



ANNUAL STATEMENT

For the Year Ended December 31, 2019

of the Condition and Affairs of the

BUCKEYE STATE MUTUAL INSURANCE COMPANY

NAIC Group Code.....	46, 46	NAIC Company Code.....	16713	Employer's ID Number.....	31-6035649
	(Current Period) (Prior Period)				
Organized under the Laws of OH		State of Domicile or Port of Entry OH		Country of Domicile	US
Incorporated/Organized.....	January 28, 1897	Commenced Business.....	April 30, 1879		
Statutory Home Office	One Heritage Place .. Piqua .. OH .. US .. 45356-4888				
	(Street and Number) (City or Town, State, Country and Zip Code)				
Main Administrative Office	One Heritage Place .. Piqua .. OH .. US .. 45356			937-778-5000	
	(Street and Number) (City or Town, State, Country and Zip Code)			(Area Code) (Telephone Number)	
Mail Address	One Heritage Place .. Piqua .. OH .. US .. 45356				
	(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)				
Primary Location of Books and Records	One Heritage Place .. Piqua .. OH .. US .. 45356			937-778-5000	
	(Street and Number) (City or Town, State, Country and Zip Code)			(Area Code) (Telephone Number)	
Internet Web Site Address	http://www.buckeye-ins.com/				
Statutory Statement Contact	Craig A Curcio			937-778-5000	
	(Name)			(Area Code) (Telephone Number) (Extension)	
	craig.curcio@buckeye-ins.com			937-778-5019	
	(E-Mail Address)			(Fax Number)	

OFFICERS

Name	Title	Name	Title
1. John Michael Brooks	President & CEO	2. Lisa Lyn Wesner	VP & Secretary
3. Jerry Christopher Collins #	CFO & Treasurer	4. Robert Edward Bornhorst	Senior VP & Chief Underwriting Officer
OTHER			
Jon Allen DeHass	VP - Claims		

DIRECTORS OR TRUSTEES

William L. Sweet Jr.	Robert W. Clark	Julie A. Covault #	John S. Haldeman II
James D. Rogers	Richard J. Seitz	J. MacAlpine Smith Jr.	Jean M. Bratton #
Oyauma M. Garrison #			

State of..... Ohio  
County of..... Miami

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)
John Michael Brooks	Lisa Lyn Wesner	Jerry Christopher Collins
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
President & CEO	VP & Secretary	CFO & Treasurer
(Title)	(Title)	(Title)
Subscribed and sworn to before me	a. Is this an original filing?	Yes [ X ] No [ ]
This _____ day of _____ 2020	b. If no	1. State the amendment number
		2. Date filed
		3. Number of pages attached

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



NAIC Group Code....46    NAIC Company Code....16713

BUSINESS IN THE STATE OF ARIZONA    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.....												
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.....												
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	1,505
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,505

**DETAILS OF WRITE-INS**

3401. State Fees.....												1,505
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	1,505

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

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



NAIC Group Code....46    NAIC Company Code....16713

BUSINESS IN THE STATE OF    COLORADO    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.....	-	-	-	-	-	-	-	-	(110)	24	-	-
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.....	-	-	-	-	(69)	(69)	-	91	(84)	805	-	-
4. Homeowners multiple peril.....	-	-	-	-	17,434	17,434	-	-	762	509	-	-
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.....												
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.....	-	-	-	-	143,075	(16,471)	48,375	3,055	3,300	11,738	-	-
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....	-	-	-	-	(2,100)	(2,100)		25	60	244	-	-
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	1,298
35. TOTALS (a).....	0	0	0	0	158,340	(1,206)	48,375	3,171	3,928	13,320	0	1,298

**DETAILS OF WRITE-INS**

3401. State Fees.....												1,298
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	1,298

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

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



NAIC Group Code....46    NAIC Company Code....16713

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.....	-	-	-	-	3,201	3,201	-	-	111	1,894	-	-
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.....	-	-	-	-	11,945	(31,966)	-	551	(2,194)	1,894	-	-
4. Homeowners multiple peril.....	-	-	-	-	29,298	(49,648)	-	-	(5,561)	2,367	-	-
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.....												
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.....	-	-	-	-	365,235	122,800	256,750	27,066	28,140	33,952	-	-
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....	-	-	-	-	(12,854)	(46,161)	37,628	1,664	719	2,130	-	-
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	1,976
35. TOTALS (a).....	0	0	0	0	396,825	(1,774)	294,378	29,281	21,215	42,237	0	1,976

**DETAILS OF WRITE-INS**

3401. State Fees.....												1,976
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	1,976

(a) Finance and service charges not included in Lines 1 to 35 \$.....7.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

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



NAIC Group Code....46    NAIC Company Code....16713

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		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	2,173,287	2,163,159		1,099,200	1,088,992	869,195	47,089	17,732	1,987	4,583	347,563	34,014
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.....	11,174,553	10,965,375		5,412,605	6,311,368	6,412,680	1,845,627	85,704	53,996	175,948	1,755,992	201,308
4. Homeowners multiple peril.....	8,926,478	8,803,008		4,522,761	6,469,878	6,278,404	1,377,654	49,070	67,185	104,749	1,404,739	159,401
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....	261,385	262,746		129,874	38,152	2,898	18,086				41,350	4,528
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.....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....	547,192	553,622		250,965	950,000	(677,240)	400,742		3,063	1,948	86,340	9,393
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....	303,765	336,026		139,138	95,533	78,905	148,193	123	(8,177)	14,921	46,044	6,882
19.2 Other private passenger auto liability.....	8,474,177	8,546,677		4,056,403	5,699,379	4,346,552	4,680,790	338,892	256,768	483,834	1,341,635	144,094
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....	7,354,313	7,307,745		3,483,579	4,781,978	4,542,850	169,056	6,699	13,761	27,239	1,160,013	129,561
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	15,941
35. TOTALS (a).....	39,215,150	38,938,358	0	19,094,525	25,435,280	21,854,244	8,687,237	498,220	388,583	813,222	6,183,676	705,122
DETAILS OF WRITE-INS												
3401. Miscellaneous Fees.....												15,941
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	15,941

(a) Finance and service charges not included in Lines 1 to 35 \$.....256,324.  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

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



NAIC Group Code....46    NAIC Company Code....16713

BUSINESS IN THE STATE OF    IOWA    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.....												
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.....												
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.....	- .....	- .....	- .....	- .....	.....(467)	.....(467)		- .....	- .....	- .....	- .....	- .....
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....420
35. TOTALS (a).....	.....0	.....0	.....0	.....0	.....(467)	.....(467)	.....0	.....0	.....0	.....0	.....0	.....420

**DETAILS OF WRITE-INS**

3401. State Fees.....												.....420
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	.....420

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

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



NAIC Group Code....46    NAIC Company Code....16713

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		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
2.5 Private flood.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium.....												
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	1,458
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,458

**DETAILS OF WRITE-INS**

3401. State Fees.....												1,458
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	1,458

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

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



NAIC Group Code....46    NAIC Company Code....16713

BUSINESS IN THE STATE OF    INDIANA    DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		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.....	632,648	638,142	-	328,963	373,199	314,082	16,169	1,126	(1,679)	306	102,682	10,568
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.....	2,234,581	2,165,206	-	1,028,956	673,513	747,357	254,428	1,119	18,887	22,315	362,683	37,326
4. Homeowners multiple peril.....	1,913,167	1,879,395	-	985,523	1,479,247	1,163,805	405,878	16,277	6,646	25,278	310,516	31,957
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....	72,323	72,344	-	36,876	4,550	(9,578)	4,984	-	-	-	11,738	1,208
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.....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....	87,332	84,911	-	39,926	58,275	63,228		-	-	-	14,174	1,459
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....	2,004,158	1,975,120	-	967,454	2,307,343	1,394,386	1,183,147	117,613	68,158	134,563	325,284	33,477
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....	1,769,265	1,766,046	-	843,352	1,190,153	1,147,322	70,594	1,905	4,584	4,207	287,160	29,553
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	8,713,474	8,581,164	0	4,231,050	6,028,005	4,815,649	1,998,428	138,040	96,596	186,669	1,414,237	145,548

**DETAILS OF WRITE-INS**

3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above)....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$....66,352.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.



