



## PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

**ANNUAL STATEMENT**  
For the Year Ended December 31, 2019  
OF THE CONDITION AND AFFAIRS OF THE  
**GRANGE INSURANCE COMPANY OF MICHIGAN**

NAIC Group Code	00267 (Current Period)	00267 (Prior Period)	NAIC Company Code	11136	Employer's ID Number	31-1769414
Organized under the Laws of	Ohio		, State of Domicile or Port of Entry		Ohio	
Country of Domicile	United States					
Incorporated/Organized	04/23/2001		Commenced Business	07/26/2001		
Statutory Home Office	671 South High Street (Street and Number)		, Columbus, OH, US 43206-1014 (City or Town, State, Country and Zip Code)			
Main Administrative Office	671 South High Street (Street and Number)		Columbus, OH, US 43206-1014 (City or Town, State, Country and Zip Code)		614-445-2900 (Area Code) (Telephone Number)	
Mail Address	P.O. Box 1218 (Street and Number or P.O. Box)		, Columbus, OH, US 43216-1218 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	671 South High Street (Street and Number)		Columbus, OH, US 43206-1014 (City or Town, State, Country and Zip Code)		614-445-2900 (Area Code) (Telephone Number)	
Internet Web Site Address	www.grangeinsurance.com					
Statutory Statement Contact	Jeffrey P Siefker (Name)		614-445-2900 (Area Code) (Telephone Number) (Extension)			
	siefkerj@grangeinsurance.com (E-Mail Address)		614-542-3017 (Fax Number)			

## OFFICERS

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

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## OTHER OFFICERS

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JOHN CHRISTOPHER MONTGOMERY, VP - INVESTMENTS

# **DIRECTORS OR TRUSTEES**

**LEWIS BOYER**      **Douglas Ball**

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

State of Ohio.....

ss

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

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

JOHN (NMN) AMMENDOLA  
PRESIDENT & CEO

LAWAWN DEE COLEMAN  
EVP & SECRETARY

TERESA JEAN DALENTA  
EVP & CFO

Subscribed and sworn to before me  
this 21st day of February, 2020

a. Is this an original filing?	Yes [ <input checked="" type="checkbox"/> ] No [ <input type="checkbox"/> ]
b. If no:	
1. State the amendment number	_____
2. Date filed	_____
3. Number of pages attached	_____

Teresa J. Burchwell, Notary Public  
April 28, 2022



**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Michigan		DURING THE YEAR 2019							NAIC Company Code 11136		
		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
Line of Business													
1. Fire .....	317,308	342,906		169,902	405,958	414,291	19,647	8,404	6,706	2,849	52,400	.5,131	
2.1 Allied lines .....	170,486	182,901		90,386	140,305	155,086	19,274		(593)	1,864	28,547	.2,757	
2.2 Multiple peril crop .....													
2.3 Federal flood .....													
2.4 Private crop .....													
2.5 Private flood .....													
3. Farmowners multiple peril .....	298,645	299,782		160,508	21,706	6,790	9,398	103,383	2,052	6,271	.52,436	.4,830	
4. Homeowners multiple peril .....	7,546,726	8,514,287		4,070,093	4,311,025	3,167,042	1,367,334	134,072	.72,640	112,048	.1,153,233	.122,044	
5.1 Commercial multiple peril (non-liability portion) .....	6,213,483	6,003,708		2,972,625	3,818,032	3,853,331	1,122,461	231,498	86,167	.53,442	.1,090,358	.100,483	
5.2 Commercial multiple peril (liability portion) .....	3,339,989	3,386,881		1,448,937	1,000,002	133,630	3,616,757		305,627	1,916,157	.570,619	.54,013	
6. Mortgage guaranty .....													
8. Ocean marine .....													
9. Inland marine .....	157,131	166,567		79,342	296,790	333,185	55,117	692	801	.984	.24,004	.2,541	
10. Financial guaranty .....													
11. Medical professional liability .....													
12. Earthquake .....	1,278	1,507		539							.210	.21	
13. Group accident and health (b) .....													
14. Credit A & H (group and individual) .....													
15.1 Collectively renewable A & H (b) .....													
15.2 Non-cancelable A & H (b) .....													
15.3 Guaranteed renewable A & H (b) .....													
15.4 Non-renewable for stated reasons only (b) .....													
15.5 Other accident only .....													
15.6 Medicare Title XVIII exempt from state taxes or fees .....													
15.7 All other A & H (b) .....													
15.8 Federal Employees Health Benefits Plan premium (b) .....													
16. Workers' compensation .....	1,048,472	1,027,687		308,336	443,957	541,960	.912,436	76,860	.47,813	.156,307	.106,622	.16,956	
17.1 Other liability-Occurrence .....	526,208	494,180		249,474		(262,593)	707,595		1,966	.13,693	.92,061	.8,510	
17.2 Other Liability-Claims-Made .....	5,373	18,801		1,735		4,755	.8,544		1,319	.5,825	.763	.87	
17.3 Excess workers' compensation .....													
18. Products liability .....	40,282	.38,196		19,437		(1,640)	.6,057		.801	.9,955	.6,989	.651	
19.1 Private passenger auto no-fault (personal injury protection) .....	3,818,030	4,239,560		873,886	3,434,021	(6,300,525)	149,950,392	.666,618	(163,596)	2,247,642	.463,999	.61,744	
19.2 Other private passenger auto liability .....	1,319,815	1,474,248		301,403	1,820,695	750,220	2,057,376	.375,668	.135,539	.679,613	.210,857	.11,709	
19.3 Commercial auto no-fault (personal injury protection) .....	1,953,995	2,015,722		.902,071	.969,757	.394,134	.1,908,051	.288,963	.238,751	.637,756	.180,650	.31,600	
19.4 Other commercial auto liability .....	2,607,573	2,659,834		1,276,518	2,982,485	.552,258	3,410,745	.352,420	.26,659	.773,056	.350,934	.42,169	
21.1 Private passenger auto physical damage .....	2,457,990	2,761,077		.560,219	.1,529,051	1,424,735	(46,562)	.277	(1,112)	.1,451	.397,509	.39,750	
21.2 Commercial auto physical damage .....	2,225,286	2,169,267		1,083,683	1,529,447	1,422,782	.24,270	.600	(.757)	.5,614	.323,723	.35,987	
22. Aircraft (all perils) .....													
23. Fidelity .....													
24. Surety .....													
26. Burglary and theft .....	2,093	1,570		1,138		.96	.99		.60	.60	.368	.34	
27. Boiler and machinery .....													
28. Credit .....													
29. International .....	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
30. Warranty .....													
34. Aggregate write-ins for other lines of business .....	0	0		0	0	0	0	0	0	0	0	0	
35. TOTAL (a) .....	34,050,163	35,798,681		14,570,231	22,703,231	6,589,536	165,148,990	2,239,455	760,841	6,624,588	5,106,282	541,016	
<b>DETAILS OF WRITE-INS</b>													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0		0	0	0	0	0	0	0	0	0	
3499. Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above) .....	0	0		0	0	0	0	0	0	0	0	0	

