



## PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

**ANNUAL STATEMENT  
For the Year Ended December 31, 2018  
OF THE CONDITION AND AFFAIRS OF THE  
GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

NAIC Group Code	00267 (Current Period)	00267 (Prior Period)	NAIC Company Code	11982	Employer's ID Number	42-1610213
Organized under the Laws of	Ohio		, State of Domicile or Port of Entry		Ohio	
Country of Domicile	United States					
Incorporated/Organized	04/01/2004		Commenced Business	05/21/2004		
Statutory Home Office	671 South High Street (Street and Number)		, Columbus, OH, US 43206-1014		(City or Town, State, Country and Zip Code)	
Main Administrative Office	671 South High Street (Street and Number)		Columbus, OH, US 43206-1014		614-445-2900 (Area Code) (Telephone Number)	
Mail Address	671 South High Street, P.O. Box 1218 (Street and Number or P.O. Box)		, Columbus, OH, US 43216-1218		(City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	671 South High Street (Street and Number)		Columbus, OH, US 43206-1014		614-445-2900 (Area Code) (Telephone Number)	
Internet Web Site Address	www.grangeinsurance.com					
Statutory Statement Contact	Jeffrey P Siefker (Name)		614-445-2900 (Area Code) (Telephone Number) (Extension)			
	siefkerj@grangeinsurance.com (E-Mail Address)		614-542-3017 (Fax Number)			

## OFFICERS

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

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## OTHER OFFICERS

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JOHN CHRISTOPHER MONTGOMERY VP - INVESTMENTS

## **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 of ..... Ohio .....

ss

County of .....Franklin.....

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

JOHN (NMN) AMMENDOLA  
PRESIDENT & CEO

LAVAWN DEE COLEMAN  
EVP & SECRETARY

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TERESA JEAN DALENTA  
EVP & CFO

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

Subscribed and sworn to before me  
this 25th day of February, 2019

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# ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY 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 11982			
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct	Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	0	0		0	0	0	0	0	0	0	0	0	0
2.1	Allied lines	0	0		0	0	0	0	0	0	0	0	0	0
2.2	Multiple peril crop	0	0		0	0	0	0	0	0	0	0	0	0
2.3	Federal flood	0	0		0	0	0	0	0	0	0	0	0	0
2.4	Private crop	0	0		0	0	0	0	0	0	0	0	0	0
2.5	Private flood	0	0		0	0	0	0	0	0	0	0	0	0
3.	Farmowners multiple peril	0	0		0	0	0	0	0	0	0	0	0	0
4.	Homeowners multiple peril	4,057,708	2,795,076		2,226,128	1,903,947	2,392,042	528,486	12,370	43,943	37,562	621,055	225,049	
5.1	Commercial multiple peril (non-liability portion)	0	0		0	0	0	0	0	0	0	0	0	0
5.2	Commercial multiple peril (liability portion)	0	0		0	0	0	0	0	0	0	0	0	0
6.	Mortgage guaranty	0	0		0	0	0	0	0	0	0	0	0	0
8.	Ocean marine	0	0		0	0	0	0	0	0	0	0	0	0
9.	Inland marine	42,758	32,592		21,280	21,874	22,220	.499	0	.73	.111	6,926	2,371	
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	1,055	911		.542	0	0	0	0	0	0	0	.176	.59
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-cancellable 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	66,392	.48,103		34,089	0	26,863	.31,843	0	.629	.756	.11,949	.3,682	
17.2	Other Liability-Claims-Made	0	0		0	0	0	0	0	0	0	0	0	0
17.3	Excess workers' compensation	0	0		0	0	0	0	0	0	0	0	0	0
18.	Products liability	0	0		0	0	0	0	0	0	0	0	0	0
19.1	Private passenger auto no-fault (personal injury protection)	0	0		0	0	0	0	0	0	0	0	0	0
19.2	Other private passenger auto liability	9,270,564	9,923,476		2,187,882	7,957,989	4,021,428	6,693,195	326,806	42,512	.812,229	1,508,772	514,166	
19.3	Commercial auto no-fault (personal injury protection)	0	0		0	0	0	0	0	0	0	0	0	0
19.4	Other commercial auto liability	0	0		0	0	0	0	0	0	0	0	0	0
21.1	Private passenger auto physical damage	4,642,859	5,098,770		1,054,018	2,390,225	2,497,252	131,869	4,852	.5,058	.2,490	.753,327	.257,503	
21.2	Commercial auto physical damage	0	0		0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)	0	0		0	0	0	0	0	0	0	0	0	0
23.	Fidelity	0	0		0	0	0	0	0	0	0	0	0	0
24.	Surety	0	0		0	0	0	0	0	0	0	0	0	0
26.	Burglary and theft	0	0		0	0	0	0	0	0	0	0	0	0
27.	Boiler and machinery	0	0		0	0	0	0	0	0	0	0	0	0
28.	Credit	0	0		0	0	0	0	0	0	0	0	0	0
30.	Warranty	0	0		0	0	0	0	0	0	0	0	0	0
34.	Aggregate write-ins for other lines of business	0	0		0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	18,081,338	17,898,927	0	5,523,939	12,274,036	8,959,804	7,385,893	344,028	92,217	853,147	2,902,204	1,002,830	
DETAILS OF WRITE-INS														
3401.														
3402.														
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 253,553

