



ANNUAL STATEMENT

For the Year Ended December 31, 2018

of the Condition and Affairs of the

MICO INSURANCE COMPANY

NAIC Group Code.....	291, 291	NAIC Company Code.....	40932	Employer's ID Number.....	31-1022150
	(Current Period) (Prior Period)				
Organized under the Laws of OH		State of Domicile or Port of Entry OH		Country of Domicile	US
Incorporated/Organized.....	November 30, 1981	Commenced Business.....	December 3, 1981		
Statutory Home Office	471 EAST BROAD STREET .. COLUMBUS .. OH .. US .. 43215 (Street and Number) (City or Town, State, Country and Zip Code)				
Main Administrative Office	471 EAST BROAD STREET .. COLUMBUS .. OH .. US .. 43215 (Street and Number) (City or Town, State, Country and Zip Code)			614-225-8211 (Area Code) (Telephone Number)	
Mail Address	471 EAST BROAD STREET .. COLUMBUS .. OH .. US .. 43215 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)				
Primary Location of Books and Records	471 EAST BROAD STREET .. COLUMBUS .. OH .. US .. 43215 (Street and Number) (City or Town, State, Country and Zip Code)			614-225-8211 (Area Code) (Telephone Number)	
Internet Web Site Address	MOTORISTSINSURANCEGROUP.COM				
Statutory Statement Contact	AMY E KUHLMAN (Name)			614-225-8285 (Area Code) (Telephone Number) (Extension)	
	ACCOUNTING@MOTORISTSGROUP.COM (E-Mail Address)			614-225-8330 (Fax Number)	

OFFICERS

Name	Title	Name	Title
1. DAVID LYNN KAUFMAN	CHIEF EXECUTIVE OFFICER	2. MARCHELLE ELAINE MOORE	SECRETARY
3. JAMES CHRISTOPHER HOWAT	TREASURER	4. THOMAS JOSEPH OBROKTA JR.	PRESIDENT

OTHER

GREGORY ARTHUR BURTON	EXECUTIVE CHAIR
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DIRECTORS OR TRUSTEES

GREGORY ARTHUR BURTON	JAMES CHRISTOPHER HOWART	DAVID LYNN KAUFMAN	MARCHELLE ELAINE MOORE
THOMAS JOSEPH OBROKTA, JR.			

State of..... OHIO
County of.... FRANKLIN

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

(Signature)	(Signature)	(Signature)
DAVID LYNN KAUFMAN	MARCHELLE ELAINE MOORE	JAMES CHRISTOPHER HOWAT
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
CHIEF EXECUTIVE OFFICER	SECRETARY	TREASURER
(Title)	(Title)	(Title)

Subscribed and sworn to before me

This 8TH day of FEBRUARY 2019

a. Is this an original filing?

Yes [X] No []

b. If no

1. State the amendment number

2. Date filed

3. Number of pages attached

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....291 NAIC Company Code....40

BUSINESS IN GRAND TOTAL DURING THE YEAR

Line of business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		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 Expense	Taxes, Licenses and Fees
	Direct Premiums Written	Direct Premiums Ceded										
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 (G).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (G).....												
15.2 Non-cancelable A&H (G).....												
15.3 Guaranteed renewable A&H (G).....												
15.4 Non-renewable for stated reasons only (G).....												
15.5 Other accident only.....												
15.6 Medicare Part XVIII ex empt from state taxes or fees.....												
15.7 All other A&H (G).....												
15.8 Federal employees health benefits plan premium.....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....					1,358	(1,042)	1	6,503	6,503			
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....					(5,128)	(3,128)						
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.....	U	U	U	U	U	U	U	U	U	U	U	6,459
35. TOTALS (a).....	U	U	U	U	4,230	(10,170)	1	6,503	6,503	U	U	6,459

DETAILS OF WRITE-INS

3401. No applicable line of business.....												6,459
3402.												
3403.	U	U	U	U	U	U	U	U	U	U	U	U
3499. Summary of remaining write-ins for Line 34 from overflow page....	U	U	U	U	U	U	U	U	U	U	U	U
3499. TOTALS (Lines 3401 through 3403 plus 3499) (Line 34 above)....	U	U	U	U	U	U	U	U	U	U	U	6,459

(a) Finance and service charges not included in Lines 1 to 35 \$.0.
(b) For health business on indicated lines report: number of persons insured under PPO managed care products.....U and number of persons insured under indemnity only products.....U.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....291 NAIC Company Code....40 BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

Line of business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		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 Expense	Taxes, Licenses and Fees
	Written	Carried										
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 (G).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (G).....												
15.2 Non-cancelable A&H (G).....												
15.3 Guaranteed renewable A&H (G).....												
15.4 Non-renewable for stated reasons only (G).....												
15.5 Other accident only.....												
15.6 Medicare Part XVIII ex empt from state taxes or fees.....												
15.7 All other A&H (G).....												
15.8 Federal employees health benefits plan premium.....												
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.....					(201)	(201)						
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....					(12)	(12)						
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.....	U	U	U	U	U	U	U	U	U	U	U	1,480
35. TOTALS (a).....	U	U	U	U	U	(213)	U	U	U	U	U	1,480

DETAILS OF WRITE-INS

3401. No applicable line of business.....												1,480
3402.												
3403.	U	U	U	U	U	U	U	U	U	U	U	U
3499. Summary of remaining write-ins for Line 34 from overflow page....	U	U	U	U	U	U	U	U	U	U	U	U
3499. TOTALS (Lines 3401 through 3403 plus 3499) (Line 34 above)....	U	U	U	U	U	U	U	U	U	U	U	1,480

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(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.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....291 NAIC Company Code....40

BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR

Line of business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		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 Expense	Taxes, Licenses and Fees
	Written	Ceded										
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 (G).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (G).....												
15.2 Non-cancelable A&H (G).....												
15.3 Guaranteed renewable A&H (G).....												
15.4 Non-renewable for stated reasons only (G).....												
15.5 Other accident only.....												
15.6 Medicare Part XVIII ex empt from state taxes or fees.....												
15.7 All other A&H (G).....												
15.8 Federal employees health benefits plan premium.....												
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.....					15,000		1	5,363	5,363			
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.....	U	U	U	U	U	U	U	U	U	U	U	595
35. TOTALS (a).....	U	U	U	U	15,000	U	1	5,363	5,363	U	U	595

DETAILS OF WRITE-INS												
3401. NO applicable line of business.....												595
3402.												
3403.	U	U	U	U	U	U	U	U	U	U	U	U
3499. Summary of remaining write-ins for Line 34 from overflow page....	U	U	U	U	U	U	U	U	U	U	U	U
3499. TOTALS (Lines 3401 through 3403 plus 3499) (Line 34 above)....	U	U	U	U	U	U	U	U	U	U	U	595