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



NAIC Group Code....46    NAIC Company Code....16713

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		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
2.5 Private flood.....												
3. Farmowners multiple peril.....	3,755,397	3,725,633	-	1,834,404	2,385,063	2,551,634	751,951	27,866	30,875	81,891	569,233	85,080
4. Homeowners multiple peril.....	2,784,928	2,848,078	-	1,358,546	1,474,991	1,638,208	437,409	21,268	32,041	61,429	422,132	63,094
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....	59,597	63,863	-	28,626	8,637	1,596	4,429	-	-	-	9,034	1,350
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.....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....	125,831	136,849	-	58,946	-	60,295	70,777	-	-	-	19,073	2,851
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....	303,765	336,026	-	139,138	95,533	78,905	148,193	123	(8,177)	14,921	46,044	6,882
19.2 Other private passenger auto liability.....	1,634,050	1,742,961	-	749,456	905,844	787,710	740,814	5,542	(4,640)	-	247,685	37,020
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....	2,018,455	2,068,266	-	929,989	1,180,382	1,194,151	92,665	744	4,946	16,128	305,952	45,729
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	10,682,023	10,921,676	0	5,099,105	6,050,450	6,312,499	2,246,238	55,543	55,045	174,369	1,619,153	242,006

**DETAILS OF WRITE-INS**

3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above)....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$....30,759.  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

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



NAIC Group Code....46    NAIC Company Code....16713

BUSINESS IN THE STATE OF MICHIGAN 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.....												
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.....												
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	915
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	915

**DETAILS OF WRITE-INS**

3401. State Fees.....												915
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	915

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

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



NAIC Group Code....46    NAIC Company Code....16713

BUSINESS IN THE STATE OF MINNESOTA    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.....												
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.....												
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	1,229
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,229

**DETAILS OF WRITE-INS**

3401. State Fees.....												1,229
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	1,229

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

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



NAIC Group Code....46    NAIC Company Code....16713

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		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
2.5 Private flood.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium.....												
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	889
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	889

**DETAILS OF WRITE-INS**

3401. State Fees.....												889
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	889

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

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



NAIC Group Code....46    NAIC Company Code....16713

BUSINESS IN THE STATE OF **NEBRASKA** 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.....	-	-	-	-	-	-	-	-	-	1,278	-	-
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.....												
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.....	-	-	-	-	(5,000)	(5,000)	30,000	4,007	2,154	3,167	-	-
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....	-	-	-	-	(67)	(67)	-	-	-	-	-	-
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	769
35. TOTALS (a).....	0	0	0	0	(5,067)	(5,067)	30,000	4,007	2,154	4,445	0	769

**DETAILS OF WRITE-INS**

3401. State Fees.....												769
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	769

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

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



NAIC Group Code....46    NAIC Company Code....16713

BUSINESS IN THE STATE OF **NEW MEXICO**    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.....												
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.....												
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	1,300
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,300

**DETAILS OF WRITE-INS**

3401. State Fees.....												1,300
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	1,300

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

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



NAIC Group Code....46    NAIC Company Code....16713

BUSINESS IN THE STATE OF OHIO DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	1,540,639	1,525,017	-	770,237	816,943	656,263	30,920	16,606	3,788	1,055	244,881	23,446
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.....	5,184,575	5,074,536	-	2,549,245	3,240,916	3,190,946	714,248	47,288	4,211	58,642	824,076	78,902
4. Homeowners multiple peril.....	4,228,383	4,075,535	-	2,178,692	3,430,888	3,506,950	534,367	11,525	32,751	14,600	672,091	64,350
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....	129,465	126,539	-	64,372	24,965	10,880	8,673	-	-	-	20,578	1,970
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.....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....	334,029	331,862	-	152,093	950,000	(795,810)	266,737	-	2,945	1,875	53,093	5,083
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.....	4,835,969	4,828,596	-	2,339,493	1,972,578	2,111,530	2,303,376	181,379	150,688	278,917	768,666	73,597
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....	3,566,593	3,473,433	-	1,710,238	2,426,931	2,283,957	(55,190)	2,332	3,616	4,152	566,901	54,279
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	19,819,653	19,435,518	0	9,764,370	12,863,221	10,964,716	3,803,131	259,130	197,999	359,241	3,150,286	301,627

**DETAILS OF WRITE-INS**

3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above)....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$....159,206.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

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



NAIC Group Code....46    NAIC Company Code....16713

BUSINESS IN THE STATE OF **SOUTH DAKOTA** 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.....	-	-	-	-	(104,351)	(104,351)	-	-	(123)	26	-	-
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.....	-	-	-	-	(45,222)	125,000	8,789	2,301	10,401	-	-	-
4. Homeowners multiple peril.....	-	-	-	-	38,020	1,655	-	546	566	-	-	-
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.....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....	-	-	-	-			-	118	73	-	-	-
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.....	-	-	-	-	10,304	(48,403)	118,328	230	8,968	21,497	-	-
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....	-	-	-	-		(33,785)	23,359	29	(164)	378	-	-
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	3,583
35. TOTALS (a).....	0	0	0	0	(56,027)	(230,106)	266,687	9,048	11,646	32,941	0	3,583

**DETAILS OF WRITE-INS**

3401. State Fees.....												3,583
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	3,583

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

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.



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



NAIC Group Code....46    NAIC Company Code....16713

BUSINESS IN THE STATE OF    WISCONSIN    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.....												
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.....												
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.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	600
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	600

**DETAILS OF WRITE-INS**

3401. State Fees.....												600
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	600

(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.

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							
Affiliates - U. S. Intercompany Pooling														
35-1630739..	17639....	Home and Farm Insurance Company.....	OH.....	.....	.....46	.....150	.....196	.....	.....	.....	.....300	.....	.....	.....
0199999.	Affiliates - U. S. Intercompany Pooling.....			.....0	.....46	.....150	.....196	.....0	.....0	.....0	.....300	.....0	.....0	.....0
0899999.	Total Affiliates.....			.....0	.....46	.....150	.....196	.....0	.....0	.....0	.....300	.....0	.....0	.....0
9999999.	Totals.....			.....0	.....46	.....150	.....196	.....0	.....0	.....0	.....300	.....0	.....0	.....0

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effectd or (Canceled) during Current Year

1	2	3	4	5	6
ID Number	NAIC Company Code	Name of Company	Date of Contract	Original Premium	Reinsurance Premium

