



ANNUAL STATEMENT
For the Year Ended December 31, 2018
OF THE CONDITION AND AFFAIRS OF THE
GRANGE INDEMNITY INSURANCE COMPANY

NAIC Group Code	00267	00267	NAIC Company Code	10322	Employer's ID Number	31-1432675
	(Current Period)	(Prior Period)				
Organized under the Laws of	Ohio			State of Domicile or Port of Entry		Ohio
Country of Domicile	United States					
Incorporated/Organized	03/10/1995			Commenced Business		08/03/1995
Statutory Home Office	671 South High Street			Columbus, OH, US 43206-1014		
	(Street and Number)			(City or Town, State, Country and Zip Code)		
Main Administrative Office	671 South High Street			Columbus, OH, US 43206-1014		614-445-2900
	(Street and Number)			(City or Town, State, Country and Zip Code)		(Area Code) (Telephone Number)
Mail Address	671 South High Street, P.O. Box 1218			Columbus, OH, US 43216-1218		
	(Street and Number or P.O. Box)			(City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	671 South High Street			Columbus, OH, US 43206-1014		614-445-2900
	(Street and Number)			(City or Town, State, Country and Zip Code)		(Area Code) (Telephone Number)
Internet Web Site Address	www.grangeinsurance.com					
Statutory Statement Contact	Jeffrey P Siefker			614-445-2900		
	(Name)			(Area Code) (Telephone Number) (Extension)		
	siefkerj@grangeinsurance.com			614-542-3017		
	(E-Mail Address)			(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		
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DIRECTORS OR TRUSTEES

JOHN (NMN) AMMENDOLA	MARK LEWIS BOXER	DOUGLAS PAUL BUTH	TERESA JEAN DALENTA
MICHAEL DESMOND FRAIZER	ROBERT ENLOW HOYT	SUZAN BULYABA KEREERE #	MARY MARNETTE PERRY
THOMAS SIMRALL STEWART	DAVID CHARLES WETMORE	CHRISTIANNA (NMN) WOOD	

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

JOHN (NMN) AMMENDOLA PRESIDENT & CEO	LAVAWN DEE COLEMAN EVP & SECRETARY	TERESA JEAN DALENTA EVP & CFO
Subscribed and sworn to before me this 25th day of February, 2019	a. Is this an original filing? b. If no: 1. State the amendment number 2. Date filed 3. Number of pages attached	Yes [X] No []

Teresa J. Burchwell, Notary Public
April 28, 2022



ANNUAL STATEMENT FOR THE YEAR 2018 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 2018				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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire	33	33		0		2	2		0	0	6	2
2.1	Allied lines	59	59		0		3	3		1	1	10	3
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)	187,050	85,055		105,151	29,150	32,228	3,078	729	1,502	773	32,455	10,166
5.2	Commercial multiple peril (liability portion)	154,127	64,710		90,402	9,213	37,866	28,654	838	29,522	28,684	26,696	8,376
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	20,930	1,524		19,407		200	200		238	238	3,632	1,137
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	838,586	926,484		206,265	930,190	518,387	561,790	33,785	(13,566)	76,714	105,908	45,575
19.3	Commercial auto no-fault (personal injury protection)												
19.4	Other commercial auto liability	3,365,782	3,156,793		1,660,677	2,863,024	1,956,802	5,590,364	376,065	355,102	1,307,632	370,497	182,920
21.1	Private passenger auto physical damage	406,628	440,950		113,971	120,487	117,538	4,868	(121)	462	462	52,997	22,099
21.2	Commercial auto physical damage	776,541	750,934		400,107	266,011	237,869	26,254	717	717	2,382	86,318	42,203
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)	5,749,736	5,426,542	0	2,595,979	4,218,074	2,900,896	6,215,213	411,417	373,394	1,416,887	678,518	312,480
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 \$83,260

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2018 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 2018					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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire	2,170	.78		2,092		.1	.1		.0	.0	.377	.36
2.1	Allied lines	5,123	.196		4,927		.2	.2		.1	.1	.889	.86
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	775,769	.656,098		391,970	.451,140	.471,358	.54,665	.7,277	.12,495	.9,699	.114,538	.12,967
5.1	Commercial multiple peril (non-liability portion)	136,225	.60,951		82,968		.2,474	.2,474		.569	.569	.23,637	.2,277
5.2	Commercial multiple peril (liability portion) .....	.89,862	.54,882		.36,089		.27,291	.27,291		.27,192	.27,192	.15,569	.1,502
6.	Mortgage guaranty												
8.	Ocean marine												
9.	Inland marine	12,001	.9,102		.6,603	.1,897	.2,006	.186	.50	.63	.32	.1,948	.201
10.	Financial guaranty												
11.	Medical professional liability												
12.	Earthquake	1,210	.1,059		.338							.195	.20
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	14,857	.10,070		.8,646		.4,820	.6,554		.187	.232	.2,650	.248
17.2	Other Liability-Claims-Made												
17.3	Excess workers' compensation												
18.	Products liability	8,242	.591		.7,651		.1	.1		.1	.1	.1,430	.138
19.1	Private passenger auto no-fault (personal injury protection)												
19.2	Other private passenger auto liability	416,381	.478,284		.101,451	.310,706	.117,842	.174,693	.2,275	(17,742)	.37,845	.53,465	.6,960
19.3	Commercial auto no-fault (personal injury protection)												
19.4	Other commercial auto liability	2,082,069	.2,559,370		.963,858	.7,557,364	.3,284,145	.7,460,442	.1,034,625	.536,631	.1,212,542	.193,469	.34,803
21.1	Private passenger auto physical damage	227,877	.270,776		.52,705	.121,049	.101,643	(3,603)	.450	.418	.270	.29,219	.3,809
21.2	Commercial auto physical damage	628,383	.786,040		.294,963	.214,671	.198,467	.31,751		.195	.2,556	.58,435	.10,504
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)	4,400,169	.4,887,500	.0	1,954,261	.8,656,828	4,210,050	7,754,458	1,044,677	560,010	1,290,939	495,820	73,551
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 \$70,593