(a) Finance and service charges not included in Lines 1 to 35 \$ 315,540

(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 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Ohio		DURING THE YEAR 2019							NAIC Company Code 11136		
		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
Line of Business		NONE											
1. Fire .....													
2.1 Allied lines .....													
2.2 Multiple peril crop .....													
2.3 Federal flood .....													
2.4 Private crop .....													
2.5 Private flood .....													
3. Farmowners multiple peril .....													
4. Homeowners multiple peril .....													
5.1 Commercial multiple peril (non-liability portion) .....													
5.2 Commercial multiple peril (liability portion) .....													
6. Mortgage guaranty .....													
8. Ocean marine .....													
9. Inland marine .....													
10. Financial guaranty .....													
11. Medical professional liability .....													
12. Earthquake .....													
13. Group accident and health (b) .....													
14. Credit A & H (group and individual) .....													
15.1 Collectively renewable A & H (b) .....													
15.2 Non-cancelable A & H (b) .....													
15.3 Guaranteed renewable A & H (b) .....													
15.4 Non-renewable for stated reasons only (b) .....													
15.5 Other accident only .....													
15.6 Medicare Title XVIII exempt from state taxes or fees .....													
15.7 All other A & H (b) .....													
15.8 Federal Employees Health Benefits Plan premium (b) .....													
16. Workers' compensation .....													
17.1 Other liability-Occurrence .....													
17.2 Other Liability-Claims-Made .....													
17.3 Excess workers' compensation .....													
18. Products liability .....													
19.1 Private passenger auto no-fault (personal injury protection) .....													
19.2 Other private passenger auto liability .....													
19.3 Commercial auto no-fault (personal injury protection) .....													
19.4 Other commercial auto liability .....													
21.1 Private passenger auto physical damage .....													
21.2 Commercial auto physical damage .....													
22. Aircraft (all perils) .....													
23. Fidelity .....													
24. Surety .....													
26. Burglary and theft .....													
27. Boiler and machinery .....													
28. Credit .....													
29. International .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30. Warranty .....													
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a) .....	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0	0

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

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

and number of persons insured under indemnity only products



**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

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

NAIC Group Code	00267	BUSINESS IN THE STATE OF Consolidated				DURING THE YEAR 2019				NAIC Company Code 11136		
		1 Line of Business	2 Direct Premiums Written	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
1. Fire	317,308	342,906	0	169,902	405,958	414,291	19,647	8,404	6,706	2,849	52,400	5,131
2.1 Allied lines	170,486	182,901	0	90,386	140,305	155,086	19,274	0	0	1,864	28,547	2,757
2.2 Multiple peril crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril	298,645	299,782	0	160,508	21,706	6,790	9,398	103,383	2,052	6,271	52,436	4,830
4. Homeowners multiple peril	7,546,726	8,514,287	0	4,070,093	4,311,025	3,167,042	1,367,334	134,072	72,640	112,048	1,153,233	122,044
5.1 Commercial multiple peril (non-liability portion)	6,213,483	6,003,708	0	2,972,625	3,818,032	3,853,331	1,122,461	231,498	86,167	53,442	1,090,358	100,483
5.2 Commercial multiple peril (liability portion)	3,339,989	3,386,881	0	1,448,937	1,000,002	133,630	3,616,757	0	305,627	1,916,157	570,619	54,013
6. Mortgage guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine	157,131	166,567	0	79,342	296,790	333,185	55,117	692	801	984	24,004	2,541
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	1,278	1,507	0	539	0	0	0	0	0	0	0	210
13. Group accident and health (b.)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A & H (group and individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A & H (b.)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A & H (b.)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A & H (b.)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b.)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A & H (b.)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan premium (b.)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation	1,048,472	1,027,687	0	308,336	443,957	541,960	912,436	76,860	47,813	156,307	106,622	16,956
17.1 Other liability-Occurrence	526,208	494,180	0	249,474	0	(262,593)	707,595	0	0	1,966	13,693	92,061
17.2 Other Liability-Claims-Made	5,373	18,801	0	1,735	0	4,755	8,544	0	0	1,319	5,825	763
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	40,282	38,196	0	19,437	0	(1,640)	6,057	0	0	801	9,955	6,989
19.1 Private passenger auto no-fault (personal injury protection)	3,818,030	4,239,560	0	873,886	3,434,021	(6,300,525)	149,950,392	666,618	(163,596)	2,247,642	463,999	61,744
19.2 Other private passenger auto liability	1,319,815	1,474,248	0	301,403	1,820,695	750,220	2,057,376	375,668	135,539	679,613	210,857	11,709
19.3 Commercial auto no-fault (personal injury protection)	1,953,995	2,015,722	0	902,071	969,757	394,134	1,908,051	288,963	238,751	637,756	180,650	31,600
19.4 Other commercial auto liability	2,607,573	2,659,834	0	1,276,518	2,982,485	552,258	3,410,745	352,420	26,659	773,056	350,934	42,169
21.1 Private passenger auto physical damage	2,457,990	2,761,077	0	560,219	1,529,051	1,424,735	(46,562)	277	(1,112)	1,451	397,509	39,750
21.2 Commercial auto physical damage	2,225,286	2,169,267	0	1,083,683	1,529,447	1,422,782	24,270	600	(757)	5,614	323,723	35,987
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft	2,093	1,570	0	1,138	0	96	99	0	0	60	60	368
27. Boiler and machinery	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	34,050,163	35,798,681	0	14,570,231	22,703,231	6,589,536	165,148,990	2,239,455	760,841	6,624,588	5,106,282	541,016
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 315,540

(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 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

**SCHEDULE F - PART 1**

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust	
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 +7								
Pools and Associations - Mandatory Pools, Associations or Other Similar Facilities															
AA-999218.....00000	NATIONAL WORKERS COMP RETNS POOL		NY	62		101	101			17					
1099999 - Pools and Associations - Mandatory Pools, Associations or Other Similar Facilities				62	0	101	101	0	0	17	0	0	0	0	
1299999 - Pools and Associations - Total Pools and Associations				62	0	101	101	0	0	17	0	0	0	0	
9999999 Totals				62	0	101	101	0	0	17	0	0	0	0	