(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 PROPERTY & CASUALTY 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 11982				
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 1 Direct Premiums Written	4 2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	5 Unearned Premium Reserves	6 Direct Losses Paid (deducting salvage)	7 Direct Losses Incurred	8 Direct Losses Unpaid	9 Direct Defense and Cost Containment Expense Paid	10 Direct Defense and Cost Containment Expense Incurred	11 Direct Defense and Cost Containment Expense Unpaid
1.	Fire													
2.1	Allied lines													
2.2	Multiple peril crop													
2.3	Federal flood													
2.4	Private crop													
2.5	Private flood													
3.	Farmowners multiple peril													
4.	Homeowners multiple peril													
5.1	Commercial multiple peril (non-liability portion)													
5.2	Commercial multiple peril (liability portion)													
6.	Mortgage guaranty													
8.	Ocean marine													
9.	Inland marine													
10.	Financial guaranty													
11.	Medical professional liability													
12.	Earthquake													
13.	Group accident and health (b)													
14.	Credit A & H (group and individual)													
15.1	Collectively renewable A & H (b)													
15.2	Non-cancellable A & H (b)													
15.3	Guaranteed renewable A & H (b)													
15.4	Non-renewable for stated reasons only (b)													
15.5	Other accident only													
15.6	Medicare Title XVIII exempt from state taxes or fees													
15.7	All other A & H (b)													
15.8	Federal Employees Health Benefits Plan premium (b)													
16.	Workers' compensation													
17.1	Other liability-Occurrence													
17.2	Other Liability-Claims-Made													
17.3	Excess workers' compensation													
18.	Products liability													
19.1	Private passenger auto no-fault (personal injury protection)													
19.2	Other private passenger auto liability													
19.3	Commercial auto no-fault (personal injury protection)													
19.4	Other commercial auto liability													
21.1	Private passenger auto physical damage													
21.2	Commercial auto physical damage													
22.	Aircraft (all perils)													
23.	Fidelity													
24.	Surety													
26.	Burglary and theft													
27.	Boiler and machinery													
28.	Credit													
30.	Warranty													
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	0	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS														
3401.														
3402.														
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

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



**ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY 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 11982		
		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
Line of Business													
1. Fire		0	0			0	0	0	0	0	0	0	0
2.1 Allied lines		0	0			0	0	0	0	0	0	0	0
2.2 Multiple peril crop		0	0			0	0	0	0	0	0	0	0
2.3 Federal flood		0	0			0	0	0	0	0	0	0	0
2.4 Private crop		0	0			0	0	0	0	0	0	0	0
2.5 Private flood		0	0			0	0	0	0	0	0	0	0
3. Farmowners multiple peril		0	0			0	0	0	0	0	0	0	0
4. Homeowners multiple peril		7,731,898	6,597,722			4,204,434	2,572,286	2,559,234	451,414	24,725	53,490	53,392	1,167,947
5.1 Commercial multiple peril (non-liability portion)		0	0			0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion)		0	0			0	0	0	0	0	0	0	0
6. Mortgage guaranty		0	0			0	0	0	0	0	0	0	0
8. Ocean marine		0	0			0	0	0	0	0	0	0	0
9. Inland marine		89,301	74,088			45,366	11,391	18,985	8,534	175	160	260	14,243
10. Financial guaranty		0	0			0	0	0	0	0	0	0	0
11. Medical professional liability		0	0			0	0	0	0	0	0	0	0
12. Earthquake		57,989	54,051			31,353	0	0	0	0	0	0	8,855
13. Group accident and health (b)		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
15.1 Collectively renewable A & H (b)		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
15.3 Guaranteed renewable A & H (b)		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
15.5 Other accident only		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
15.7 All other A & H (b)		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
16. Workers' compensation		0	0			0	0	0	0	0	0	0	0
17.1 Other liability-Occurrence		75,952	62,613			37,930	0	20,437	42,732	0	446	1,015	13,608
17.2 Other Liability-Claims-Made		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
18. Products liability		0	0			0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection)		0	0			0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability		0	0			0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection)		0	0			0	0	0	0	0	0	0	0
19.4 Other commercial auto liability		0	0			0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage		0	0			0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage		0	0			0	0	0	0	0	0	0	0
22. Aircraft (all perils)		0	0			0	0	0	0	0	0	0	0
23. Fidelity		0	0			0	0	0	0	0	0	0	0
24. Surety		0	0			0	0	0	0	0	0	0	0
26. Burglary and theft		0	0			0	0	0	0	0	0	0	0
27. Boiler and machinery		0	0			0	0	0	0	0	0	0	0
28. Credit		0	0			0	0	0	0	0	0	0	0
30. Warranty		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
35. TOTAL (a)		7,955,140	6,788,475	0	4,319,083	2,583,677	2,598,656	502,679	24,900	54,097	54,666	1,204,653	147,831
<b>DETAILS OF WRITE-INS</b>													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page		0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 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 \$ 65,053