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2018 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 2018				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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire	504	353		151		17	17		4	4	87	9
2.1	Allied lines	999	632		367		31	31		8	8	173	19
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)	113,276	71,249		42,027		2,944	2,944		677	677	19,655	2,102
5.2	Commercial multiple peril (liability portion)	35,661	20,413		15,248		9,881	9,881		12,387	12,387	6,164	662
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	2,662,644	2,822,444		680,685	1,577,330	1,218,487	1,251,925	93,169	(13,694)	224,202	389,365	49,403
19.3	Commercial auto no-fault (personal injury protection)												
19.4	Other commercial auto liability	754,689	909,472		401,821	418,120	(143,635)	1,542,104	70,258	(82,060)	427,189	72,873	14,002
21.1	Private passenger auto physical damage	1,759,326	1,870,246		449,439	826,142	812,389	17,339		33	1,669	260,179	32,642
21.2	Commercial auto physical damage	241,496	292,402		126,303	294,540	259,878	(5,942)		58	967	22,903	4,481
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)	5,568,595	5,987,211	0	1,716,040	3,116,132	2,159,992	2,818,300	163,426	(82,587)	667,102	771,400	103,319
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 \$ 233,666

(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 2018 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 2018				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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire												
2.1	Allied lines												
2.2	Multiple peril crop												
2.3	Federal flood												
2.4	Private crop												
2.5	Private flood												
3.	Farmowners multiple peril												
4.	Homeowners multiple peril												
5.1	Commercial multiple peril (non-liability portion)												
5.2	Commercial multiple peril (liability portion)												
6.	Mortgage guaranty												
8.	Ocean marine												
9.	Inland marine												
10.	Financial guaranty												
11.	Medical professional liability												
12.	Earthquake												
13.	Group accident and health (b)												
14.	Credit 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												
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
35.	TOTAL (a)	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
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$ and number of persons insured under indemnity only products
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products



ANNUAL STATEMENT FOR THE YEAR 2018 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 2018			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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire												
2.1	Allied lines												
2.2	Multiple peril crop												
2.3	Federal flood												
2.4	Private crop												
2.5	Private flood												
3.	Farmowners multiple peril												
4.	Homeowners multiple peril												
5.1	Commercial multiple peril (non-liability portion)												
5.2	Commercial multiple peril (liability portion)												
6.	Mortgage guaranty												
8.	Ocean marine												
9.	Inland marine												
10.	Financial guaranty												
11.	Medical professional liability												
12.	Earthquake												
13.	Group accident and health (b)												
14.	Credit 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												
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
35.	TOTAL (a)	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
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 \$

(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 2018 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 2018				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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire	2,126	1,940		186		98	98		25	25	369	(3,250)
2.1	Allied lines	1,586	1,447		139		73	73		18	18	275	168
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)	68,806	72,465		28,741	5,000	7,954	2,954	22	713	691	11,874	5,780
5.2	Commercial multiple peril (liability portion)	31,933	19,181		18,077		9,478	9,478	6	9,453	9,447	5,505	982
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	6,901	5,719		1,182		1,165	1,165		1,385	1,385	1,197	(55)
17.2	Other Liability-Claims-Made												
17.3	Excess workers' compensation												
18.	Products liability												
19.1	Private passenger auto no-fault (personal injury protection)	87,712	110,143		23,463	27,103	60,207	(20,198)	19,434	18,223	4,836	11,775	9,279
19.2	Other private passenger auto liability	377,014	457,780		106,424	395,997	251,996	334,940	15,155	(16,680)	43,641	51,135	(8,431)
19.3	Commercial auto no-fault (personal injury protection)	82,798	91,207		38,597	4,550	29,063	29,469	2,619	10,816	53,806	8,107	8,759
19.4	Other commercial auto liability	1,251,722	1,410,905		583,764	638,553	79,544	2,324,955	159,740	75,468	656,153	122,499	18,446
21.1	Private passenger auto physical damage	197,727	236,823		64,850	63,905	61,919	(3,629)	4,130	4,101	284	27,964	20,916
21.2	Commercial auto physical damage	472,088	531,211		209,715	351,618	340,985	7,721	5,263	5,628	1,812	46,506	49,940
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)	2,580,414	2,938,821	0	1,075,139	1,486,727	842,483	2,687,028	206,369	109,151	772,098	287,207	102,532
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 \$45,306
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2018 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 2018				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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire												
2.1	Allied lines												
2.2	Multiple peril crop												
2.3	Federal flood												
2.4	Private crop												
2.5	Private flood												
3.	Farmowners multiple peril												
4.	Homeowners multiple peril												
5.1	Commercial multiple peril (non-liability portion)												
5.2	Commercial multiple peril (liability portion)												
6.	Mortgage guaranty												
8.	Ocean marine												
9.	Inland marine												
10.	Financial guaranty												
11.	Medical professional liability												
12.	Earthquake												
13.	Group accident and health (b)												
14.	Credit 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												
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
35.	TOTAL (a)	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
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 \$

(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 2018 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 2018				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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire												
2.1	Allied lines												
2.2	Multiple peril crop												
2.3	Federal flood												
2.4	Private crop												
2.5	Private flood												
3.	Farmowners multiple peril												
4.	Homeowners multiple peril												
5.1	Commercial multiple peril (non-liability portion)												
5.2	Commercial multiple peril (liability portion)												
6.	Mortgage guaranty												
8.	Ocean marine												
9.	Inland marine												
10.	Financial guaranty												
11.	Medical professional liability												
12.	Earthquake												
13.	Group accident and health (b)												
14.	Credit 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												
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
35.	TOTAL (a)	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
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$ and number of persons insured under indemnity only products
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products



1 0 3 2 2 2 0 1 8 4 3 0 3 6 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2018 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 2018				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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire	286	201		85		10	10	0	3	2	50	4
2.1	Allied lines	704	494		210		24	24	0	6		122	11
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	35,220,759	27,251,346		18,748,930	9,951,946	12,545,790	4,029,791	117,340	276,155	226,501	5,874,587	548,983
5.1	Commercial multiple peril (non-liability portion)	174,437	105,062		77,448		6,910	6,910	1,518	2,533	1,014	29,063	2,719
5.2	Commercial multiple peril (liability portion)	85,440	59,495		31,871		29,999	29,999	895	30,785	29,891	14,782	1,332
6.	Mortgage guaranty												
8.	Ocean marine												
9.	Inland marine	685,119	529,179		356,432	140,977	158,761	28,151	1,197	2,063	1,824	118,254	10,679
10.	Financial guaranty												
11.	Medical professional liability												
12.	Earthquake	128,271	100,703		70,038				123	123		21,840	1,999
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	861,994	659,178		452,255		329,962	457,150		7,648	10,892	154,363	13,436
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	61,572,249	56,484,393		25,753,947	27,241,667	35,534,901	33,025,613	832,771	2,043,638	4,526,335	9,615,246	959,721
19.3	Commercial auto no-fault (personal injury protection)												
19.4	Other commercial auto liability	3,931,722	3,984,060		1,836,443	2,147,320	96,324	5,550,842	141,918	37,853	1,811,763	384,201	61,283
21.1	Private passenger auto physical damage	57,902,896	53,431,465		23,980,856	30,023,373	30,849,958	1,192,406	31,573	46,171	25,881	9,067,968	902,527
21.2	Commercial auto physical damage	1,282,729	1,355,535		604,093	765,669	773,490	48,422	956	1,986	4,504	124,841	19,994
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)	161,846,606	143,961,112	0	71,912,610	70,270,951	80,326,128	44,369,317	1,128,290	2,448,963	6,638,614	25,405,317	2,522,688
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 \$ 2,180,318

