44288201820100100

ANNUAL STATEMENT

For the Year Ended December 31, 2018

of the Condition and Affairs of the

PROGRESSIVE CHOICE INSURANCE COMPANY

NAIC Group Code.....155, 155 (Current Period) (Prior Period) NAIC Company Code..... 44288 Employer's ID Number..... 62-1444848

Organized under the Laws of OH State of Domicile or Port of Entry OH Country of Domicile US

Incorporated/Organized..... September 17, 1990 Commenced Business..... November 30, 1990

Statutory Home Office	6300 WILSON MILLS ROAD, W33 .. CLEVELAND .. OH .. US .. 44143-2182 *(Street and Number) (City or Town, State, Country and Zip Code)*	
Main Administrative Office	6300 WILSON MILLS ROAD, W33 .. CLEVELAND .. OH .. US .. 44143-2182 *(Street and Number) (City or Town, State, Country and Zip Code)*	440-461-5000 *(Area Code) (Telephone Number)*
Mail Address	P.O. BOX 89490 .. CLEVELAND .. OH .. US .. 44101-6490 *(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)*	
Primary Location of Books and Records	6300 WILSON MILLS ROAD, W33 .. CLEVELAND .. OH .. US .. 44143-2182 *(Street and Number) (City or Town, State, Country and Zip Code)*	440-395-4460 *(Area Code) (Telephone Number)*
Internet Web Site Address	PROGRESSIVE.COM	
Statutory Statement Contact	MARY BETH ANDREANO *(Name)*	440-395-4460 *(Area Code) (Telephone Number) (Extension)*
	FINANCIAL_REPORTING@PROGRESSIVE.COM *(E-Mail Address)*	440-603-5500 *(Fax Number)*

POLICYHOLDER SERVICES AND CLAIMS REPORTING -- 1-800-PROGRESSIVE (1-800-776-4737)

OFFICERS

Name	Title	Name	Title
BRIAN JACOB GURA	PRESIDENT	MICHAEL ROBERT UTH	SECRETARY
DANIEL JOSEPH WITALEC	TREASURER		

OTHER

SCOTT EDWARD COLEMAN	(ASST. TREASURER)	MICHAEL VINCENT ESPOSITO #	(VICE PRESIDENT)
KAREN ANN KOSUDA	(ASST. SECRETARY)	MARIANN WOJTKUN MARSHALL	(VICE PRESIDENT)

DIRECTORS OR TRUSTEES

MICHAEL VINCENT ESPOSITO #	BRIAN JACOB GURA	SANJAY MAHESH VYAS	DANIEL JOSEPH WITALEC
SCOTT WESLEY ZIEGLER #			

State of....... OHIO
County of..... CUYAHOGA

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)
BRIAN JACOB GURA	KAREN ANN KOSUDA	SCOTT EDWARD COLEMAN
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
PRESIDENT	ASSISTANT SECRETARY	ASSISTANT TREASURER
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This 13TH 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)

* 4 4 2 8 8 2 0 1 8 4 3 0 0 9 1 0 0 *

NAIC Group Code.....155 NAIC Company Code....44 BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR

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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1. Fire		0				0			0			
2.1 Allied lines		0				0			0			
2.2 Multiple peril crop		0				0			0			
2.3 Federal flood		0				0			0			
2.4 Private crop		0				0			0			
2.5 Private flood		0				0			0			
3. Farmowners multiple peril		0				0			0			
4. Homeowners multiple peril		0				0			0			
5.1 Commercial multiple peril (non-liability portion)		0				0			0			
5.2 Commercial multiple peril (liability portion)		0				0			0			
6. Mortgage guaranty		0				0			0			
8. Ocean marine		0				0			0			
9. Inland marine		0				0			0			
10. Financial guaranty		0				0			0			
11. Medical professional liability		0				0			0			
12. Earthquake		0				0			0			
13. Group accident and health (b)		0				0			0			
14. Credit A & H (group and individual)		0				0			0			
15.1 Collectively renewable A&H (b)		0				0			0			
15.2 Non-cancelable A & H (b)		0				0			0			
15.3 Guaranteed renewable A & H (b)		0				0			0			
15.4 Non-renewable for stated reasons only (b)		0				0			0			
15.5 Other accident only		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees		0				0			0			
15.7 All other A & H (b)		0				0			0			
15.8 Federal employees health benefits plan premium		0				0			0			
16. Workers' compensation		0				0			0			
17.1 Other liability-occurrence		0				0			0			
17.2 Other liability-claims-made		0				0			0			
17.3 Excess workers' compensation		0				0			0			
18. Products liability		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection)		0				0			0			
19.2 Other private passenger auto liability		0				0			0			1,560
19.3 Commercial auto no-fault (personal injury protection)		0				0			0			
19.4 Other commercial auto liability		0				0			0			
21.1 Private passenger auto physical damage		0				0			0			
21.2 Commercial auto physical damage		0				0			0			
22. Aircraft (all perils)		0				0			0			
23. Fidelity		0				0			0			
24. Surety		0				0			0			
26. Burglary and theft		0				0			0			
27. Boiler and machinery		0				0			0			
28. Credit		0				0			0			
30. Warranty		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. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	1,560
DETAILS OF WRITE-INS												
3401.		0				0			0			
3402.		0				0			0			
3403.		0				0			0			
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 $..............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.

Annual Statement for the year 2018 of the **PROGRESSIVE CHOICE INSURANCE COMPANY**

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code.....155 NAIC Company Code....44 BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire		0				0			0			
2.1 Allied lines		0				0			0			
2.2 Multiple peril crop		0				0			0			
2.3 Federal flood		0				0			0			
2.4 Private crop		0				0			0			
2.5 Private flood		0				0			0			
3. Farmowners multiple peril		0				0			0			
4. Homeowners multiple peril		0				0			0			
5.1 Commercial multiple peril (non-liability portion)		0				0			0			
5.2 Commercial multiple peril (liability portion)		0				0			0			
6. Mortgage guaranty		0				0			0			
8. Ocean marine		0				0			0			
9. Inland marine		0				0			0			
10. Financial guaranty		0				0			0			
11. Medical professional liability		0				0			0			
12. Earthquake		0				0			0			
13. Group accident and health (b)		0				0			0			
14. Credit A & H (group and individual)		0				0			0			
15.1 Collectively renewable A&H (b)		0				0			0			
15.2 Non-cancelable A & H (b)		0				0			0			
15.3 Guaranteed renewable A & H (b)		0				0			0			
15.4 Non-renewable for stated reasons only (b)		0				0			0			
15.5 Other accident only		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees		0				0			0			
15.7 All other A & H (b)		0				0			0			
15.8 Federal employees health benefits plan premium		0				0			0			
16. Workers' compensation		0				0			0			
17.1 Other liability-occurrence		0				0			0			
17.2 Other liability-claims-made		0				0			0			
17.3 Excess workers' compensation		0				0			0			
18. Products liability		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection)		0				0			0			
19.2 Other private passenger auto liability		0				0			0			954
19.3 Commercial auto no-fault (personal injury protection)		0				0			0			
19.4 Other commercial auto liability		0				0			0			
21.1 Private passenger auto physical damage		0				0			0			
21.2 Commercial auto physical damage		0				0			0			
22. Aircraft (all perils)		0				0			0			
23. Fidelity		0				0			0			
24. Surety		0				0			0			
26. Burglary and theft		0				0			0			
27. Boiler and machinery		0				0			0			
28. Credit		0				0			0			
30. Warranty		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. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	954
DETAILS OF WRITE-INS												
3401.		0				0			0			
3402.		0				0			0			
3403.		0				0			0			
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 $..............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)

