

Amendment #1 – Filed 3/4/2019

Page 5 Cash Flow

There was a correction made after the Cash Flow (page 5) was completed that affected lines 8 and 9.

Line 8 is Dividends paid to policyholders and SAIC does not pay dividends to policyholders. The \$7,866,093 shown on line 8 should have been reported on line 9. This would change line 9 to be \$7,708,272.

There were no other changes to Cash Flow (page 5) or the remainder of the annual statement, as a result of this correction.

Incorrect Filing

| CASH FLOW | | 1 Current Year |
|--------------------------------------------------------------------------------------------------------------|--|-------------------|
| CASH FROM OPERATIONS | | |
| 1. Premiums collected net of reinsurance..... | | 385,854,853 |
| 2. Net investment income..... | | 10,246,438 |
| 3. Miscellaneous income..... | | 25,560,150 |
| 4. Total (Lines 1 through 3)..... | | 421,661,441 |
| 5. Benefit and loss related payments..... | | 208,321,126 |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts..... | | |
| 7. Commissions, expenses paid and aggregate write-ins for deductions..... | | 172,493,788 |
| 8. Dividends paid to policyholders..... | | 7,866,093 |
| 9. Federal and foreign income taxes paid (recovered) net of \$....157,821 tax on capital gains (losses)..... | | (157,821) |
| 10. Total (Lines 5 through 9)..... | | 388,523,186 |
| 11. Net cash from operations (Line 4 minus Line 10)..... | | 33,138,255 |

Correct Filing

| CASH FLOW | | 1 Current Year |
|--------------------------------------------------------------------------------------------------------------|--|-------------------|
| CASH FROM OPERATIONS | | |
| 1. Premiums collected net of reinsurance..... | | 385,854,853 |
| 2. Net investment income..... | | 10,246,438 |
| 3. Miscellaneous income..... | | 25,560,150 |
| 4. Total (Lines 1 through 3)..... | | 421,661,441 |
| 5. Benefit and loss related payments..... | | 208,321,126 |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts..... | | |
| 7. Commissions, expenses paid and aggregate write-ins for deductions..... | | 172,493,795 |
| 8. Dividends paid to policyholders..... | | 7,708,272 |
| 9. Federal and foreign income taxes paid (recovered) net of \$....157,821 tax on capital gains (losses)..... | | |
| 10. Total (Lines 5 through 9)..... | | 388,523,193 |
| 11. Net cash from operations (Line 4 minus Line 10)..... | | 33,138,247 |



ANNUAL STATEMENT

For the Year Ended December 31, 2018

of the Condition and Affairs of the

Safe Auto Insurance Company

NAIC Group Code..... 0, 0
(Current Period) (Prior Period)

Organized under the Laws of OH

Incorporated/Organized..... May 28, 1993

Statutory Home Office

Main Administrative Office

Mail Address

Primary Location of Books and Records

Internet Web Site Address

Statutory Statement Contact

NAIC Company Code..... 25405

State of Domicile or Port of Entry OH

Employer's ID Number..... 31-1379882

Country of Domicile US

Commenced Business..... August 25, 1993

4 Easton Oval .. Columbus .. OH .. 43219
(Street and Number) (City or Town, State, Country and Zip Code)

4 Easton Oval .. Columbus .. OH .. 43219
(Street and Number) (City or Town, State, Country and Zip Code)

4 Easton Oval .. Columbus .. OH .. 43219
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

4 Easton Oval .. Columbus .. OH .. 43219
(Street and Number) (City or Town, State, Country and Zip Code)

614-231-0200

(Area Code) (Telephone Number)

614-231-0200

(Area Code) (Telephone Number)

www.safeauto.com

614-944-7680

Thomas Happensack

(Area Code) (Telephone Number) (Extension)

(Name)
thomas.happensack@safeauto.com
(E-Mail Address)

614-559-5357

(Fax Number)

OFFICERS

Name

Title

Name

Title

1. Ronald H Davies
3. Gregory A Sutton

Chief Executive Officer & President
Chief Financial Officer & Treasurer

2. Kelly A Armstrong
4. Thomas J Happensack

Chief Legal Officer & Secretary
Controller

OTHER

Mark LeMaster
Partha Srinivasa

Claims Leader
Chief Information Officer

Evan McKee
Charles Kordes

Product Leader
Customer Demand & Experience
Leader

DIRECTORS OR TRUSTEES

Ronald Davies
Gabriel Glitsberg

Ari Deshe
William Graves

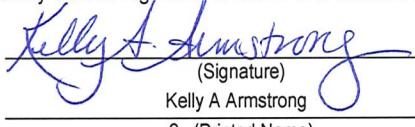
Elie Deshe
Oded Gur-Arie

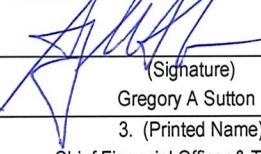
Jon Diamond
Karen Morrison #

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.


(Signature)
Ronald H Davies
1. (Printed Name)
Chief Executive Officer & President
(Title)


(Signature)
Kelly A Armstrong
2. (Printed Name)
Chief Legal Officer & Secretary
(Title)


(Signature)
Gregory A Sutton
3. (Printed Name)
Chief Financial Officer & Treasurer
(Title)

Subscribed and sworn to before me

This 4th day of March 2019

a. Is this an original filing?

Yes [] No [X]

b. If no 1. State the amendment number

1

2. Date filed

3/4/19

3. Number of pages attached

1