(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 2018 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 2018				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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire	228	228		0		13	13		3	3	40	9
2.1	Allied lines	152	152		0		9	9		2	2	26	6
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)	80,786	43,292		38,158		1,727	1,727		397	397	14,017	3,176
5.2	Commercial multiple peril (liability portion)	135,204	71,680		63,979		34,674	34,674		34,551	34,551	23,425	5,315
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	3,284	2,868		416		597	597		710	710	570	129
17.2	Other Liability-Claims-Made												
17.3	Excess workers' compensation												
18.	Products liability	3,045	2,824		221		583	583		694	694	528	120
19.1	Private passenger auto no-fault (personal injury protection)	71,743	75,214		17,260	52,583	79,346	11,910	1,379	1,697	3,179	8,098	2,820
19.2	Other private passenger auto liability	416,315	432,569		102,306	296,999	263,192	278,516	37,084	32,102	24,054	46,973	16,367
19.3	Commercial auto no-fault (personal injury protection)	82,309	76,424		43,503	15,759	34,470	21,936	33	7,352	44,398	8,441	3,236
19.4	Other commercial auto liability	1,012,140	966,540		520,207	1,410,989	549,154	1,752,314	260,449	135,461	436,462	106,385	39,791
21.1	Private passenger auto physical damage	256,990	253,516		67,885	118,830	97,620	3,847		22	211	29,015	10,103
21.2	Commercial auto physical damage	383,445	364,717		193,845	204,650	206,514	12,392		223	1,155	39,632	15,075
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)	2,445,641	2,290,023	0	1,047,781	2,099,810	1,267,897	2,118,517	298,944	213,215	545,815	277,149	96,146
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 \$73,153

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2018 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 2018				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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire	1,913	508		2,028		16	19		4	5	332	55
2.1	Allied lines	2,945	767		2,995		24	29		6	7	511	85
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	3,580,510	2,696,149		1,961,861	900,964	896,922	82,420	6,063	30,132	35,120	564,885	102,856
5.1	Commercial multiple peril (non-liability portion)	86,254	51,410		42,609	(473)	1,494	1,971		480	483	14,966	2,478
5.2	Commercial multiple peril (liability portion)	67,565	48,603		54,155		22,815	24,261		22,869	24,173	11,705	1,941
6.	Mortgage guaranty												
8.	Ocean marine												
9.	Inland marine	46,579	33,780		26,879	24,079	24,158	416		23	115	7,685	1,338
10.	Financial guaranty												
11.	Medical professional liability												
12.	Earthquake	17,640	13,023		9,910							2,918	507
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	78,535	57,007		42,061		24,857	37,426		864	1,211	14,341	2,256
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	1,123,027	1,152,475		298,205	507,168	398,036	425,918	17,553	(39)	89,862	150,375	32,261
19.3	Commercial auto no-fault (personal injury protection)												
19.4	Other commercial auto liability	1,948,391	1,906,270		948,175	1,183,862	106,955	3,472,440	97,384	(45,326)	863,259	197,414	55,971
21.1	Private passenger auto physical damage	663,152	702,639		173,924	309,683	279,774	4,102	2,739	2,817	719	88,547	19,050
21.2	Commercial auto physical damage	506,185	524,188		255,384	362,408	353,409	2,258	45	229	1,746	52,554	14,541
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)	8,122,696	7,186,819	0	3,818,185	3,287,692	2,108,459	4,051,261	123,785	12,059	1,016,700	1,106,232	233,338
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 \$169,530

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00267		BUSINESS IN THE STATE OF Virginia				DURING THE YEAR 2018				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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire	694	271		423		12	12		3	3	120	26
2.1	Allied lines	1,207	561		646		26	26		6	6	209	45
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)	22,844	4,073		18,771		114	114		26	26	3,964	859
5.2	Commercial multiple peril (liability portion)	21,425	1,498		19,927		200	200		199	199	3,707	806
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												
19.3	Commercial auto no-fault (personal injury protection)												
19.4	Other commercial auto liability	44,212	20,023		24,189		8,301	8,301		2,548	2,548	7,671	1,663
21.1	Private passenger auto physical damage												
21.2	Commercial auto physical damage	6,653	3,006		3,647		162	162		6	6	1,154	250
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)	97,035	29,432	0	67,603	0	8,815	8,815	0	2,789	2,789	16,826	3,650
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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00267		BUSINESS IN THE STATE OF Wisconsin				DURING THE YEAR 2018			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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire												
2.1	Allied lines												
2.2	Multiple peril crop												
2.3	Federal flood												
2.4	Private crop												
2.5	Private flood												
3.	Farmowners multiple peril												
4.	Homeowners multiple peril												
5.1	Commercial multiple peril (non-liability portion)												
5.2	Commercial multiple peril (liability portion)												
6.	Mortgage guaranty												
8.	Ocean marine												
9.	Inland marine												
10.	Financial guaranty												
11.	Medical professional liability												
12.	Earthquake												
13.	Group accident and health (b)												
14.	Credit 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												
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
35.	TOTAL (a)	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
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 \$ and number of persons insured under indemnity only products