NONE

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable on								16	Reinsurance Payable		19	20	
						7	8	9	10	11	12	13	14		15	17			18
ID Number	NAIC Company Code	Name of Reinsurer	Domi-ciliary Juris-diction	Special Code	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commissions	Col. 7 through 14 Totals	Amount in Dispute Included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable from Reinsurers (Cols. 15 - [17 + 18])	Funds Held by Company Under Reinsurance Treaties
Authorized Other U.S. Unaffiliated Insurers																			
06-1182357.	22730...	Allied World Insurance Company.....	NH....		.....60	.....45	.....	.....11	- .....	- .....	- .....	- .....	.....	.....56	.....	.....	.....	.....56	.....
36-2661954.	10103...	American Agricultural Insurance Company.....	IN....		.....	.....1	.....	- .....	- .....	- .....	- .....	- .....	.....	.....1	.....	.....(6)	.....	.....7	.....
51-0434766.	20370...	Axis Reinsurance Company.....	NY....		.....129	.....37	- .....	.....10	- .....	- .....	- .....	.....42	.....	.....89	.....	.....32	.....	.....57	.....
47-0574325.	32603...	Berkley Insurance Company.....	DE....		- .....	- .....	- .....	- .....	- .....	- .....	- .....	- .....	.....	.....0	.....	.....(4)	.....	.....4	.....
42-0234980.	21415...	Employers Mutual Casualty Company.....	IA....		.....599	.....29	.....1	.....90	.....3	.....128	.....29	.....250	.....	.....530	.....	.....177	.....	.....353	.....
22-2005057.	26921...	Everest Reinsurance Company.....	DE....		.....866	.....25	.....1	.....144	.....6	.....222	.....46	.....354	.....	.....798	.....	.....257	.....	.....541	.....
03-0350908.	10641...	Endurance American Insurance Company.....	DE....		- .....	- .....	- .....	.....20	.....1	.....23	.....2	- .....	.....	.....46	.....	- .....	.....	.....46	.....
05-0316605.	21482...	Factory Mutual Insurance Company.....	RI....		.....275	- .....	- .....	- .....	- .....	- .....	- .....	.....141	.....	.....141	.....	.....37	.....	.....104	.....
42-0245840.	13897...	Farmers Mutual Hail Insurance Company Of Iowa.....	IA....		- .....	- .....	- .....	- .....	- .....	- .....	- .....	- .....	.....	.....0	.....	.....(3)	.....	.....3	.....
04-1543470.	23043...	Liberty Mutual Insurance Company.....	MA....		.....1,042	.....27	.....1	.....133	.....4	.....192	.....44	.....439	.....	.....840	.....	.....321	.....	.....519	.....
13-4924125.	10227...	Munich Reinsurance America, Inc.....	DE....		.....708	.....93	- .....	.....111	.....6	.....115	.....10	.....213	.....	.....548	.....	.....159	.....	.....389	.....
25-0687550.	19445...	National Union Fire Insurance Co of Pittsburgh, PA.....	PA....		.....239	.....29	- .....	.....9	- .....	- .....	- .....	.....85	.....	.....123	.....	.....63	.....	.....60	.....
23-2153760.	39675...	PMA Capital.....	PA....		.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....	.....33	.....	.....(33)	.....
13-1675535.	25364...	Swiss Reinsurance America Corporation.....	NY....		.....530	.....4	- .....	.....8	- .....	- .....	- .....	.....169	.....	.....181	.....	.....123	.....	.....58	.....
13-2918573.	42439...	The Toa Reinsurance Company Of America.....	DE....		- .....	- .....	- .....	- .....	- .....	- .....	- .....	- .....	.....	.....0	.....	.....28	.....	.....(28)	.....
13-5616275.	19453...	Transatlantic Reinsurance Company.....	NY....		.....889	.....45	.....1	.....199	.....22	.....204	.....55	.....416	.....	.....942	.....	.....266	.....	.....676	.....
06-1430254.	10348...	Arch Reinsurance Company .....	DE....		.....218	.....(4)	.....	.....27	.....	.....45	.....13	.....104	.....	.....185	.....	.....75	.....	.....110	.....
13-2673100.	22039...	General Reinsurance Corporation.....	DE....		.....872	.....(16)	.....1	.....107	.....1	.....180	.....52	.....416	.....	.....741	.....	.....301	.....	.....440	.....
0999999.	Total Authorized Other U.S. Unaffiliated Insurers.....				.....6,427	.....315	.....5	.....869	.....43	.....1,109	.....251	.....2,629	.....0	.....5,221	.....0	.....1,859	.....0	.....3,362	.....0
Authorized Other Non-U.S. Insurers																			
AA-1120337.	00000...	Aspen Insurance UK Limited.....	GBR..		- .....	- .....	- .....	- .....	.....	- .....	- .....	- .....	.....	.....0	.....	.....(1)	.....	.....1	.....
AA-1340125.	00000...	Hannover Rück SE.....	DEU..		.....949	.....26	.....1	.....119	.....3	.....173	.....42	.....397	.....	.....761	.....	.....287	.....	.....474	.....
AA-1120184.	00000...	Lloyd's Underwriter Syndicate No. 3268.....	GBR..		.....98	.....18	- .....	.....5	- .....	- .....	- .....	.....21	.....	.....44	.....	.....16	.....	.....28	.....
AA-1840000.	00000...	Mapfre Re, Compañía de Reaseguros S. A.....	ESP..		- .....	- .....	.....	- .....	- .....	- .....	- .....	- .....	.....	.....0	.....	.....(1)	.....	.....1	.....
1299999.	Total Authorized Other Non-U.S. Insurers.....				.....1,047	.....44	.....1	.....124	.....3	.....173	.....42	.....418	.....0	.....805	.....0	.....301	.....0	.....504	.....0
1499999.	Total Authorized Excluding Protected Cells.....				.....7,474	.....359	.....6	.....993	.....46	.....1,282	.....293	.....3,047	.....0	.....6,026	.....0	.....2,160	.....0	.....3,866	.....0
Unauthorized Affiliates-U.S. Intercompany Pooling																			
35-1630739.	17639...	Home and Farm Insurance Company.....	OH....		.....1,581	.....199	.....23	.....168	.....9	.....164	.....30	.....801	.....	.....1,394	.....	.....362	.....119	.....913	.....2,000
1599999.	Total Unauthorized Affiliates - U.S. Intercompany Pooling.....				.....1,581	.....199	.....23	.....168	.....9	.....164	.....30	.....801	.....0	.....1,394	.....0	.....362	.....119	.....913	.....2,000

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable on								16	Reinsurance Payable		19	20	
						7	8	9	10	11	12	13	14		15	17			18
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Special Code	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commissions	Col. 7 through 14 Totals	Amount in Dispute Included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable from Reinsurers (Cols. 15 - [17 + 18])	Funds Held by Company Under Reinsurance Treaties
2299999.		Total Unauthorized Affiliates.....			.....1,581	.....199	.....23	.....168	.....9	.....164	.....30	.....801	.....0	.....1,394	.....0	.....362	.....119	.....913	.....2,000
Unauthorized Other Non-U.S. Insurers																			
AA-1560350.	00000...	Farm Mutual Reinsurance Plan Inc.....	CAN..					- .....	- .....	- .....	- .....	- .....		.....0		.....1		.....(1)	.....11
AA-5324100.	00000...	Taiping Reinsurance Company Limited.....	HKG..		.....117	.....1	- .....	.....1	- .....	- .....	- .....	.....21		.....23		.....16		.....7	.....24
2699999.		Total Unauthorized Other Non-U.S. Insurers.....			.....117	.....1	.....0	.....1	.....0	.....0	.....0	.....21	.....0	.....23	.....0	.....17	.....0	.....6	.....35
2899999.		Total Unauthorized Excluding Protected Cells.....			.....1,698	.....200	.....23	.....169	.....9	.....164	.....30	.....822	.....0	.....1,417	.....0	.....379	.....119	.....919	.....2,035
4399999.		Total Authorized, Unauthorized and Certified Excluding Protected Cells.....			.....9,172	.....559	.....29	.....1,162	.....55	.....1,446	.....323	.....3,869	.....0	.....7,443	.....0	.....2,539	.....119	.....4,785	.....2,035
9999999.		Totals (Sum of 4399999 and 4499999).....			.....9,172	.....559	.....29	.....1,162	.....55	.....1,446	.....323	.....3,869	.....0	.....7,443	.....0	.....2,539	.....119	.....4,785	.....2,035

SCHEDULE F - PART 3 (Continued)

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

(Credit Risk)

		Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
ID Number from Col. 1	Name of Reinsurer from Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15 - 27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17 + 18 + 20; Not in Excess of Col. 29)	Stressed Net Recoverable (Cols. 29 - 30)	Total Collateral (Cols. 21 + 22 + 24; Not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
Authorized Other U.S. Unaffiliated Insurers																	
06-1182357.	Allied World Insurance Company.....					.....0	.....56	.....0	.....56	.....67	.....0	.....67	.....0	.....67	.....3	.....0	.....3
36-2661954.	American Agricultural Insurance Company.....					.....(6)	.....7	.....0	.....1	.....1	.....(6)	.....7	.....0	.....7	.....3	.....0	.....0
51-0434766.	Axis Reinsurance Company.....					.....32	.....57	.....0	.....89	.....107	.....32	.....75	.....0	.....75	.....2	.....0	.....3
47-0574325.	Berkley Insurance Company.....					.....(4)	.....4	.....0	.....0	.....0	.....(4)	.....4	.....0	.....4	.....2	.....0	.....0
42-0234980.	Employers Mutual Casualty Company.....					.....177	.....353	.....0	.....530	.....636	.....177	.....459	.....0	.....459	.....3	.....0	.....22
22-2005057.	Everest Reinsurance Company.....					.....257	.....541	.....0	.....798	.....958	.....257	.....701	.....0	.....701	.....2	.....0	.....29
03-0350908.	Endurance American Insurance Company.....					.....0	.....46	.....0	.....46	.....55	.....0	.....55	.....0	.....55	.....2	.....0	.....2
05-0316605.	Factory Mutual Insurance Company.....					.....37	.....104	.....0	.....141	.....169	.....37	.....132	.....0	.....132	.....2	.....0	.....5
42-0245840.	Farmers Mutual Hail Insurance Company Of Iowa.....					.....(3)	.....3	.....0	.....0	.....0	.....(3)	.....3	.....0	.....3	.....4	.....0	.....0
04-1543470.	Liberty Mutual Insurance Company.....					.....321	.....519	.....0	.....840	.....1,008	.....321	.....687	.....0	.....687	.....3	.....0	.....33
13-4924125.	Munich Reinsurance America, Inc.....					.....159	.....389	.....0	.....548	.....658	.....159	.....499	.....0	.....499	.....2	.....0	.....20
25-0687550.	National Union Fire Insurance Co of Pittsburgh, PA.....					.....63	.....60	.....0	.....123	.....148	.....63	.....85	.....0	.....85	.....3	.....0	.....4
23-2153760.	PMA Capital.....					.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....3	.....0	.....0
13-1675535.	Swiss Reinsurance America Corporation.....					.....123	.....58	.....0	.....181	.....217	.....123	.....94	.....0	.....94	.....2	.....0	.....4
13-2918573.	The Toa Reinsurance Company Of America.....					.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....3	.....0	.....0
13-5616275.	Transatlantic Reinsurance Company.....					.....266	.....676	.....0	.....942	.....1,130	.....266	.....864	.....0	.....864	.....2	.....0	.....35
06-1430254.	Arch Reinsurance Company .....					.....75	.....110	.....0	.....185	.....222	.....75	.....147	.....0	.....147	.....2	.....0	.....6
13-2673100.	General Reinsurance Corporation.....					.....301	.....440	.....0	.....741	.....889	.....301	.....588	.....0	.....588	.....1	.....0	.....21
0999999.	Total Authorized Other U.S. Unaffiliated Insurers.....	.....0	.....0	...XXX...	.....0	.....1,798	.....3,423	.....0	.....5,221	.....6,265	.....1,798	.....4,467	.....0	.....4,467	...XXX....	.....0	.....189
Authorized Other Non-U.S. Insurers																	
AA-1120337.	Aspen Insurance UK Limited.....					.....(1)	.....1	.....0	.....0	.....0	.....(1)	.....1	.....0	.....1	.....3	.....0	.....0
AA-1340125.	Hannover Rück SE.....					.....287	.....474	.....0	.....761	.....913	.....287	.....626	.....0	.....626	.....2	.....0	.....26
AA-1120184.	Lloyd's Underwriter Syndicate No. 3268.....					.....16	.....28	.....0	.....44	.....53	.....16	.....37	.....0	.....37	.....3	.....0	.....2
AA-1840000.	Mapfre Re, Compañía de Reaseguros S. A.....					.....(1)	.....1	.....0	.....0	.....0	.....(1)	.....1	.....0	.....1	.....3	.....0	.....0
1299999.	Total Authorized Other Non-U.S. Insurers.....	.....0	.....0	...XXX...	.....0	.....301	.....504	.....0	.....805	.....966	.....301	.....665	.....0	.....665	...XXX....	.....0	.....28
1499999.	Total Authorized Excluding Protected Cells.....	.....0	.....0	...XXX...	.....0	.....2,099	.....3,927	.....0	.....6,026	.....7,231	.....2,099	.....5,132	.....0	.....5,132	...XXX....	.....0	.....217
Unauthorized Affiliates-U.S. Intercompany Pooling																	
35-1630739.	Home and Farm Insurance Company.....					.....1,394	.....0	.....0	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....
1599999.	Total Unauthorized Affiliates - U.S. Intercompany Pooling..	.....0	.....0	...XXX...	.....0	.....1,394	.....0	.....0	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....