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

## **SCHEDULE F - PART 2**

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

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

**SCHEDULE F - PART 3**

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsur- ance Premiums Ceded	Reinsurance Recoverable On										16	Reinsurance Payable		19 Net Amount Recover- able From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Cols. 7 through 14 Totals	16 Amount in Dispute Included in Column 15	17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers			
<b>Authorized - Affiliates - U.S. Intercompany Pooling</b>																				
31-4192970	14060	GRANGE INS CO	OH		31,098			13,906	6,655	7,010	3,355	13,679		44,605				44,605		
<b>0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling</b>						31,098	0	0	13,906	6,655	7,010	3,355	13,679	0	44,605	0	0	44,605	0	
<b>0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates</b>						31,098	0	0	13,906	6,655	7,010	3,355	13,679	0	44,605	0	0	44,605	0	
<b>Authorized - Other U.S. Unaffiliated Insurers</b>																				
06-1430254	10348	ARCH REINS CO		DE	5										0				0	
51-0434766	20370	AXIS REINS CO		NY	2										0				0	
47-0574325	32603	BERKLEY INS CO		DE	160										.77		.77		.77	
42-0234980	21415	EMPLOYERS MUT CAS CO		IA	16										24		24		24	
35-2293075	11551	ENDURANCE ASSUR CORP		DE	41										60		60		60	
22-2005057	26921	EVEREST REINS CO		DE	10										0		0		0	
13-2673100	22039	GENERAL REINS CORP		DE	107										.54		.54		.54	
06-0384680	11452	HARTFORD STEAM BOIL INSP& INS CO		CT	318										166		169		169	
13-4924125	10227	MUNICH REINS AMER INC		DE	181										181		181		181	
13-3138390	42307	NAVIGATORS INS CO		NY	3										0		0		0	
13-3031176	38636	PARTNER REINS CO OF THE US		NY	28										.48		.48		.48	
23-1641984	10219	QBE REINS CORP		PA	0										0		0		0	
52-1952955	10357	RENAISSANCE REINS US INC		MD	25										0		0		0	
43-0727872	15105	SAFETY NATL CAS CORP		MO	4										0		0		0	
13-1675535	25364	SWISS REINS AMER CORP		NY	94										0		0		0	
13-5616275	19453	TRANSATLANTIC REINS CO		NY	4										0		0		0	
13-1290712	20583	XL REINS AMER INC		NY	5										0		0		0	
<b>099999 - Total Authorized - Other U.S. Unaffiliated Insurers</b>						1,004	0	0	3	0	314	0	297	0	613	0	0	0	613	0
<b>Authorized - Pools - Mandatory Pools</b>																				
AA-9991159	00000	MICHIGAN CATASTROPHIC CLAIMS ASSN		MI		1,777	4,148		143,922						.612		.148,681		.148,681	
<b>1099999 - Total Authorized - Pools - Mandatory Pools</b>						1,777	4,148	0	143,922	0	0	0	0	612	0	148,681	0	0	148,681	
<b>Authorized - Other Non-U.S. Insurers</b>																				
AA-1126033	00000	LLOYD'S SYNDICATE NUMBER 33		GBR	7										0				0	
AA-1126435	00000	LLOYD'S SYNDICATE NUMBER 435		GBR	4										0				0	
AA-1126510	00000	LLOYD'S SYNDICATE NUMBER 510		GBR	1										0				0	
AA-1126623	00000	LLOYD'S SYNDICATE NUMBER 623		GBR	2										0				0	
AA-1127084	00000	LLOYD'S SYNDICATE NUMBER 1084		GBR	12										0				0	
AA-1127414	00000	Lloyd's Syndicate Number 1414		GBR	4										0				0	
AA-1120156	00000	LLOYD'S SYNDICATE NUMBER 1686		GBR	1										0				0	
AA-1120157	00000	LLOYD'S SYNDICATE NUMBER 1729		GBR	1										0				0	
AA-1120171	00000	Lloyd's Syndicate Number 1856		GBR	1										0				0	
AA-1127861	00000	LLOYD'S SYNDICATE NUMBER 1861		GBR	1										0				0	
AA-1120084	00000	Lloyd's Syndicate Number 1955		GBR	1										0				0	
AA-1120106	00000	Lloyd's Syndicate Number 1969		GBR	0										0				0	
AA-1128001	00000	LLOYD'S SYNDICATE NUMBER 2001		GBR	.16										0				0	
AA-1128003	00000	LLOYD'S SYNDICATE NUMBER 2003		GBR	4										0				0	
AA-1128010	00000	LLOYD'S SYNDICATE NUMBER 2010		GBR	2										0				0	
AA-1128623	00000	Lloyd's Syndicate Number 2623		GBR	8										0				0	
AA-1128791	00000	LLOYD'S SYNDICATE NUMBER 2791		GBR	1										0				0	
AA-1128987	00000	Lloyd's Syndicate Number 2987		GBR	4										0				0	
AA-1126006	00000	Lloyd's Syndicate Number 4472		GBR	2										0				0	
AA-1120181	00000	Lloyd's Syndicate Number 5886		GBR	3										0				0	
AA-1120337	00000	ASPEN INS UK LTD		GBR	20										.24				.24	
AA-1340125	00000	HANNOVER RUECK SE		DEU	72										121				121	
AA-1840000	00000	MAPFRE RE COMPANIA DE REASEGUROS SA		ESP	2										0				0	
AA-3190829	00000	Markel Bermuda Ltd		BMU	0										0				0	
AA-1460006	00000	Validus Reins (Switzerland) Ltd		CHE	.13										.24				.24	
<b>1299999 - Total Authorized - Other Non-U.S. Insurers</b>						180	0	0	0	0	169	0	0	0	169	0	0	0	169	0
<b>1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)</b>						34,059	4,148	0	157,830	6,655	7,492	3,355	14,588	0	194,068	0	0	0	194,068	
<b>Unauthorized - Other non-U.S. Insurers</b>																				
AA-3194126	00000	Arch Reins Ltd		BMU	.10										0				0	
AA-3190770	00000	Chubb Tempest Reins Ltd		BMU	.8										0				0	

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

**SCHEDULE F - PART 3**

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsur- ance Premiums Ceded	Reinsurance Recoverable On									16	Reinsurance Payable		19 Net Amount Recover- able From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commiss- sions	15 Cols. 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
AA-9240012	00000	CHINA PROP & CAS REINS CO LTD.	CHN		1										0			0	
AA-1120175	00000	Fidelis Underwriting Ltd.	GBR		1										0			0	
AA-3191190	00000	Hamilton Re Ltd.	BMU		2										0			0	
AA-3190875	00000	Hiscox Ins Co (Bermuda) Ltd.	BMU		12										0			0	
AA-5420050	00000	KOREAN REINS CO	KOR		1										0			0	
AA-1460019	00000	MS Amlin AG	CHE		9										0			0	
AA-3191298	00000	Qatar Reins Co Ltd.	BMU		0										0			0	
AA-3190870	00000	Validus Reins Ltd.	BMU		1										0			0	
AA-3191315	00000	XL Bermuda Ltd.	BMU		4										0			0	
AA-1440076	00000	SIRIUS INTL INS CORP	SWE		1										0			0	
AA-5324100	00000	TAIPING REINS CO LTD.	HKG		1										0			0	
AA-1460023	00000	RenaissanceRe Europe AG	CHE		1										0			0	
269999 - Total Unauthorized - Other Non-U.S. Insurers						53	0	0	0	0	0	0	0	0	0	0	0	0	
289999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)						53	0	0	0	0	0	0	0	0	0	0	0	0	
439999 - Total Authorized, Unauthorized and Certified (Sum of 1499999, 2899999 and 4299999)						34,112	4,148	0	157,830	6,655	7,492	3,355	14,588	0	194,068	0	0	194,068	
9999999 Totals						34,112	4,148	0	157,830	6,655	7,492	3,355	14,588	0	194,068	0	0	194,068	