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



ANNUAL STATEMENT FOR THE YEAR 2018 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 2018				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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire	7,954	3,611	.0	4,965	.0	169	172	.0	42	43	1,380	(3,108)
2.1	Allied lines	12,775	4,309	.0	9,283	.0	192	197	.0	48	49	2,217	422
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	39,577,038	30,603,594	.0	21,102,762	11,304,050	13,914,070	4,166,876	130,680	318,782	271,321	6,554,010	664,806
5.1	Commercial multiple peril (non-liability portion)	869,678	493,558	.0	435,872	33,677	55,846	22,173	2,269	6,897	4,630	149,630	29,557
5.2	Commercial multiple peril (liability portion)	621,216	340,461	.0	329,748	9,213	172,204	164,438	1,739	166,958	166,524	107,553	20,916
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	743,699	572,061	.0	389,914	166,953	184,925	28,752	1,247	2,149	1,971	127,886	12,218
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	147,121	114,786	.0	80,286	.0	.0	.0	123	123	.0	24,954	2,526
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	986,502	736,365	.0	523,968	.0	361,601	503,093	.0	11,033	14,668	176,753	17,152
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	11,287	3,416	.0	7,871	.0	584	584	.0	695	695	1,958	257
19.1	Private passenger auto no-fault (personal injury protection)	159,455	185,357	.0	40,723	79,686	139,553	(8,287)	20,814	19,921	8,015	19,873	12,099
19.2	Other private passenger auto liability	67,406,216	62,754,430	.0	27,249,283	31,260,057	38,302,840	36,053,394	1,031,791	2,014,018	5,022,653	10,412,467	1,101,855
19.3	Commercial auto no-fault (personal injury protection)	165,107	167,631	.0	82,100	20,309	63,532	51,406	2,652	18,168	98,204	16,547	11,994
19.4	Other commercial auto liability	14,390,727	14,913,432	.0	6,939,134	16,219,231	5,937,589	27,701,764	2,140,438	1,015,676	6,717,549	1,455,010	408,878
21.1	Private passenger auto physical damage	61,414,596	57,206,416	.0	24,903,630	31,583,469	32,320,841	1,215,330	38,892	53,440	29,496	9,555,888	1,011,147
21.2	Commercial auto physical damage	4,297,520	4,608,034	.0	2,088,058	2,459,566	2,370,774	123,019	6,264	9,043	15,128	432,342	156,986
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)	190,810,892	172,707,460	0	84,187,598	93,136,213	93,824,720	70,022,910	3,376,909	3,636,993	12,350,944	29,038,469	3,447,706
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 \$ 2,855,917

(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 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 1

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2018 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 Reinsur- ance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute Included in Column 15	Reinsurance Payable		19 Net Amount Recover- able From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held By Company Under Reinsurance Treaties
						7	8	9	10	11	12	13	14	15		17	18		
						Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commis- sions	Cols. 7 through 14 Totals		Ceded Balances Payable	Other Amounts Due to Reinsurers		
Authorized - Affiliates - U.S. Intercompany Pooling																			
31-4192970	14060	GRANGE MUT CAS CO	OH		188,208			38,126	9,012	32,314	7,638	84,200		171,290				171,290	
0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling					188,208	0	0	38,126	9,012	32,314	7,638	84,200	0	171,290	0	0	0	171,290	0
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates					188,208	0	0	38,126	9,012	32,314	7,638	84,200	0	171,290	0	0	0	171,290	0
Authorized - Other U.S. Unaffiliated Insurers																			
47-0574325	32603	BERKLEY INS CO	DE		7							3		3				3	
42-0234980	21415	EMPLOYERS MUT CAS CO	IA		28									0				0	
35-2293075	11551	ENDURANCE ASSUR CORP	DE		101									0				0	
22-2005057	26921	EVEREST REINS CO	DE		149									0				0	
13-2673100	22039	GENERAL REINS CORP	DE		70							37		37				37	
06-0384680	11452	HARTFORD STEAM BOIL INSPEC & INS CO	CT		111							61		61				61	
13-4924125	10227	MUNICH REINS AMER INC	DE		535									0				0	
13-3138390	42307	NAVIGATORS INS CO	NY		27									0				0	
23-1641984	10219	QBE REINS CORP	PA		4									0				0	
52-1952955	10357	RENAISSANCE REINS US INC	MD		173									0				0	
43-0727872	15105	SAFETY NATL CAS CORP	MO		28									0				0	
13-1675535	25364	SWISS REINS AMER CORP	NY		358									0				0	
13-5616275	19453	TRANSATLANTIC REINS CO	NY		59									0				0	
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers					1,648	0	0	0	0	0	0	102	0	102	0	0	0	102	0
Authorized - Pools - Mandatory Pools																			
AA-9991500	00000	ILLINOIS MINE SUBSIDENCE FUND	IL		1							0		0				0	
AA-9991502	00000	KENTUCKY MINE SUBSIDENCE FUND	KY		0							0		0				0	
AA-9991503	00000	OHIO MINE SUBSIDENCE FUND	OH		13							5		5				5	
1099999 - Total Authorized - Pools - Mandatory Pools					14	0	0	0	0	0	0	5	0	5	0	0	0	5	0
Authorized - Other Non-U.S. Insurers																			
AA-1126033	00000	LLOYD'S SYNDICATE NUMBER 33	GBR		75									0				0	
AA-1126435	00000	LLOYD'S SYNDICATE NUMBER 435	GBR		38									0				0	
AA-1126510	00000	LLOYD'S SYNDICATE NUMBER 510	GBR		8									0				0	
AA-1126566	00000	LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)	GBR		3									0				0	
AA-1126623	00000	LLOYD'S SYNDICATE NUMBER 623	GBR		7									0				0	
AA-1126780	00000	LLOYD'S SYNDICATE NUMBER 780	GBR		6									0				0	
AA-1127084	00000	LLOYD'S SYNDICATE NUMBER 1084	GBR		58									0				0	
AA-1120157	00000	LLOYD'S SYNDICATE NUMBER 1729	GBR		4									0				0	
AA-1120171	00000	Lloyd's Syndicate Number 1856	GBR		5									0				0	
AA-1120084	00000	Lloyd's Syndicate Number 1955	GBR		6									0				0	
AA-1120106	00000	Lloyd's Syndicate Number 1969	GBR		12									0				0	
AA-1128001	00000	LLOYD'S SYNDICATE NUMBER 2001	GBR		83									0				0	
AA-1128003	00000	LLOYD'S SYNDICATE NUMBER 2003	GBR		66									0				0	
AA-1120071	00000	Lloyd's Syndicate Number 2007	GBR		7									0				0	
AA-1128010	00000	LLOYD'S SYNDICATE NUMBER 2010	GBR		12									0				0	
AA-1120158	00000	LLOYD'S SYNDICATE NUMBER 2014	GBR		5									0				0	
AA-1128623	00000	Lloyd's Syndicate Number 2623	GBR		32									0				0	
AA-1128791	00000	LLOYD'S SYNDICATE NUMBER 2791	GBR		34									0				0	
AA-1126006	00000	Lloyd's Syndicate Number 4472	GBR		5									0				0	
AA-1120181	00000	Lloyd's Syndicate Number 5886	GBR		4									0				0	
AA-3194168	00000	Aspen Bermuda Ltd	BMU		110									0				0	
AA-1340125	00000	HANNOVER RUECK SE	DEU		94									0				0	
AA-1840000	00000	MAPFRE RE COMPANIA DE REASEGUROS SA	ESP		18									0				0	
AA-3190829	00000	Markel Bermuda Ltd	BMU		2									0				0	
AA-3190870	00000	Validus Reins Ltd	BMU		23									0				0	
1299999 - Total Authorized - Other Non-U.S. Insurers					716	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					190,586	0	0	38,126	9,012	32,314	7,638	84,307	0	171,397	0	0	0	171,397	0
Unauthorized - Other non-U.S. Insurers																			
AA-3194126	00000	Arch Reins Ltd	BMU		103									0				0	
AA-3190770	00000	Chubb Tempest Reins Ltd			64									0				0	
AA-9240012	00000	CHINA PROP & CAS REINS CO LTD	CHN		6									0				0	
AA-3194130	00000	Endurance Specialty Ins Ltd	BMU		6									0				0	