SCHEDULE F - PART 3 (Continued)

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

(Credit Risk)

ID Number from Col. 1	Name of Reinsurer from Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15 - 27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17 + 18 + 20; Not in Excess of Col. 29)	Stressed Net Recoverable (Cols. 29 - 30)	Total Collateral (Cols. 21 + 22 + 24; Not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
2299999.	Total Unauthorized Affiliates.....	.....0	.....0	...XXX....	.....0	.....1,394	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	...XXX....	.....0	.....0
Unauthorized Other Non-U.S. Insurers																	
AA-1560350.	Farm Mutual Reinsurance Plan Inc.....	.....	.....	.....	.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....4	.....0	.....0
AA-5324100.	Taiping Reinsurance Company Limited.....	.....	.....	.....	.....	.....23	.....0	.....0	.....23	.....28	.....28	.....0	.....0	.....0	.....3	.....0	.....0
2699999.	Total Unauthorized Other Non-U.S. Insurers.....	.....0	.....0	...XXX....	.....0	.....23	.....0	.....0	.....23	.....28	.....28	.....0	.....0	.....0	...XXX....	.....0	.....0
2899999.	Total Unauthorized Excluding Protected Cells.....	.....0	.....0	...XXX....	.....0	.....1,417	.....0	.....0	.....23	.....28	.....28	.....0	.....0	.....0	...XXX....	.....0	.....0
4399999.	Total Authorized, Unauthorized & Certified Excl Prot Cells.....	.....0	.....0	...XXX....	.....0	.....3,516	.....3,927	.....0	.....6,049	.....7,259	.....2,127	.....5,132	.....0	.....5,132	...XXX....	.....0	.....217
9999999.	Totals (Sum of 4399999 and 4499999).....	.....0	.....0	...XXX....	.....0	.....3,516	.....3,927	.....0	.....6,049	.....7,259	.....2,127	.....5,132	.....0	.....5,132	...XXX....	.....0	.....217

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SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number from Col. 1	Name of Reinsurer from Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44  Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45  Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46  Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 43 - 44)	47  Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48  Amounts Received Prior 90 Days	49  Percentage Overdue (Col. 42 / Col. 43)	50  Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47 /[Cols. 46 + 48])	51  Percentage More Than 120 Days Overdue (Col. 41 / Col. 43)	52  Is the Amount in Col. 50 Less than 20%? (Yes or No)	53  Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
		37  Current	Overdue					43  Total Due Cols. 37 + 42 (In Total Should Equal Cols. 7 + 8)											
			38  1 - 29 Days	39  30 - 90 Days	40  91 - 120 Days	41  Over 120 Days	42  Total Overdue (Cols. 38 + 39 + 40 +41)												
Authorized Other U.S. Unaffiliated Insurers																			
06-1182357.	Allied World Insurance Company.....	45					0	45			45	0		0.0	0.0	0.0	0.0	YES....	0
36-2661954.	American Agricultural Insurance Company.....	1					0	1			1	0		0.0	0.0	0.0	0.0	YES....	0
51-0434766.	Axis Reinsurance Company.....	37					0	37			37	0		0.0	0.0	0.0	0.0	YES....	0
47-0574325.	Berkley Insurance Company.....						0	0			0	0		0.0	0.0	0.0	0.0	YES....	0
42-0234980.	Employers Mutual Casualty Company.....	30					0	30			30	0		0.0	0.0	0.0	0.0	YES....	0
22-2005057.	Everest Reinsurance Company.....	26					0	26			26	0		0.0	0.0	0.0	0.0	YES....	0
03-0350908.	Endurance American Insurance Company.....						0	0			0	0		0.0	0.0	0.0	0.0	YES....	0
05-0316605.	Factory Mutual Insurance Company.....	-					0	0			0	0		0.0	0.0	0.0	0.0	YES....	0
42-0245840.	Farmers Mutual Hail Insurance Company Of Iowa.....						0	0			0	0		0.0	0.0	0.0	0.0	YES....	0
04-1543470.	Liberty Mutual Insurance Company.....	28					0	28			28	0		0.0	0.0	0.0	0.0	YES....	0
13-4924125.	Munich Reinsurance America, Inc.....	93					0	93			93	0		0.0	0.0	0.0	0.0	YES....	0
25-0687550.	National Union Fire Insurance Co of Pittsburgh, PA.....	29					0	29			29	0		0.0	0.0	0.0	0.0	YES....	0
23-2153760.	PMA Capital.....	-					0	0			0	0		0.0	0.0	0.0	0.0	YES....	0
13-1675535.	Swiss Reinsurance America Corporation.....	4					0	4			4	0		0.0	0.0	0.0	0.0	YES....	0
13-2918573.	The Toa Reinsurance Company Of America.....	-					0	0			0	0		0.0	0.0	0.0	0.0	YES....	0
13-5616275.	Transatlantic Reinsurance Company.....	46					0	46			46	0		0.0	0.0	0.0	0.0	YES....	0
06-1430254.	Arch Reinsurance Company .....	(4)					0	(4)			(4)	0		0.0	0.0	0.0	0.0	YES....	0
13-2673100.	General Reinsurance Corporation.....	(15)					0	(15)			(15)	0		0.0	0.0	0.0	0.0	YES....	0
0999999.	Total Authorized Other U.S. Unaffiliated Insurers.....	320	0	0	0	0	0	320	0	0	320	0	0	0.0	0.0	0.0	0.0	...XXX.	0
Authorized Other Non-U.S. Insurers																			
AA-1120337.	Aspen Insurance UK Limited.....	-					0	0			0	0		0.0	0.0	0.0	0.0	YES....	0
AA-1340125.	Hannover Rück SE.....	27					0	27			27	0		0.0	0.0	0.0	0.0	YES....	0
AA-1120184.	Lloyd's Underwriter Syndicate No. 3268.....	18					0	18			18	0		0.0	0.0	0.0	0.0	YES....	0
AA-1840000.	Mapfre Re, Compañía de Reaseguros S. A.....						0	0			0	0		0.0	0.0	0.0	0.0	YES....	0
1299999.	Total Authorized Other Non-U.S. Insurers.....	45	0	0	0	0	0	45	0	0	45	0	0	0.0	0.0	0.0	0.0	...XXX.	0
1499999.	Total Authorized Excluding Protected Cells.....	365	0	0	0	0	0	365	0	0	365	0	0	0.0	0.0	0.0	0.0	...XXX.	0
Unauthorized Affiliates-U.S. Intercompany Pooling																			
35-1630739.	Home and Farm Insurance Company.....	222					0	222			222	0		0.0	0.0	0.0	0.0	YES....	0
1599999.	Total Unauthorized Affiliates - U.S. Intercompany Pooling..	222	0	0	0	0	0	222	0	0	222	0	0	0.0	0.0	0.0	0.0	...XXX.	0