* 4 4 2 8 8 2 0 1 8 4 3 0 5 9 1 0 0 *

NAIC Group Code.....155 NAIC Company Code....44

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 1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1. Fire		0				0			0			
2.1 Allied lines		0				0			0			
2.2 Multiple peril crop		0				0			0			
2.3 Federal flood		0				0			0			
2.4 Private crop		0				0			0			
2.5 Private flood		0				0			0			
3. Farmowners multiple peril		0				0			0			
4. Homeowners multiple peril		0				0			0			
5.1 Commercial multiple peril (non-liability portion)		0				0			0			
5.2 Commercial multiple peril (liability portion)		0				0			0			
6. Mortgage guaranty		0				0			0			
8. Ocean marine		0				0			0			
9. Inland marine		0				0			0			
10. Financial guaranty		0				0			0			
11. Medical professional liability		0				0			0			
12. Earthquake		0				0			0			
13. Group accident and health (b)		0				0			0			
14. Credit A & H (group and individual)		0				0			0			
15.1 Collectively renewable A&H (b)		0				0			0			
15.2 Non-cancelable A & H (b)		0				0			0			
15.3 Guaranteed renewable A & H (b)		0				0			0			
15.4 Non-renewable for stated reasons only (b)		0				0			0			
15.5 Other accident only		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees		0				0			0			
15.7 All other A & H (b)		0				0			0			
15.8 Federal employees health benefits plan premium		0				0			0			
16. Workers' compensation		0				0			0			
17.1 Other liability-occurrence		0				0			0			
17.2 Other liability-claims-made		0				0			0			
17.3 Excess workers' compensation		0				0			0			
18. Products liability		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection)		0				0			0			
19.2 Other private passenger auto liability		0				0			0			23,005
19.3 Commercial auto no-fault (personal injury protection)		0				0			0			
19.4 Other commercial auto liability		0				0			0			
21.1 Private passenger auto physical damage		0				0			0			
21.2 Commercial auto physical damage		0				0			0			
22. Aircraft (all perils)		0				0			0			
23. Fidelity		0				0			0			
24. Surety		0				0			0			
26. Burglary and theft		0				0			0			
27. Boiler and machinery		0				0			0			
28. Credit		0				0			0			
30. Warranty		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. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	23,005

DETAILS OF WRITE-INS

3401.		0				0			0			
3402.		0				0			0			
3403.		0				0			0			
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 $..............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)

* 4 4 2 8 8 2 0 1 8 4 3 0 1 4 0 0 0 *

NAIC Group Code.....155 NAIC Company Code....44

BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1. Fire		0				0			0			
2.1 Allied lines		0				0			0			
2.2 Multiple peril crop		0				0			0			
2.3 Federal flood		0				0			0			
2.4 Private crop		0				0			0			
2.5 Private flood		0				0			0			
3. Farmowners multiple peril		0				0			0			
4. Homeowners multiple peril		0				0			0			
5.1 Commercial multiple peril (non-liability portion)		0				0			0			
5.2 Commercial multiple peril (liability portion)		0				0			0			
6. Mortgage guaranty		0				0			0			
8. Ocean marine		0				0			0			
9. Inland marine		0				0			0			
10. Financial guaranty		0				0			0			
11. Medical professional liability		0				0			0			
12. Earthquake		0				0			0			
13. Group accident and health (b)		0				0			0			
14. Credit A & H (group and individual)		0				0			0			
15.1 Collectively renewable A&H (b)		0				0			0			
15.2 Non-cancelable A & H (b)		0				0			0			
15.3 Guaranteed renewable A & H (b)		0				0			0			
15.4 Non-renewable for stated reasons only (b)		0				0			0			
15.5 Other accident only		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees		0				0			0			
15.7 All other A & H (b)		0							0			
15.8 Federal employees health benefits plan premium		0							0			
16. Workers' compensation		0							0			
17.1 Other liability-occurrence		0				0			0			
17.2 Other liability-claims-made		0				0			0			
17.3 Excess workers' compensation		0				0			0			
18. Products liability		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection)		0				0			0			
19.2 Other private passenger auto liability		0				0			0			
19.3 Commercial auto no-fault (personal injury protection)		0				0			0			
19.4 Other commercial auto liability		0				0			0			
21.1 Private passenger auto physical damage		0				0			0			
21.2 Commercial auto physical damage		0				0			0			
22. Aircraft (all perils)		0				0			0			
23. Fidelity		0				0			0			
24. Surety		0				0			0			
26. Burglary and theft		0				0			0			
27. Boiler and machinery		0				0			0			
28. Credit		0				0			0			
30. Warranty		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. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS												
3401.		0				0			0			
3402.		0				0			0			
3403.		0				0			0			
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

NONE

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

* 4 4 2 8 8 2 0 1 8 4 3 0 1 7 1 0 0 *

NAIC Group Code.....155 NAIC Company Code.....44

BUSINESS IN THE STATE OF KANSAS DURING THE YEAR

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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1. Fire		0				0			0			
2.1 Allied lines		0				0			0			
2.2 Multiple peril crop		0				0			0			
2.3 Federal flood		0				0			0			
2.4 Private crop		0				0			0			
2.5 Private flood		0				0			0			
3. Farmowners multiple peril		0				0			0			
4. Homeowners multiple peril		0				0			0			
5.1 Commercial multiple peril (non-liability portion)		0				0			0			
5.2 Commercial multiple peril (liability portion)		0				0			0			
6. Mortgage guaranty		0				0			0			
8. Ocean marine		0				0			0			
9. Inland marine		0				0			0			
10. Financial guaranty		0				0			0			
11. Medical professional liability		0				0			0			
12. Earthquake		0				0			0			
13. Group accident and health (b)		0				0			0			
14. Credit A & H (group and individual)		0				0			0			
15.1 Collectively renewable A&H (b)		0				0			0			
15.2 Non-cancelable A & H (b)		0				0			0			
15.3 Guaranteed renewable A & H (b)		0				0			0			
15.4 Non-renewable for stated reasons only (b)		0				0			0			
15.5 Other accident only		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees		0				0			0			
15.7 All other A & H (b)		0				0			0			
15.8 Federal employees health benefits plan premium		0				0			0			
16. Workers' compensation		0				0			0			
17.1 Other liability-occurrence		0				0			0			
17.2 Other liability-claims-made		0				0			0			
17.3 Excess workers' compensation		0				0			0			
18. Products liability		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection)		0				0			0			
19.2 Other private passenger auto liability		0				0			0			660
19.3 Commercial auto no-fault (personal injury protection)		0				0			0			
19.4 Other commercial auto liability		0				0			0			
21.1 Private passenger auto physical damage		0				0			0			
21.2 Commercial auto physical damage		0				0			0			
22. Aircraft (all perils)		0				0			0			
23. Fidelity		0				0			0			
24. Surety		0				0			0			
26. Burglary and theft		0				0			0			
27. Boiler and machinery		0				0			0			
28. Credit		0				0			0			
30. Warranty		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. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	660

DETAILS OF WRITE-INS

3401.		0				0			0			
3402.		0				0			0			
3403.		0				0			0			
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 $..............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)

* 4 4 2 8 8 2 0 1 8 4 3 0 1 9 1 0 0 *

NAIC Group Code.....155 NAIC Company Code....44 BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR

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			
2.1 Allied lines		0				0			0			
2.2 Multiple peril crop		0				0			0			
2.3 Federal flood		0				0			0			
2.4 Private crop		0				0			0			
2.5 Private flood		0				0			0			
3. Farmowners multiple peril		0				0			0			
4. Homeowners multiple peril		0				0			0			
5.1 Commercial multiple peril (non-liability portion)		0				0			0			
5.2 Commercial multiple peril (liability portion)		0				0			0			
6. Mortgage guaranty		0				0			0			
8. Ocean marine		0				0			0			
9. Inland marine		0				0			0			
10. Financial guaranty		0				0			0			
11. Medical professional liability		0				0			0			
12. Earthquake		0				0			0			
13. Group accident and health (b)		0				0			0			
14. Credit A & H (group and individual)		0				0			0			
15.1 Collectively renewable A&H (b)		0				0			0			
15.2 Non-cancelable A & H (b)		0				0			0			
15.3 Guaranteed renewable A & H (b)		0				0			0			
15.4 Non-renewable for stated reasons only (b)		0				0			0			
15.5 Other accident only		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees		0				0			0			
15.7 All other A & H (b)		0				0			0			
15.8 Federal employees health benefits plan premium		0				0			0			
16. Workers' compensation		0				0			0			
17.1 Other liability-occurrence		0				0			0			
17.2 Other liability-claims-made		0				0			0			
17.3 Excess workers' compensation		0				0			0			
18. Products liability		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection)		0				0			0			
19.2 Other private passenger auto liability		0				0			0			4,185
19.3 Commercial auto no-fault (personal injury protection)		0				0			0			
19.4 Other commercial auto liability		0				0			0			
21.1 Private passenger auto physical damage		0				0			0			
21.2 Commercial auto physical damage		0				0			0			
22. Aircraft (all perils)		0				0			0			
23. Fidelity		0				0			0			
24. Surety		0				0			0			
26. Burglary and theft		0				0			0			
27. Boiler and machinery		0				0			0			
28. Credit		0				0			0			
30. Warranty		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. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	4,185

DETAILS OF WRITE-INS

	1	2	3	4	5	6	7	8	9	10	11	12
3401.		0				0			0			
3402.		0				0			0			
3403.		0				0			0			
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 $..............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)

* 4 4 2 8 8 2 0 1 8 4 3 0 3 5 1 0 0 *

NAIC Group Code.....155 NAIC Company Code....44 BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR

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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1. Fire		0				0			0			
2.1 Allied lines		0				0			0			
2.2 Multiple peril crop		0				0			0			
2.3 Federal flood		0				0			0			
2.4 Private crop		0				0			0			
2.5 Private flood		0				0			0			
3. Farmowners multiple peril		0				0			0			
4. Homeowners multiple peril		0				0			0			
5.1 Commercial multiple peril (non-liability portion)		0				0			0			
5.2 Commercial multiple peril (liability portion)		0				0			0			
6. Mortgage guaranty		0				0			0			
8. Ocean marine		0				0			0			
9. Inland marine		0				0			0			
10. Financial guaranty		0				0			0			
11. Medical professional liability		0				0			0			
12. Earthquake		0				0			0			
13. Group accident and health (b)		0				0			0			
14. Credit A & H (group and individual)		0				0			0			
15.1 Collectively renewable A&H (b)		0				0			0			
15.2 Non-cancelable A & H (b)		0				0			0			
15.3 Guaranteed renewable A & H (b)		0				0			0			
15.4 Non-renewable for stated reasons only (b)		0				0			0			
15.5 Other accident only		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees		0				0			0			
15.7 All other A & H (b)		0				0			0			
15.8 Federal employees health benefits plan premium		0				0			0			
16. Workers' compensation		0				0			0			
17.1 Other liability-occurrence		0				0			0			
17.2 Other liability-claims-made		0				0			0			
17.3 Excess workers' compensation		0				0			0			
18. Products liability		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection)		0				0			0			
19.2 Other private passenger auto liability		0				0			0			862
19.3 Commercial auto no-fault (personal injury protection)		0				0			0			
19.4 Other commercial auto liability		0				0			0			
21.1 Private passenger auto physical damage		0				0			0			
21.2 Commercial auto physical damage		0				0			0			
22. Aircraft (all perils)		0				0			0			
23. Fidelity		0				0			0			
24. Surety		0				0			0			
26. Burglary and theft		0				0			0			
27. Boiler and machinery		0				0			0			
28. Credit		0				0			0			
30. Warranty		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. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	862
DETAILS OF WRITE-INS												
3401.		0				0			0			
3402.		0				0			0			
3403.		0				0			0			
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 $..............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)

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

NAIC Group Code.....155 NAIC Company Code....44 BUSINESS IN THE STATE OF OHIO DURING THE YEAR

	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
Line of Business	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			
2.1 Allied lines		0				0			0			
2.2 Multiple peril crop		0				0			0			
2.3 Federal flood		0				0			0			
2.4 Private crop		0				0			0			
2.5 Private flood		0				0			0			
3. Farmowners multiple peril		0				0			0			
4. Homeowners multiple peril		0				0			0			
5.1 Commercial multiple peril (non-liability portion)		0				0			0			
5.2 Commercial multiple peril (liability portion)		0				0			0			
6. Mortgage guaranty		0				0			0			
8. Ocean marine		0				0			0			
9. Inland marine		0				0			0			
10. Financial guaranty		0				0			0			
11. Medical professional liability		0				0			0			
12. Earthquake		0				0			0			
13. Group accident and health (b)		0				0			0			
14. Credit A & H (group and individual)		0				0			0			
15.1 Collectively renewable A&H (b)		0				0			0			
15.2 Non-cancelable A & H (b)		0				0			0			
15.3 Guaranteed renewable A & H (b)		0				0			0			
15.4 Non-renewable for stated reasons only (b)		0				0			0			
15.5 Other accident only		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees		0				0			0			
15.7 All other A & H (b)		0				0			0			
15.8 Federal employees health benefits plan premium		0				0			0			
16. Workers' compensation		0				0			0			
17.1 Other liability-occurrence		0				0			0			
17.2 Other liability-claims-made		0				0			0			
17.3 Excess workers' compensation		0				0			0			
18. Products liability		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection)		0				0			0			
19.2 Other private passenger auto liability		0				0			0			11,588
19.3 Commercial auto no-fault (personal injury protection)		0				0			0			
19.4 Other commercial auto liability		0				0			0			
21.1 Private passenger auto physical damage		0				0			0			
21.2 Commercial auto physical damage		0				0			0			
22. Aircraft (all perils)		0				0			0			
23. Fidelity		0				0			0			
24. Surety		0				0			0			
26. Burglary and theft		0				0			0			
27. Boiler and machinery		0				0			0			
28. Credit		0				0			0			
30. Warranty		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. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	11,588
DETAILS OF WRITE-INS												
3401.		0				0			0			
3402.		0				0			0			
3403.		0				0			0			
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 $..............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)

* 4 4 2 8 8 2 0 1 8 4 3 0 3 9 1 0 0 *

NAIC Group Code.....155 NAIC Company Code....44 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		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			
2.1 Allied lines		0				0			0			
2.2 Multiple peril crop		0				0			0			
2.3 Federal flood		0				0			0			
2.4 Private crop		0				0			0			
2.5 Private flood		0				0			0			
3. Farmowners multiple peril		0				0			0			
4. Homeowners multiple peril		0				0			0			
5.1 Commercial multiple peril (non-liability portion)		0				0			0			
5.2 Commercial multiple peril (liability portion)		0				0			0			
6. Mortgage guaranty		0				0			0			
8. Ocean marine		0				0			0			
9. Inland marine		0				0			0			
10. Financial guaranty		0				0			0			
11. Medical professional liability		0				0			0			
12. Earthquake		0				0			0			
13. Group accident and health (b)		0				0			0			
14. Credit A & H (group and individual)		0				0			0			
15.1 Collectively renewable A&H (b)		0				0			0			
15.2 Non-cancelable A & H (b)		0				0			0			
15.3 Guaranteed renewable A & H (b)		0				0			0			
15.4 Non-renewable for stated reasons only (b)		0				0			0			
15.5 Other accident only		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees		0				0			0			
15.7 All other A & H (b)		0				0			0			
15.8 Federal employees health benefits plan premium		0				0			0			
16. Workers' compensation		0				0			0			
17.1 Other liability-occurrence		0				0			0			
17.2 Other liability-claims-made		0				0			0			
17.3 Excess workers' compensation		0				0			0			
18. Products liability		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection)		0				0			0			
19.2 Other private passenger auto liability		0				0			0			850
19.3 Commercial auto no-fault (personal injury protection)		0				0			0			
19.4 Other commercial auto liability		0				0			0			
21.1 Private passenger auto physical damage		0				0			0			
21.2 Commercial auto physical damage		0				0			0			
22. Aircraft (all perils)		0				0			0			
23. Fidelity		0				0			0			
24. Surety		0				0			0			
26. Burglary and theft		0				0			0			
27. Boiler and machinery		0				0			0			
28. Credit		0				0			0			
30. Warranty		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. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	850
DETAILS OF WRITE-INS												
3401.		0				0			0			
3402.		0				0			0			
3403.		0				0			0			
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 $..............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)

* 4 4 2 8 8 2 0 1 8 4 3 0 4 3 0 0 0 *

NAIC Group Code.....155 NAIC Company Code....44 BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1. Fire		0				0			0			
2.1 Allied lines		0				0			0			
2.2 Multiple peril crop		0				0			0			
2.3 Federal flood		0				0			0			
2.4 Private crop		0				0			0			
2.5 Private flood		0				0			0			
3. Farmowners multiple peril		0				0			0			
4. Homeowners multiple peril		0				0			0			
5.1 Commercial multiple peril (non-liability portion)		0				0			0			
5.2 Commercial multiple peril (liability portion)		0				0			0			
6. Mortgage guaranty		0				0			0			
8. Ocean marine		0				0			0			
9. Inland marine		0				0			0			
10. Financial guaranty		0				0			0			
11. Medical professional liability		0				0			0			
12. Earthquake		0				0			0			
13. Group accident and health (b)		0				0			0			
14. Credit A & H (group and individual)		0				0			0			
15.1 Collectively renewable A&H (b)		0				0			0			
15.2 Non-cancelable A & H (b)		0				0			0			
15.3 Guaranteed renewable A & H (b)		0				0			0			
15.4 Non-renewable for stated reasons only (b)		0				0			0			
15.5 Other accident only		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees		0				0			0			
15.7 All other A & H (b)		0							0			
15.8 Federal employees health benefits plan premium		0							0			
16. Workers' compensation		0							0			
17.1 Other liability-occurrence		0				0			0			
17.2 Other liability-claims-made		0				0			0			
17.3 Excess workers' compensation		0				0			0			
18. Products liability		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection)		0				0			0			
19.2 Other private passenger auto liability		0				0			0			
19.3 Commercial auto no-fault (personal injury protection)		0				0			0			
19.4 Other commercial auto liability		0				0			0			
21.1 Private passenger auto physical damage		0				0			0			
21.2 Commercial auto physical damage		0				0			0			
22. Aircraft (all perils)		0				0			0			
23. Fidelity		0				0			0			
24. Surety		0				0			0			
26. Burglary and theft		0				0			0			
27. Boiler and machinery		0				0			0			
28. Credit		0				0			0			
30. Warranty		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. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS												
3401.		0				0			0			
3402.		0				0			0			
3403.		0				0			0			
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