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 3

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 - 27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29 – 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	Reinsurer Designation Equivalent	Credit Risk Collateralized Recoverables (Col. 32 * Factor Applicable to Designation Equivalent in Col. 34)	Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Designation Equivalent in Col. 34)
Authorized - Affiliates - U.S. Intercompany Pooling																	
31-4192970...	GRANGE MUT CAS CO.					.0	171,290	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling		0	0	XXX	0	0	171,290	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates		0	0	XXX	0	0	171,290	0	0	0	0	0	0	0	XXX	0	0
Authorized - Other U.S. Unaffiliated Insurers																	
47-0574325...	BERKLEY INS CO.					.0	3	.0	3	4	.0	4	.0	4	2	.0	.0
42-0234980...	EMPLOYERS MUT CAS CO.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
35-2293075...	ENDURANCE ASSUR CORP.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
22-2005057...	EVEREST REINS CO.					.0	0	.0	0	0	.0	0	.0	0	2	.0	.0
13-2673100...	GENERAL REINS CORP.					.0	37	.0	37	45	.0	45	.0	45	1	.0	2
06-0384680...	HARTFORD STEAM BOIL INSPEC & INS CO.					.0	61	.0	61	73	.0	73	.0	73	1	.0	3
13-4924125...	MUNICH REINS AMER INC.					.0	0	.0	0	0	.0	0	.0	0	2	.0	.0
13-3138390...	NAVIGATORS INS CO.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
23-1641984...	QBE REINS CORP.					.0	0	.0	0	0	.0	0	.0	0	4	.0	.0
52-1952955...	RENAISSANCE REINS US INC.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
43-0727872...	SAFETY NATL CAS CORP.					.0	0	.0	0	0	.0	0	.0	0	2	.0	.0
13-1675535...	SWISS REINS AMER CORP.					.0	0	.0	0	0	.0	0	.0	0	2	.0	.0
13-5616275...	TRANSATLANTIC REINS CO.					.0	0	.0	0	0	.0	0	.0	0	2	.0	.0
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers		0	0	XXX	0	0	102	0	102	122	0	122	0	122	XXX	0	4
Authorized - Pools - Mandatory Pools																	
AA-9991500...	ILLINOIS MINE SUBSIDENCE FUND.					.0	0	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991502...	KENTUCKY MINE SUBSIDENCE FUND.					.0	0	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991503...	OHIO MINE SUBSIDENCE FUND.					.0	5	.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999 - Total Authorized - Pools - Mandatory Pools		0	0	XXX	0	0	5	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Authorized - Other Non-U.S. Insurers																	
AA-1126033...	LLOYD'S SYNDICATE NUMBER 33.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1126435...	LLOYD'S SYNDICATE NUMBER 435.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1126510...	LLOYD'S SYNDICATE NUMBER 510.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1126566...	LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999).					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1126623...	LLOYD'S SYNDICATE NUMBER 623.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1126780...	LLOYD'S SYNDICATE NUMBER 780.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1127084...	LLOYD'S SYNDICATE NUMBER 1084.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1120157...	LLOYD'S SYNDICATE NUMBER 1729.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1120171...	Lloyd's Syndicate Number 1856.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1120084...	Lloyd's Syndicate Number 1955.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1120106...	Lloyd's Syndicate Number 1969.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1128001...	LLOYD'S SYNDICATE NUMBER 2001.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1128003...	LLOYD'S SYNDICATE NUMBER 2003.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1120071...	Lloyd's Syndicate Number 2007.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1128010...	LLOYD'S SYNDICATE NUMBER 2010.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1120158...	LLOYD'S SYNDICATE NUMBER 2014.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1128623...	Lloyd's Syndicate Number 2623.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1128791...	LLOYD'S SYNDICATE NUMBER 2791.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1126006...	Lloyd's Syndicate Number 4472.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1120181...	Lloyd's Syndicate Number 5886.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-3194168...	Aspen Bermuda Ltd.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-1340125...	HANNOVER RUECK SE.					.0	0	.0	0	0	.0	0	.0	0	2	.0	.0
AA-1840000...	MAPFRE RE COMPANIA DE REASEGUROS SA.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-3190829...	Markel Bermuda Ltd.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0
AA-3190870...	Validus Reins Ltd.					.0	0	.0	0	0	.0	0	.0	0	3	.0	.0