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(b) For health business on indicated lines report: number of persons insured under PPO managed care products.....U and number of persons insured under indemnity only products.....U.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....291 NAIC Company Code....40

BUSINESS IN THE STATE OF OHIO DURING THE YEAR

Line of business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		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 Expense	Taxes, Licenses and Fees
	Direct Premiums Written	Direct Premiums Ceded										
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 (G).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (G).....												
15.2 Non-cancelable A&H (G).....												
15.3 Guaranteed renewable A&H (G).....												
15.4 Non-renewable for stated reasons only (G).....												
15.5 Other accident only.....												
15.6 Medicare Part XVIII ex empt from state taxes or fees.....												
15.7 All other A&H (G).....												
15.8 Federal employees health benefits plan premium.....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....					(1,441)	(1,441)		1,140	1,140			
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....					(3,117)	(3,117)						
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	1,014
35. TOTALS (a).....	0	0	0	0	(10,558)	(10,558)	0	1,140	1,140	0	0	1,014

DETAILS OF WRITE-INS

3401. No applicable line of business.....												1,014
3402.												
3403.	0	0	0	0	0	0	0	0	0	0	0	0
3490. 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 3490) (Line 34 above)....	0	0	0	0	0	0	0	0	0	0	0	1,014

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(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.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....291 NAIC Company Code....40 BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

Line of business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		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 Expense	Taxes, Licenses and Fees
	Written	Ceded										
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 (G).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (G).....												
15.2 Non-cancelable A&H (G).....												
15.3 Guaranteed renewable A&H (G).....												
15.4 Non-renewable for stated reasons only (G).....												
15.5 Other accident only.....												
15.6 Medicare Part XVIII ex empt from state taxes or fees.....												
15.7 All other A&H (G).....												
15.8 Federal employees health benefits plan premium.....												
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.....	U	U	U	U	U	U	U	U	U	U	U	1,000
35. TOTALS (a).....	U	U	U	U	U	U	U	U	U	U	U	1,000

DETAILS OF WRITE-INS

3401. No applicable line of business.....												1,000
3402.												
3403.	U	U	U	U	U	U	U	U	U	U	U	U
3499. Summary of remaining write-ins for Line 34 from overflow page....	U	U	U	U	U	U	U	U	U	U	U	U
3499. TOTALS (Lines 3401 through 3403 plus 3499) (Line 34 above)....	U	U	U	U	U	U	U	U	U	U	U	1,000

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(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.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....291 NAIC Company Code....40 BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

Line of business	Gross Premiums, including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		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 Expense	Taxes, Licenses and Fees
	Written	Carried										
1. Fire.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
2.5 Private flood.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Part XVIII ex empt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium.....												
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.....	U	U	U	U	U	U	U	U	U	U	U	1, / 15
35. TOTALS (a).....	U	U	U	U	U	U	U	U	U	U	U	1, / 15

DETAILS OF WRITE-INS

3401. No applicable line of business.....												1, / 15
3402.												
3403.	U	U	U	U	U	U	U	U	U	U	U	
3499. Summary of remaining write-ins for Line 34 from overflow page....	U	U	U	U	U	U	U	U	U	U	U	U
3499. TOTALS (Lines 3401 through 3403 plus 3499) (Line 34 above)....	U	U	U	U	U	U	U	U	U	U	U	1, / 15

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.
(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.

Sch. F - Pt. 1
NONE

Sch. F - Pt. 2
NONE

SCHEDULE F - PART 3
Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

1	2	3	4	5	6	Reinsurance Recoverable on								16	Reinsurance Payable		19	20	
						7	8	9	10	11	12	13	14		15	17			18
ID Number	NAIC Compan y Code	Name of Reinsurer	Domi- ciliary Juris- diction	Specia l Code	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commissions	Col. 7 through 14 Totals	Amount in Dispute Included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable from Reinsurers (Cols. 15 - [17 + 18])	Funds Held by Company Under Reinsurance Treaties
Authorized Affiliates-U.S. Intercompany Pooling																			
31-4259550..	14621...	Motorists Mutual Insurance Company.....	OH...			(1)				0				(1)				(1)	
0199999.	Total Authorized Affiliates - U.S. Intercompany Pooling.....				0	(1)	0	0	0	0	0	0	0	(1)	0	0	0	(1)	0
0899999.	Total Authorized Affiliates.....				0	(1)	0	0	0	0	0	0	0	(1)	0	0	0	(1)	0
1499999.	Total Authorized Ex cluding Protected Cells.....				0	(1)	0	0	0	0	0	0	0	(1)	0	0	0	(1)	0
4399999.	Total Authorized, Unauthorized and Certified Ex cluding Protected Cells.....				0	(1)	0	0	0	0	0	0	0	(1)	0	0	0	(1)	0
9999999.	Totals (Sum of 4399999 and 4499999).....				0	(1)	0	0	0	0	0	0	0	(1)	0	0	0	(1)	0

SCHEDULE F - PART 3 (Continued)

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

		Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
ID Number from Col. 1	Name of Reinsurer from Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15 - 27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17 + 18 + 20; Not in Excess of Col. 29)	Stressed Net Recoverable (Cols. 29 - 30)	Total Collateral (Cols. 21 + 22 + 24; Not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	Reinsurer Designation Equivalent	Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
Authorized Affiliates-U.S. Intercompany Pooling																	
31-4259550.	Motorists Mutual Insurance Company.....	.....	.....	.....	.....	.....(1)	0	0	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	...XXX...	XXX.....	XXX.....
0199999.	Total Authorized Affiliates - U.S. Intercompany Pooling...	0	0	...XXX	0	(1)	0	0	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	...XXX...	XXX.....	XXX.....
0899999.	Total Authorized Affiliates.....	0	0	...XXX	0	(1)	0	0	0	0	0	0	0	0	...XXX...	0	0
1499999.	Total Authorized Ex cluding Protected Cells.....	0	0	...XXX	0	(1)	0	0	0	0	0	0	0	0	...XXX...	0	0
4399999.	Total Authorized, Unauthorized & Certified Ex cl Prot Cells.....	0	0	...XXX	0	(1)	0	0	0	0	0	0	0	0	...XXX...	0	0
9999999.	Totals (Sum of 4399999 and 4499999).....	0	0	...XXX	0	(1)	0	0	0	0	0	0	0	0	...XXX...	0	0

SCHEDULE F - PART 3 (Continued)
Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Aging of Ceded Reinsurance)