NONE

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

Annual Statement for the year 2018 of the **PROGRESSIVE CHOICE INSURANCE COMPANY**

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

* 4 4 2 8 8 2 0 1 8 4 3 0 4 4 1 0 0 *

NAIC Group Code.....155 NAIC Company Code....44 BUSINESS IN THE STATE OF TEXAS DURING THE YEAR

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 Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1. Fire		0				0			0			
2.1 Allied lines		0				0			0			
2.2 Multiple peril crop		0				0			0			
2.3 Federal flood		0				0			0			
2.4 Private crop		0				0			0			
2.5 Private flood		0				0			0			
3. Farmowners multiple peril		0				0			0			
4. Homeowners multiple peril		0				0			0			
5.1 Commercial multiple peril (non-liability portion)		0				0			0			
5.2 Commercial multiple peril (liability portion)		0				0			0			
6. Mortgage guaranty		0				0			0			
8. Ocean marine		0				0			0			
9. Inland marine		0				0			0			
10. Financial guaranty		0				0			0			
11. Medical professional liability		0				0			0			
12. Earthquake		0				0			0			
13. Group accident and health (b)		0				0			0			
14. Credit A & H (group and individual)		0				0			0			
15.1 Collectively renewable A&H (b)		0				0			0			
15.2 Non-cancelable A & H (b)		0				0			0			
15.3 Guaranteed renewable A & H (b)		0				0			0			
15.4 Non-renewable for stated reasons only (b)		0				0			0			
15.5 Other accident only		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees		0				0			0			
15.7 All other A & H (b)		0				0			0			
15.8 Federal employees health benefits plan premium		0				0			0			
16. Workers' compensation		0				0			0			
17.1 Other liability-occurrence		0				0			0			
17.2 Other liability-claims-made		0				0			0			
17.3 Excess workers' compensation		0				0			0			
18. Products liability		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection)		0				0			0			
19.2 Other private passenger auto liability		0				0			0			750
19.3 Commercial auto no-fault (personal injury protection)		0				0			0			
19.4 Other commercial auto liability		0				0			0			
21.1 Private passenger auto physical damage		0				0			0			
21.2 Commercial auto physical damage		0				0			0			
22. Aircraft (all perils)		0				0			0			
23. Fidelity		0				0			0			
24. Surety		0				0			0			
26. Burglary and theft		0				0			0			
27. Boiler and machinery		0				0			0			
28. Credit		0				0			0			
30. Warranty		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. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	750
DETAILS OF WRITE-INS												
3401.		0				0			0			
3402.		0				0			0			
3403.		0				0			0			
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 $..............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)

* 4 4 2 8 8 2 0 1 8 4 3 0 4 9 1 0 0 *

NAIC Group Code.....155 NAIC Company Code....44

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 1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1. Fire		0				0			0			
2.1 Allied lines		0				0			0			
2.2 Multiple peril crop		0				0			0			
2.3 Federal flood		0				0			0			
2.4 Private crop		0				0			0			
2.5 Private flood		0				0			0			
3. Farmowners multiple peril		0				0			0			
4. Homeowners multiple peril		0				0			0			
5.1 Commercial multiple peril (non-liability portion)		0				0			0			
5.2 Commercial multiple peril (liability portion)		0				0			0			
6. Mortgage guaranty		0				0			0			
8. Ocean marine		0				0			0			
9. Inland marine		0				0			0			
10. Financial guaranty		0				0			0			
11. Medical professional liability		0				0			0			
12. Earthquake		0				0			0			
13. Group accident and health (b)		0				0			0			
14. Credit A & H (group and individual)		0				0			0			
15.1 Collectively renewable A&H (b)		0				0			0			
15.2 Non-cancelable A & H (b)		0				0			0			
15.3 Guaranteed renewable A & H (b)		0				0			0			
15.4 Non-renewable for stated reasons only (b)		0				0			0			
15.5 Other accident only		0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees		0				0			0			
15.7 All other A & H (b)		0				0			0			
15.8 Federal employees health benefits plan premium		0				0			0			
16. Workers' compensation		0				0			0			
17.1 Other liability-occurrence		0				0			0			
17.2 Other liability-claims-made		0				0			0			
17.3 Excess workers' compensation		0				0			0			
18. Products liability		0				0			0			
19.1 Private passenger auto no-fault (personal injury protection)		0				0			0			
19.2 Other private passenger auto liability		0				0			0			1,596
19.3 Commercial auto no-fault (personal injury protection)		0				0			0			
19.4 Other commercial auto liability		0				0			0			
21.1 Private passenger auto physical damage		0				0			0			
21.2 Commercial auto physical damage		0				0			0			
22. Aircraft (all perils)		0				0			0			
23. Fidelity		0				0			0			
24. Surety		0				0			0			
26. Burglary and theft		0				0			0			
27. Boiler and machinery		0				0			0			
28. Credit		0				0			0			
30. Warranty		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. TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	1,596
DETAILS OF WRITE-INS												
3401.		0				0			0			
3402.		0				0			0			
3403.		0				0			0			
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 $..............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

Sch. F - Pt. 3
NONE

Sch. F - Pt. 3
NONE

Sch. F - Pt. 3
NONE

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

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)	6,010,757		6,010,757
2.	Premiums and considerations (Line 15)			0
3.	Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)			0
4.	Funds held by or deposited with reinsured companies (Line 16.2)			0
5.	Other assets	60,628		60,628
6.	Net amount recoverable from reinsurers			0
7.	Protected cell assets (Line 27)			0
8.	Totals (Line 28)	6,071,385	0	6,071,385
	LIABILITIES (Page 3)			
9.	Losses and loss adjustment expenses (Lines 1 through 3)			0
10.	Taxes, expenses, and other obligations (Lines 4 through 8)	18,601		18,601
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	272,815		272,815
19.	Total liabilities excluding protected cell business (Line 26)	291,416	0	291,416
20.	Protected cell liabilities (Line 27)			0
21.	Surplus as regards policyholders (Line 37)	5,779,969	XXX	5,779,969
22.	Totals (Line 38)	6,071,385	0	6,071,385

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

If yes, give full explanation:

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

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

($000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned: 1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss and Loss Expense Payments: Loss Payments: 4 Direct and Assumed	5 Ceded	Defense and Cost Containment Payments: 6 Direct and Assumed	7 Ceded	Adjusting and Other Payments: 8 Direct and Assumed	9 Ceded	10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported-Direct and Assumed
1. Prior	XXX	XXX	XXX								0	XXX
2. 2009			0								0	
3. 2010			0								0	
4. 2011			0								0	
5. 2012			0								0	
6. 2013			0								0	
7. 2014			0								0	
8. 2015			0								0	
9. 2016			0								0	
10. 2017			0								0	
11. 2018			0								0	
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

NONE

	Losses Unpaid: Case Basis: 13 Direct and Assumed	14 Ceded	Bulk + IBNR: 15 Direct and Assumed	16 Ceded	Defense and Cost Containment Unpaid: Case Basis: 17 Direct and Assumed	18 Ceded	Bulk + IBNR: 19 Direct and Assumed	20 Ceded	Adjusting and Other Unpaid: 21 Direct and Assumed	22 Ceded	23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
1. Prior												0	
2. 2009												0	
3. 2010												0	
4. 2011												0	
5. 2012												0	
6. 2013												0	
7. 2014												0	
8. 2015												0	
9. 2016												0	
10. 2017												0	
11. 2018												0	
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred: 26 Direct and Assumed	27 Ceded	28 Net	Loss and Loss Expense Percentage (Incurred/Premiums Earned): 29 Direct and Assumed	30 Ceded	31 Net	Nontabular Discount: 32 Loss	33 Loss Expense	34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount: 35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	0	0
2. 2009	0	0	0	0.0	0.0	0.0				0	0
3. 2010	0	0	0	0.0	0.0	0.0				0	0
4. 2011	0	0	0	0.0	0.0	0.0				0	0
5. 2012	0	0	0	0.0	0.0	0.0				0	0
6. 2013	0	0	0	0.0	0.0	0.0				0	0
7. 2014	0	0	0	0.0	0.0	0.0				0	0
8. 2015	0	0	0	0.0	0.0	0.0				0	0
9. 2016	0	0	0	0.0	0.0	0.0				0	0
10. 2017	0	0	0	0.0	0.0	0.0				0	0
11. 2018	0	0	0	0.0	0.0	0.0				0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