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

ID Number from Col. 1	Name of Reinsurer from Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44	45	46	47	48	49	50	51	52	53	
		37	Overdue					43											
			38	39	40	41	42												
		Current	1 - 29 Days	30 - 90 Days	91 - 120 Days	Over 120 Days	Total Overdue (Cols. 38 + 39 + 40 +41)	Total Due Cols. 37 + 42 (In Total Should Equal Cols. 7 + 8)	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 43 - 44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	Amounts Received Prior 90 Days	Percentage Overdue (Col. 42 / Col. 43)	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47 /[Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 41 / 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	
2299999.	Total Unauthorized Affiliates.....	.....222	.....0	.....0	.....0	.....0	.....0	.....222	.....0	.....0	.....222	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0.0	...XXX.	.....0
Unauthorized Other Non-U.S. Insurers																			
AA-1560350.	Farm Mutual Reinsurance Plan Inc.....	.....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	YES....	.....0
AA-5324100.	Taiping Reinsurance Company Limited.....	.....1	.....	.....	.....	.....	.....0	.....1	.....	.....	.....1	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	YES....	.....0
2699999.	Total Unauthorized Other Non-U.S. Insurers.....	.....1	.....0	.....0	.....0	.....0	.....0	.....1	.....0	.....0	.....1	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0.0	...XXX.	.....0
2899999.	Total Unauthorized Excluding Protected Cells.....	.....223	.....0	.....0	.....0	.....0	.....0	.....223	.....0	.....0	.....223	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0.0	...XXX.	.....0
4399999.	Total Authorized, Unauthorized & Certified Excl Prot Cells.....	.....588	.....0	.....0	.....0	.....0	.....0	.....588	.....0	.....0	.....588	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0.0	...XXX.	.....0
9999999.	Totals (Sum of 4399999 and 4499999).....	.....588	.....0	.....0	.....0	.....0	.....0	.....588	.....0	.....0	.....588	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0.0	...XXX.	.....0

**Sch. F - Pt. 3**  
**NONE**

**Sch. F - Pt. 3**  
**NONE**

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

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

1	2	3
Name of Reinsurer	Commission Rate	Ceded Premium
1. Factory Mutual Insurance Company.....	.....35.0	.....275
2. Transatlantic Reinsurance Company.....	.....25.0	.....754
3. General Reinsurance Corporation.....	.....25.0	.....754
4. Everest Reinsurance Company.....	.....25.0	.....565
5. Hannover Rück SE.....	.....25.0	.....565

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

1	2	3	4
Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated YES or NO
6. Home and Farm Insurance Company.....	.....1,388	.....1,581	.....YES.....
7. Transatlantic Reinsurance Company.....	.....935	.....890	.....NO.....
8. Liberty Mutual Insurance Company.....	.....842	.....1,042	.....NO.....
9. Everest Reinsurance Company.....	.....805	.....866	.....NO.....
10.Hannover Rück SE.....	.....763	.....950	.....NO.....

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12).....	43,183,611	(2,034,984)	41,148,627
2. Premiums and considerations (Line 15).....	8,320,319		8,320,319
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	585,547	(585,548)	(1)
4. Funds held by or deposited with reinsured companies (Line 16.2).....	300,000	(300,000)	0
5. Other assets.....	818,942	(138,956)	679,986
6. Net amount recoverable from reinsurers.....		6,284,875	6,284,875
7. Protected cell assets (Line 27).....			0
8. Totals (Line 28).....	53,208,419	3,225,387	56,433,806
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	7,253,437	3,791,068	11,044,505
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	2,743,481	160,776	2,904,257
11. Unearned premiums (Line 9).....	15,223,646	3,870,877	19,094,523
12. Advance premiums (Line 10).....	420,690		420,690
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....	2,542,160	(2,542,160)	0
15. Funds held by company under reinsurance treaties (Line 13).....	2,034,984	(2,034,984)	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.....	904,708	(20,190)	884,518
19. Total liabilities excluding protected cell business (Line 26).....	31,123,106	3,225,387	34,348,493
20. Protected cell liabilities (Line 27).....			0
21. Surplus as regards policyholders (Line 37).....	22,085,313	XXX	22,085,313
22. Totals (Line 38).....	53,208,419	3,225,387	56,433,806

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 [ X ]

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			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1  Direct and Assumed	2  Ceded	3  Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....(1).....				.....11.....		.....1.....	.....10.....	.....XXX.....
2. 2010.....	.....33,451.....	.....15,837.....	.....17,614.....	.....25,010.....	.....13,834.....	.....560.....	.....342.....	.....1,291.....	.....158.....	.....328.....	.....12,527.....	.....6,119.....
3. 2011.....	.....33,507.....	.....16,134.....	.....17,373.....	.....37,325.....	.....24,028.....	.....438.....	.....236.....	.....1,941.....	.....424.....	.....294.....	.....15,016.....	.....8,559.....
4. 2012.....	.....29,409.....	.....12,962.....	.....16,447.....	.....22,441.....	.....12,946.....	.....360.....	.....125.....	.....1,487.....	.....337.....	.....131.....	.....10,880.....	.....5,399.....
5. 2013.....	.....28,738.....	.....6,968.....	.....21,770.....	.....16,612.....	.....2,771.....	.....263.....	.....94.....	.....1,004.....	.....37.....	.....285.....	.....14,977.....	.....3,647.....
6. 2014.....	.....28,300.....	.....9,516.....	.....18,784.....	.....20,753.....	.....8,280.....	.....183.....	.....67.....	.....1,082.....	.....175.....	.....76.....	.....13,496.....	.....3,770.....
7. 2015.....	.....27,004.....	.....8,704.....	.....18,300.....	.....14,938.....	.....4,940.....	.....170.....	.....55.....	.....798.....	.....134.....	.....124.....	.....10,777.....	.....2,470.....
8. 2016.....	.....25,892.....	.....6,529.....	.....19,363.....	.....16,815.....	.....3,895.....	.....227.....	.....86.....	.....938.....	.....44.....	.....71.....	.....13,955.....	.....2,852.....
9. 2017.....	.....23,699.....	.....4,654.....	.....19,045.....	.....17,101.....	.....4,728.....	.....78.....	.....24.....	.....699.....	.....21.....	.....22.....	.....13,105.....	.....2,639.....
10. 2018.....	.....19,248.....	.....4,442.....	.....14,806.....	.....9,422.....	.....322.....	.....33.....	.....11.....	.....499.....	.....11.....	.....54.....	.....9,610.....	.....1,707.....
11. 2019.....	.....18,780.....	.....4,303.....	.....14,477.....	.....10,215.....	.....2,330.....	.....33.....	.....14.....	.....529.....	.....24.....	.....133.....	.....8,409.....	.....1,938.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....190,631.....	.....78,074.....	.....2,345.....	.....1,054.....	.....10,279.....	.....1,365.....	.....1,519.....	.....122,762.....	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23  Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25  Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	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			
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....3.....	.....	.....	.....3.....	.....6.....
2. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....1.....
3. 2011.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
4. 2012.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
5. 2013.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
6. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
7. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
8. 2016.....	.....200.....	.....35.....	.....	.....	.....30.....	.....5.....	.....	.....	.....16.....	.....1.....	.....	.....205.....	.....5.....
9. 2017.....	.....115.....	.....10.....	.....175.....	.....93.....	.....14.....	.....	.....13.....	.....3.....	.....10.....	.....	.....11.....	.....221.....	.....5.....
10. 2018.....	.....223.....	.....190.....	.....334.....	.....170.....	.....6.....	.....6.....	.....38.....	.....8.....	.....5.....	.....	.....19.....	.....232.....	.....7.....
11. 2019.....	.....823.....	.....112.....	.....1,193.....	.....618.....	.....3.....	.....	.....252.....	.....88.....	.....73.....	.....3.....	.....67.....	.....1,523.....	.....155.....
12. Totals...	.....1,361.....	.....347.....	.....1,702.....	.....881.....	.....53.....	.....11.....	.....303.....	.....99.....	.....107.....	.....4.....	.....97.....	.....2,184.....	.....179.....