ID Number from Col. 1	Name of Reinsurer from Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 43 - 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue (Col. 42 / Col. 43)	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47 / [Cols. 46 + 48])	51 Percentage More Than 120 Days Overdue (Col. 41 / Col. 43)	52 Is the Amount in Col. 50 Less than 20% ? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
		37 Current	Overdue															43 Total Due Cols. 37 + 42 (In Total Should Equal Cols. 7 + 8)
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue (Cols. 38 + 39 + 40 +41)											
Authorized Affiliates-U.S. Intercompany Pooling																		
31-4259550..	Motorists Mutual Insurance Company.....	(1)	.....	.....	.....	.....	.....0	(1)	.....	.....(1)	0	.....	.....0.0	0.0	0.0	0.0	YES...	0
0199999.	Total Authorized Affiliates - U.S. Intercompany Pooling...	(1)	0	0	0	0	0	(1)	0	0	(1)	0	0	0.0	0.0	0.0	0.0	XXX.....0
0899999.	Total Authorized Affiliates.....	(1)	0	0	0	0	0	(1)	0	0	(1)	0	0	0.0	0.0	0.0	0.0	XXX.....0
1499999.	Total Authorized Ex cluding Protected Cells.....	(1)	0	0	0	0	0	(1)	0	0	(1)	0	0	0.0	0.0	0.0	0.0	XXX.....0
4399999.	Total Authorized, Unauthorized & Certified Ex cl Prot Cells.....	(1)	0	0	0	0	0	(1)	0	0	(1)	0	0	0.0	0.0	0.0	0.0	XXX.....0
9999999.	Totals (Sum of 4399999 and 4499999).....	(1)	0	0	0	0	0	(1)	0	0	(1)	0	0	0.0	0.0	0.0	0.0	XXX.....0

Sch. F - Pt. 3
NONE

Sch. F - Pt. 3
NONE

Sch. F - Pt. 4 Issuing or Confirming Banks for Letters of Credit from Scfpt3
NONE

Sch. F - Pt. 5 Interrogatories for Sch. F Pt. 3
NONE

MICO INSURANCE COMPANY
SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	11,483,804		11,483,804
2. Premiums and considerations (Line 15).....			0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	(513)	513	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....			0
5. Other assets.....	52,783	(73)	52,710
6. Net amount recoverable from reinsurers.....		8,344	8,344
7. Protected cell assets (Line 27).....			0
8. Totals (Line 28).....	11,536,074	8,784	11,544,858
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....		1	1
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	55,521	8,783	64,304
11. Unearned premiums (Line 9).....			0
12. Advance premiums (Line 10).....			0
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....			0
15. Funds held by company under reinsurance treaties (Line 13).....			0
16. Amounts withheld or retained by company for account of others (Line 14).....			0
17. Provision for reinsurance (Line 16).....			0
18. Other liabilities.....	12,657		12,657
19. Total liabilities excluding protected cell business (Line 26).....	68,178	8,784	76,962
20. Protected cell liabilities (Line 27).....			0
21. Surplus as regards policyholders (Line 37).....	11,467,898	XXX	11,467,898
22. Totals (Line 38).....	11,536,076	8,784	11,544,860

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 cedes to its affiliate, Motorists Mutual Insurance Company, through a 100% intercompany pooling arrangement. Reference Note 26 in the Notes to Financial Statements for