($000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned 1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss and Loss Expense Payments: Loss Payments 4 Direct and Assumed	5 Ceded	Defense and Cost Containment Payments 6 Direct and Assumed	7 Ceded	Adjusting and Other Payments 8 Direct and Assumed	9 Ceded	10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported-Direct and Assumed
1. Prior	XXX	XXX	XXX								0	XXX
2. 2009	248,240	223,416	24,824	136,688	123,020	5,617	5,055	31,966	28,770	250	17,427	60,940
3. 2010	266,591	239,932	26,659	146,708	132,037	5,723	5,151	32,214	28,993	241	18,465	65,938
4. 2011	262,066	235,860	26,206	148,364	133,528	5,634	5,071	30,171	27,154	233	18,417	63,264
5. 2012	238,183	214,364	23,819	144,585	130,127	5,557	5,001	27,788	25,009	170	17,793	53,371
6. 2013	9,752	8,777	975	5,024	4,521	185	166	1,002	902	3	621	1,470
7. 2014			0								0	
8. 2015			0								0	
9. 2016			0								0	
10. 2017			0								0	
11. 2018			0								0	
12. Totals	XXX	XXX	XXX	581,369	523,232	22,716	20,444	123,141	110,827	896	72,723	XXX

	Losses Unpaid: Case Basis 13 Direct and Assumed	14 Ceded	Bulk + IBNR 15 Direct and Assumed	16 Ceded	Defense and Cost Containment Unpaid: Case Basis 17 Direct and Assumed	18 Ceded	Bulk + IBNR 19 Direct and Assumed	20 Ceded	Adjusting and Other Unpaid 21 Direct and Assumed	22 Ceded	23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
1. Prior												0	
2. 2009												0	
3. 2010												0	
4. 2011												0	
5. 2012												0	
6. 2013												0	
7. 2014												0	
8. 2015												0	
9. 2016												0	
10. 2017												0	
11. 2018												0	
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred 26 Direct and Assumed	27 Ceded	28 Net	Loss and Loss Expense Percentage (Incurred/Premiums Earned) 29 Direct and Assumed	30 Ceded	31 Net	Nontabular Discount 32 Loss	33 Loss Expense	34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount 35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	0	0
2. 2009	174,272	156,845	17,427	70.2	70.2	70.2				0	0
3. 2010	184,645	166,181	18,465	69.3	69.3	69.3				0	0
4. 2011	184,170	165,753	18,417	70.3	70.3	70.3				0	0
5. 2012	177,929	160,137	17,793	74.7	74.7	74.7				0	0
6. 2013	6,211	5,590	621	63.7	63.7	63.7				0	0
7. 2014	0	0	0	0.0	0.0	0.0				0	0
8. 2015	0	0	0	0.0	0.0	0.0				0	0
9. 2016	0	0	0	0.0	0.0	0.0				0	0
10. 2017	0	0	0	0.0	0.0	0.0				0	0
11. 2018	0	0	0	0.0	0.0	0.0				0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

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

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

($000 omitted)

	Premiums Earned			Loss and Loss Expense Payments								12
Years in Which Premiums Were Earned and Losses Were Incurred	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported- Direct and Assumed
	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
1. Prior	XXX	XXX	XXX								0	XXX
2. 2017			0								0	
3. 2018			0								0	
4. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22		Total	
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Anticipated	Net Losses and Expenses Unpaid	Number of Claims Outstanding- Direct and Assumed
1. Prior												0	
2. 2017												0	
3. 2018												0	
4. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	0	0
2. 2017	0	0	0	0.0	0.0	0.0				0	0
3. 2018	0	0	0	0.0	0.0	0.0				0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

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

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End ($000 omitted)										Development	
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018	11 One Year	12 Two Year
1. Prior											0	0
2. 2009											0	0
3. 2010	XXX										0	0
4. 2011	XXX	XXX									0	0
5. 2012	XXX	XXX	XXX								0	0
6. 2013	XXX	XXX	XXX	XXX							0	0
7. 2014	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals	0	0

NONE

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

Years in Which Losses Were Incurred	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018	11 One Year	12 Two Year
1. Prior	4,882	4,241	3,785	3,867	3,870	3,870	3,870	3,870	3,870	3,870	0	0
2. 2009	15,672	14,680	14,336	14,250	14,231	14,231	14,231	14,231	14,231	14,231	0	0
3. 2010	XXX	15,816	15,416	15,250	15,243	15,243	15,243	15,243	15,243	15,243	0	0
4. 2011	XXX	XXX	15,024	15,267	15,400	15,400	15,400	15,400	15,400	15,400	0	0
5. 2012	XXX	XXX	XXX	14,953	15,014	15,014	15,014	15,014	15,014	15,014	0	0
6. 2013	XXX	XXX	XXX	XXX	521	521	521	521	521	521	0	0
7. 2014	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals	0	0

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

Years in Which Losses Were Incurred	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018	11 One Year	12 Two Year
1. Prior											0	0
2. 2009											0	0
3. 2010	XXX										0	0
4. 2011	XXX	XXX									0	0
5. 2012	XXX	XXX	XXX								0	0
6. 2013	XXX	XXX	XXX	XXX							0	0
7. 2014	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals	0	0

NONE

SCHEDULE P - PART 2D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

Years in Which Losses Were Incurred	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018	11 One Year	12 Two Year
1. Prior											0	0
2. 2009											0	0
3. 2010	XXX										0	0
4. 2011	XXX	XXX									0	0
5. 2012	XXX	XXX	XXX								0	0
6. 2013	XXX	XXX	XXX	XXX							0	0
7. 2014	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals	0	0

NONE

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

Years in Which Losses Were Incurred	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018	11 One Year	12 Two Year
1. Prior											0	0
2. 2009											0	0
3. 2010	XXX										0	0
4. 2011	XXX	XXX									0	0
5. 2012	XXX	XXX	XXX								0	0
6. 2013	XXX	XXX	XXX	XXX							0	0
7. 2014	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals	0	0

NONE

SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End ($000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	One Year	Two Year
1. Prior											0	0
2. 2009											0	0
3. 2010	XXX										0	0
4. 2011	XXX	XXX									0	0
5. 2012	XXX	XXX	XXX								0	0
6. 2013	XXX	XXX	XXX	XXX							0	0
7. 2014	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals	0	0

NONE

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior											0	0
2. 2009											0	0
3. 2010	XXX										0	0
4. 2011	XXX	XXX									0	0
5. 2012	XXX	XXX	XXX								0	0
6. 2013	XXX	XXX	XXX	XXX							0	0
7. 2014	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals	0	0

NONE

SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER & MACHINERY)

1. Prior											0	0
2. 2009											0	0
3. 2010	XXX										0	0
4. 2011	XXX	XXX									0	0
5. 2012	XXX	XXX	XXX								0	0
6. 2013	XXX	XXX	XXX	XXX							0	0
7. 2014	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals	0	0

NONE

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior											0	0
2. 2009											0	0
3. 2010	XXX										0	0
4. 2011	XXX	XXX									0	0
5. 2012	XXX	XXX	XXX								0	0
6. 2013	XXX	XXX	XXX	XXX							0	0
7. 2014	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals	0	0

NONE

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior											0	0
2. 2009											0	0
3. 2010	XXX										0	0
4. 2011	XXX	XXX									0	0
5. 2012	XXX	XXX	XXX								0	0
6. 2013	XXX	XXX	XXX	XXX							0	0
7. 2014	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals	0	0

NONE

SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

NONE

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End ($000 omitted)										Development	
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018	11 One Year	12 Two Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										4. Totals	0	0

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(0)	(0)	(0)
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										4. Totals	(0)	(0)

SCHEDULE P - PART 2K - FIDELITY/SURETY

NONE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										4. Totals	0	0

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

NONE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										4. Totals	0	0

SCHEDULE P - PART 2M - INTERNATIONAL

NONE

1. Prior											0	0
2. 2009											0	0
3. 2010	XXX										0	0
4. 2011	XXX	XXX									0	0
5. 2012	XXX	XXX	XXX								0	0
6. 2013	XXX	XXX	XXX	XXX							0	0
7. 2014	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals	0	0

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

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End ($000 omitted) 1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018	11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
1. Prior	000											
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			

NONE

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior	000	2,489	3,322	3,702	3,870	3,870	3,870	3,870	3,870	3,870	36,437	23,380
2. 2009	6,892	11,124	12,880	13,901	14,231	14,231	14,231	14,231	14,231	14,231	34,975	25,965
3. 2010	XXX	7,558	11,996	13,968	15,243	15,243	15,243	15,243	15,243	15,243	37,971	27,967
4. 2011	XXX	XXX	7,702	12,094	15,400	15,400	15,400	15,400	15,400	15,400	37,202	26,062
5. 2012	XXX	XXX	XXX	7,917	15,014	15,014	15,014	15,014	15,014	15,014	31,848	21,523
6. 2013	XXX	XXX	XXX	XXX	521	521	521	521	521	521	828	642
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			