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 - 27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29 – 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	Reinsurer Designation Equivalent	Credit Risk Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
1299999	- Total Authorized - Other Non-U.S. Insurers	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
1499999	- Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	0	XXX	0	0	171,397	0	102	122	0	122	0	122	XXX	0	4
Unauthorized - Other non-U.S. Insurers																	
AA-3194126	Arch Reins Ltd.					0	0	0	0	0	0	0	0	0	2	0	0
AA-3190770	Chubb Tempest Reins Ltd.					0	0	0	0	0	0	0	0	0	1	0	0
AA-9240012	CHINA PROP & CAS REINS CO LTD.					0	0	0	0	0	0	0	0	0	3	0	0
AA-3194130	Endurance Specialty Ins Ltd.					0	0	0	0	0	0	0	0	0	3	0	0
AA-3191289	Fidelis Ins Bermuda Ltd.					0	0	0	0	0	0	0	0	0	4	0	0
AA-5340310	GEN INS CORP OF INDIA					0	0	0	0	0	0	0	0	0	4	0	0
AA-3191190	Hamilton Re Ltd.					0	0	0	0	0	0	0	0	0	4	0	0
AA-3190875	Hiscox Ins Co (Bermuda) Ltd.					0	0	0	0	0	0	0	0	0	3	0	0
AA-1460019	MS Amlin AG					0	0	0	0	0	0	0	0	0	3	0	0
AA-3194200	MS FRONTIER REINS LTD.					0	0	0	0	0	0	0	0	0	3	0	0
AA-3191298	Qatar Reins Co Ltd.					0	0	0	0	0	0	0	0	0	3	0	0
AA-3190757	XL Re Ltd.					0	0	0	0	0	0	0	0	0	3	0	0
AA-1440076	SIRIUS INTL INS CORP.					0	0	0	0	0	0	0	0	0	3	0	0
AA-5324100	TAIPING REINS CO LTD.					0	0	0	0	0	0	0	0	0	3	0	0
AA-1460023	Tokio Millennium Re AG					0	0	0	0	0	0	0	0	0	1	0	0
2699999	- Total Unauthorized - Other Non-U.S. Insurers	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2899999	- Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4399999	- Total Authorized, Unauthorized and Certified (Sum of 1499999, 2899999 and 4299999)	0	0	XXX	0	0	171,397	0	102	122	0	122	0	122	XXX	0	4
9999999 Totals		0	0	XXX	0	0	171,397	0	102	122	0	122	0	122	XXX	0	

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 43 – 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20% (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
		37	Overdue					43											
			38	39	40	41	42												

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute in Cols. 43 – 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20% (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
		37	Overdue					43											
			38	39	40	41	42												
		Current	1 – 29 Days	30 – 90 Days	91 – 120 Days	Over 120 Days	Total Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)											
AA-3190870...	Validus Reins Ltd.						0	0			0	0		0.000	0.000	0.000	YES	0	
1299999 - Total Authorized - Other Non-U.S. Insurers		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0	
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0	
Unauthorized - Other non-U.S. Insurers																			
AA-3194126...	Arch Reins Ltd.						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-3190770...	Chubb Tempest Reins Ltd.						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-9240012...	CHINA PROP & CAS REINS CO LTD.						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-3194130...	Endurance Specialty Ins Ltd.						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-3191289...	Fidelis Ins Bermuda Ltd.						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-5340310...	GEN INS CORP OF INDIA						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-3191190...	Hamilton Re Ltd.						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-3190875...	Hiscox Ins Co (Bermuda) Ltd.						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-1460019...	MS Amlin AG						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-3194200...	MS FRONTIER REINS LTD.						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-3191298...	Qatar Reins Co Ltd.						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-3190757...	XL Re Ltd.						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-1440076...	SIRIUS INTL INS CORP.						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-5324100...	TAIPING REINS CO LTD.						0	0			0	0		0.000	0.000	0.000	YES	0	
AA-1460023...	Tokio Millennium Re AG						0	0			0	0		0.000	0.000	0.000	YES	0	
2699999 - Total Unauthorized - Other Non-U.S. Insurers		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0	
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0	
4399999 - Total Authorized, Unauthorized and Certified (Sum of 1499999, 2899999 and 4299999)		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0	
9999999 Totals		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0	