(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 PROPERTY & CASUALTY 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 11982			
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned	Unearned Premium Reserves											
1.	Fire	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied lines	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple peril crop	0	0	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	0	0
2.4	Private crop	0	0	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	0	0
3.	Farmowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners multiple peril	5,161,698	4,764,321	2,713,381	1,967,973	2,167,906	488,250	22,020	51,626	61,414	790,728	.84,110	0	0	0
5.1	Commercial multiple peril (non-liability portion)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial multiple peril (liability portion)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage guaranty	0	0	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	0	0
9.	Inland marine	56,770	51,940	30,447	42,426	49,355	7,567	.100	.73	.185	9,038	.5,298	0	0	
10.	Financial guaranty	0	0	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	0	0
12.	Earthquake	96,835	.89,018	53,058	0	0	0	0	0	0	0	0	0	15,437	.9,038
13.	Group accident and health (b)	0	0	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	0	0
15.1	Collectively renewable A & H (b)	0	0	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	0	0
15.3	Guaranteed renewable A & H (b)	0	0	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	0	0
15.5	Other accident only	0	0	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	0	0
15.7	All other A & H (b)	0	0	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	0	0
16.	Workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other liability-Occurrence	103,675	.92,128	54,982	0	22,374	.64,318	0	458	1,528	.18,069	.9,676	0	0	0
17.2	Other Liability-Claims-Made	0	0	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	0	0
18.	Products liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private passenger auto no-fault (personal injury protection)	2,991,790	3,052,340	1,130,861	1,430,568	1,492,947	237,803	136,504	205,116	.278,067	459,112	.279,226	0	0	0
19.2	Other private passenger auto liability	16,340,656	16,538,529	6,202,609	11,505,325	12,488,615	12,621,000	506,640	.520,079	2,000,873	2,509,244	(543,204)	0	0	0
19.3	Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other commercial auto liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private passenger auto physical damage	10,944,779	11,310,158	4,039,832	5,593,925	5,764,616	252,522	5,520	.7,537	.5,388	1,686,563	1,021,486	0	0	0
21.2	Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity	0	0	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	0	0
26.	Burglary and theft	0	0	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	0	0
28.	Credit	0	0	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	0	0
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	35,696,203	35,898,435	0	14,225,170	20,540,218	21,985,813	13,671,460	670,785	784,888	2,347,455	5,488,193	865,630	0	0
DETAILS OF WRITE-INS															
3401.															
3402.															
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 310,030

(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 PROPERTY & CASUALTY 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 11982		
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned											
1.	Fire	0	0	0	0	0	0	0	0	106	106	0	0	
2.1	Allied lines	0	0	0	0	0	0	0	0	37	37	0	0	
2.2	Multiple peril crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.3	Federal flood	0	0	0	0	0	0	0	0	0	0	0	0	
2.4	Private crop	0	0	0	0	0	0	0	0	0	0	0	0	
2.5	Private flood	0	0	0	0	0	0	0	0	0	0	0	0	
3.	Farmowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0	
4.	Homeowners multiple peril	71,758,398	76,487,301	36,974,394	34,899,537	33,235,778	7,358,398	496,103	380,881	676,434	11,897,035	1,176,312	0	
5.1	Commercial multiple peril (non-liability portion)	0	0	0	0	0	0	0	0	0	0	0	0	
5.2	Commercial multiple peril (liability portion)	0	0	0	0	0	0	0	0	0	0	0	0	
6.	Mortgage guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
8.	Ocean marine	0	0	0	0	0	0	0	0	0	0	0	0	
9.	Inland marine	2,079,436	2,190,821	1,035,432	617,256	554,571	50,793	5,802	(2,426)	8,027	346,743	34,088	0	
10.	Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0	
11.	Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0	
12.	Earthquake	429,574	456,894	219,708	0	0	0	0	0	557	557	0	72,015	
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	1,824,182	1,954,906	912,006	257,813	(43,790)	1,423,077	1,357	(8,726)	33,507	309,012	29,903	0	
17.2	Other Liability-Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0	
17.3	Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0	
18.	Products liability	0	0	0	0	0	0	0	0	0	0	0	0	
19.1	Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.2	Other private passenger auto liability	38,096,986	38,930,676	8,996,153	28,548,528	22,739,000	28,795,530	1,113,321	572,399	3,132,919	6,357,709	624,511	0	
19.3	Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0	
19.4	Other commercial auto liability	0	0	0	0	0	0	0	0	0	0	0	0	
21.1	Private passenger auto physical damage	34,710,768	36,145,974	8,044,383	19,124,171	19,953,365	695,390	26,734	32,759	16,811	5,797,555	569,002	0	
21.2	Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0	
22.	Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0	
24.	Surety	0	0	0	0	0	0	0	0	0	0	0	0	
26.	Burglary and theft	0	0	0	0	0	0	0	0	0	0	0	0	
27.	Boiler and machinery	0	0	0	0	0	0	0	0	0	0	0	0	
28.	Credit	0	0	0	0	0	0	0	0	0	0	0	0	
30.	Warranty	0	0	0	0	0	0	0	0	0	0	0	0	
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	
35.	TOTAL (a)	148,899,343	156,166,571	0	56,182,077	83,447,305	76,438,923	38,323,187	1,644,016	975,587	3,867,697	24,780,071	2,440,858	
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 \$ 2,217,912

(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 PROPERTY & CASUALTY INSURANCE COMPANY**

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

19.