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior	000											
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			

NONE

SCHEDULE P - PART 3D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior	000											
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			

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior	000											
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			

NONE

SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End ($000 omitted)										11	12
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
1. Prior	000											
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			

NONE

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior	000											
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			

NONE

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior	000										XXX	XXX
2. 2009											XXX	XXX
3. 2010	XXX										XXX	XXX
4. 2011	XXX	XXX									XXX	XXX
5. 2012	XXX	XXX	XXX								XXX	XXX
6. 2013	XXX	XXX	XXX	XXX							XXX	XXX
7. 2014	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior	000											
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			

NONE

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior	000											
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			

NONE

SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

NONE

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Containment Expenses Reported at Year End ($000 omitted)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000			XXX	XXX
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000		(0)		
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3K - FIDELITY/SURETY

NONE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000			XXX	XXX
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

NONE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000			XXX	XXX
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

SCHEDULE P - PART 3M - INTERNATIONAL

NONE

1. Prior	000										XXX	XXX
2. 2009											XXX	XXX
3. 2010	XXX										XXX	XXX
4. 2011	XXX	XXX									XXX	XXX
5. 2012	XXX	XXX	XXX								XXX	XXX
6. 2013	XXX	XXX	XXX	XXX							XXX	XXX
7. 2014	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

NONE

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End ($000 omitted)									
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 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	

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior	754	292	69							
2. 2009	2,395	596	211	59						
3. 2010	XXX	2,054	525	193						
4. 2011	XXX	XXX	1,999	540						
5. 2012	XXX	XXX	XXX	1,879						
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	

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

NONE

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	

SCHEDULE P - PART 4D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

NONE

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	

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

NONE

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	

SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses 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	

NONE

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

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	

NONE

SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

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	

NONE

SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

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	

NONE

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

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	

NONE

SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

NONE

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End ($000 omitted)									
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4K - FIDELITY/SURETY

NONE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

NONE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4M - INTERNATIONAL

NONE

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	

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

SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018
1. Prior	8,804	1,592	417	110	9					
2. 2009	26,186	33,198	34,538	34,940	34,975	34,975	34,975	34,975	34,975	34,975
3. 2010	XXX	28,723	36,263	37,799	37,971	37,971	37,971	37,971	37,971	37,971
4. 2011	XXX	XXX	29,189	36,662	37,202	37,202	37,202	37,202	37,202	37,202
5. 2012	XXX	XXX	XXX	28,725	31,848	31,848	31,848	31,848	31,848	31,848
6. 2013	XXX	XXX	XXX	XXX	828	828	828	828	828	828
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 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018
1. Prior	2,071	574	158	53						
2. 2009	8,667	1,663	501	112						
3. 2010	XXX	8,847	1,917	537						
4. 2011	XXX	XXX	8,128	1,810						
5. 2012	XXX	XXX	XXX	6,989						
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 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018
1. Prior	2,805	247	34	10	(39)					
2. 2009	58,930	60,759	60,965	61,007	60,940	60,940	60,940	60,940	60,940	60,940
3. 2010	XXX	63,991	66,093	66,295	65,938	65,938	65,938	65,938	65,938	65,938
4. 2011	XXX	XXX	62,127	64,553	63,264	63,264	63,264	63,264	63,264	63,264
5. 2012	XXX	XXX	XXX	56,608	53,371	53,371	53,371	53,371	53,371	53,371
6. 2013	XXX	XXX	XXX	XXX	1,470	1,470	1,470	1,470	1,470	1,470
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	

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

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 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 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	

NONE

SECTION 5

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

NONE

SECTION 6

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

NONE

SECTION 7

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

NONE

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims-Made insurance policies. EREs provided for reasons other than DDR are not 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 [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). PER 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 [ ] No [X]

7.2 An extended statement may be attached.

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

	Direct Business Only					
States, Etc.	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 RSSD	CIK	Name of 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															
		00000	34-0963169		80661	NYSE	The Progressive Corporation	OH	UIP	Board, Management	Board		The Progressive Corporation	N	1, 3
		00000	83-0371533				Drive Insurance Holdings, Inc.	DE	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	11410	68-0004572				Drive New Jersey Insurance Company	NJ	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	12879	20-4093467				Progressive Commercial Casualty Company	OH	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	24252	34-1094197				Progressive American Insurance Company	OH	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	17350	31-1193845				Progressive Bayside Insurance Company	OH	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	24260	34-6513736				Progressive Casualty Insurance Company	OH	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	34-1576555				PC Investment Company	DE	NIA	Progressive Casualty Insurance Company	Ownership	100.000	The Progressive Corporation	Y	1, 3
0155	Progressive Insurance Group	29203	74-1082840				Progressive County Mutual Insurance Company	TX	IA	Progressive Casualty Insurance Company	Management		The Progressive Corporation	N	2, 3
0155	Progressive Insurance Group	42412	34-1374634				Progressive Gulf Insurance Company	OH	IA	Progressive Casualty Insurance Company	Ownership	100.000	The Progressive Corporation	Y	1, 3
0155	Progressive Insurance Group	32786	34-1172685				Progressive Specialty Insurance Company	OH	IA	Progressive Casualty Insurance Company	Ownership	100.000	The Progressive Corporation	Y	1, 3
		00000					Trussville/Cahaba, AL , LLC	OH	NIA	Progressive Specialty Insurance Company	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	42994	39-1453002				Progressive Classic Insurance Company	WI	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	10067	99-0311930				Progressive Hawaii Insurance Corp.	OH	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	10187	34-1787734				Progressive Michigan Insurance Company	MI	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	35190	93-0935623				Progressive Mountain Insurance Company	OH	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	38628	34-1318335				Progressive Northern Insurance Company	WI	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	42919	91-1187829				Progressive Northwestern Insurance Company	OH	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	37834	34-1287020				Progressive Preferred Insurance Company	OH	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	10050	72-1269745				Progressive Security Insurance Company	LA	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	38784	59-1951700				Progressive Southeastern Insurance Company	IN	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	27804	95-2676519				Progressive West Insurance Company	OH	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	12302	20-3187886				Progressive Freedom Insurance Company	OH	IA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	27-2393886				Progressive Commercial Advantage Agency, Inc.	OH	NIA	Drive Insurance Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	20-1583033				Progressive Commercial Holdings, Inc.	DE	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	10194	59-3213819				Artisan and Truckers Casualty Company	WI	IA	Progressive Commercial Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	10243	06-0281045				National Continental Insurance Company	NY	IA	Progressive Commercial Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	10193	59-3213719				Progressive Express Insurance Company	OH	IA	Progressive Commercial Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	11770	36-3298008				United Financial Casualty Company	OH	IA	Progressive Commercial Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	15643	47-1849658				Blue Hill Specialty Insurance Company, Inc.	IL	IA	Progressive Commercial Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	83-0371538				Progressive Direct Holdings, Inc.	DE	UDP	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	44180	23-2599971				Mountain Laurel Assurance Company	OH	IA	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	11851	62-0484104				Progressive Advanced Insurance Company	OH	IA	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	58-1772717				Progressive Auto Pro Insurance Agency, Inc.	FL	NIA	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	44288	62-1444848				Progressive Choice Insurance Company	OH	RE	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	16322	34-1524319				Progressive Direct Insurance Company	OH	IA	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3