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk									
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of (Col. 28 * 120%)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of (Col. 29)	31 Stressed Net Recoverable (Cols. 29 - 30)	32 Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	34 Reinsurer Designation Equivalent	35 Credit Risk Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	
Authorized - Affiliates - U.S. Intercompany Pooling																		
31-4192970	GRANGE INS CO					0	44,605		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999	- Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	XXX	0	0	44,605		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999	- Total Authorized - Affiliates - Total Authorized - Affiliates	0	0	XXX	0	0	44,605		0	0	0	0	0	0	0	XXX	0	0
Authorized - Other U.S. Unaffiliated Insurers																		
06-1430254	ARCH REINS CO					0	0	0	0	0	0	0	0	0	0	0	2	0
51-0434766	AXIS REINS CO					0	0	0	0	0	0	0	0	0	0	0	2	0
47-0574325	BERKLEY INS CO					0	.77	0	.77	.92	0	.92	0	.92	0	2	0	
42-0234980	EMPLOYERS MUT CAS CO					0	.24	0	.24	.29	0	.29	0	.29	0	2	0	
35-2293075	ENDURANCE ASSUR CORP					0	.60	0	.60	.72	0	.72	0	.72	0	2	0	
22-2005057	EVEREST REINS CO					0	0	0	0	0	0	0	0	0	0	2	0	
13-2673100	GENERAL REINS CORP					0	.54	0	.54	.65	0	.65	0	.65	0	1	0	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO					0	.169	0	.169	.203	0	.203	0	.203	0	1	0	
13-4924125	MUNICH REINS AMER INC					0	.181	0	.181	.217	0	.217	0	.217	0	2	0	
13-3138390	NAVIGATORS INS CO					0	0	0	0	0	0	0	0	0	0	3	0	
13-3031176	PARTNER REINS CO OF THE US					0	.48	0	.48	.58	0	.58	0	.58	0	3	0	
23-1641984	QBE REINS CORP					0	0	0	0	0	0	0	0	0	0	3	0	
52-1952955	RENAISSANCE REINS US INC					0	0	0	0	0	0	0	0	0	0	2	0	
43-0727872	SAFETY NATL CAS CORP					0	0	0	0	0	0	0	0	0	0	2	0	
13-1675535	SWISS REINS AMER CORP					0	0	0	0	0	0	0	0	0	0	2	0	
13-5616275	TRANSATLANTIC REINS CO					0	0	0	0	0	0	0	0	0	0	2	0	
13-1290712	XL REINS AMER INC					0	0	0	0	0	0	0	0	0	0	2	0	
0999999	- Total Authorized - Other U.S. Unaffiliated Insurers	0	0	XXX	0	0	613	0	613	736	0	736	0	736	XXX	0	29	
Authorized - Pools - Mandatory Pools																		
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN					0	148,681		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999	- Total Authorized - Pools - Mandatory Pools	0	0	XXX	0	0	148,681	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Authorized - Other Non-U.S. Insurers																		
AA-1126033	LLOYD'S SYNDICATE NUMBER 33					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1126435	LLOYD'S SYNDICATE NUMBER 435					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1126510	LLOYD'S SYNDICATE NUMBER 510					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1126623	LLOYD'S SYNDICATE NUMBER 623					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1127414	Lloyd's Syndicate Number 1414					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1120156	LLOYD'S SYNDICATE NUMBER 1686					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1120157	LLOYD'S SYNDICATE NUMBER 1729					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1120171	Lloyd's Syndicate Number 1856					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1127861	LLOYD'S SYNDICATE NUMBER 1861					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1120084	Lloyd's Syndicate Number 1955					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1120106	Lloyd's Syndicate Number 1969					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1128623	Lloyd's Syndicate Number 2623					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1128987	Lloyd's Syndicate Number 2987					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1126006	Lloyd's Syndicate Number 4472					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1120181	Lloyd's Syndicate Number 5886					0	0	0	0	0	0	0	0	0	0	3	0	
AA-1120337	ASPEN INS UK LTD					0	24	0	24	29	0	29	0	29	3	0	1	
AA-1340125	HANNOVER RUECK SE					0	121	0	121	145	0	145	0	145	2	0	6	
AA-1840000	MAPFRE RE COMPANIA DE REASEGUROS SA					0	0	0	0	0	0	0	0	0	0	3	0	
AA-3190829	Markel Bermuda Ltd.					0	0	0	0	0	0	0	0	0	0	3	0	

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk													
		21	22	23	24				Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 - 27)	28	29	30	31	32	33	34	35	36
AA-1460006	Validus Reins (Switzerland) Ltd.....					0	24			0	24		29	0	29	0	29	0	29	3	0	1
129999 - Total Authorized - Other Non-U.S. Insurers		0	0	XXX	0	0	169		0	169		203	0	203	0	203	XXX	0	0	0	9	
149999 - Total Authorized Excluding Protected Cells (Sum of 089999, 099999, 109999, 119999 and 129999)		0	0	XXX	0	0	194,068		0	782	938	0	938	0	938	XXX	0	0	0	38		
Unauthorized - Other non-U.S. Insurers																						
AA-3194126	Arch Reins Ltd.....					0	0			0	0		0	0	0	0	0	0	0	2	0	0
AA-3190770	Chubb Tempest Reins Ltd.....					0	0			0	0		0	0	0	0	0	0	0	1	0	0
AA-9240012	CHINA PROP & CAS REINS CO LTD.....					0	0			0	0		0	0	0	0	0	0	0	3	0	0
AA-1120175	Fidelis Underwriting Ltd.....					0	0			0	0		0	0	0	0	0	0	0	2	0	0
AA-3191190	Hamilton Re Ltd.....					0	0			0	0		0	0	0	0	0	0	0	4	0	0
AA-3190875	Hiscox Ins Co (Bermuda) Ltd.....					0	0			0	0		0	0	0	0	0	0	0	3	0	0
AA-5420050	KOREAN REINS CO.....					0	0			0	0		0	0	0	0	0	0	0	3	0	0
AA-1460019	MS Amlin AG.....					0	0			0	0		0	0	0	0	0	0	0	3	0	0
AA-3191298	Qatar Reins Co Ltd.....					0	0			0	0		0	0	0	0	0	0	0	3	0	0
AA-3190870	Validus Reins Ltd.....					0	0			0	0		0	0	0	0	0	0	0	3	0	0
AA-3191315	XL Bermuda Ltd.....					0	0			0	0		0	0	0	0	0	0	0	3	0	0
AA-1440076	SIRIUS INTL INS CORP.....					0	0			0	0		0	0	0	0	0	0	0	3	0	0
AA-5324100	TAIPING REINS CO LTD.....					0	0			0	0		0	0	0	0	0	0	0	3	0	0
AA-1460023	RenaissanceRe Europe AG.....					0	0			0	0		0	0	0	0	0	0	0	1	0	0
269999 - Total Unauthorized - Other Non-U.S. Insurers		0	0	XXX	0	0	0		0	0	0		0	0	0	0	0	XXX	0	0	0	
289999 - Total Unauthorized Excluding Protected Cells (Sum of 229999, 239999, 249999, 259999 and 269999)		0	0	XXX	0	0	0		0	0	0		0	0	0	0	0	XXX	0	0	0	
439999 - Total Authorized, Unauthorized and Certified (Sum of 149999, 289999 and 429999)		0	0	XXX	0	0	194,068		0	782	938	0	938	0	938	XXX	0	0	0	38		
9999999 Totals		0	0	XXX	0	0	194,068		0	782	938	0	938	0	938	XXX	0	0	0	38		

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44	45	46	47	48	49	50	51	52	53											
		37	Overdue																									
			38	39	40	41	42																					
								Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 43 – 44)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 50 Less Than 20% (Yes or No)	Is the Amount in Col. 50 Less Than 20% (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50													
Current	1 – 29 Days	30 – 90 Days	91 – 120 Days	Over 120 Days	Total Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)																						
Authorized - Affiliates - U.S. Intercompany Pooling							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
31-4192970	GRANGE INS CO						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
0199999	- Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
0899999	- Total Authorized - Affiliates - Total Authorized - Affiliates	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
Authorized - Other U.S. Unaffiliated Insurers																												
06-1430254	ARCH REINS CO						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
51-0434766	AXIS REINS CO						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
47-0574325	BERKLEY INS CO						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
42-0234980	EMPLOYERS MUT CAS CO						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
35-2293075	ENDURANCE ASSUR CORP						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
22-2005057	EVEREST REINS CO						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
13-2673100	GENERAL REINS CORP						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
13-4924125	MUNICH REINS AMER INC						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
13-3138390	NAVIGATORS INS CO						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
13-3031176	PARTNER REINS CO OF THE US						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
23-1641984	QBE REINS CORP						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
52-1952955	RENAISSANCE REINS US INC						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
43-0727872	SAFETY NATL CAS CORP						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
13-1675535	SWISS REINS AMER CORP						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
13-5616275	TRANSATLANTIC REINS CO						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
13-1290712	XL REINS AMER INC						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
0999999	- Total Authorized - Other U.S. Unaffiliated Insurers	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
Authorized - Pools - Mandatory Pools																												
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN	4,148					0	4,148		4,148	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
1099999	- Total Authorized - Pools - Mandatory Pools	4,148	0	0	0	0	0	4,148	0	4,148	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
Authorized - Other Non-U.S. Insurers																												
AA-1126033	LLOYD'S SYNDICATE NUMBER 33						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1126435	LLOYD'S SYNDICATE NUMBER 435						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1126510	LLOYD'S SYNDICATE NUMBER 510						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1126623	LLOYD'S SYNDICATE NUMBER 623						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1127414	Lloyd's Syndicate Number 1414						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1120156	LLOYD'S SYNDICATE NUMBER 1686						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1120157	LLOYD'S SYNDICATE NUMBER 1729						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1120171	Lloyd's Syndicate Number 1856						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1127861	LLOYD'S SYNDICATE NUMBER 1861						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1120084	Lloyd's Syndicate Number 1955						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1120106	Lloyd's Syndicate Number 1969						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1128623	Lloyd's Syndicate Number 2623						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1128987	Lloyd's Syndicate Number 2987						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1126006	Lloyd's Syndicate Number 4472						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1120181	Lloyd's Syndicate Number 5880						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1120337	ASPEN INS UK LTD						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1340125	HANNOVER RUECK SE						0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000	0.000										