	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.....	.....3.....
2. 2010.	.....26,861.....	.....14,334.....	.....12,527.....	.....80.3.....	.....90.5.....	.....71.1.....				.....0.....	.....0.....
3. 2011.	.....39,704.....	.....24,688.....	.....15,016.....	.....118.5.....	.....153.0.....	.....86.4.....				.....0.....	.....0.....
4. 2012.	.....24,288.....	.....13,408.....	.....10,880.....	.....82.6.....	.....103.4.....	.....66.2.....				.....0.....	.....0.....
5. 2013.	.....17,879.....	.....2,902.....	.....14,977.....	.....62.2.....	.....41.6.....	.....68.8.....				.....0.....	.....0.....
6. 2014.	.....22,018.....	.....8,522.....	.....13,496.....	.....77.8.....	.....89.6.....	.....71.8.....				.....0.....	.....0.....
7. 2015.	.....15,906.....	.....5,129.....	.....10,777.....	.....58.9.....	.....58.9.....	.....58.9.....				.....0.....	.....0.....
8. 2016.	.....18,226.....	.....4,066.....	.....14,160.....	.....70.4.....	.....62.3.....	.....73.1.....				.....165.....	.....40.....
9. 2017.	.....18,205.....	.....4,879.....	.....13,326.....	.....76.8.....	.....104.8.....	.....70.0.....				.....187.....	.....34.....
10. 2018.	.....10,560.....	.....718.....	.....9,842.....	.....54.9.....	.....16.2.....	.....66.5.....				.....197.....	.....35.....
11. 2019.	.....13,121.....	.....3,189.....	.....9,932.....	.....69.9.....	.....74.1.....	.....68.6.....				.....1,286.....	.....237.....
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....1,835.....	.....349.....

**SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**  
(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported- Direct and Assumed	
	1  Direct and Assumed	2  Ceded	3  Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received		11  Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....					.....9.....			.....9.....	.....XXX.....
2. 2010.....	.....12,335.....	.....1,030.....	.....11,305.....	.....8,659.....	.....551.....	.....363.....	.....55.....	.....682.....		.....542.....	.....9,098.....	.....2,917.....
3. 2011.....	.....12,038.....	.....1,019.....	.....11,019.....	.....9,567.....	.....1,620.....	.....363.....	.....70.....	.....512.....	.....21.....	.....301.....	.....8,731.....	.....2,885.....
4. 2012.....	.....10,987.....	.....815.....	.....10,172.....	.....8,091.....	.....89.....	.....348.....	.....60.....	.....598.....	.....(55).....	.....342.....	.....8,943.....	.....2,750.....
5. 2013.....	.....11,281.....	.....916.....	.....10,365.....	.....6,425.....	.....71.....	.....227.....	.....34.....	.....683.....	.....(18).....	.....309.....	.....7,248.....	.....2,959.....
6. 2014.....	.....12,113.....	.....3,735.....	.....8,378.....	.....7,687.....	.....2,062.....	.....227.....	.....40.....	.....667.....	.....33.....	.....285.....	.....6,446.....	.....2,853.....
7. 2015.....	.....11,833.....	.....3,364.....	.....8,469.....	.....8,726.....	.....2,459.....	.....331.....	.....61.....	.....712.....	.....42.....	.....302.....	.....7,207.....	.....2,550.....
8. 2016.....	.....11,541.....	.....2,436.....	.....9,105.....	.....7,574.....	.....1,443.....	.....262.....	.....56.....	.....676.....	.....(8).....	.....218.....	.....7,021.....	.....2,463.....
9. 2017.....	.....10,779.....	.....1,088.....	.....9,691.....	.....7,134.....	.....428.....	.....306.....	.....71.....	.....608.....	.....13.....	.....184.....	.....7,536.....	.....2,067.....
10. 2018.....	.....8,755.....	.....981.....	.....7,774.....	.....4,228.....	.....272.....	.....33.....	.....10.....	.....469.....	.....(10).....	.....145.....	.....4,458.....	.....1,519.....
11. 2019.....	.....8,439.....	.....979.....	.....7,460.....	.....2,382.....		.....7.....	.....2.....	.....404.....	.....(2).....	.....60.....	.....2,793.....	.....1,390.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....70,473.....	.....8,995.....	.....2,467.....	.....459.....	.....6,020.....	.....16.....	.....2,688.....	.....69,490.....	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23  Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25  Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14  Ceded	15 Direct and Assumed	16  Ceded	17 Direct and Assumed	18  Ceded	19 Direct and Assumed	20  Ceded					
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....2	.....	.....	.....2	.....5
2. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
3. 2011.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
4. 2012.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
5. 2013.....	.....29	.....	.....	.....	.....3	.....	.....	.....	.....1	.....	.....	.....33	.....2
6. 2014.....	.....1	.....	.....	.....	.....	.....	.....	.....	.....1	.....	.....	.....2	.....3
7. 2015.....	.....48	.....12	.....	.....	.....10	.....4	.....	.....	.....2	.....	.....	.....44	.....3
8. 2016.....	.....103	.....22	.....	.....	.....42	.....8	.....	.....	.....5	.....	.....20	.....120	.....4
9. 2017.....	.....399	.....65	.....174	.....(1)	.....66	.....9	.....25	.....6	.....14	.....	.....29	.....599	.....18
10. 2018.....	.....415	.....1	.....341	.....(10)	.....16	.....	.....53	.....11	.....12	.....	.....81	.....835	.....24
11. 2019.....	.....1,875	.....480	.....1,204	.....(22)	.....13	.....3	.....423	.....147	.....67	.....1	.....171	.....2,973	.....144
12. Totals...	.....2,870	.....580	.....1,719	.....(33)	.....150	.....24	.....501	.....164	.....104	.....1	.....301	.....4,608	.....203

	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	36
										Losses Unpaid	Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....XXX.....	.....0.....	.....2.....
2. 2010.	.....9,704.....	.....606.....	.....9,098.....	.....78.7.....	.....58.8.....	.....80.5.....	.....	.....	.....	.....0.....	.....0.....
3. 2011.	.....10,442.....	.....1,711.....	.....8,731.....	.....86.7.....	.....167.9.....	.....79.2.....	.....	.....	.....	.....0.....	.....0.....
4. 2012.	.....9,037.....	.....94.....	.....8,943.....	.....82.2.....	.....11.5.....	.....87.9.....	.....	.....	.....	.....0.....	.....0.....
5. 2013.	.....7,368.....	.....87.....	.....7,281.....	.....65.3.....	.....9.5.....	.....70.2.....	.....	.....	.....	.....29.....	.....4.....
6. 2014.	.....8,583.....	.....2,135.....	.....6,448.....	.....70.9.....	.....57.2.....	.....77.0.....	.....	.....	.....	.....1.....	.....1.....
7. 2015.	.....9,829.....	.....2,578.....	.....7,251.....	.....83.1.....	.....76.6.....	.....85.6.....	.....	.....	.....	.....36.....	.....8.....
8. 2016.	.....8,662.....	.....1,521.....	.....7,141.....	.....75.1.....	.....62.4.....	.....78.4.....	.....	.....	.....	.....81.....	.....39.....
9. 2017.	.....8,726.....	.....591.....	.....8,135.....	.....81.0.....	.....54.3.....	.....83.9.....	.....	.....	.....	.....509.....	.....90.....
10. 2018.	.....5,567.....	.....274.....	.....5,293.....	.....63.6.....	.....27.9.....	.....68.1.....	.....	.....	.....	.....765.....	.....70.....
11. 2019.	.....6,375.....	.....609.....	.....5,766.....	.....75.5.....	.....62.2.....	.....77.3.....	.....	.....	.....	.....2,621.....	.....352.....
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....4,042.....	.....566.....

**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**



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

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1  Direct and Assumed	2  Ceded	3  Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....								.....0	.....XXX.....
2. 2010.....	.....1,575.....	.....1,082.....	.....493.....	.....224.....		.....36.....		.....15.....			.....275.....	.....38.....
3. 2011.....	.....1,466.....	.....1,074.....	.....392.....	.....3,352.....	.....3,208.....	.....21.....	.....25.....	.....18.....	.....(7).....	.....95.....	.....165.....	.....48.....
4. 2012.....	.....1,046.....	.....667.....	.....379.....	.....58.....		.....18.....	.....7.....	.....13.....	.....(7).....		.....89.....	.....13.....
5. 2013.....	.....1,057.....	.....679.....	.....378.....	.....24.....		.....1.....		.....11.....			.....36.....	.....18.....
6. 2014.....	.....1,128.....	.....743.....	.....385.....	.....802.....	.....640.....			.....15.....			.....177.....	.....21.....
7. 2015.....	.....1,149.....	.....732.....	.....417.....	.....125.....	.....41.....	.....16.....	.....13.....	.....19.....			.....106.....	.....17.....
8. 2016.....	.....1,162.....	.....703.....	.....459.....	.....59.....		.....15.....		.....20.....			.....94.....	.....12.....
9. 2017.....	.....1,062.....	.....666.....	.....396.....	.....942.....	.....857.....			.....15.....			.....100.....	.....17.....
10. 2018.....	.....795.....	.....555.....	.....240.....	.....10.....				.....7.....			.....17.....	.....7.....
11. 2019.....	.....536.....	.....506.....	.....30.....					.....6.....			.....6.....	.....1.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....5,596.....	.....4,746.....	.....107.....	.....45.....	.....139.....	.....(14).....	.....95.....	.....1,065.....	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23  Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14  Ceded	15 Direct and Assumed	16  Ceded	17 Direct and Assumed	18  Ceded	19 Direct and Assumed	20  Ceded					
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
2. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
3. 2011.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
4. 2012.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
5. 2013.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
6. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
7. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
8. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
9. 2017.....	.....	.....	.....48	.....46	.....	.....	.....	.....	.....	.....	.....	.....2	.....
10. 2018.....	.....285	.....143	.....64	.....60	.....	.....	.....	.....	.....	.....	.....	.....146	.....1
11. 2019.....	.....7	.....7	.....262	.....247	.....	.....	.....2	.....1	.....	.....	.....	.....16	.....1
12. Totals...	.....292	.....150	.....374	.....353	.....0	.....0	.....2	.....1	.....0	.....0	.....0	.....164	.....2