(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 PROPERTY & CASUALTY 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 11982				
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied lines													
2.2	Multiple peril crop													
2.3	Federal flood													
2.4	Private crop													
2.5	Private flood													
3.	Farmowners multiple peril													
4.	Homeowners multiple peril													
5.1	Commercial multiple peril (non-liability portion)													
5.2	Commercial multiple peril (liability portion)													
6.	Mortgage guaranty													
8.	Ocean marine													
9.	Inland marine													
10.	Financial guaranty													
11.	Medical professional liability													
12.	Earthquake													
13.	Group accident and health (b)													
14.	Credit A & H (group and individual)													
15.1	Collectively renewable A & H (b)													
15.2	Non-cancellable A & H (b)													
15.3	Guaranteed renewable A & H (b)													
15.4	Non-renewable for stated reasons only (b)													
15.5	Other accident only													
15.6	Medicare Title XVIII exempt from state taxes or fees													
15.7	All other A & H (b)													
15.8	Federal Employees Health Benefits Plan premium (b)													
16.	Workers' compensation													
17.1	Other liability-Occurrence													
17.2	Other Liability-Claims-Made													
17.3	Excess workers' compensation													
18.	Products liability													
19.1	Private passenger auto no-fault (personal injury protection)													
19.2	Other private passenger auto liability													
19.3	Commercial auto no-fault (personal injury protection)													
19.4	Other commercial auto liability													
21.1	Private passenger auto physical damage													
21.2	Commercial auto physical damage													
22.	Aircraft (all perils)													
23.	Fidelity													
24.	Surety													
26.	Burglary and theft													
27.	Boiler and machinery													
28.	Credit													
30.	Warranty													
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	0	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS														
3401.														
3402.														
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

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



**ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY 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 11982			
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned	Unearned Premium Reserves											
1.	Fire	0	0	0	0	0	0	0	0	0	106	106	0	0	0
2.1	Allied lines	0	0	0	0	0	0	0	0	0	37	37	0	0	0
2.2	Multiple peril crop	0	0	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	0	0
2.4	Private crop	0	0	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	0	0
3.	Farmowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners multiple peril	88,709,702	90,644,419	0	46,118,337	41,343,745	40,354,959	8,826,547	555,218	529,941	828,802	14,476,765	1,629,154		
5.1	Commercial multiple peril (non-liability portion)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial multiple peril (liability portion)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage guaranty	0	0	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	0	0
9.	Inland marine	2,268,266	2,349,441	0	1,132,526	692,946	645,131	67,393	6,077	(2,120)	8,582	376,951	43,417		
10.	Financial guaranty	0	0	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	0	0
12.	Earthquake	585,452	600,874	0	304,662	0	0	0	0	0	557	557	0	96,483	17,216
13.	Group accident and health (b)	0	0	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	0	0
15.1	Collectively renewable A & H (b)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Non-cancellable A & H (b)	0	0	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	0	0
15.4	Non-renewable for stated reasons only (b)	0	0	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	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	0	0
15.7	All other A & H (b)	0	0	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	0	0
16.	Workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other liability-Occurrence	2,070,202	2,157,750	0	1,039,006	257,813	25,884	1,561,970	1,357	(7,192)	36,805	352,638	44,673		
17.2	Other Liability-Claims-Made	0	0	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	0	0
18.	Products liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private passenger auto no-fault (personal injury protection)	2,991,790	3,052,340	0	1,130,861	1,430,568	1,492,947	237,803	136,504	205,116	278,067	459,112	279,226		
19.2	Other private passenger auto liability	63,708,206	65,392,680	0	17,386,644	48,011,843	39,249,043	48,109,725	1,946,767	1,134,991	5,946,021	10,375,726	595,473		
19.3	Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other commercial auto liability	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private passenger auto physical damage	50,298,406	52,554,902	0	13,138,233	27,108,321	28,215,233	1,079,781	37,106	45,354	24,689	8,237,445	1,847,991		
21.2	Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity	0	0	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	0	0
26.	Burglary and theft	0	0	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	0	0
28.	Credit	0	0	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	0	0
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	210,632,024	216,752,407	0	80,250,269	118,845,235	109,983,197	59,883,219	2,683,729	1,906,789	7,122,966	34,375,120	4,457,150		
DETAILS OF WRITE-INS															
3401.															
3402.															
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 2,846,548

(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 PROPERTY & CASUALTY INSURANCE COMPANY**

**SCHEDULE F - PART 1**

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 +7							
Pools and Associations - Mandatory Pools, Associations or Other Similar Facilities														
AA-9991222	00000	OHIO FAIR PLAN	OH	338		66	66			172				
AA-9991205	00000	GEORGIA FAIR PLAN	GA	6		1	1			4				
1099999 - Pools and Associations - Mandatory Pools, Associations or Other Similar Facilities				344	0	66	66	0	0	176	0	0	0	0
1299999 - Pools and Associations - Total Pools and Associations				344	0	66	66	0	0	176	0	0	0	0
9999999 Totals				344	0	66	66	0	0	176	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