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)
		54 Certified Reinsurer Rating (1 through 6)	55 Effective Date of Certified Reinsurer Rating	56 Percent Collateral Required for Full Credit (0% through 100%)	57 Catastrophe Recoverables Qualifying for Collateral Deferral	58 Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	59 Dollar Amount of Collateral Required (Col. 56 * Col. 58)	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20+Col. 21+Col. 22+Col. 24]/Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	63 Amount of Credit Allowed for Net Recoverables (Col. 57+[Col. 58 * Col. 61])	64 Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	65 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	66 Total Collateral Provided (Col. 20+Col. 21+Col.22+ Col. 24; not to Exceed Col. 63)	67 Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	68 20% of Amount in Col. 67		
Authorized - Affiliates - U.S. Intercompany Pooling																		
31-4192970	GRANGE MUT CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling																		
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates																		
Authorized - Other U.S. Unaffiliated Insurers																		
47-0574325	BERKLEY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0234980	EMPLOYERS MUT CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35-2293075	ENDURANCE ASSUR CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
22-2005057	EVEREST REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2673100	GENERAL REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-4924125	MUNICH REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3138390	NAVIGATORS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23-1641984	QBE REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
52-1952955	RENAISSANCE REINS US INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43-0727872	SAFETY NATL CAS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1675535	SWISS REINS AMER CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-5616275	TRANSATLANTIC REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers																		
Authorized - Pools - Mandatory Pools																		
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991503	OHIO MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999 - Total Authorized - Pools - Mandatory Pools																		
Authorized - Other Non-U.S. Insurers																		
AA-1126033	LLOYD'S SYNDICATE NUMBER 33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126435	LLOYD'S SYNDICATE NUMBER 435	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126510	LLOYD'S SYNDICATE NUMBER 510	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126566	LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126623	LLOYD'S SYNDICATE NUMBER 623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126780	LLOYD'S SYNDICATE NUMBER 780	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120157	LLOYD'S SYNDICATE NUMBER 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120171	Lloyd's Syndicate Number 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120084	Lloyd's Syndicate Number 1955	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120106	Lloyd's Syndicate Number 1969	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120071	Lloyd's Syndicate Number 2007	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120158	LLOYD'S SYNDICATE NUMBER 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128623	Lloyd's Syndicate Number 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126006	Lloyd's Syndicate Number 4472	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120181	Lloyd's Syndicate Number 5886	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194168	Aspen Bermuda Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340125	HANNOVER RUECK SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1840000	MAPFRE RE COMPANIA DE REASEGUROS SA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20+Col. 21+Col. 22+Col. 24]/Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57+[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20+Col. 21+Col.22+ Col. 24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	20% of Amount in Col. 67		
AA-3190829	Markel Bermuda Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190870	Validus Reins Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1299999 - Total Authorized - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Unauthorized - Other non-U.S. Insurers																		
AA-3194126	Arch Reins Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190770	Chubb Tempest Reins Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9240012	CHINA PROP & CAS REINS CO LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194130	Endurance Specialty Ins Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191289	Fidelis Ins Bermuda Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5340310	GEN INS CORP OF INDIA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191190	Hamilton Re Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190875	Hiscox Ins Co (Bermuda) Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460019	MS Amlin AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194200	MS FRONTIER REINS LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191298	Qatar Reins Co Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190757	XL Re Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1440076	SIRIUS INTL INS CORP.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5324100	TAIPING REINS CO LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460023	Tokio Millennium Re AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2699999 - Total Unauthorized - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4399999 - Total Authorized, Unauthorized and Certified (Sum of 1499999, 2899999 and 4299999)		XXX	XXX	XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
9999999 Totals		XXX	XXX	XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or [Col. 40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Col. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
Authorized - Affiliates - U.S. Intercompany Pooling										
31-4192970	GRANGE MUT CAS CO	0	xxx	xxx	0	0	0	xxx	xxx	0
0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling		0	xxx	xxx	0	0	0	xxx	xxx	0
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates		0	xxx	xxx	0	0	0	xxx	xxx	0
Authorized - Other U.S. Unaffiliated Insurers										
47-0574325	BERKLEY INS CO	0	xxx	xxx	0	0	0	xxx	xxx	0
42-0234980	EMPLOYERS MUT CAS CO	0	xxx	xxx	0	0	0	xxx	xxx	0
35-2293075	ENDURANCE ASSUR CORP	0	xxx	xxx	0	0	0	xxx	xxx	0
22-2005057	EVEREST REINS CO	0	xxx	xxx	0	0	0	xxx	xxx	0
13-2673100	GENERAL REINS CORP	0	xxx	xxx	0	0	0	xxx	xxx	0
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	0	xxx	xxx	0	0	0	xxx	xxx	0
13-4924125	MUNICH REINS AMER INC	0	xxx	xxx	0	0	0	xxx	xxx	0
13-3138390	NAVIGATORS INS CO	0	xxx	xxx	0	0	0	xxx	xxx	0
23-1641984	QBE REINS CORP	0	xxx	xxx	0	0	0	xxx	xxx	0
52-1952955	RENAISSANCE REINS US INC	0	xxx	xxx	0	0	0	xxx	xxx	0
43-0727872	SAFETY NATL CAS CORP	0	xxx	xxx	0	0	0	xxx	xxx	0
13-1675535	SWISS REINS AMER CORP	0	xxx	xxx	0	0	0	xxx	xxx	0
13-5616275	TRANSATLANTIC REINS CO	0	xxx	xxx	0	0	0	xxx	xxx	0
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers		0	xxx	xxx	0	0	0	xxx	xxx	0
Authorized - Pools - Mandatory Pools										
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-9991503	OHIO MINE SUBSIDENCE FUND	0	xxx	xxx	0	0	0	xxx	xxx	0
1099999 - Total Authorized - Pools - Mandatory Pools		0	xxx	xxx	0	0	0	xxx	xxx	0
Authorized - Other Non-U.S. Insurers										
AA-1126033	LLOYD'S SYNDICATE NUMBER 33	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1126435	LLOYD'S SYNDICATE NUMBER 435	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1126510	LLOYD'S SYNDICATE NUMBER 510	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1126566	LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1126623	LLOYD'S SYNDICATE NUMBER 623	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1126780	LLOYD'S SYNDICATE NUMBER 780	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1120157	LLOYD'S SYNDICATE NUMBER 1729	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1120171	Lloyd's Syndicate Number 1856	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1120084	Lloyd's Syndicate Number 1955	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1120106	Lloyd's Syndicate Number 1969	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1120071	Lloyd's Syndicate Number 2007	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1120158	LLOYD'S SYNDICATE NUMBER 2014	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1128623	Lloyd's Syndicate Number 2623	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1126006	Lloyd's Syndicate Number 4472	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1120181	Lloyd's Syndicate Number 5886	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-3194168	Aspen Bermuda Ltd	0	xxx	xxx	0	0	0	xxx	xxx	0
AA-1340125	HANNOVER RUECK SE	0	xxx	xxx	0	0	0	xxx	xxx	0

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or [Col. 40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Col. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
AA-1840000.....	MAPFRE RE COMPANIA DE REASEGUROS SA.....	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3190829.....	Markel Bermuda Ltd.....	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3190870.....	Validus Reins Ltd.....	0	XXX	XXX	0	0	0	XXX	XXX	0
1299999 - Total Authorized - Other Non-U.S. Insurers		0	XXX	XXX	0	0	0	XXX	XXX	0
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0	XXX	XXX	0	0	0	XXX	XXX	0
Unauthorized - Other non-U.S. Insurers										
AA-3194126.....	Arch Reins Ltd.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190770.....	Chubb Tempest Reins Ltd.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-9240012.....	CHINA PROP & CAS REINS CO LTD.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3194130.....	Endurance Specialty Ins Ltd.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191289.....	Fidelis Ins Bermuda Ltd.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-5340310.....	GEN INS CORP OF INDIA.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191190.....	Hamilton Re Ltd.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190875.....	Hiscox Ins Co (Bermuda) Ltd.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1460019.....	MS Amlin AG.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3194200.....	MS FRONTIER REINS LTD.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191298.....	Qatar Reins Co Ltd.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190757.....	XL Re Ltd.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1440076.....	SIRIUS INTL INS CORP.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-5324100.....	TAIPING REINS CO LTD.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1460023.....	Tokio Millennium Re AG.....	0	0	0	XXX	XXX	XXX	0	XXX	0
2699999 - Total Unauthorized - Other Non-U.S. Insurers		0	0	0	XXX	XXX	XXX	0	XXX	0
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	XXX	XXX	XXX	0	XXX	0
4399999 - Total Authorized, Unauthorized and Certified (Sum of 1499999, 2899999 and 4299999)		0	0	0	0	0	0	0	0	0
9999999 Totals		0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 4

Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3 (\$000 Omitted)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
Total				0

NONE

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE INDEMNITY INSURANCE COMPANY