	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. 2010.	.....275.....	.....0	.....275	.....17.5	.....0.0	.....55.8	.....	.....	.....	.....0	.....0
3. 2011.	.....3,391.....	.....3,226	.....165	.....231.3	.....300.4	.....42.1	.....	.....	.....	.....0	.....0
4. 2012.	.....89.....	.....0	.....89	.....8.5	.....0.0	.....23.5	.....	.....	.....	.....0	.....0
5. 2013.	.....36.....	.....0	.....36	.....3.4	.....0.0	.....9.5	.....	.....	.....	.....0	.....0
6. 2014.	.....817.....	.....640	.....177	.....72.4	.....86.1	.....46.0	.....	.....	.....	.....0	.....0
7. 2015.	.....160.....	.....54	.....106	.....13.9	.....7.4	.....25.4	.....	.....	.....	.....0	.....0
8. 2016.	.....94.....	.....0	.....94	.....8.1	.....0.0	.....20.5	.....	.....	.....	.....0	.....0
9. 2017.	.....1,005.....	.....903	.....102	.....94.6	.....135.6	.....25.8	.....	.....	.....	.....2	.....0
10. 2018.	.....366.....	.....203	.....163	.....46.0	.....36.6	.....67.9	.....	.....	.....	.....146	.....0
11. 2019.	.....277.....	.....255	.....22	.....51.7	.....50.4	.....73.3	.....	.....	.....	.....15	.....1
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....163	.....1

**SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	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. 2010.....			.....0								.....0	
3. 2011.....			.....0								.....0	
4. 2012.....			.....0								.....0	
5. 2013.....			.....0								.....0	
6. 2014.....			.....0								.....0	
7. 2015.....			.....0								.....0	
8. 2016.....			.....0								.....0	
9. 2017.....			.....0								.....0	
10. 2018.....			.....0								.....0	
11. 2019.....			.....0								.....0	
12. 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  Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25  Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21  Direct and Assumed	22  Ceded			
	13 Direct and Assumed	14  Ceded	15 Direct and Assumed	16  Ceded	17 Direct and Assumed	18  Ceded	19 Direct and Assumed	20  Ceded					
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
2. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
3. 2011.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
4. 2012.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
5. 2013.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
6. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
7. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
8. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
9. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
10. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
11. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
12. Totals...	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0

NONE

	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. 2010.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
3. 2011.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
4. 2012.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
5. 2013.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
6. 2014.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
7. 2015.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
8. 2016.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
9. 2017.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
10. 2018.	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
11. 2019.	.....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 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1  Direct and Assumed	2  Ceded	3  Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....(48)	.....16	.....13	.....4	.....	.....	.....100	.....(55)	.....XXX.....
2. 2018.....	.....2,540	.....618	.....1,922	.....984	.....6	.....4	.....1	.....39	.....(1)	.....21	.....1,021	.....XXX.....
3. 2019.....	.....2,305	.....558	.....1,747	.....1,039	.....96	.....3	.....1	.....42	.....2		.....985	.....XXX.....
4. Totals....	.....XXX.....	.....XXX.....	.....XXX.....	.....1,975	.....118	.....20	.....6	.....81	.....1	.....121	.....1,951	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23  Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25  Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21  Direct and Assumed	22  Ceded			
	13  Direct and Assumed	14  Ceded	15  Direct and Assumed	16  Ceded	17  Direct and Assumed	18  Ceded	19  Direct and Assumed	20  Ceded					
1. Prior.....	.....(2)	.....	.....5	.....2	.....1	.....	.....	.....	.....	.....	.....2	.....2	.....
2. 2018.....	.....(19)	.....	.....10	.....3	.....	.....	.....1	.....	.....	.....	.....19	.....(11)	.....
3. 2019.....	.....31	.....5	.....36	.....11	.....	.....	.....4	.....1	.....4	.....	.....10	.....58	.....9
4. Totals...	.....10	.....5	.....51	.....16	.....1	.....0	.....5	.....1	.....4	.....0	.....31	.....49	.....9

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34  Inter-Company Pooling Participation Percentage	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		35  Losses Unpaid	36  Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....XXX.....	.....1	.....1
2. 2018.	.....1,019	.....9	.....1,010	.....40.1	.....1.5	.....52.5	.....	.....	.....	.....(12)	.....1
3. 2019.	.....1,159	.....116	.....1,043	.....50.3	.....20.8	.....59.7	.....	.....	.....	.....51	.....7
4. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....40	.....9

**SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE**  
(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1  Direct and Assumed	2  Ceded	3  Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported- Direct and Assumed
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....(10).....	.....8.....	.....1.....	.....	.....17.....	.....	.....24.....	.....0.....	.....XXX.....
2. 2018.....	.....7,358.....	.....847.....	.....6,511.....	.....4,396.....	.....	.....6.....	.....	.....270.....	.....	.....458.....	.....4,672.....	.....1,955.....
3. 2019.....	.....6,942.....	.....793.....	.....6,149.....	.....4,498.....	.....104.....	.....3.....	.....	.....312.....	.....2.....	.....216.....	.....4,707.....	.....1,841.....
4. Totals....	.....XXX.....	.....XXX.....	.....XXX.....	.....8,884.....	.....112.....	.....10.....	.....0.....	.....599.....	.....2.....	.....698.....	.....9,379.....	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23  Salvage and Subrogation Anticipated	24  Total Net Losses and Expenses Unpaid	25  Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	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			
1. Prior.....	.....(94).....	.....	.....50.....	.....1.....	.....	.....	.....2.....	.....	.....4.....	.....	.....95.....	.....(39).....	.....9.....
2. 2018.....	.....(90).....	.....	.....98.....	.....(1).....	.....	.....	.....5.....	.....1.....	.....	.....	.....90.....	.....13.....	.....1.....
3. 2019.....	.....(150).....	.....6.....	.....347.....	.....1.....	.....	.....	.....33.....	.....12.....	.....18.....	.....	.....333.....	.....229.....	.....39.....
4. Totals...	.....(334).....	.....6.....	.....495.....	.....1.....	.....0.....	.....0.....	.....40.....	.....13.....	.....22.....	.....0.....	.....518.....	.....203.....	.....49.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34  Inter-Company Pooling Participation Percentage	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		35  Losses Unpaid	36  Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....XXX.....	.....(45).....	.....6.....
2. 2018.	.....4,685.....	.....0.....	.....4,685.....	.....63.7.....	.....0.0.....	.....72.0.....	.....	.....	.....	.....9.....	.....4.....
3. 2019.	.....5,061.....	.....125.....	.....4,936.....	.....72.9.....	.....15.8.....	.....80.3.....	.....	.....	.....	.....190.....	.....39.....
4. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....154.....	.....49.....