Sch. H - Pt. 1
NONE

Sch. H - Pt. 2
NONE

Sch. H - Pt. 3
NONE

Sch. H - Pt. 4
NONE

Sch. H - Pt. 5
NONE

Sch. P - Pt. 1A
NONE

Sch. P - Pt. 1B
NONE

Sch. P - Pt. 1C
NONE

Sch. P - Pt. 1D
NONE

Sch. P - Pt. 1E
NONE

Sch. P - Pt. 1F - Sn. 1
NONE

Sch. P - Pt. 1F - Sn. 2
NONE

Sch. P - Pt. 1G
NONE

Sch. P - Pt. 1H - Sn. 1
NONE

Sch. P - Pt. 1H - Sn. 2
NONE

Sch. P - Pt. 1I
NONE

Sch. P - Pt. 1J
NONE

Sch. P - Pt. 1K
NONE

Sch. P - Pt. 1L
NONE

Sch. P - Pt. 1M
NONE

Sch. P - Pt. 1N
NONE

Sch. P - Pt. 1O
NONE

Sch. P - Pt. 1P
NONE

Sch. P - Pt. 1R - Sn. 1
NONE

Sch. P - Pt. 1R - Sn. 2
NONE

Sch. P - Pt. 1S
NONE

Sch. P - Pt. 1T
NONE

Sch. P - Pt. 2A
NONE

Sch. P - Pt. 2B
NONE

Sch. P - Pt. 2C
NONE

Sch. P - Pt. 2D
NONE

Sch. P - Pt. 2E
NONE

Sch. P - Pt. 2F - Sn. 1
NONE

Sch. P - Pt. 2F - Sn. 2
NONE

Sch. P - Pt. 2G
NONE

Sch. P - Pt. 2H - Sn. 1
NONE

Sch. P - Pt. 2H - Sn. 2
NONE

Sch. P - Pt. 2I
NONE

Sch. P - Pt. 2J
NONE

Sch. P - Pt. 2K
NONE

Sch. P - Pt. 2L
NONE

Sch. P - Pt. 2M
NONE

Sch. P - Pt. 2N
NONE

Sch. P - Pt. 2O
NONE

Sch. P - Pt. 2P
NONE

Sch. P - Pt. 2R - Sn. 1
NONE

Sch. P - Pt. 2R - Sn. 2
NONE

Sch. P - Pt. 2S
NONE

Sch. P - Pt. 2T
NONE

Sch. P - Pt. 3A
NONE

Sch. P - Pt. 3B
NONE

Sch. P - Pt. 3C
NONE

Sch. P - Pt. 3D
NONE

Sch. P - Pt. 3E
NONE

Sch. P - Pt. 3F - Sn. 1
NONE

Sch. P - Pt. 3F - Sn. 2
NONE

Sch. P - Pt. 3G
NONE

Sch. P - Pt. 3H - Sn. 1
NONE

Sch. P - Pt. 3H - Sn. 2
NONE

Sch. P - Pt. 3I
NONE

Sch. P - Pt. 3J
NONE

Sch. P - Pt. 3K
NONE

Sch. P - Pt. 3L
NONE

Sch. P - Pt. 3M
NONE

Sch. P - Pt. 3N
NONE

Sch. P - Pt. 3O
NONE

Sch. P - Pt. 3P
NONE

Sch. P - Pt. 3R - Sn. 1
NONE

Sch. P - Pt. 3R - Sn. 2
NONE

Sch. P - Pt. 3S
NONE

Sch. P - Pt. 3T
NONE

Sch. P - Pt. 4A
NONE

Sch. P - Pt. 4B
NONE

Sch. P - Pt. 4C
NONE

Sch. P - Pt. 4D
NONE

Sch. P - Pt. 4E
NONE

Sch. P - Pt. 4F - Sn. 1
NONE

Sch. P - Pt. 4F - Sn. 2
NONE

Sch. P - Pt. 4G
NONE

Sch. P - Pt. 4H - Sn. 1
NONE

Sch. P - Pt. 4H - Sn. 2
NONE

Sch. P - Pt. 4I
NONE

Sch. P - Pt. 4J
NONE

Sch. P - Pt. 4K
NONE

Sch. P - Pt. 4L
NONE

Sch. P - Pt. 4M
NONE

Sch. P - Pt. 4N
NONE

Sch. P - Pt. 4O
NONE

Sch. P - Pt. 4P
NONE

Sch. P - Pt. 4R - Sn. 1
NONE

Sch. P - Pt. 4R - Sn. 2
NONE

Sch. P - Pt. 4S
NONE

Sch. P - Pt. 4T
NONE

Sch. P - Pt. 5A - Sn. 1
NONE

Sch. P - Pt. 5A - Sn. 2
NONE

Sch. P - Pt. 5A - Sn. 3
NONE

Sch. P - Pt. 5B - Sn. 1
NONE

Sch. P - Pt. 5B - Sn. 2
NONE

Sch. P - Pt. 5B - Sn. 3
NONE

Sch. P - Pt. 5C - Sn. 1
NONE

Sch. P - Pt. 5C - Sn. 2
NONE

Sch. P - Pt. 5C - Sn. 3
NONE

Sch. P - Pt. 5D - Sn. 1
NONE

Sch. P - Pt. 5D - Sn. 2
NONE

Sch. P - Pt. 5D - Sn. 3
NONE

Sch. P - Pt. 5E - Sn. 1
NONE

Sch. P - Pt. 5E - Sn. 2
NONE

Sch. P - Pt. 5E - Sn. 3
NONE

Sch. P - Pt. 5F - Sn. 1A
NONE

Sch. P - Pt. 5F - Sn. 2A
NONE

Sch. P - Pt. 5F - Sn. 3A
NONE

Sch. P - Pt. 5F - Sn. 1B
NONE

Sch. P - Pt. 5F - Sn. 2B
NONE

Sch. P - Pt. 5F - Sn. 3B
NONE

Sch. P - Pt. 5H - Sn. 1A
NONE

Sch. P - Pt. 5H - Sn. 2A
NONE

Sch. P - Pt. 5H - Sn. 3A
NONE

Sch. P - Pt. 5H - Sn. 1B
NONE

Sch. P - Pt. 5H - Sn. 2B
NONE

Sch. P - Pt. 5H - Sn. 3B
NONE

Sch. P - Pt. 5R - Sn. 1A
NONE

Sch. P - Pt. 5R - Sn. 2A
NONE

Sch. P - Pt. 5R - Sn. 3A
NONE

Sch. P - Pt. 5R - Sn. 1B
NONE

Sch. P - Pt. 5R - Sn. 2B
NONE

Sch. P - Pt. 5R - Sn. 3B
NONE

Sch. P - Pt. 5T - Sn. 1
NONE

Sch. P - Pt. 5T - Sn. 2
NONE

Sch. P - Pt. 5T - Sn. 3
NONE

Sch. P - Pt. 6C - Sn. 1
NONE

Sch. P - Pt. 6C - Sn. 2
NONE

Sch. P - Pt. 6D - Sn. 1
NONE

Sch. P - Pt. 6D - Sn. 2
NONE

Sch. P - Pt. 6E - Sn. 1
NONE

Sch. P - Pt. 6E - Sn. 2
NONE

Sch. P - Pt. 6H - Sn. 1A
NONE

Sch. P - Pt. 6H - Sn. 2A
NONE

Sch. P - Pt. 6H - Sn. 1B
NONE
Sch. P - Pt. 6H - Sn. 2B
NONE
Sch. P - Pt. 6M - Sn. 1
NONE
Sch. P - Pt. 6M - Sn. 2
NONE
Sch. P - Pt. 6N - Sn. 1
NONE
Sch. P - Pt. 6N - Sn. 2
NONE
Sch. P - Pt. 6O - Sn. 1
NONE
Sch. P - Pt. 6O - Sn. 2
NONE
Sch. P - Pt. 6R - Sn. 1A
NONE
Sch. P - Pt. 6R - Sn. 2A
NONE
Sch. P - Pt. 6R - Sn. 1B
NONE
Sch. P - Pt. 6R - Sn. 2B
NONE
Sch. P - Pt. 7A - Sn. 1
NONE
Sch. P - Pt. 7A - Sn. 2
NONE
Sch. P - Pt. 7A - Sn. 3
NONE
Sch. P - Pt. 7A - Sn. 4
NONE
Sch. P - Pt. 7A - Sn. 5
NONE
Sch. P - Pt. 7B - Sn. 1
NONE
Sch. P - Pt. 7B - Sn. 2
NONE
Sch. P - Pt. 7B - Sn. 3
NONE

Annual Statement for the year 2018 of the

MICO INSURANCE COMPANY

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (continued)

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums Reported At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5

Years in Which Policies Were Issued	Net Reserve For Premium Adjustments And Accrued Retrospective Premiums At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 6

Years in Which Policies Were Issued	Incured Adjustable Commissions Reported At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 7

Years in Which Policies Were Issued	Reserves For Commission Adjustments At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

MICO 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 be included.
- 1.1

Does the company issue Medical Professional Liability Claims-Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost?
If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions.

Yes [] No [X]
- 1.2

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

.....
- 1.3

Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65?

Yes [] No [X]
- 1.4

Does the company report any DDR reserve as loss or loss adjustment expense reserve?

Yes [] No [X]
- 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[X]
- 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).
If not the same in all years, explain in Interrogatory 7.

PER CLAIM
- 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 [] No [X]
- 7.2

An extended statement may be attached.

.....
.....