## **SCHEDULE F - PART 2**

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

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY 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	Reinsurance Payable		19 Net Amount Recover- able From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Cols. 7 through 14 Totals	16 Amount in Dispute Included in Column 15	17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers			
<b>Authorized - Affiliates - U.S. Intercompany Pooling</b>																				
31-4192970	14060	GRANGE MUT CAS CO	OH		205,656			39,013	9,760	20,937	5,238	80,381		155,329					155,329	
<b>0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling</b>						205,656	0	0	39,013	9,760	20,937	5,238	80,381	0	155,329	0	0	0	155,329	
<b>0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates</b>						205,656	0	0	39,013	9,760	20,937	5,238	80,381	0	155,329	0	0	0	155,329	
<b>Authorized - Other U.S. Unaffiliated Insurers</b>																				
42-0234980	21415	EMPLOYERS MUT CAS CO	IA		.75										0				0	
35-2293075	11551	ENDURANCE ASSUR CORP	DE		.98										0				0	
22-2005057	26921	EVEREST REINS CO	DE		.352										0				0	
13-2673100	22039	GENERAL REINS CORP	DE		.54										0				0	
06-0384680	11452	HARTFORD STEAM BOIL INSPEC & INS CO	CT		.61									.35		.35			.35	
13-4924125	10227	MUNICH REINS AMER INC	DE		.902									0				0		
13-3138390	42307	NAVIGATORS INS CO	NY		.64									0				0		
23-1641984	10219	QBE REINS CORP	PA		.10									0				0		
52-1952955	10357	RENAISSANCE REINS US INC	MD		.238									0				0		
43-0727872	15105	SAFETY NATL CAS CORP	MO		.27									0				0		
13-1675535	25364	SWISS REINS AMER CORP	NY		.427									0				0		
13-5616275	19453	TRANSATLANTIC REINS CO	NY		.139									0				0		
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers					2,446	0	0	0	0	0	0	0	35	0	35	0	0	0	35	
<b>Authorized - Pools - Mandatory Pools</b>																				
AA-9991501	00000	INDIANA MINE SUBSIDENCE FUND	IN		1									0		0			0	
AA-9991502	00000	KENTUCKY MINE SUBSIDENCE FUND	KY		1									0		0			0	
AA-9991503	00000	OHIO MINE SUBSIDENCE FUND	OH		.19									.10		.10			.10	
1099999 - Total Authorized - Pools - Mandatory Pools					21	0	0	0	0	0	0	0	11	0	11	0	0	0	11	
<b>Authorized - Other Non-U.S. Insurers</b>																				
AA-1126033	00000	LLOYD'S SYNDICATE NUMBER 33	GBR		.177									0					0	
AA-1126435	00000	LLOYD'S SYNDICATE NUMBER 435	GBR		.69									0					0	
AA-1126510	00000	LLOYD'S SYNDICATE NUMBER 510	GBR		.19									0					0	
AA-1126566	00000	LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)	GBR		.6									0					0	
AA-1126623	00000	LLOYD'S SYNDICATE NUMBER 623	GBR		.18									0					0	
AA-1126780	00000	LLOYD'S SYNDICATE NUMBER 780	GBR		.5									0					0	
AA-1127084	00000	LLOYD'S SYNDICATE NUMBER 1084	GBR		.142									0					0	
AA-1120157	00000	LLOYD'S SYNDICATE NUMBER 1729	GBR		.10									0					0	
AA-1120171	00000	Lloyd's Syndicate Number 1856	GBR		.12									0					0	
AA-1120084	00000	Lloyd's Syndicate Number 1955	GBR		.5									0					0	
AA-1120106	00000	Lloyd's Syndicate Number 1969	GBR		.27									0					0	
AA-1128001	00000	LLOYD'S SYNDICATE NUMBER 2001	GBR		.201									0					0	
AA-1128003	00000	LLOYD'S SYNDICATE NUMBER 2003	GBR		.157									0					0	
AA-1120071	00000	Lloyd's Syndicate Number 2007	GBR		.16									0					0	
AA-1128010	00000	LLOYD'S SYNDICATE NUMBER 2010	GBR		.29									0					0	
AA-1120158	00000	LLOYD'S SYNDICATE NUMBER 2014	GBR		.12									0					0	
AA-1128623	00000	Lloyd's Syndicate Number 2623	GBR		.80									0					0	
AA-1128791	00000	LLOYD'S SYNDICATE NUMBER 2791	GBR		.79									0					0	
AA-1126006	00000	Lloyd's Syndicate Number 4472	GBR		.12									0					0	
AA-1120181	00000	Lloyd's Syndicate Number 5886	GBR		.12									0					0	
AA-3194168	00000	Aspen Bermuda Ltd	BMU		.200									0					0	
AA-1340125	00000	HANNOVER RUECK SE	DEU		.271									0					0	
AA-1840000	00000	MAPFRE RE COMPANIA DE REASEGUROS SA	ESP		.42									0					0	
AA-3190829	00000	Markel Bermuda Ltd	BMU		.4									0					0	
AA-3190870	00000	Validus Reins Ltd	BMU		.58									0					0	
1299999 - Total Authorized - Other Non-U.S. Insurers					1,666	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)					209,788	0	0	39,013	9,760	20,937	5,238	80,426	0	155,374	0	0	0	0	155,374	
<b>Unauthorized - Other non-U.S. Insurers</b>																				
AA-3194126	00000	Arch Reins Ltd	BMU		.244									0					0	
AA-3190770	00000	Chubb Tempest Reins Ltd	BMU		.150									0					0	
AA-9240012	00000	CHINA PROP & CAS REINS CO LTD	CHN		.15									0					0	
AA-3194130	00000	Endurance Specialty Ins Ltd	BMU		.13									0					0	
AA-3191289	00000	Fidelis Ins Bermuda Ltd	BMU		.2									0					0	

**ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY 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	Reinsurance Payable		19 Net Amount Recover- able From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commiss- sions	15 Cols. 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
AA-5340310.	00000	GEN INS CORP OF INDIA.....	IND.		.10										0			0	
AA-3191190.	00000	Hamilton Re Ltd.....	BMU.		.34										0			0	
AA-3190875.	00000	Hiscox Ins Co (Bermuda) Ltd.....	BMU.		329										0			0	
AA-1460019.	00000	MS AmLin AG.....	CHE.		143										0			0	
AA-3194200.	00000	MS FRONTIER REINS LTD.....	BMU.		6										0			0	
AA-3191298.	00000	Qatar Reins Co Ltd.....	BMU.		.13										0			0	
AA-3190757.	00000	XL Re Ltd.....	BMU.		156										0			0	
AA-1440076.	00000	SIRIUS INTL INS CORP.....	SWE.		.11										0			0	
AA-5324100.	00000	TAIPING REINS CO LTD.....	HKG.		26										0			0	
AA-1460023.	00000	Tokio Millennium Re AG.....	CHE.		.36										0			0	
2699999 - Total Unauthorized - Other Non-U.S. Insurers						1,188	0	0	0	0	0	0	0	0	0	0	0	0	
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)						1,188	0	0	0	0	0	0	0	0	0	0	0	0	
4399999 - Total Authorized, Unauthorized and Certified (Sum of 1499999, 2899999 and 4299999)						210,976	0	0	39,013	9,760	20,937	5,238	80,426	0	155,374	0	0	155,374	
9999999 Totals						210,976	0	0	39,013	9,760	20,937	5,238	80,426	0	155,374	0	0	155,374	

**ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY 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 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of (Col. 28 * 120%)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of (Col. 29)	31 Stressed Net Recoverable (Cols. 29 - 30)	32 Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	34 Reinsurer Designation Equivalent	35 Credit Risk Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	
Authorized - Affiliates - U.S. Intercompany Pooling																		
31-4192970	GRANGE MUT CAS CO					0	155,329		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999	- Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	XXX	0	0	155,329		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999	- Total Authorized - Affiliates - Total Authorized - Affiliates	0	0	XXX	0	0	155,329		0	0	0	0	0	0	0	XXX	0	0
Authorized - Other U.S. Unaffiliated Insurers																		
42-0234980	EMPLOYERS MUT CAS CO					0	0	0	0	0	0	0	0	0	0	0	0	0
35-2293075	ENDURANCE ASSUR CORP					0	0	0	0	0	0	0	0	0	0	0	0	0
22-2005057	EVEREST REINS CO					0	0	0	0	0	0	0	0	0	0	0	0	0
13-2673100	GENERAL REINS CORP					0	0	0	0	0	0	0	0	0	0	0	0	0
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO					0	35	0	35	42	0	0	42	0	42	0	1	0
13-4924125	MUNICH REINS AMER INC					0	0	0	0	0	0	0	0	0	0	0	0	0
13-3138390	NAVIGATORS INS CO					0	0	0	0	0	0	0	0	0	0	0	0	0
23-1641984	QBE REINS CORP					0	0	0	0	0	0	0	0	0	0	0	0	0
52-1952955	RENAISSANCE REINS US INC					0	0	0	0	0	0	0	0	0	0	0	0	0
43-0727872	SAFETY NATL CAS CORP					0	0	0	0	0	0	0	0	0	0	0	0	0
13-1675535	SWISS REINS AMER CORP					0	0	0	0	0	0	0	0	0	0	0	0	0
13-5616275	TRANSATLANTIC REINS CO					0	0	0	0	0	0	0	0	0	0	0	0	0
0999999	- Total Authorized - Other U.S. Unaffiliated Insurers	0	0	XXX	0	0	35	0	35	42	0	0	42	0	42	XXX	0	1
Authorized - Pools - Mandatory Pools																		
AA-9991501	INDIANA MINE SUBSIDENCE FUND					0	0	0	XXX	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	XXX
AA-9991503	OHIO MINE SUBSIDENCE FUND					0	10	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999	- Total Authorized - Pools - Mandatory Pools	0	0	XXX	0	0	11	0	XXX	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	0	0	0	0
AA-1126435	LLOYD'S SYNDICATE NUMBER 435					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1126510	LLOYD'S SYNDICATE NUMBER 510					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1126566	LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1126623	LLOYD'S SYNDICATE NUMBER 623					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1126780	LLOYD'S SYNDICATE NUMBER 780					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1120157	LLOYD'S SYNDICATE NUMBER 1729					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1120171	Lloyd's Syndicate Number 1856					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1120084	Lloyd's Syndicate Number 1955					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1120106	Lloyd's Syndicate Number 1969					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1120071	Lloyd's Syndicate Number 2007					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1120158	LLOYD'S SYNDICATE NUMBER 2014					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1128623	Lloyd's Syndicate Number 2623					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1126006	Lloyd's Syndicate Number 4472					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1120181	Lloyd's Syndicate Number 5886					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-3194168	Aspen Bermuda Ltd					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1340125	HANNOVER RUECK SE					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1840000	MAPFRE RE COMPANIA DE REASEGUROS SA					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-3190829	Markel Bermuda Ltd					0	0	0	0	0	0	0	0	0	0	0	0	0
AA-3190870	Validus Reins Ltd					0	0	0	0	0	0	0	0	0	0	0	0	0
1299999	- Total Authorized - Other Non-U.S. Insurers	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0

**ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY 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										35	36
		21	22	23	24				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)	28	29	30	31	32	33	34
1499999 - Total Authorized Excluding Protected Cells (Sum of 089999, 099999, 109999, 119999 and 129999)		0	0	XXX	0	0	155,374		0	35	42		0	42	0	42	XXX	0	1	
Unauthorized - Other non-U.S. Insurers																				
AA-3194126	Arch Reins Ltd.					0	0	0	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	0	0	0	1	0	0
AA-9240012	CHINA PROP & CAS REINS CO LTD.					0	0	0	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	0	0	0	3	0	0
AA-3191289	Fidelis Ins Bermuda Ltd.					0	0	0	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	0	0	0	4	0	0
AA-3191190	Hamilton Re Ltd.					0	0	0	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	0	0	0	3	0	0
AA-1460019	MS Am1in AG					0	0	0	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	0	0	0	3	0	0
AA-3191298	Qatar Reins Co Ltd.					0	0	0	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	0	0	0	3	0	0
AA-1440076	SIRIUS INTL INS CORP					0	0	0	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	0	0	0	3	0	0
AA-1460023	Tokio Millennium Re AG					0	0	0	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	0	0	XXX	0	0	0
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 229999, 239999, 249999, 259999 and 269999)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0	0
4399999 - Total Authorized, Unauthorized and Certified (Sum of 149999, 289999 and 429999)		0	0	XXX	0	0	155,374		0	35	42	0	42	0	42	XXX	0	1		
9999999 Totals		0	0	XXX	0	0	155,374		0	35	42	0	42	0	42	XXX	0	0	1	

**ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY 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	45	46	47	48	49	50	51	52	53											
		37	Overdue																									
			38	39	40	41	42																					
								Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 43 – 44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 50/ Col. 43)	Is the Amount in Col. 50 Less Than 20% (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50												
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)	Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 43 – 44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 50/ Col. 43)	Is the Amount in Col. 50 Less Than 20% (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50													
Authorized - Affiliates - U.S. Intercompany Pooling	GRANGE MUT CAS CO.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
31-4192970	GRANGE MUT CAS CO.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0												
0899999	Total Authorized - Affiliates - Total Authorized - Affiliates	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0												
Authorized - Other U.S. Unaffiliated Insurers																												
42-0234980	EMPLOYERS MUT CAS CO.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
35-2293075	ENDURANCE ASSUR CORP.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
22-2005057	EVEREST REINS CO.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
13-2673100	GENERAL REINS CORP.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
13-4924125	MUNICH REINS AMER INC.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
13-3138390	NAVIGATORS INS CO.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
23-1641984	QBE REINS CORP.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
52-1952955	RENAISSANCE REINS US INC.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
43-0727872	SAFETY NATL CAS CORP.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
13-1675535	SWISS REINS AMER CORP.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
13-5616275	TRANSATLANTIC REINS CO.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0												
Authorized - Pools - Mandatory Pools																												
AA-9991501	INDIANA MINE SUBSIDENCE FUND					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-9991503	OHIO MINE SUBSIDENCE FUND					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
1099999	Total Authorized - Pools - Mandatory Pools	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0												
Authorized - Other Non-U.S. Insurers																												
AA-1126033	LLOYD'S SYNDICATE NUMBER 33					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1126435	LLOYD'S SYNDICATE NUMBER 435					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1126510	LLOYD'S SYNDICATE NUMBER 510					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1126566	LLOYD'S SYNDICATE NUMBER 566 (Incidental to 2999)					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1126623	LLOYD'S SYNDICATE NUMBER 623					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1126780	LLOYD'S SYNDICATE NUMBER 780					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1120157	LLOYD'S SYNDICATE NUMBER 1729					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1120171	Lloyd's Syndicate Number 1856					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1120084	Lloyd's Syndicate Number 1955					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1120106	Lloyd's Syndicate Number 1969					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1120071	Lloyd's Syndicate Number 2007					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1120158	LLOYD'S SYNDICATE NUMBER 2014					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1128623	Lloyd's Syndicate Number 2623					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1126006	Lloyd's Syndicate Number 4472					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1120181	Lloyd's Syndicate Number 5886					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-3194168	Aspen Bermuda Ltd.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1340125	HANNOVER RUECK SE					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-1840000	MAPFRE RE COMPANIA DE REASEGUROS SA					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-3190829	Markel Bermuda Ltd.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												
AA-3190870	Validus Reins Ltd.					0	0	0	0	0	0	0.000	0.000	0.000	YES	0												

**ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY 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 Over 90 Days Past Due Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Col. 40 & 41	46 Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 43 – 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 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/ [Col. 46 + 48])	51 Percentage More Than 120 Days Overdue (Col. 50 Less Than 20% (Yes or No)	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 Current	Overdue																								
			38 1 – 29 Days	39 30 – 90 Days	40 91 – 120 Days	41 Over 120 Days	42 Total Due Cols. 37 + 42																				
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 089999, 099999, 109999, 119999 and 129999)		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								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-3194126.. Arch Reins Ltd.								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-3190770.. Chubb Tempest Reins Ltd.								0	0	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	0	0.000	0.000	0.000	YES	0									
AA-3194130.. Endurance Specialty Ins Ltd.								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-3191289.. Fidelis Ins Bermuda Ltd.								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-5340310.. GEN INS CORP OF INDIA...								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-3191190.. Hamilton Re Ltd.....								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-3190875.. Hiscox Ins Co (Bermuda) Ltd.								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-1460019.. MS Am1in AG								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-3194200.. MS FRONTIER REINS LTD.								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-3191298.. Qatar Reins Co Ltd.								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-3190757.. XL Re Ltd.								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-1440076.. SIRIUS INTL INS CORP								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-5324100.. TAIPING REINS CO LTD.								0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
AA-1460023.. Tokio Millennium Re AG								0	0	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 229999, 239999, 249999, 259999 and 269999)		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 149999, 289999 and 429999)		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 PROPERTY & CASUALTY 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															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	GRANGE MUT CAS CO.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
31-4192970	GRANGE MUT CAS CO.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Authorized - Other U.S. Unaffiliated Insurers																	
42-0234980	EMPLOYERS MUT CAS CO.	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	
22-2005057	EVEREST REINS CO.	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	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO.	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	
13-3138390	NAVIGATORS INS CO.	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	
52-1952955	RENAISSANCE REINS US INC.	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	
13-1675535	SWISS REINS AMER CORP.	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	
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Authorized - Pools - Mandatory Pools																	
AA-9991501	INDIANA MINE SUBSIDENCE FUND	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	
AA-9991503	OHIO MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999 - Total Authorized - Pools - Mandatory Pools		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
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	
AA-1126435	LLOYD'S SYNDICATE NUMBER 435	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	
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	
AA-1126623	LLOYD'S SYNDICATE NUMBER 623	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	
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084	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	
AA-1120171	Lloyd's Syndicate Number 1856	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	
AA-1120106	Lloyd's Syndicate Number 1969	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	
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003	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	
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010	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	
AA-1128623	Lloyd's Syndicate Number 2623	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	
AA-1126006	Lloyd's Syndicate Number 4472	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	
AA-3194168	Aspen Bermuda Ltd.	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	
AA-1840000	MAPFRE RE COMPANIA DE REASEGUROS SA.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY 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															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	Complete if Col. 52 = "No"; Otherwise Enter 0				
		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-3190929.....	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, 099999, 109999, 119999 and 129999)		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 PROF & 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 Am1in 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 PROPERTY & CASUALTY 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	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
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										
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-9991501	INDIANA 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 PROPERTY & CASUALTY 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	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
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 PROPERTY & CASUALTY 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 PROPERTY & CASUALTY 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:

	<u>1</u> Name of Reinsurer	<u>2</u> Commission Rate	<u>3</u> Ceded Premium
1.	GRANGE MUT CAS CO.....		205,655,518
2.	MUNICH REINS AMER INC.....		,902,226
3.	SWISS REINS AMER CORP.....		,426,660
4.	EVEREST REINS CO.....		,351,684
5.	Hiscox Ins Co (Bermuda) Ltd.....		,329,249

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.

	<u>1</u> Name of Reinsurer	<u>2</u> Total Recoverables	<u>3</u> Ceded Premiums	<u>4</u> Affiliated
6.	GRANGE MUT CAS CO.....	,155,328,839	205,655,518	Yes [ X ] No [ ]
7.	HARTFORD STEAM BOIL INSPEC & INS CO.....	,34,694	,60,508	Yes [ ] No [ X ]
8.	OHIO MINE SUBSIDENCE FUND.....	,9,768	,19,014	Yes [ ] No [ X ]
9.	KENTUCKY MINE SUBSIDENCE FUND.....	,496	,1,066	Yes [ ] No [ X ]
10.	INDIANA MINE SUBSIDENCE FUND.....	,284	,895	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)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	44,340,625		44,340,625
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 .....	871,896		871,896
6. Net amount recoverable from reinsurers .....		155,363,529	155,363,529
7. Protected cell assets (Line 27) .....	0		0
8. Totals (Line 28) .....	45,212,521	155,363,529	200,576,050
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	0	74,947,787	74,947,787
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	142,308		142,308
11. Unearned premiums (Line 9) .....	0	80,415,742	80,415,742
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) .....	142,308	155,363,529	155,505,837
20. Protected cell liabilities (Line 27) .....	0		0
21. Surplus as regards policyholders (Line 37) .....	45,070,213	XXX	45,070,213
22. Totals (Line 38) .....	45,212,521	155,363,529	200,576,050

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**

# ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

## SCHEDULE P INTERROGATORIES

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

1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost?

Yes [ ] No [ X ]

If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:

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

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

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

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

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

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior .....		
1.602 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 .....

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

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

Allocated By States and Territories

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

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**

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

Asterisk	Explanation
*	Indicates a required field.

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

## SCHEDULE Y

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

# ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	<b>MARCH FILING</b>	<b>RESPONSES</b>
1.	Will an actuarial opinion be filed by March 1?	.....YES.....
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	.....YES.....
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	.....YES.....
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	.....YES.....
	<b>APRIL FILING</b>	
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	.....YES.....
6.	Will Management's Discussion and Analysis be filed by April 1?	.....YES.....
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	.....YES.....
	<b>MAY FILING</b>	
8.	Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	.....YES.....
	<b>JUNE FILING</b>	
9.	Will an audited financial report be filed by June 1?	.....YES.....
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	.....YES.....
	<b>AUGUST FILING</b>	
11.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	.....YES.....
<p>The following supplemental reports are required to be filed as part of your statement filing <b>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.</b> If the supplement is required of your company but is not being filed for whatever reason, enter <b>SEE EXPLANATION</b> and provide an explanation following the interrogatory questions.</p>		
	<b>MARCH FILING</b>	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	.....NO.....
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	.....NO.....
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	.....NO.....
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	.....NO.....
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	.....NO.....
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	.....NO.....
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	.....YES.....
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	.....YES.....
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	.....YES.....
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	.....NO.....
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	.....NO.....
27.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	.....NO.....

**ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY 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

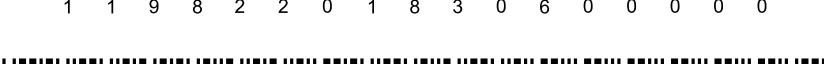
33. No business written

35. No business written

36. No business written

**Bar Code:**

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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

**ANNUAL STATEMENT FOR THE YEAR 2018 OF THE GRANGE PROPERTY & CASUALTY INSURANCE COMPANY**  
**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 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
2404. Deferred Compensation.....			2,325	2,325
2405. Investment Banking Fees.....			80,758	80,758
2497. Summary of remaining write-ins for Line 24 from page 11	0	0	83,082	83,082

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