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44	45	46	47	48	49	50	51	52	53											
		37	Overdue																									
			38	39	40	41	42																					
								Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 43)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 50/ Col. 43)	Is the Amount in Col. 50 Less Than 20% (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50												
			Current	1 – 29 Days	30 – 90 Days	91 – 120 Days	Over 120 Days	Total Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)																			
AA-1840000...	MAPFRE RE COMPANIA DE REASEGUROS SA...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-3190829...	Markel Bermuda Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1460006...	Validus Reins (Switzerland) Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
1299999 - Total Authorized - Other Non-U.S. Insurers		0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	XXX										
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		4,148	0	0	0	0	0	0	4,148	0	0	4,148	0	0.000	0.000	0.000	0.000	0.000	XXX									
Unauthorized - Other non-U.S. Insurers																												
AA-3194126...	Arch Reins Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-3190770...	Chubb Tempest Reins Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-9240012...	CHINA PROP & CAS REINS CO LTD...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1120175...	Fidelis Underwriting Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-3191190...	Hamilton Re Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-3190875...	Hiscox Ins Co (Bermuda) Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-5420050...	KOREAN REINS CO...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1460019...	MS Am1in AG...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-3191298...	Qatar Reins Co Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-3190870...	Validus Reins Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-3191315...	XL Bermuda Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1440076...	SIRIUS INTL INS CORP...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-5324100...	TAIPING REINS CO LTD...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
AA-1460023...	RenaissanceRe Europe AG...							0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	0.000										
2699999 - Total Unauthorized - Other Non-U.S. Insurers		0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	XXX										
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	0.000	0.000	XXX										
4399999 - Total Authorized Unauthorized and Certified (Sum of 1499999, 2899999 and 4299999)		4,148	0	0	0	0	0	4,148	0	0	4,148	0	0.000	0.000	0.000	0.000	0.000	XXX										
9999999 Totals		4,148	0	0	0	0	0	4,148	0	0	4,148	0	0.000	0.000	0.000	0.000	0.000	XXX										

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

**SCHEDULE F - PART 3 (Continued)**

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance																69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0				
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20+Col. 21+Col. 22+Col. 24]/Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57+[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20+Col. 21+Col.22+Col. 24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	20% of Amount in Col. 67		
Authorized - Affiliates - U.S. Intercompany Pooling																		
31-4192970	GRANGE INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999	- Total Authorized - Affiliates - U.S. Intercompany Pooling	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999	- Total Authorized - Affiliates - Total Authorized - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Authorized - Other U.S. Unaffiliated Insurers																		
06-1430254	ARCH REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
51-0434766	AXIS REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0574325	BERKLEY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0234980	EMPLOYERS MUT CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35-2293075	ENDURANCE ASSUR CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
22-2005057	EVEREST REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2673100	GENERAL REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-4924125	MUNICH REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3138390	NAVIGATORS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3031176	PARTNER REINS CO OF THE US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23-1641984	QBE REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
52-1952955	RENAISSANCE REINS US INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43-0727872	SAFETY NATL CAS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1675535	SWISS REINS AMER CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-5616275	TRANSATLANTIC REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1290712	XL REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999	- Total Authorized - Other U.S. Unaffiliated Insurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Authorized - Pools - Mandatory Pools																		
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999	- Total Authorized - Pools - Mandatory Pools	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Authorized - Other Non-U.S. Insurers																		
AA-1126033	LLOYD'S SYNDICATE NUMBER 33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126435	LLOYD'S SYNDICATE NUMBER 435	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126510	LLOYD'S SYNDICATE NUMBER 510	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126623	LLOYD'S SYNDICATE NUMBER 623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127414	Lloyd's Syndicate Number 1414	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120156	LLOYD'S SYNDICATE NUMBER 1686	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120157	LLOYD'S SYNDICATE NUMBER 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120171	Lloyd's Syndicate Number 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127861	LLOYD'S SYNDICATE NUMBER 1861	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120084	Lloyd's Syndicate Number 1955	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120106	Lloyd's Syndicate Number 1969	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128623	Lloyd's Syndicate Number 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128987	Lloyd's Syndicate Number 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126006	Lloyd's Syndicate Number 4472	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120181	Lloyd's Syndicate Number 5886	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120337	ASPEN INS UK LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance																69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0				
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20+Col. 21+Col. 22+Col. 24]/Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57+[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20+Col. 21+Col. 22+Col. 24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	20% of Amount in Col. 67		
AA-1340125...	HANNOVER RUECK SE...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1840000...	MAPFRE RE COMPANIA DE REASEGUROS SA...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190829...	Markel Bermuda Ltd...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460006...	Validus Reins (Switzerland) Ltd...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1299999 - Total Authorized - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 099999, 109999, 119999 and 129999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Unauthorized - Other non-U.S. Insurers																		
AA-3194126...	Arch Reins Ltd...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190770...	Chubb Tempest Reins Ltd...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9240012...	CHINA PROP & CAS REINS CO LTD...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120175...	Fidelis Underwriting Ltd...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191190...	Hamilton Re Ltd...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190875...	Hiscox Ins Co (Bermuda) Ltd...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5420050...	KOREAN REINS CO...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460019...	MS Amlin AG...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191298...	Qatar Reins Co Ltd...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190870...	Validus Reins Ltd...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191315...	XL Bermuda Ltd...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1440076...	SIRIUS INTL INS CORP...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5324100...	TAIPING REINS CO LTD...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460023...	RenaissanceRe Europe AG...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2699999 - Total Unauthorized - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 229999, 239999, 249999, 259999 and 269999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4399999 - Total Authorized, Unauthorized and Certified (Sum of 149999, 289999 and 429999)		XXX	XXX	XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
9999999 Totals		XXX	XXX	XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

## SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized Reinsurance		Total Provision for Reinsurance			
			71	72	73	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
		20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute [(Col. 47 * 20%) + (Col. 45 * 20%)]	Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or [Col. 40 + 41] * 20%)	Provision for Amounts Ceded to Authorized Reinsurers (Col. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Certified Reinsurers (Col. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
Authorized - Affiliates - U.S. Intercompany Pooling			0	XXX	XXX	0	.0	0	XXX	XXX
31-4192970	GRANGE INS CO		0	XXX	XXX	0	.0	0	XXX	0
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling		0	XXX	XXX	0	0	0	XXX	0
0899999	Total Authorized - Affiliates - Total Authorized - Affiliates		0	XXX	XXX	0	0	0	XXX	0
Authorized - Other U.S. Unaffiliated Insurers										
06-1430254	ARCH REINS CO		0	XXX	XXX	0	.0	0	XXX	0
51-0434766	AXIS REINS CO		0	XXX	XXX	0	.0	0	XXX	0
47-0574325	BERKLEY INS CO		0	XXX	XXX	0	.0	0	XXX	0
42-0234980	EMPLOYERS MUT CAS CO		0	XXX	XXX	0	.0	0	XXX	0
35-2293075	ENDURANCE ASSUR CORP		0	XXX	XXX	0	.0	0	XXX	0
22-2005057	EVEREST REINS CO		0	XXX	XXX	0	.0	0	XXX	0
13-2673100	GENERAL REINS CORP		0	XXX	XXX	0	.0	0	XXX	0
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO		0	XXX	XXX	0	.0	0	XXX	0
13-4924125	MUNICH REINS AMER INC		0	XXX	XXX	0	.0	0	XXX	0
13-3138390	NAVIGATORS INS CO		0	XXX	XXX	0	.0	0	XXX	0
13-3031176	PARTNER REINS CO OF THE US		0	XXX	XXX	0	.0	0	XXX	0
23-1641984	QBE REINS CORP		0	XXX	XXX	0	.0	0	XXX	0
52-1952955	RENAISSANCE REINS US INC		0	XXX	XXX	0	.0	0	XXX	0
43-0727872	SAFETY NATL CAS CORP		0	XXX	XXX	0	.0	0	XXX	0
13-1675535	SWISS REINS AMER CORP		0	XXX	XXX	0	.0	0	XXX	0
13-5616275	TRANSATLANTIC REINS CO		0	XXX	XXX	0	.0	0	XXX	0
13-1290712	XL REINS AMER INC		0	XXX	XXX	0	.0	0	XXX	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers		0	XXX	XXX	0	0	0	XXX	0
Authorized - Pools - Mandatory Pools										
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN		0	XXX	XXX	0	0	0	XXX	0
1099999	Total Authorized - Pools - Mandatory Pools		0	XXX	XXX	0	0	0	XXX	0
Authorized - Other Non-U.S. Insurers										
AA-1126033	LLOYD'S SYNDICATE NUMBER 33		0	XXX	XXX	0	.0	0	XXX	0
AA-1126435	LLOYD'S SYNDICATE NUMBER 435		0	XXX	XXX	0	.0	0	XXX	0
AA-1126510	LLOYD'S SYNDICATE NUMBER 510		0	XXX	XXX	0	.0	0	XXX	0
AA-1126623	LLOYD'S SYNDICATE NUMBER 623		0	XXX	XXX	0	.0	0	XXX	0
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084		0	XXX	XXX	0	.0	0	XXX	0
AA-1127414	Lloyd's Syndicate Number 1414		0	XXX	XXX	0	.0	0	XXX	0
AA-1120156	LLOYD'S SYNDICATE NUMBER 1686		0	XXX	XXX	0	.0	0	XXX	0
AA-1120157	LLOYD'S SYNDICATE NUMBER 1729		0	XXX	XXX	0	.0	0	XXX	0
AA-1120171	Lloyd's Syndicate Number 1856		0	XXX	XXX	0	.0	0	XXX	0
AA-1127861	LLOYD'S SYNDICATE NUMBER 1861		0	XXX	XXX	0	.0	0	XXX	0
AA-1120084	Lloyd's Syndicate Number 1955		0	XXX	XXX	0	.0	0	XXX	0
AA-1120106	Lloyd's Syndicate Number 1969		0	XXX	XXX	0	.0	0	XXX	0
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001		0	XXX	XXX	0	.0	0	XXX	0
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003		0	XXX	XXX	0	.0	0	XXX	0
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010		0	XXX	XXX	0	.0	0	XXX	0
AA-1128623	Lloyd's Syndicate Number 2623		0	XXX	XXX	0	.0	0	XXX	0
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791		0	XXX	XXX	0	.0	0	XXX	0
AA-1128987	Lloyd's Syndicate Number 2987		0	XXX	XXX	0	.0	0	XXX	0
AA-1126006	Lloyd's Syndicate Number 4472		0	XXX	XXX	0	.0	0	XXX	0
AA-1120181	Lloyd's Syndicate Number 5886		0	XXX	XXX	0	.0	0	XXX	0

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
AA-1120337	ASPER INS UK LTD.	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1340125	HANNOVER RUECK SE	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1840000	MAPFRE RE COMPANIA DE REASEGUROS SA	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3190829	Markel Bermuda Ltd.	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1460006	Validus Reins (Switzerland) Ltd.	0	XXX	XXX	0	0	0	XXX	XXX	0
1299999	- Total Authorized - Other Non-U.S. Insurers	0	XXX	XXX	0	0	0	XXX	XXX	0
1499999	- Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	XXX	XXX	0	0	0	XXX	XXX	0
Unauthorized - Other non-U.S. Insurers										
AA-3194126	Arch Reins Ltd.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190770	Chubb Tempest Reins Ltd.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-9240012	CHINA PROP & CAS REINS CO LTD.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1120175	Fidelis Underwriting Ltd.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191190	Hamilton Re Ltd.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190875	Hiscox Ins Co (Bermuda) Ltd.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-5420050	KOREAN REINS CO	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1460019	MS Amlin AG	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191298	Qatar Reins Co Ltd.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190870	Validus Reins Ltd.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191315	XL Bermuda Ltd.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1440076	SIRIUS INTL INS CORP.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-5324100	TAIPING REINS CO LTD.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1460023	RenaissanceRe Europe AG	0	0	0	XXX	XXX	XXX	0	XXX	0
2699999	- Total Unauthorized - Other Non-U.S. Insurers	0	0	0	XXX	XXX	XXX	0	XXX	0
2899999	- Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	0	XXX	XXX	XXX	0	XXX	0
4399999	- Total Authorized, Unauthorized and Certified (Sum of 1499999, 2899999 and 4299999)	0	0	0	0	0	0	0	0	0
9999999	Totals	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

**SCHEDULE F - PART 4**

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

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

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

**SCHEDULE F - PART 5**

Interrogatories for Schedule F, Part 3 (000 Omitted)

A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

	<u>1</u> Name of Reinsurer	<u>2</u> Commission Rate	<u>3</u> Ceded Premium
1.	GRANGE INS CO.....		31,098
2.	MICHIGAN CATASTROPHIC CLAIMS ASSN.....		1,777
3.	HARTFORD STEAM BOIL INSP& INS CO.....		318
4.	MUNICH REINS AMER INC.....		181
5.	BERKLEY INS CO.....		160

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

	<u>1</u> Name of Reinsurer	<u>2</u> Total Recoverables	<u>3</u> Ceded Premiums	<u>4</u> Affiliated
6.	GRANGE INS CO.....	44,605	31,098	Yes [ X ] No [ ]
7.	MICHIGAN CATASTROPHIC CLAIMS ASSN.....	148,681	1,777	Yes [ ] No [ X ]
8.	HARTFORD STEAM BOIL INSP& INS CO.....	169	318	Yes [ ] No [ X ]
9.	MUNICH REINS AMER INC.....	181	181	Yes [ ] No [ X ]
10.	BERKLEY INS CO.....	77	160	Yes [ ] No [ X ]

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

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

**SCHEDULE F - PART 6**

**Restatement of Balance Sheet to Identify Net Credit for Reinsurance**

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	41,182,760		41,182,760
2. Premiums and considerations (Line 15) .....	0		0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	4,147,663	(4,147,663)	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....	0		0
5. Other assets .....	1,058,485		1,058,485
6. Net amount recoverable from reinsurers .....		49,661,229	49,661,229
7. Protected cell assets (Line 27) .....	0		0
8. Totals (Line 28) .....	46,388,908	45,513,566	91,902,474
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	0	30,925,882	30,925,882
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	166,849		166,849
11. Unearned premiums (Line 9) .....	0	14,587,684	14,587,684
12. Advance premiums (Line 10) .....	0		0
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12) .....	0		0
15. Funds held by company under reinsurance treaties (Line 13) .....	0		0
16. Amounts withheld or retained by company for account of others (Line 14) .....	0		0
17. Provision for reinsurance (Line 16) .....	0		0
18. Other liabilities .....	0		0
19. Total liabilities excluding protected cell business (Line 26) .....	166,849	45,513,566	45,680,415
20. Protected cell liabilities (Line 27) .....	0		0
21. Surplus as regards policyholders (Line 37) .....	46,222,059	XXX	46,222,059
22. Totals (Line 38) .....	46,388,908	45,513,566	91,902,474

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

If yes, give full explanation:

The Company participates in a 100% pooling agreement that includes Grange Insurance Company and Integrity Insurance Company and their collective insurance subsidiaries.....