MICO 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.....IN						0
16. Iowa.....IA						0
17. Kansas.....KS						0
18. Kentucky.....KY						0
19. Louisiana.....LA						0
20. Maine.....ME						0
21. Maryland.....MD						0
22. Massachusetts.....MA						0
23. Michigan.....MI						0
24. Minnesota.....MN						0
25. Mississippi.....MS						0
26. Missouri.....MO						0
27. Montana.....MT						0
28. Nebraska.....NE						0
29. Nevada.....NV						0
30. New Hampshire.....NH						0
31. New Jersey.....NJ						0
32. New Mexico.....NM						0
33. New York.....NY						0
34. North Carolina.....NC						0
35. North Dakota.....ND						0
36. Ohio.....OH						0
37. Oklahoma.....OK						0
38. Oregon.....OR						0
39. Pennsylvania.....PA						0
40. Rhode Island.....RI						0
41. South Carolina.....SC						0
42. South Dakota.....SD						0
43. Tennessee.....TN						0
44. Texas.....TX						0
45. Utah.....UT						0
46. Vermont.....VT						0
47. Virginia.....VA						0
48. Washington.....WA						0
49. West Virginia.....WV						0
50. Wisconsin.....WI						0
51. Wyoming.....WY						0
52. American Samoa.....AS						0
53. Guam.....GU						0
54. Puerto Rico.....PR						0
55. US Virgin Islands.....VI						0
56. Northern Mariana Islands.....MP						0
57. Canada.....CAN						0
58. Aggregate Other Alien.....OT						0
59. Totals.....	0	0	0	0	0	0

NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal KSSU	CIF	Name or Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	"
Members															
97	0291.	Motorists Insurance Group.....	10204....	31-1783451.....			Broad Street Brokerage Insurance Agency, LLC.....	OH.....	NIA.....	Motorists Life Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	N.....	3.....
			62-1590861.....				Consumers Insurance USA, Inc.....	TN.....	IA.....	Motorists Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	N.....	3.....
			42-1496478.....				IMARC, LLC.....	IA.....	NIA.....	Iowa Mutual Insurance Company.....	Ownership.....	...90.000	Motorists Mutual Insurance Company.....	N.....	3.....
	0291.	Motorists Insurance Group.....	31577....	42-1019089.....			Iowa American Insurance Company.....	OH.....	IA.....	Iowa Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	N.....	3.....
	0291.	Motorists Insurance Group.....	14338....	42-0333120.....			Iowa Mutual Insurance Company.....	OH.....	IA.....				Motorists Mutual Insurance Company.....	N.....	1.....
				41-1563134.....			MCM Insurance Agency, Inc.....	MN.....	NIA.....	Motorists Commercial Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	N.....	3.....
	0291.	Motorists Insurance Group.....	40932....	31-1022150.....			MICO Insurance Company.....	OH.....	RE.....	Motorists Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	N.....	3.....
							Motorists Commercial Mutual Insurance Company.....	OH.....	IA.....				Motorists Mutual Insurance Company.....	N.....	1.....
	0291.	Motorists Insurance Group.....	66311....	31-0717055.....			Motorists Life Insurance Company.....	OH.....	IA.....	Motorists Mutual Insurance Company.....	Ownership.....	...70.000	Motorists Mutual Insurance Company.....	N.....	3.....
	0291.	Motorists Insurance Group.....	14621....	31-4259550.....			Motorists Mutual Insurance Company.....	OH.....	UDP.....					N.....	1.....
				31-0851906.....			Motorists Service Corporation.....	OH.....	NIA.....	Motorists Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	N.....	3.....
	0291.	Motorists Insurance Group.....	23175....	02-0178290.....			Phenix Mutual Fire Insurance Company.....	OH.....	IA.....				Motorists Mutual Insurance Company.....	N.....	1.....
	0291.	Motorists Insurance Group.....	19950....	39-0739760.....			Wilson Mutual Insurance Company.....	OH.....	IA.....				Motorists Mutual Insurance Company.....	N.....	1.....
				81-4951462.....			MIG Realty, LLC.....	OH.....	NIA.....	Motorists Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	N.....	3.....
				31-1712343.....			Motorists Insurance Group Foundation.....	OH.....	NIA.....	Motorists Mutual Insurance Company.....	Board.....		Motorists Mutual Insurance Company.....	N.....	4.....
	0291.	Motorists Insurance Group.....	12372....	20-2394166.....			BrickStreet Mutual Insurance Company.....	WV.....	IA.....				Motorists Mutual Insurance Company.....	N.....	1.....
	0291.	Motorists Insurance Group.....	15137....	46-1783383.....			PinnaclePoint Insurance Company.....	WV.....	IA.....	BrickStreet Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	N.....	2.....
	0291.	Motorists Insurance Group.....	13045....	26-0818900.....			NorthStone Insurance Company.....	PA.....	IA.....	BrickStreet Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	N.....	2.....
	0291.	Motorists Insurance Group.....	15136....	46-1795752.....			SummitPoint Insurance Company.....	WV.....	IA.....	BrickStreet Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	N.....	2.....
	0291.	Motorists Insurance Group.....	13016....	87-0807723.....			AlleghenyPoint Insurance Company.....	PA.....	IA.....	BrickStreet Mutual Insurance Company.....	Ownership.....	...100.000	Motorists Mutual Insurance Company.....	N.....	2.....
				80-0772825.....			BrickStreet Foundation, Inc.....	WV.....	NIA.....	BrickStreet Mutual Insurance Company.....	Board.....		Motorists Mutual Insurance Company.....	N.....	5.....

Aster	Explanation
1	The company is a mutual property/casualty insurer and an affiliate of The Motorists Insurance Group. Motorists Mutual Insurance Company is the ultimate controlling entity of the Group through an interlocking board of directors.
2	This company is a stock subsidiary of BrickStreet Mutual Insurance Company with ultimate control of that parent as described in Note1
3	The entity is a subsidiary of an insurer that is an affiliate of The Motorists Insurance Group. With ultimate control of that insurer as described in Note 1
4	Schedule Y, Parts 1 and 1A, includes the Motorists Insurance Group Foundation, a 501(c)(3) tax -ex empt private foundation incorporated on 7/12/2000.
5	Schedule Y, Parts 1 and 1A, includes BrickStreet Foundation, Inc. a 501(c)(3) tax -ex empt private foundation incorporated on December 23, 2011.

