranty/Mortgage Guaranty .....	0		0.0	0		0.0
22. Warranty .....	0		0.0	0		0.0
23. Totals .....	0	0	0.0	(18,689)	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 2008	2	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior .....	0	0	0	0	0	0	0	0	0	0
2. 2008 .....	0	0	0	0	0	0	0	0	0	0
3. 2009 .....	XXX	0	0	0	0	0	0	0	0	0
4. 2010 .....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011 .....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012 .....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013 .....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014 .....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017 .....	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 2008	2	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior .....	0	0	0	0	0	0	0	0	0	0
2. 2008 .....	0	0	0	0	0	0	0	0	0	0
3. 2009 .....	XXX	0	0	0	0	0	0	0	0	0
4. 2010 .....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011 .....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012 .....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013 .....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014 .....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017 .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

**SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS**

**(continued)**

**SECTION 4**

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**SECTION 5**

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**SECTION 6**

Years in Which Policies Were Issued	INCURRED ADJUSTABLE COMMISSIONS REPORTED AT YEAR END (\$000 OMITTED)									
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**SECTION 7**

Years in Which Policies Were Issued	RESERVES FOR COMMISSION ADJUSTMENTS AT YEAR END (\$000 OMITTED)									
	1 2008	2 2009	3 2010	4 2011	5 2012	6 2013	7 2014	8 2015	9 2016	10 2017
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2008	0	0	0	0	0	0	0	0	0	0
3. 2009	XXX	0	0	0	0	0	0	0	0	0
4. 2010	XXX	XXX	0	0	0	0	0	0	0	0
5. 2011	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2012	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2013	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2014	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

# ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

## 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)? \$ .....

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

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

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 [ ]

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 .....		
1.602 2008.....		
1.603 2009.....		
1.604 2010.....		
1.605 2011.....		
1.606 2012.....		
1.607 2013.....		
1.608 2014 .....		
1.609 2015.....		
1.610 2016 .....		
1.611 2017.....		
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 \$ .....

5.2 Surety \$ .....

6. Claim count information is reported per claim or per claimant (indicate which). .... 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 [ X ] No [ ]

7.2 An extended statement may be attached.

As of 1/1/2017, the intercompany pooling agreement was amended. 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 Insurance Company remains the lead company .....

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**

**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 .....					0
2. Alaska .....	AK .....					0
3. Arizona .....	AZ .....					0
4. Arkansas .....	AR .....					0
5. California .....	CA .....					0
6. Colorado .....	CO .....					0
7. Connecticut .....	CT .....					0
8. Delaware .....	DE .....					0
9. District of Columbia .....	DC .....					0
10. Florida .....	FL .....					0
11. Georgia .....	GA .....					0
12. Hawaii .....	HI .....					0
13. Idaho .....	ID .....					0
14. Illinois .....	IL .....					0
15. Indiana .....	JN .....					0
16. Iowa .....	JA .....					0
17. Kansas .....	KS .....					0
18. Kentucky .....	KY .....					0
19. Louisiana .....	LA .....					0
20. Maine .....	ME .....					0
21. Maryland .....	MD .....					0
22. Massachusetts .....	MA .....					0
23. Michigan .....	MI .....					0
24. Minnesota .....	MN .....					0
25. Mississippi .....	MS .....					0
26. Missouri .....	MO .....					0
27. Montana .....	MT .....					0
28. Nebraska .....	NE .....					0
29. Nevada .....	NV .....					0
30. New Hampshire .....	NH .....					0
31. New Jersey .....	NJ .....					0
32. New Mexico .....	NM .....					0
33. New York .....	NY .....					0
34. North Carolina .....	NC .....					0
35. North Dakota .....	ND .....					0
36. Ohio .....	OH .....					0
37. Oklahoma .....	OK .....					0
38. Oregon .....	OR .....					0
39. Pennsylvania .....	PA .....					0
40. Rhode Island .....	RI .....					0
41. South Carolina .....	SC .....					0
42. South Dakota .....	SD .....					0
43. Tennessee .....	TN .....					0
44. Texas .....	TX .....					0
45. Utah .....	UT .....					0
46. Vermont .....	VT .....					0
47. Virginia .....	VA .....					0
48. Washington .....	WA .....					0
49. West Virginia .....	WV .....					0
50. Wisconsin .....	WI .....					0
51. Wyoming .....	WY .....					0
52. American Samoa .....	AS .....					0
53. Guam .....	GU .....					0
54. Puerto Rico .....	PR .....					0
55. US Virgin Islands .....	VI .....					0
56. Northern Mariana Islands .....	MP .....					0
57. Canada .....	CAN .....					0
58. Aggregate Other Alien .....	OT .....					0
59. Totals .....		0	0	0	0	0