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 RSSD	CIK	Name of 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)	*
		00000					Gadsden, AL, LLC	OH	NIA	Progressive Direct Insurance Company	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	14800	22-2404709				Progressive Garden State Insurance Company	NJ	IA	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	37605	33-0350911				Progressive Marathon Insurance Company	MI	IA	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	24279	34-0472535				Progressive Max Insurance Company	OH	IA	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	44695	86-0686869				Progressive Paloverde Insurance Company	IN	IA	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	21735	36-3789786				Progressive Premier Insurance Company of Illinois	OH	IA	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	10192	59-3213815				Progressive Select Insurance Company	OH	IA	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	34-1804869				Progressive Advantage Agency, Inc.	OH	NIA	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
0155	Progressive Insurance Group	21727	36-3789787				Progressive Universal Insurance Company	WI	IA	Progressive Direct Holdings, Inc.	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	99-0311966				Garden Sun Insurance Services, LLC	HI	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	95-2706008				Pacific Motor Club	CA	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	11-3203413				PROGNY Agency, Inc.	NY	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	34-1574447				Progressive Adjusting Company, Inc.	OH	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	13-3673368				Progressive Capital Management Corp.	NY	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	34-1378861				Progressive Investment Company, Inc.	DE	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	34-6530101				Progressive Premium Budget, Inc.	OH	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	34-1574448				Progressive RSC, Inc.	OH	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	20-2702408				Progressive Vehicle Service Company	OH	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	51-0295493				Village Transport Corp.	DE	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	34-1324270				Wilson Mills Land Co.	OH	NIA	The Progressive Corporation	Ownership	100.000	The Progressive Corporation	N	1, 3
		00000	80-0832526				Makaira Indica, LP	CA	NIA	Progressive Casualty Insurance Company	Other		The Progressive Corporation	N	1, 3, 4
		00000	59-3491541				ARX Holding Corp.	DE	NIA	The Progressive Corporation	Ownership	86.790	The Progressive Corporation	N	1, 3, 5
0155	Progressive Insurance Group	11072	56-2512990				ASI Home Insurance Corp.	FL	IA	ARX Holding Corp.	Ownership	100.000	The Progressive Corporation	N	1, 3, 5
0155	Progressive Insurance Group	13142	26-1996532				ASI Preferred Insurance Corp.	FL	IA	American Strategic Insurance Corp.	Ownership	40.000	The Progressive Corporation	N	1, 3, 5
0155	Progressive Insurance Group	13142	26-1996532				ASI Preferred Insurance Corp.	FL	IA	ARX Holding Corp.	Ownership	60.000	The Progressive Corporation	N	1, 3, 5
0155	Progressive Insurance Group	10872	59-3459912				American Strategic Insurance Corp.	FL	IA	ARX Holding Corp.	Ownership	100.000	The Progressive Corporation	N	1, 3, 5
0155	Progressive Insurance Group	11059	75-2904629				ASI Lloyds	TX	IA	ASI Lloyds, Inc.	Management		The Progressive Corporation	N	1, 3, 5, 6
0155	Progressive Insurance Group	12196	20-1284676				ASI Assurance Corp.	FL	IA	ARX Holding Corp.	Ownership	100.000	The Progressive Corporation	N	1, 3, 5
0155	Progressive Insurance Group	14042	27-3421622				ASI Select Insurance Corp.	DE	IA	ARX Holding Corp.	Ownership	100.000	The Progressive Corporation	N	1, 3, 5
		00000	59-3538810				ASI Services Inc.	FL	NIA	ARX Holding Corp.	Ownership	100.000	The Progressive Corporation	N	1, 3, 5
		00000	59-3621835				ASI Lloyds, Inc.	TX	NIA	ARX Holding Corp.	Ownership	100.000	The Progressive Corporation	N	1, 3, 5
		00000	59-3720125				ASI Underwriters of Texas, Inc.	TX	NIA	ARX Holding Corp.	Ownership	100.000	The Progressive Corporation	N	1, 3, 5
		00000	11-3644072				Sunshine Security Insurance Agency, Inc.	FL	NIA	ARX Holding Corp.	Ownership	100.000	The Progressive Corporation	N	1, 3, 5
		00000	59-3602626				ASI Underwriters Corp.	FL	NIA	ARX Holding Corp.	Ownership	100.000	The Progressive Corporation	N	1, 3, 5
		00000	01-0765428				e-Ins, LLC	FL	NIA	ARX Holding Corp.	Ownership	90.000	The Progressive Corporation	N	1, 3, 5
		00000	01-0765428				e-Ins, LLC	FL	NIA	ASI Underwriters Corp.	Ownership	10.000	The Progressive Corporation	N	1, 3, 5

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
0155.	Progressive Insurance Group	13038....	26-1142659...	....	....	....	Progressive Property Insurance Company.........................	FL...........	IA.................	ARX Holding Corp..	Ownership.........	....100.000	The Progressive Corporation..............	......N.......	1, 3, 5........
0155.	Progressive Insurance Group	16140....	81-1112584...	....	....	....	ASI Select Auto Insurance Corp...	CA..........	IA.................	ARX Holding Corp..	Ownership.........	....100.000	The Progressive Corporation..............	......N.......	1,3,5..........
....	....	00000....	26-0325360...	....	....	....	Ark Royal Underwriters, LLC..	FL...........	NIA...............	ARX Holding Corp..	Ownership.........	....100.000	The Progressive Corporation..............	......N.......	1, 3, 5........
....	....	00000....	47-4504370...	....	....	....	PropertyPlus Insurance Agency, Inc.................................	DE..........	NIA...............	ARX Holding Corp..	Ownership.........	....100.000	The Progressive Corporation..............	......N.......	1, 3, 5........

Aster	Explanation
1	Schedule Y Part 1A is a common schedule for all companies of The Progressive Corporation, however column 10 requires specific relationship information relative to the reporting entity.
2	Progressive County Mutual Insurance Company is a Texas county mutual insurance company that is managed, but not owned by Progressive Casualty Insurance Company.
3	None of the companies that are part of The Progressive Corporation are Federally chartered or insured institutions and therefore, do not have Federal RSSD numbers.
4	Makaira Indica, LP is a limited partnership in which Progressive Casualty Insurance Company is the sole limited partner.
5	Effective April 1, 2015, The Progressive Corporation purchased a majority ownership share in the ARX Holding Corp.
6	ASI Lloyds is a Texas Lloyds insurance company that is managed, but not owned by ASI Lloyds, Inc.

SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
	34-0963169	The Progressive Corporation					710,062,686			N/A	710,062,686	
	83-0371533	Drive Insurance Holdings, Inc.	680,800,000	(39,000,000)						N/A	641,800,000	
24260	34-6513736	Progressive Casualty Insurance Company	(251,400,000)		60,850,772		3,593,966,696	837,477,739	*	N/A	4,240,895,207	(2,937,673,663)
24252	34-1094197	Progressive American Insurance Company		32,000,000			(8,529,872)		*	N/A	23,470,128	
32786	34-1172685	Progressive Specialty Insurance Company	(135,600,000)		(6,998,133)		(33,348,056)		*	N/A	(175,946,189)	
38784	59-1951700	Progressive Southeastern Insurance Company					(4,792,438)		*	N/A	(4,792,438)	
38628	34-1318335	Progressive Northern Insurance Company	(92,000,000)		(7,697,946)		(56,638,237)		*	N/A	(156,336,183)	
37834	34-1287020	Progressive Preferred Insurance Company	(39,000,000)				(27,141,022)		*	N/A	(66,141,022)	
42412	34-1374634	Progressive Gulf Insurance Company	(12,000,000)				(8,345,334)		*	N/A	(20,345,334)	
42919	91-1187829	Progressive Northwestern Insurance Company	(81,000,000)		(5,998,400)		(59,376,895)		*	N/A	(146,375,295)	
42994	39-1453002	Progressive Classic Insurance Company	(15,000,000)				(12,542,899)		*	N/A	(27,542,899)	
17350	31-1193845	Progressive Bayside Insurance Company	(5,600,000)				(4,038,967)		*	N/A	(9,638,967)	
35190	93-0935623	Progressive Mountain Insurance Company		6,000,000			(5,244,718)		*	N/A	755,282	
10187	34-1787734	Progressive Michigan Insurance Company	(20,400,000)		(2,899,227)		(16,829,515)		*	N/A	(40,128,742)	
29203	74-1082840	Progressive County Mutual Insurance Company					(28,972,830)	(687,398,222)		N/A	(716,371,052)	2,044,033,053
27804	95-2676519	Progressive West Insurance Company		1,000,000			(56,114,687)	(31,334,944)		N/A	(86,449,631)	208,168,566
10050	72-1269745	Progressive Security Insurance Company	(2,500,000)				(64,600,270)	(79,939,258)		N/A	(147,039,528)	300,811,730
11410	68-0004572	Drive New Jersey Insurance Company					(53,724,396)	(39,540,414)		N/A	(93,264,810)	378,855,318
10067	99-0311930	Progressive Hawaii Insurance Corp.	(26,300,000)				(42,033,848)			N/A	(68,333,848)	
12879	20-4093467	Progressive Commercial Casualty Company					(10,457)	69,319		N/A	58,862	
	83-0371538	Progressive Direct Holdings, Inc.	198,100,000	(100,000,000)						N/A	98,100,000	
16322	34-1524319	Progressive Direct Insurance Company	(161,000,000)				(2,242,524,375)	111,066,989	*	N/A	(2,292,457,386)	(2,268,546,636)
24279	34-0472535	Progressive Max Insurance Company	(10,500,000)		(2,999,200)		(15,685,778)	(531,482)	*	N/A	(29,716,460)	302,865
44695	86-0686869	Progressive Paloverde Insurance Company		7,500,000			(1,507,229)		*	N/A	5,992,771	
21735	36-3789786	Progressive Premier Insurance Company of Illinois		8,000,000			(4,717,702)		*	N/A	3,282,298	
21727	36-3789787	Progressive Universal Insurance Company	(7,000,000)				(11,474,150)		*	N/A	(18,474,150)	
37605	33-0350911	Progressive Marathon Insurance Company	(3,000,000)		(2,999,200)		(15,161,075)		*	N/A	(21,160,275)	
10192	59-3213815	Progressive Select Insurance Company		60,000,000			(582,795,391)	(47,668,300)		N/A	(570,463,691)	1,717,932,611
44288	62-1444848	Progressive Choice Insurance Company					(9,233)			N/A	(9,233)	
11851	62-0484104	Progressive Advanced Insurance Company		24,000,000			(8,867,667)		*	N/A	15,132,333	
12302	20-3187886	Progressive Freedom Insurance Company					(8,706)			N/A	(8,706)	
14800	22-2404709	Progressive Garden State Insurance Company		500,000			(156,652,269)	(63,398,689)		N/A	(219,550,958)	550,614,025
44180	23-2599971	Mountain Laurel Assurance Company	(16,600,000)				(70,021,775)			N/A	(86,621,775)	
	20-1583033	Progressive Commercial Holdings, Inc.	60,000,000	(40,000,000)						N/A	20,000,000	
11770	36-3298008	United Financial Casualty Company	(57,000,000)		(3,998,933)		(368,448,894)	118,444,574		N/A	(311,003,253)	(1,297,591,041)
10243	06-0281045	National Continental Insurance Company	(3,000,000)				(29,631,319)	1,197,262		N/A	(31,434,057)	5,502,131
10194	59-3213819	Artisan and Truckers Casualty Company		1,000,000			(87,309,771)	(87,188,940)		N/A	(173,498,711)	593,850,951
10193	59-3213719	Progressive Express Insurance Company		39,000,000			(108,583,905)	(31,282,447)		N/A	(100,866,352)	703,740,090
15643	47-1849658	Blue Hill Specialty Insurance Company, Inc.					3,644	26,813		N/A	30,457	
	34-1576555	PC Investment Company			(289,348)		(6,233,464)			N/A	(6,522,812)	
	34-1378861	Progressive Investment Company, Inc.			(26,970,385)		(633,151)			N/A	(27,603,536)	

SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
	13-3673368	Progressive Capital Management Corp.					13,989,526			N/A	13,989,526	
	11-3203413	ProgNY Agency, Inc.					3			N/A	3	
	34-1574448	Progressive RSC, Inc.					11,577,916			N/A	11,577,916	
	34-1804869	Progressive Specialty Insurance Agency, Inc.					(111,141,809)			N/A	(111,141,809)	
	27-2393886	Progressive Commercial Advantage Agency, Inc.					248			N/A	248	
	34-1574447	Progressive Adjusting Company, Inc.					(91,776)			N/A	(91,776)	
	51-0295493	Village Transport Corp.					367,704			N/A	367,704	
	59-3491541	ARX Holding Corp.		(194,200,000)			(4,703,821)			N/A	(198,903,821)	
10872	59-3459912	American Strategic Insurance Corp.		166,700,000			(101,850,816)	(24,376,070)		N/A	40,473,114	273,406,068
11059	75-2904629	ASI Lloyds		5,000,000			(49,996,455)	(3,608,456)		N/A	(48,604,911)	(135,228,214)
13038	26-1142659	Progressive Property Insurance Company		2,500,000			(21,355,108)	18,803,953		N/A	(51,155)	(38,146,971)
12196	20-1284676	ASI Assurance Corp.					(411,504)	(18,777,775)		N/A	(19,189,279)	38,145,267
11072	56-2512990	ASI Home Insurance Corp.					(567,389)			N/A	(567,389)	
13142	26-1996532	ASI Preferred Insurance Corp.		7,000,000			(25,808,811)	7,095,248		N/A	(11,713,563)	(93,675,113)
14042	27-3421622	ASI Select Insurance Corp.		13,000,000			(1,479,744)	20,339,351		N/A	31,859,607	(42,899,154)
16140	81-1112584	ASI Select Auto Insurance Corp.					2,219,460	523,749		N/A	2,743,209	(1,601,883)
	59-3602626	ASI Underwriters Corp.					111,123,287			N/A	111,123,287	
	59-3720125	ASI Underwriters of Texas Inc.					30,297,293			N/A	30,297,293	
	26-0325360	Ark Royal Underwriters, LLC					21,765,204			N/A	21,765,204	
	11-3644072	Sunshine Security Insurance Agency Inc.					5,236,091			N/A	5,236,091	
	01-0765428	e-INS, LLC					7,146,657			N/A	7,146,657	
	47-4504370	PropertyPlus Insurance Agency, Inc.					2,201,113			N/A	2,201,113	
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 %
24260	Progressive Casualty Insurance Company	49.00%	16322	Progressive Direct Insurance Company	77.50%
24252	Progressive American Insurance Company	2.00%	24279	Progressive Max Insurance Company	6.00%
32786	Progressive Specialty Insurance Company	7.00%	21735	Progressive Premier Insurance Company	2.00%
38784	Progressive Southeastern Insurance Company	1.00%	21727	Progressive Universal Insurance Company	4.00%
38628	Progressive Northern Insurance Company	12.00%	37605	Progressive Marathon Insurance Company	6.00%
37834	Progressive Preferred Insurance Company	6.00%	44695	Progressive Paloverde Insurance Company	0.50%
42412	Progressive Gulf Insurance Company	2.00%	11851	Progressive Advanced Insurance Company	4.00%
42919	Progressive Northwestern Insurance Company	12.00%			
42994	Progressive Classic Insurance Company	3.00%			
17350	Progressive Bayside Insurance Company	1.00%			
35190	Progressive Mountain Insurance Company	1.00%			
10187	Progressive Michigan Insurance Company	4.00%			

Detailed Explanation

For the above listed companies, see Annual Statement Footnote 26 for further information.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	MARCH FILING	Responses
1.	Will an actuarial opinion be filed by March 1?	SEE EXPLANATION
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?	SEE EXPLANATION
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	SEE EXPLANATION
	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?	SEE EXPLANATION

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)?	SEE EXPLANATION
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?	NO

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.

EXPLANATION:	BAR CODE:
1. THE COMPANY MEETS THE REQUIREMENTS FOR AND HAS RECEIVED AN EXEMPTION FROM THE OHIO DEPARTMENT OF INSURANCE ("DOI").	* 4 4 2 8 8 2 0 1 8 4 4 0 0 0 0 0 0 *
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9. THE COMPANY MEETS THE REQUIREMENTS FOR AND HAS RECEIVED AN EXEMPTION FROM THE OHIO DOI.	* 4 4 2 8 8 2 0 1 8 2 2 0 0 0 0 0 0 *
10. THE COMPANY MEETS THE REQUIREMENTS FOR AND HAS RECEIVED AN EXEMPTION FROM THE OHIO DOI.	* 4 4 2 8 8 2 0 1 8 2 2 1 0 0 0 0 0 *
11. THE COMPANY MEETS THE REQUIREMENTS FOR AND HAS RECEIVED AN EXEMPTION FROM THE OHIO DOI.	* 4 4 2 8 8 2 0 1 8 2 2 2 0 0 0 0 0 *
12. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 4 2 0 0 0 0 0 0 *
13. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 2 4 0 0 0 0 0 0 *
14. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 3 6 0 0 0 0 0 0 *
15. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 4 5 5 0 0 0 0 0 *
16. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 4 9 0 0 0 0 0 0 *
17. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 3 8 5 0 0 0 0 0 *
18. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 4 0 1 0 0 0 0 0 *
19. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 3 6 5 0 0 0 0 0 *
20. THE COMPANY MEETS THE REQUIREMENTS FOR AND HAS RECEIVED AN EXEMPTION FROM THE OHIO DOI.	* 4 4 2 8 8 2 0 1 8 4 4 1 0 0 0 0 0 *
21.	
22. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 4 0 0 0 0 0 0 0 *
23. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 5 0 0 0 0 0 0 0 *
24. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 5 0 5 0 0 0 0 0 *
25. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 2 2 4 0 0 0 0 0 *
26. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 2 2 5 0 0 0 0 0 *
27. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 2 2 6 0 0 0 0 0 *
28. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 5 5 5 0 0 0 0 0 *
29. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 2 3 0 0 0 0 0 0 *
30 The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 3 0 6 0 0 0 0 0 *
31. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 2 1 0 0 0 0 0 0 *
32. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 2 1 6 0 0 0 0 0 *
33. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 2 1 7 0 0 0 0 0 *
34. The data for this supplement is not required to be filed.	* 4 4 2 8 8 2 0 1 8 5 5 0 0 0 0 0 0 *

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.

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

44288201829000000

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

44288201830000000

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

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