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements		Any Other Material Activity Not in the Ordinary Course of the Insurers Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
12372.....	20-2394166.....	BrickStreet Mutual Insurance Company.....	-	(30,000,000)	(178,305,954)	.....	.....(22,102,950)	.....		- .....	.....(230,408,904)	.....
14621.....	31-4259550.....	Motorists Mutual Insurance Company.....	-	636,268	108,799,539	.....	.....(58,369,226)	.....		.....(3,529,227)	47,537,354	.....
13331.....	41-0299900.....	Motorists Commercial Mutual Insurance Company.....	-	-	60,639,773	.....	.....(14,045,785)	.....		- .....	.....46,593,988	.....
10204.....	62-1590891.....	Consumers Insurance Company.....	-	-	18,501,075	.....	.....(2,290,366)	.....		- .....	.....16,210,709	.....
19950.....	39-0739760.....	Wilson Mutual Insurance Company.....	-	-	10,433,122	.....	.....(13,064,960)	.....		- .....	.....(2,631,838)	.....
14338.....	42-0333120.....	Iowa Mutual Insurance Company.....	-	-	10,433,122	.....	.....(10,799,797)	.....		- .....	.....(366,675)	.....
23175.....	02-0178290.....	Phenix Mutual Fire Insurance Company.....	-	-	8,416,134	.....	.....(5,818,544)	.....		- .....	.....2,597,590	.....
15136.....	46-1795752.....	SummitPoint Insurance Company.....	-	15,000,000	(8,049,910)	.....	.....(7,465,339)	.....		- .....	.....(515,249)	.....
15137.....	46-1783383.....	PinnaclePoint Insurance Company.....	-	15,000,000	(8,460,105)	.....	.....(19,016,896)	.....		- .....	.....(12,477,001)	.....
31577.....	42-1019089.....	Iowa American Insurance Company.....	-	-	4,150,037	.....	.....(3,305,388)	.....		- .....	.....844,649	.....
40932.....	31-1022150.....	MICO Insurance Company.....	- .....	- .....	- .....	.....	.....149,310	.....		- .....	.....149,310	.....
13045.....	26-0818900.....	NorthStone Insurance Company.....	-	-	(24,094,301)	.....	.....(16,633,992)	.....		- .....	.....(40,728,293)	.....
13016.....	87-0807723.....	AlleghenyPoint Insurance Company.....	-	-	(2,462,532)	.....	.....(6,511,230)	.....		- .....	.....(8,973,762)	.....
	31-0851906.....	Motorists Service Corporation.....	- .....	- .....	- .....	.....	.....179,401,759	.....		.....4,546,200	183,947,959	.....
	41-1563134.....	MCM Agency.....	- .....	- .....	- .....	.....	.....(85,285)	.....		- .....	.....(85,285)	.....
	81-4951462.....	MIG Realty LLC.....	-	(636,268)	- .....	.....	.....	.....		.....(1,016,973)	(1,653,241)	.....
	41-1563134.....	MCM Insurance Agency.....	- .....	- .....	- .....	.....	.....	.....		- .....	.....0	.....
	31-1783451.....	Broad Street Brokerage.....	- .....	- .....	- .....	.....	.....25,046	.....		.....	.....25,046	.....
	42-1496478.....	IMARC, LLC.....	- .....	- .....	- .....	.....	.....22,905	.....		.....	.....22,905	.....
66311.....	31-0717055.....	Motorists Life Insurance Company.....	- .....	- .....	- .....	.....	.....(89,262)	.....		.....	.....(89,262)	.....
9999999.....	Control Totals.....	.....	.....0	0	0	0	0	0	XXX	0	0	0

Pooling Information

NAIC Code	Name of Insurer	Pooling %	NAIC Code	Name of Insurer	Pooling %
12372	BrickStreet Mutual Insurance Company	48.00%	15136	SummitPoint Insurance Company	0.80%
14621	Motorists Mutual Insurance Company	32.40%	15137	PinnaclePoint Insurance Company	0.80%
13331	Motorists Commercial Mutual Insurance Company	10.30%	31577	Iowa American Insurance Company	0.60%
10204	Consumers Insurance Company	2.10%	40932	MICO Insurance Company	
19950	Wilson Mutual Insurance Company	1.70%	13045	NorthStone Insurance Company	
14338	Iowa Mutual Insurance Company	1.70%	13016	AlleghenyPoint Insurance Company	
23175	Phenix Mutual Fire Insurance Company	1.60%			

Detailed Explanation

The affiliation of the Motorists Group with the BrickStreet Group and the pooling arrangement that was entered into as a result of the affiliation required a pool realignment that was settled primarily by the transfer of securities.

Motorists Mutual Insurance Company has committed to finance a real estate project being undertaken by MIG Realty. The project is estimated to cost aprox imately \$30 million. By year end, there was a transfer of funds under the loan agreement in the amount of approx imately \$1 million.

Motorists Service Corporation holds certain IT assets which are used by Motorists Mutual Insurance Company. A service fee of approx imately \$4 mlion is charged/paid between these two companies.

Motorists Service Corporation provides payroll services to Motorists Mutual Insurance Company and BrickStreet Mutual Insurance Company. Total service revenue charged/paid related to these services was approx imately \$180 million.

MICO 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 or WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING		Responses
1.	Will an actuarial opinion be filed by March 1?	YES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.	Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
APRIL FILING		
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6.	Will the Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
MAY FILING		
8.	Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	YES
JUNE FILING		
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
AUGUST FILING		
11.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES

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

If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING		
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
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
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 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 Expense 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?	NO
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 Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with 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

MICO 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 or 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.

EXPLANATION:

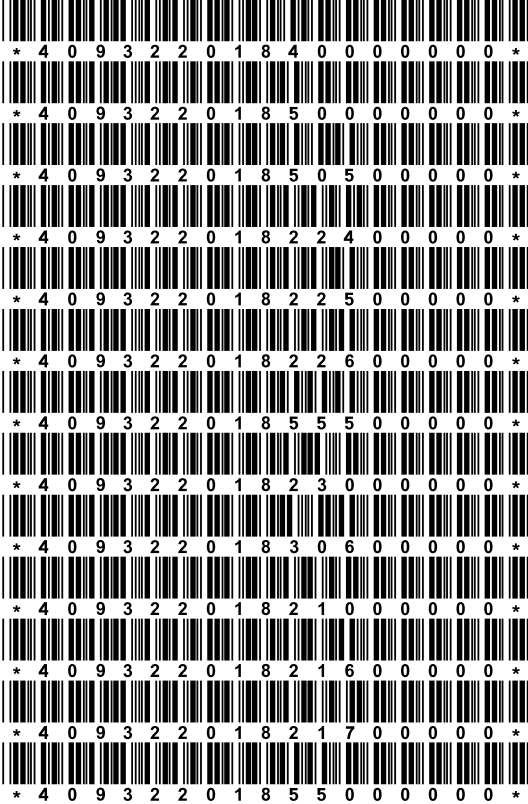
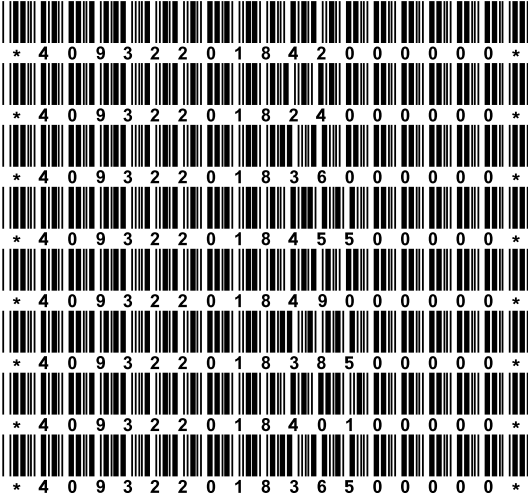
BAR CODE:

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12. The data for this supplement is not required to be filed.
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31. The data for this supplement is not required to be filed.
32. The data for this supplement is not required to be filed.
33. The data for this supplement is not required to be filed.
34. The data for this supplement is not required to be filed.