**NONE**

## ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

**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 Domiciliary Location	10 Relationship 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 Ownership Provide Percentage	14	15 Is an SCA Filing Required? (Y/N)	16
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
		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	0.0	GRANGE MUTUAL CASUALTY COMPANY	N	0

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

## SCHEDULE Y

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

# ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY

## 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.

	<b>MARCH FILING</b>	<b>RESPONSES</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 Risks Interrogatories be filed by April 1?	.....YES.....
	<b>MAY FILING</b>	
8.	Will this company be included in a combined annual statement that 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 Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	.....YES.....
	<b>AUGUST FILING</b>	
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?	.....YES.....
<p>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 <b>NO</b> 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 <b>SEE EXPLANATION</b> and provide an explanation following the interrogatory questions.</p>		
	<b>MARCH FILING</b>	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	.....NO.....
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	.....NO.....
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	.....NO.....
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	.....NO.....
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	.....NO.....
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	.....NO.....
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	.....YES.....
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	.....YES.....
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	.....YES.....
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
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?	.....NO.....
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?	.....NO.....
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?	.....NO.....

**ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY**  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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? .....NO.....

**APRIL FILING**

29. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? .....NO.....

30. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....NO.....

31. Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....NO.....

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? .....NO.....

33. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1? .....NO.....

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

**AUGUST FILING**

35. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? .....YES.....

**Explanation:**

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**Bar Code:**

12.   
1 0 3 2 2 0 1 7 4 2 0 0 0 0 0 0 0

13.   
1 0 3 2 2 0 1 7 2 4 0 0 0 0 0 0 0

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE GRANGE INDEMNITY INSURANCE COMPANY  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

14.		1 0 3 2 2 2 0 1 7 3 6 0 5 9 0 0 0 0 0
15.		1 0 3 2 2 2 0 1 7 4 5 5 0 0 0 0 0 0 0
16.		1 0 3 2 2 2 0 1 7 4 9 0 0 0 0 0 0 0 0
17.		1 0 3 2 2 2 0 1 7 3 8 5 0 0 0 0 0 0 0
18.		1 0 3 2 2 2 0 1 7 4 0 1 0 0 0 0 0 0 0
19.		1 0 3 2 2 2 0 1 7 3 6 5 0 0 0 0 0 0 0
23.		1 0 3 2 2 2 0 1 7 5 0 0 0 0 0 0 0 0 0
24.		1 0 3 2 2 2 0 1 7 5 0 5 0 0 0 0 0 0 0
25.		1 0 3 2 2 2 0 1 7 2 2 4 0 0 0 0 0 0 0
26.		1 0 3 2 2 2 0 1 7 2 2 5 0 0 0 0 0 0 0
27.		1 0 3 2 2 2 0 1 7 2 2 6 0 0 0 0 0 0 0
28.		1 0 3 2 2 2 0 1 7 5 5 5 0 0 0 0 0 0 0
29.		1 0 3 2 2 2 0 1 7 2 3 0 5 9 0 0 0 0 0
30.		1 0 3 2 2 2 0 1 7 3 0 6 0 0 0 0 0 0 0
31.		1 0 3 2 2 2 0 1 7 2 1 0 0 0 0 0 0 0 0
32.		1 0 3 2 2 2 0 1 7 2 1 6 5 9 0 0 0 0 0
33.		1 0 3 2 2 2 0 1 7 2 1 7 0 0 0 0 0 0 0

**OVERFLOW PAGE FOR WRITE-INS**

P011 Additional Aggregate Lines for Page 11 Line 24.

\*EXEXP - Underwriting and Investment - Part 3 - Expenses

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
2404. Deferred Compensation.....			1,933	1,933
2405. Investment Banking Fees.....			47,926	47,926
2497. Summary of remaining write-ins for Line 24 from page 11	0	0	49,859	49,859

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