Schedule H - Part 1

**NONE**

Schedule H - Part 2

**NONE**

Schedule H - Part 3

**NONE**

Schedule H - Part 4

**NONE**

Schedule H - Part 5 - Health Claims

**NONE**

Schedule P - Part 1A - Home/Farm

**NONE**

Schedule P - Part 1B - Private Passenger

**NONE**

Schedule P - Part 1C - Comm Auto/Truck

**NONE**

Schedule P - Part 1D - Workers' Comp

**NONE**

Schedule P - Part 1E - Comm Multi Peril

**NONE**

Schedule P - Part 1F - Med Pro Liab Occ

**NONE**

Schedule P - Part 1F - Med Pro Liab Clm

**NONE**

Schedule P - Part 1G - Special Liability

**NONE**

Schedule P - Part 1H - Other Liab Occur

**NONE**

Schedule P - Part 1H - Other Liab Claims

**NONE**

Schedule P - Part 1I - Special Property

**NONE**

Schedule P - Part 1J - Auto Physical

**NONE**

Schedule P - Part 1K - Fidelity/Surety

**NONE**

Schedule P - Part 1L - Other

**NONE**

Schedule P - Part 1M - International

**NONE**

Schedule P - Part 1N - Reinsurance

**NONE**

Schedule P - Part 1O - Reinsurance

**NONE**

Schedule P - Part 1P - Reinsurance

**NONE**

Schedule P - Part 1R - Prod Liab Occur

**NONE**

Schedule P - Part 1R - Prod Liab Claims

**NONE**

Schedule P - Part 1S-Fin./Mtg. Guaranty

**NONE**

Schedule P - Part 1T - Warranty

**NONE**

Schedule P - Part 2A

**NONE**

Schedule P - Part 2B

**NONE**

Schedule P - Part 2C

**NONE**

Schedule P - Part 2D

**NONE**

Schedule P - Part 2E

**NONE**

Schedule P - Part 2F - Section 1

**NONE**

Schedule P - Part 2F - Med Pro Liab Clm

**NONE**

Schedule P - Part 2G

**NONE**

Schedule P - Part 2H - Other Liab Occur

**NONE**

Schedule P - Part 2H - Other Liab Claim

**NONE**

Schedule P - Part 2I

**NONE**

Schedule P - Part 2J

**NONE**

Schedule P - Part 2K

**NONE**

Schedule P - Part 2L

**NONE**

Schedule P - Part 2M

**NONE**

Schedule P - Part 2N

**NONE**

Schedule P - Part 2O

**NONE**

Schedule P - Part 2P

**NONE**

Schedule P - Part 2R - Prod Liab Occur

**NONE**

Schedule P - Part 2R - Prod Liab Claims

**NONE**

Schedule P - Part 2S

**NONE**

Schedule P - Part 2T

**NONE**

Schedule P - Part 3A

**NONE**

Schedule P - Part 3B

**NONE**

Schedule P - Part 3C

**NONE**

Schedule P - Part 3D

**NONE**

Schedule P - Part 3E

**NONE**

Schedule P - Part 3F - Med Pro Liab Occ

**NONE**

Schedule P - Part 3F - Med Pro Liab Clm

**NONE**

Schedule P - Part 3G

**NONE**

Schedule P - Part 3H - Other Liab Occur

**NONE**

Schedule P - Part 3H - Other Liab Claims

**NONE**

Schedule P - Part 3I

**NONE**

Schedule P - Part 3J

**NONE**

Schedule P - Part 3K

**NONE**

Schedule P - Part 3L

**NONE**

Schedule P - Part 3M

**NONE**

Schedule P - Part 3N

**NONE**

Schedule P - Part 3O

**NONE**

Schedule P - Part 3P

**NONE**

Schedule P - Part 3R - Prod Liab Occur

**NONE**

Schedule P - Part 3R - Prod Liab Claims

**NONE**

Schedule P - Part 3S

**NONE**

Schedule P - Part 3T

**NONE**

Schedule P - Part 4A

**NONE**

Schedule P - Part 4B

**NONE**

Schedule P - Part 4C

**NONE**

Schedule P - Part 4D

**NONE**

Schedule P - Part 4E

**NONE**

Schedule P - Part 4F - Med Pro Liab Occ

**NONE**

Schedule P - Part 4F - Med Pro Liab Clm

**NONE**

Schedule P - Part 4G

**NONE**

Schedule P - Part 4H - Other Liab Occur

**NONE**

Schedule P - Part 4H - Other Liab Claims

**NONE**

Schedule P - Part 4I

**NONE**

Schedule P - Part 4J

**NONE**

Schedule P - Part 4K

**NONE**

Schedule P - Part 4L

**NONE**

Schedule P - Part 4M

**NONE**

Schedule P - Part 4N

**NONE**

Schedule P - Part 4O

**NONE**

Schedule P - Part 4P

**NONE**

Schedule P - Part 4R - Prod Liab Occur

**NONE**

Schedule P - Part 4R - Prod Liab Claims

**NONE**

Schedule P - Part 4S

**NONE**

Schedule P - Part 4T - Warranty

**NONE**

Schedule P - Part 5A- SN1

**NONE**

Schedule P - Part 5A- SN2

**NONE**

Schedule P - Part 5A- SN3

**NONE**

Schedule P - Part 5B- SN1

**NONE**

Schedule P - Part 5B- SN2

**NONE**

Schedule P - Part 5B- SN3

**NONE**

Schedule P - Part 5C- SN1

**NONE**

Schedule P - Part 5C- SN2

**NONE**

Schedule P - Part 5C- SN3

**NONE**

Schedule P - Part 5D- SN1

**NONE**

Schedule P - Part 5D- SN2

**NONE**

Schedule P - Part 5D- SN3

**NONE**

Schedule P - Part 5E- SN1

**NONE**

Schedule P - Part 5E- SN2

**NONE**

Schedule P - Part 5E- SN3

**NONE**

Schedule P - Part 5F- SN1A

**NONE**

Schedule P - Part 5F- SN2A

**NONE**

Schedule P - Part 5F- SN3A

**NONE**

Schedule P - Part 5F- SN1B

**NONE**

Schedule P - Part 5F- SN2B

**NONE**

Schedule P - Part 5F- SN3B

**NONE**

Schedule P - Part 5H- SN1A

**NONE**

Schedule P - Part 5H- SN2A

**NONE**

Schedule P - Part 5H- SN3A

**NONE**

Schedule P - Part 5H- SN1B

**NONE**

Schedule P - Part 5H- SN2B

**NONE**

Schedule P - Part 5H- SN3B

**NONE**

Schedule P - Part 5R- SN1A

**NONE**

Schedule P - Part 5R- SN2A

**NONE**

Schedule P - Part 5R- SN3A

**NONE**

Schedule P - Part 5R- SN1B

**NONE**

Schedule P - Part 5R- SN2B

**NONE**

Schedule P - Part 5R- SN3B

**NONE**

Schedule P - Part 5T- SN1

**NONE**

Schedule P - Part 5T- SN2

**NONE**

Schedule P - Part 5T- SN3

**NONE**

Schedule P - Part 6C - SN1

**NONE**

Schedule P - Part 6C - SN2

**NONE**

Schedule P - Part 6D - SN1

**NONE**

Schedule P - Part 6D - SN2

**NONE**

Schedule P - Part 6E - SN1

**NONE**

Schedule P - Part 6E - SN2

**NONE**

Schedule P - Part 6H - SN1A

**NONE**

Schedule P - Part 6H - SN2A

**NONE**

Schedule P - Part 6H - SN1B

**NONE**

Schedule P - Part 6H - SN2B

**NONE**

Schedule P - Part 6M - SN1

**NONE**

Schedule P - Part 6M - SN2

**NONE**

Schedule P - Part 6N - SN1

**NONE**

Schedule P - Part 6N - SN2

**NONE**

Schedule P - Part 6O - SN1

**NONE**

Schedule P - Part 6O - SN2

**NONE**

Schedule P - Part 6R - SN1A

**NONE**

Schedule P - Part 6R - SN2A

**NONE**

Schedule P - Part 6R - SN1B

**NONE**

Schedule P - Part 6R - SN2B

**NONE**

Schedule P - Part 7A - Section 1

**NONE**

Schedule P - Part 7A - Section 2

**NONE**

Schedule P - Part 7A - Section 3

**NONE**

Schedule P - Part 7A - Section 4

**NONE**

Schedule P - Part 7A - Section 5

**NONE**

Schedule P - Part 7B - Section 1

**NONE**

Schedule P - Part 7B - Section 2

**NONE**

Schedule P - Part 7B - Section 3

**NONE**

Schedule P - Part 7B - Section 4

**NONE**

Schedule P - Part 7B - Section 5

**NONE**

Schedule P - Part 7B - Section 6

**NONE**

Schedule P - Part 7B - Section 7

**NONE**

# ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

## SCHEDULE P INTERROGATORIES

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

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

Yes [ ] No [ X ]

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

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

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

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

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

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

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior .....		
1.602 2010.....		
1.603 2011.....		
1.604 2012.....		
1.605 2013.....		
1.606 2014.....		
1.607 2015.....		
1.608 2016 .....		
1.609 2017.....		
1.610 2018 .....		
1.611 2019.....		
1.612 Totals	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [ X ] No [ ]

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement?: Yes [ X ] No [ ]

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [ ] No [ X ]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.

Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for: (in thousands of dollars)

5.1 Fidelity \$ .....

5.2 Surety \$ .....

6. Claim count information is reported per claim or per claimant (indicate which). ..... CLAIMANT  
If not the same in all years, explain in Interrogatory 7.

7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [ X ] No [ ]

7.2 An extended statement may be attached.

As of 1/1/2017, the intercompany pooling agreement was amended. The intercompany pooling agreement now cedes underwriting results back only to the two parent companies, Grange Insurance Company and Integrity Insurance Company, with their respective stock subsidiary companies receiving 0% from the pool. Grange Insurance Company remains the lead company .....

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

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

Allocated By States and Territories

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

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**

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

Asterisk	Explanation
*	Indicates a required field.

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

## 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	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
14060	31-4192970	GRANGE INSURANCE COMPANY.....	(67,761,811)				11,438,951				(56,322,860)	(759,531,435)
40118	41-1405571	TRUSTGARD INSURANCE COMPANY.....									0	135,431,256
10322	31-1432675	GRANGE INDEMNITY INSURANCE COMPANY.....									0	207,187,834
11136	31-1769414	GRANGE INSURANCE COMPANY OF MICHIGAN.....									0	44,604,990
14303	39-0367560	INTEGRITY INSURANCE COMPANY.....						(13,761,493)			(13,761,493)	145,440,720
11982	42-1610213	GRANGE PROPERTY & CASUALTY INSURANCE COM.....									0	143,656,404
12986	41-2236417	INTEGRITY PROPERTY & CASUALTY INSURANCE.....									0	72,957,766
10288	81-3455935	INTEGRITY SELECT INSURANCE COMPANY.....									0	10,252,465
00000	31-1145043	GRANGEAMERICA.....									0	
00000	31-1193707	NORTHVIEW INSURANCE AGENCY.....						(773,296)			(773,296)	
00000	83-2982350	GRANGE MUTUAL HOLDING COMPANY.....									0	
00000	83-2949300	GRANGE HOLDINGS, INC.....	67,761,811					3,095,838			70,857,649	
9999999 Control Totals												
			0	0	0	0	0	0	0	XXX	0	0
												0

# ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	<b>MARCH FILING</b>	<b>RESPONSES</b>
1.	Will an actuarial opinion be filed by March 1?	.....YES.....
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	.....YES.....
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	.....YES.....
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	.....YES.....
	<b>APRIL FILING</b>	
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	.....YES.....
6.	Will Management's Discussion and Analysis be filed by April 1?	.....YES.....
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	.....YES.....
	<b>MAY FILING</b>	
8.	Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	.....YES.....
	<b>JUNE FILING</b>	
9.	Will an audited financial report be filed by June 1?	.....YES.....
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	.....YES.....
	<b>AUGUST FILING</b>	
11.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	.....YES.....
<p>The following supplemental reports are required to be filed as part of your statement filing <b>if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below.</b> If the supplement is required of your company but is not being filed for whatever reason, enter <b>SEE EXPLANATION</b> and provide an explanation following the interrogatory questions.</p>		
	<b>MARCH FILING</b>	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	.....NO.....
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	.....NO.....
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	.....NO.....
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	.....NO.....
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	.....NO.....
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	.....NO.....
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	.....YES.....
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	.....YES.....
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	.....YES.....
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....YES.....
25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	.....NO.....
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	.....NO.....
27.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	.....NO.....

**ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN**  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

28. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1? ..... No.....

APRIL FILING

29. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? ..... NO.....

30. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? ..... NO.....

31. Will the Accident and Health Policy Experience Exhibit be filed by April 1? ..... NO.....

32. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? ..... NO.....

33. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1? ..... NO.....

34. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1? ..... YES.....

35. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? ..... NO.....

36. Will the Adjustment to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1? ..... NO.....

**AUGUST FILING**

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

### Explanation:

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

**Bar Code:**



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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

**OVERFLOW PAGE FOR WRITE-INS**

P011 Additional Aggregate Lines for Page 11 Line 24.

\*EXEXP - Underwriting and Investment - Part 3 - Expenses

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
2404. Investment Banking Fees.....			29,115	29,115
2497. Summary of remaining write-ins for Line 24 from page 11	0	0	29,115	29,115

**SUPPLEMENT FOR THE YEAR 2019 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN****DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT**For The Year Ended December 31, 2019  
(To Be Filed by March 1)

NAIC Group Code 00267

NAIC Company Code 11136

Company Name GRANGE INSURANCE COMPANY OF MICHIGAN

If the reporting entity writes any director and officer (D&amp;O) business, please provide the following:

## 1. Monoline Policies

Direct Premiums		Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Written	2 Earned	3 Paid	4 Incurred	5 Paid	6 Incurred	7 Claims Made	8 Occurrence
\$ 150	\$ 150	\$ 0	\$ (9)	\$ 0	\$ 1	100.0 %	0.0 %

## 2. Commercial Multiple Peril (CMP) Packaged Policies

2.1 Does the reporting entity provide D&amp;O liability coverage as part of a CMP packaged policy? Yes [ ] No [X]

2.2 Can the direct premium earned for D&amp;O liability coverage provided as part of a CMP packaged policy be quantified or estimated? Yes [ ] No [X]

2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&amp;O liability coverage in CMP packaged policies

2.31 Amount quantified: \$ .....

2.32 Amount estimated using reasonable assumptions: \$ .....

2.4 If the answer to question 2.1 is yes, please provide the following:

Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Paid	2 Paid + Change in Case Reserves	3 Paid	4 Paid + Change in Case Reserves	5 Claims Made	6 Occurrence
\$	\$	\$	\$	%	%

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