MICO 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 or 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.

35. The data for this supplement is not required to be filed.



36. The data for this supplement is not required to be filed.

37.

MICO INSURANCE COMPANY

Overflow Page for Write-Ins

Additional Write-ins for Underwriting and Investment Exhibit-Part 3:

	1	2	3	4
	Loss Adjustment Ex penses	Other Underwriting Ex penses	Investment Ex penses	Total
2404. Unallocated aggregate stop-loss recovery.....				.0
2405. Data services.....			14	14
2406. Temporary labor.....			6	6
2407. Policy administration / servicing fees.....				.0
2408. Other unallocated ex penses.....				.0
2497. Summary of remaining write-ins for Line 24.....	0	0	20	20

Overflow Page for Write-Ins

NONE

2018 ALPHABETICAL INDEX -- PROPERTY & CASUALTY ANNUAL STATEMENT BLANK

Assets	2	Schedule P–Part 2H–Section 2–Other Liability–Claims–Made	58
Cash Flow	5	Schedule P–Part 2I–Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	59
Exhibit of Capital Gains (Losses)	12	Schedule P–Part 2J–Auto Physical Damage	59
Exhibit of Net Investment Income	12	Schedule P–Part 2K–Fidelity, Surety	59
Exhibit of Nonadmitted Assets	13	Schedule P–Part 2L–Other (Including Credit, Accident and Health)	59
Exhibit of Premiums and Losses (State Page)	19	Schedule P–Part 2M–International	59
Five-Year Historical Data	17	Schedule P–Part 2N–Reinsurance – Nonproportional Assumed Property	60
General Interrogatories	15	Schedule P–Part 2O–Reinsurance – Nonproportional Assumed Liability	60
Jurat Page	1	Schedule P–Part 2P–Reinsurance – Nonproportional Assumed Financial Lines	60
Liabilities, Surplus and Other Funds	3	Schedule P–Part 2R–Section 1–Products Liability–Occurrence	61
Notes To Financial Statements	14	Schedule P–Part 2R–Section 2–Products Liability–Claims–Made	61
Overflow Page For Write-ins	100	Schedule P–Part 2S–Financial Guaranty/Mortgage Guaranty	61
Schedule A–Part 1	E01	Schedule P–Part 2T–Warranty	61
Schedule A–Part 2	E02	Schedule P–Part 3A–Homeowners/Farmowners	62
Schedule A–Part 3	E03	Schedule P–Part 3B–Private Passenger Auto Liability/Medical	62
Schedule A–Verification Between Years	SI02	Schedule P–Part 3C–Commercial Auto/Truck Liability/Medical	62
Schedule B–Part 1	E04	Schedule P–Part 3D–Workers’ Compensation (Excluding Excess Workers Compensation)	62
Schedule B–Part 2	E05	Schedule P–Part 3E–Commercial Multiple Peril	62
Schedule B–Part 3	E06	Schedule P–Part 3F–Section 1 –Medical Professional Liability–Occurrence	63
Schedule B–Verification Between Years	SI02	Schedule P–Part 3F–Section 2–Medical Professional Liability–Claims–Made	63
Schedule BA–Part 1	E07	Schedule P–Part 3G–Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	63
Schedule BA–Part 2	E08	Schedule P–Part 3H–Section 1–Other Liability–Occurrence	63
Schedule BA–Part 3	E09	Schedule P–Part 3H–Section 2–Other Liability–Claims–Made	63
Schedule BA–Verification Between Years	SI03	Schedule P–Part 3I–Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, Theft)	64
Schedule D–Part 1	E10	Schedule P–Part 3J–Auto Physical Damage	64
Schedule D–Part 1A–Section 1	SI05	Schedule P–Part 3K–Fidelity/Surety	64
Schedule D–Part 1A–Section 2	SI08	Schedule P–Part 3L–Other (Including Credit, Accident and Health)	64
Schedule D–Part 2–Section 1	E11	Schedule P–Part 3M–International	64
Schedule D–Part 2–Section 2	E12	Schedule P–Part 3N–Reinsurance – Nonproportional Assumed Property	65
Schedule D–Part 3	E13	Schedule P–Part 3O–Reinsurance – Nonproportional Assumed Liability	65
Schedule D–Part 4	E14	Schedule P–Part 3P–Reinsurance – Nonproportional Assumed Financial Lines	65
Schedule D–Part 5	E15	Schedule P–Part 3R–Section 1–Products Liability–Occurrence	66
Schedule D–Part 6–Section 1	E16	Schedule P–Part 3R–Section 2–Products Liability–Claims–Made	66
Schedule D–Part 6–Section 2	E16	Schedule P–Part 3S–Financial Guaranty/Mortgage Guaranty	66
Schedule D–Summary By Country	SI04	Schedule P–Part 3T–Warranty	66
Schedule D–Verification Between Years	SI03	Schedule P–Part 4A–Homeowners/Farmowners	67
Schedule DA–Part 1	E17	Schedule P–Part 4B–Private Passenger Auto Liability/Medical	67
Schedule DA–Verification Between Years	SI10	Schedule P–Part 4C–Commercial Auto/Truck Liability/Medical	67
Schedule DB–Part A–Section 1	E18	Schedule P–Part 4D–Workers’ Compensation (Excluding Excess Workers Compensation)	67
Schedule DB–Part A–Section 2	E19	Schedule P–Part 4E–Commercial Multiple Peril	67
Schedule DB–Part A–Verification Between Years	SI11	Schedule P–Part 4F–Section 1–Medical Professional Liability–Occurrence	68
Schedule DB–Part B–Section 1	E20	Schedule P–Part 4F–Section 2–Medical Professional Liability–Claims–Made	68
Schedule DB–Part B–Section 2	E21	Schedule P–Part 4G–Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	68
Schedule DB–Part B–Verification Between Years	SI11	Schedule P–Part 4H–Section 1–Other Liability–Occurrence	68
Schedule DB–Part C–Section 1	SI12	Schedule P–Part 4H–Section 2–Other Liability–Claims–Made	68
Schedule DB–Part C–Section 2	SI13	Schedule P–Part 4I–Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	69
Schedule DB–Part D–Section 1	E22	Schedule P–Part 4J–Auto Physical Damage	69
Schedule DB–Part D–Section 2	E23	Schedule P–Part 4K–Fidelity/Surety	69
Schedule DB–Verification	SI14	Schedule P–Part 4L–Other (Including Credit, Accident and Health)	69
Schedule DL–Part 1	E24	Schedule P–Part 4M–International	69
Schedule DL–Part 2	E25	Schedule P–Part 4N–Reinsurance – Nonproportional Assumed Property	70
Schedule E–Part 1–Cash	E26	Schedule P–Part 4O–Reinsurance – Nonproportional Assumed Liability	70
Schedule E–Part 2–Cash Equivalents	E27	Schedule P–Part 4P–Reinsurance – Nonproportional Assumed Financial Lines	70
Schedule E–Verification Between Years	SI15	Schedule P–Part 4R–Section 1–Products Liability–Occurrence	71
Schedule E–Part 3–Special Deposits	E28	Schedule P–Part 4R–Section 2–Products Liability–Claims–Made	71
Schedule F–Part 1	20	Schedule P–Part 4S–Financial Guaranty/Mortgage Guaranty	71
Schedule F–Part 2	21	Schedule P–Part 4T–Warranty	71
Schedule F–Part 3	22	Schedule P–Part 5A–Homeowners/Farmowners	72
Schedule F–Part 4	27	Schedule P–Part 5B–Private Passenger Auto Liability/Medical	73
Schedule F–Part 5	28	Schedule P–Part 5C–Commercial Auto/Truck Liability/Medical	74
Schedule F–Part 6	29	Schedule P–Part 5D–Workers’ Compensation (Excluding Excess Workers Compensation)	75
Schedule H–Accident and Health Exhibit–Part 1	30	Schedule P–Part 5E–Commercial Multiple Peril	76
Schedule H–Part 2, Part 3 and Part 4	31	Schedule P–Part 5F–Medical Professional Liability–Claims–Made	78
Schedule H–Part 5–Health Claims	32	Schedule P–Part 5F–Medical Professional Liability–Occurrence	77
Schedule P–Part 1–Summary	33	Schedule P–Part 5H–Other Liability–Claims–Made	80
Schedule P–Part 1A–Homeowners/Farmowners	35	Schedule P–Part 5H–Other Liability–Occurrence	79
Schedule P–Part 1B–Private Passenger Auto Liability/Medical	36	Schedule P–Part 5R–Products Liability–Claims–Made	82
Schedule P–Part 1C–Commercial Auto/Truck Liability/Medical	37	Schedule P–Part 5R–Products Liability–Occurrence	81
Schedule P–Part 1D–Workers’ Compensation (Excluding Excess Workers Compensation)	38	Schedule P–Part 5T–Warranty	83
Schedule P–Part 1E–Commercial Multiple Peril	39	Schedule P–Part 6C–Commercial Auto/Truck Liability/Medical	84
Schedule P–Part 1F–Section 1–Medical Professional Liability–Occurrence	40	Schedule P–Part 6D–Workers’ Compensation (Excluding Excess Workers Compensation)	84
Schedule P–Part 1F–Section 2–Medical Professional Liability–Claims–Made	41	Schedule P–Part 6E–Commercial Multiple Peril	85
Schedule P–Part 1G–Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler & Machinery)	42	Schedule P–Part 6H–Other Liability–Claims–Made	86
Schedule P–Part 1H–Section 1–Other Liability–Occurrence	43	Schedule P–Part 6H–Other Liability–Occurrence	85
Schedule P–Part 1H–Section 2–Other Liability–Claims–Made	44	Schedule P–Part 6M–International	86
Schedule P–Part 1I–Spec. Prop. (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	45	Schedule P–Part 6N–Reinsurance – Nonproportional Assumed Property	87
Schedule P–Part 1J–Auto Physical Damage	46	Schedule P–Part 6O–Reinsurance – Nonproportional Assumed Liability	87
Schedule P–Part 1K–Fidelity/Surety	47	Schedule P–Part 6R–Products Liability–Claims–Made	88
Schedule P–Part 1L–Other (Including Credit, Accident and Health)	48	Schedule P–Part 6R–Products Liability–Occurrence	88