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1.	GRANGE MUT CAS CO.....		188,207,906
2.	MUNICH REINS AMER INC.....		534,617
3.	SWISS REINS AMER CORP.....		357,834
4.	RENAISSANCE REINS US INC.....		172,844
5.	EVEREST REINS CO.....		149,049

Report the five largest reinsurance recoverables reported in Schedule F, Part 3.Column 15, due from any one reinsurer (based on-the total recoverables), Schedule F, Part 3, Line 9999999, Column 15, the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
6.	GRANGE MUT CAS CO.....	171,289,717	188,207,986	Yes [X] No []
7.	HARTFORD STEAM BOIL INSPEC & INS CO.....	60,852	110,557	Yes [] No [X]
8.	GENERAL REINS CORP.....	37,435	69,582	Yes [] No [X]
9.	OHIO MINE SUBSIDENCE FUND.....	13,182	4,932	Yes [] No [X]
10.	BERKLEY INS CO.....	6,588	3,424	Yes [] No [X]

NOTE: Disclosure of the five largest provisional commission rates should exclude mandatory pools and joint underwriting associations.

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance			
	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	57,765,259		57,765,259
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	2,099,987		2,099,987
6. Net amount recoverable from reinsurers		171,391,408	171,391,408
7. Protected cell assets (Line 27)	0		0
8. Totals (Line 28)	59,865,246	171,391,408	231,256,654
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	0	87,089,977	87,089,977
10. Taxes, expenses, and other obligations (Lines 4 through 8)	327,613		327,613
11. Unearned premiums (Line 9)	0	84,301,431	84,301,431
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)	327,613	171,391,408	171,719,021
20. Protected cell liabilities (Line 27)	0		0
21. Surplus as regards policyholders (Line 37)	59,537,633	X X X	59,537,633
22. Totals (Line 38)	59,865,246	171,391,408	231,256,654

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

Schedule P - Part 7A - Section 1

NONE

Schedule P - Part 7A - Section 2

NONE

Schedule P - Part 7A - Section 3

NONE

Schedule P - Part 7A - Section 4

NONE

Schedule P - Part 7A - Section 5

NONE

Schedule P - Part 7B - Section 1

NONE

Schedule P - Part 7B - Section 2

NONE

Schedule P - Part 7B - Section 3

NONE

Schedule P - Part 7B - Section 4

NONE

Schedule P - Part 7B - Section 5

NONE

Schedule P - Part 7B - Section 6

NONE

Schedule P - Part 7B - Section 7

NONE

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?
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:

Yes [] No [X]
- 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	2
		Section 1: Occurrence	Section 2: Claims-Made
1.601	Prior		
1.602	2009.....		
1.603	2010.....		
1.604	2011.....		
1.605	2012.....		
1.606	2013.....		
1.607	2014.....		
1.608	2015.....		
1.609	2016.....		
1.610	2017.....		
1.611	2018.....		
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 Casualty Company remains the lead company.....

SCHEDULE T – PART 2
INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN

Allocated By States and Territories

		Direct Business Only					
		1	2	3	4	5	6
States, Etc.		Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	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	IN .....						.0
16. Iowa	IA .....						.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	0

NONE

SCHEDULE Y

PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

Asterisk	Explanation

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68

68

68

ANNUAL STATEMENT FOR THE YEAR 2018 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.

	MARCH FILING	RESPONSES
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.....
APRIL FILING		
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.....
MAY FILING		
8.	Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	.....YES.....
JUNE FILING		
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.....
AUGUST FILING		
11.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	.....YES.....

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

	MARCH FILING	
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 2018 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.....

35.

Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?

.....NO.....

36.

Will the Adjustment to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1?

.....NO.....

AUGUST FILING

37.

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






















.....YES.....

Explanation:

12. No business written
13. No business written
14. No business written
15. No business written
16. No business written
17. No business written
18. No business written
19. No business written
23. No business written
24. No business written
25. No business written
26. No business written
27. No business written
28. No business written
29. No business written
30. No business written
31. No business written
32. No business written
33. No business written
35. No business written
36. No business written

Bar Code:

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

12.	 1 0 3 2 2 2 0 1 8 4 2 0 0 0 0 0 0
13.	 1 0 3 2 2 2 0 1 8 2 4 0 0 0 0 0 0
14.	 1 0 3 2 2 2 0 1 8 3 6 0 5 9 0 0 0
15.	 1 0 3 2 2 2 0 1 8 4 5 5 0 0 0 0 0
16.	 1 0 3 2 2 2 0 1 8 4 9 0 0 0 0 0 0
17.	 1 0 3 2 2 2 0 1 8 3 8 5 0 0 0 0 0
18.	 1 0 3 2 2 2 0 1 8 4 0 1 0 0 0 0 0
19.	 1 0 3 2 2 2 0 1 8 3 6 5 0 0 0 0 0
23.	 1 0 3 2 2 2 0 1 8 5 0 0 0 0 0 0 0
24.	 1 0 3 2 2 2 0 1 8 5 0 5 0 0 0 0 0
25.	 1 0 3 2 2 2 0 1 8 2 2 4 0 0 0 0 0
26.	 1 0 3 2 2 2 0 1 8 2 2 5 0 0 0 0 0
27.	 1 0 3 2 2 2 0 1 8 2 2 6 0 0 0 0 0
28.	 1 0 3 2 2 2 0 1 8 5 5 5 0 0 0 0 0
29.	 1 0 3 2 2 2 0 1 8 2 3 0 5 9 0 0 0
30.	 1 0 3 2 2 2 0 1 8 3 0 6 0 0 0 0 0
31.	 1 0 3 2 2 2 0 1 8 2 1 0 0 0 0 0 0
32.	 1 0 3 2 2 2 0 1 8 2 1 6 5 9 0 0 0
33.	 1 0 3 2 2 2 0 1 8 2 1 7 0 0 0 0 0
35.	 1 0 3 2 2 2 0 1 8 2 9 0 0 0 0 0 0
36.	 1 0 3 2 2 2 0 1 8 3 0 0 0 0 0 0 0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

OVERFLOW PAGE FOR WRITE-INS

P011 Additional Aggregate Lines for Page 11 Line 24.
*EXEXP - Underwriting and Investment - Part 3 - Expenses

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
2404. Deferred Compensation.....			3,029	3,029
2405. Investment Banking Fees.....			105,208	105,208
2497. Summary of remaining write-ins for Line 24 from page 11	0	0	108,237	108,237

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