Schedule P-Part 1M-International	49	Schedule P-Part 7A-Primary Loss Sensitive Contracts	89
Schedule P-Part 1N-Reinsurance – Nonproportional Assumed Property	50	Schedule P-Part 7B-Reinsurance Loss Sensitive Contracts	91
Schedule P-Part 1O-Reinsurance – Nonproportional Assumed Liability	51	Schedule P Interrogatories	93
Schedule P-Part 1P-Reinsurance – Nonproportional Assumed Financial Lines	52	Schedule T-Exhibit of Premiums Written	94
Schedule P-Part 1R-Section 1-Products Liability-Occurrence	53	Schedule T-Part 2-Interstate Compact	95
Schedule P-Part 1R-Section 2-Products Liability-Claims-Made	54	Schedule Y-Information Concerning Activities of Insurer Members of a Holding Company Group	96
Schedule P-Part 1S-Financial Guaranty/Mortgage Guaranty	55	Schedule Y-Detail of Insurance Holding Company System	97
Schedule P-Part 1T-Warranty	56	Schedule Y-Part 2-Summary of Insurer’s Transactions With Any Affiliates	98
Schedule P-Part 2, Part 3 and Part 4 - Summary	34	Statement of Income	4
Schedule P-Part 2A-Homeowners/Farmowners	57	Summary Investment Schedule	SI01
Schedule P-Part 2B-Private Passenger Auto Liability/Medical	57	Supplemental Exhibits and Schedules Interrogatories	99
Schedule P-Part 2C-Commercial Auto/Truck Liability/Medical	57	Underwriting and Investment Exhibit Part 1	6
Schedule P-Part 2D-Workers’ Compensation (Excluding Excess Workers Compensation)	57	Underwriting and Investment Exhibit Part 1A	7
Schedule P-Part 2E-Commercial Multiple Peril	57	Underwriting and Investment Exhibit Part 1B	8
Schedule P-Part 2F-Section 1-Medical Professional Liability-Occurrence	58	Underwriting and Investment Exhibit Part 2	9
Schedule P-Part 2F-Section 2-Medical Professional Liability-Claims-Made	58	Underwriting and Investment Exhibit Part 2A	10
Schedule P-Part 2G-Special Liability (Ocean Marine, Aircraft (All Perils), Boiler & Machinery)	58	Underwriting and Investment Exhibit Part 3	11
Schedule P-Part 2H-Section 1-Other Liability-Occurrence	58		