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	2	3	4	5	6	7	8	9	10	11	12
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	One Year	Two Year
1. Prior.....	1,127	883	641	667	615	634	634	632	630	629	(1)	(3)
2. 2010.....	12,222	11,663	11,584	11,337	11,342	11,401	11,391	11,396	11,394	11,394	0	(2)
3. 2011.....	XXX	13,782	13,559	13,627	13,454	13,509	13,510	13,515	13,499	13,499	0	(16)
4. 2012.....	XXX	XXX	10,194	9,591	9,501	9,536	9,541	9,733	9,733	9,730	(3)	(3)
5. 2013.....	XXX	XXX	XXX	14,392	14,114	14,156	14,047	14,094	14,020	14,010	(10)	(84)
6. 2014.....	XXX	XXX	XXX	XXX	12,864	12,464	12,507	12,550	12,589	12,589	0	39
7. 2015.....	XXX	XXX	XXX	XXX	XXX	10,399	9,961	10,160	10,112	10,113	1	(47)
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	13,169	13,173	13,496	13,251	(245)	78
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,598	12,528	12,638	110	40
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,456	9,349	(107)	XXX
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,357	XXX	XXX
12. Totals											(255)	2

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

1. Prior.....	3,601	2,854	2,765	2,517	2,621	2,628	2,627	2,625	2,623	2,623	0	(2)
2. 2010.....	8,730	9,187	8,624	8,331	8,378	8,378	8,419	8,417	8,417	8,416	(1)	(1)
3. 2011.....	XXX	8,522	8,664	8,437	8,261	8,397	8,270	8,266	8,242	8,240	(2)	(26)
4. 2012.....	XXX	XXX	8,510	8,830	8,406	8,209	8,297	8,291	8,290	8,290	0	(1)
5. 2013.....	XXX	XXX	XXX	6,977	7,407	6,726	6,539	6,545	6,578	6,579	1	34
6. 2014.....	XXX	XXX	XXX	XXX	5,584	6,248	5,812	5,796	5,843	5,813	(30)	17
7. 2015.....	XXX	XXX	XXX	XXX	XXX	5,436	6,496	6,709	6,621	6,579	(42)	(130)
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	5,664	7,004	6,716	6,452	(264)	(552)
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,554	7,768	7,526	(242)	972
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,144	4,802	(342)	XXX
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,294	XXX	XXX
12. Totals											(922)	311

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

1. Prior.....											0	0
2. 2010.....	2										0	0
3. 2011.....	XXX										0	0
4. 2012.....	XXX	XXX									0	0
5. 2013.....	XXX	XXX	XXX								0	0
6. 2014.....	XXX	XXX	XXX	XXX							0	0
7. 2015.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

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

1. Prior.....											0	0
2. 2010.....											0	0
3. 2011.....	XXX										0	0
4. 2012.....	XXX	XXX									0	0
5. 2013.....	XXX	XXX	XXX								0	0
6. 2014.....	XXX	XXX	XXX	XXX							0	0
7. 2015.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

**SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL**

1. Prior.....											0	0
2. 2010.....											0	0
3. 2011.....	XXX										0	0
4. 2012.....	XXX	XXX									0	0
5. 2013.....	XXX	XXX	XXX								0	0
6. 2014.....	XXX	XXX	XXX	XXX							0	0
7. 2015.....	XXX	XXX	XXX	XXX	XX						0	0
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

**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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	One Year	Two Year
1. Prior.....											.....0	.....0
2. 2010.....											.....0	.....0
3. 2011.....	XXX										.....0	.....0
4. 2012.....	XXX	XXX									.....0	.....0
5. 2013.....	XXX	XXX	XXX								.....0	.....0
6. 2014.....	XXX	XXX	XXX	XXX							.....0	.....0
7. 2015.....	XXX	XXX	XXX	XXX	XXX						.....0	.....0
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX					.....0	.....0
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.....0	.....0
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.....0	XXX
11. 2019.....	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. 2010.....											.....0	.....0
3. 2011.....	XXX										.....0	.....0
4. 2012.....	XXX	XXX									.....0	.....0
5. 2013.....	XXX	XXX	XXX								.....0	.....0
6. 2014.....	XXX	XXX	XXX	XXX							.....0	.....0
7. 2015.....	XXX	XXX	XXX	XXX	XXX						.....0	.....0
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX					.....0	.....0
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.....0	.....0
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.....0	XXX
11. 2019.....	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. 2010.....											.....0	.....0
3. 2011.....	XXX										.....0	.....0
4. 2012.....	XXX	XXX									.....0	.....0
5. 2013.....	XXX	XXX	XXX								.....0	.....0
6. 2014.....	XXX	XXX	XXX	XXX							.....0	.....0
7. 2015.....	XXX	XXX	XXX	XXX	XXX						.....0	.....0
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX					.....0	.....0
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.....0	.....0
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.....0	XXX
11. 2019.....	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.....	.....355	.....83	.....36	.....30	.....29	.....29	.....29	.....29	.....29	.....29	.....0	.....0
2. 2010.....	.....305	.....357	.....245	.....255	.....260	.....260	.....260	.....260	.....260	.....260	.....0	.....0
3. 2011.....	XXX	.....212	.....180	.....195	.....140	.....140	.....140	.....140	.....140	.....140	.....0	.....0
4. 2012.....	XXX	XXX	.....220	.....130	.....90	.....69	.....69	.....69	.....69	.....69	.....0	.....0
5. 2013.....	XXX	XXX	XXX	.....181	.....90	.....48	.....25	.....25	.....25	.....25	.....0	.....0
6. 2014.....	XXX	XXX	XXX	XXX	.....313	.....242	.....187	.....162	.....162	.....162	.....0	.....0
7. 2015.....	XXX	XXX	XXX	XXX	XXX	.....181	.....165	.....113	.....87	.....87	.....0	.....(26)
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	.....185	.....342	.....291	.....74	.....(217)	.....(268)
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....203	.....179	.....87	.....(92)	.....(116)
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....338	.....156	.....(182)	XXX
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....16	XXX	XXX
12. Totals											.....(491)	.....(410)

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

1. Prior.....											.....0	.....0
2. 2010.....											.....0	.....0
3. 2011.....	XXX										.....0	.....0
4. 2012.....	XXX	XXX									.....0	.....0
5. 2013.....	XXX	XXX	XXX								.....0	.....0
6. 2014.....	XXX	XXX	XXX	XXX							.....0	.....0
7. 2015.....	XXX	XXX	XXX	XXX	XXX						.....0	.....0
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX					.....0	.....0
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.....0	.....0
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.....0	XXX
11. 2019.....	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)**

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	One Year	Two Year
1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....363	.....311	.....167	.....(144)	.....(196)
2. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....1,067	.....970	.....(97)	...XXX.....
3. 2019.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....999	...XXX.....	...XXX.....
4. Totals											.....(241)	.....(196)

**SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE**

1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....282	.....207	.....46	.....(161)	.....(236)
2. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	4,474	4,415	.....(59)	...XXX.....
3. 2019.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	4,608	...XXX.....	...XXX.....
4. Totals											.....(220)	.....(236)

**SCHEDULE P - PART 2K - FIDELITY/SURETY**

1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....0	.....0
2. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....0	...XXX.....
3. 2019.....	...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)**

1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....0	.....0
2. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....0	...XXX.....
3. 2019.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	...XXX.....	...XXX.....
4. Totals											.....0	.....0

**SCHEDULE P - PART 2M - INTERNATIONAL**

1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....0
2. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....0
3. 2011.....	...XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....0
4. 2012.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....0
5. 2013.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....0
6. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....	.....	.....0	.....0
7. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....	.....0	.....0
8. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....0	.....0
9. 2017.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....0	.....0
10. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....0	...XXX.....
11. 2019.....	...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**

BUCKEYE STATE MUTUAL INSURANCE COMPANY

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)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019		
1. Prior.....	.000.....	.....657	.....552	.....495	.....620	.....634	.....634	.....632	.....630	.....629	.....83,937	.....18,471
2. 2010.....	.....9,111	.....10,406	.....10,943	.....11,326	.....11,331	.....11,401	.....11,391	.....11,396	.....11,394	.....11,394	.....3,890	.....2,228
3. 2011.....	.....XXX.....	.....11,004	.....13,187	.....13,447	.....13,431	.....13,484	.....13,486	.....13,489	.....13,499	.....13,499	.....5,622	.....2,937
4. 2012.....	.....XXX.....	.....XXX.....	.....8,163	.....9,085	.....9,327	.....9,484	.....9,486	.....9,733	.....9,733	.....9,730	.....3,136	.....2,263
5. 2013.....	.....XXX.....	.....XXX.....	.....XXX.....	.....11,585	.....13,800	.....13,878	.....13,947	.....14,094	.....14,020	.....14,010	.....2,130	.....1,517
6. 2014.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....10,790	.....11,895	.....12,363	.....12,412	.....12,589	.....12,589	.....2,144	.....1,626
7. 2015.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....8,054	.....9,623	.....9,801	.....10,112	.....10,113	.....1,396	.....1,074
8. 2016.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....10,920	.....12,865	.....12,996	.....13,061	.....1,493	.....1,354
9. 2017.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....10,981	.....12,138	.....12,427	.....1,514	.....1,120
10. 2018.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....8,317	.....9,122	.....987	.....713
11. 2019.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....7,904	.....930	.....853

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

1. Prior.....	.000.....	.....1,348	.....2,235	.....2,467	.....2,457	.....2,628	.....2,627	.....2,625	.....2,623	.....2,623	.....23,131	.....5,536
2. 2010.....	.....4,389	.....6,700	.....7,680	.....7,964	.....8,378	.....8,371	.....8,419	.....8,417	.....8,417	.....8,416	.....1,781	.....1,136
3. 2011.....	.....XXX.....	.....4,097	.....6,095	.....7,248	.....7,841	.....8,041	.....8,131	.....8,146	.....8,242	.....8,240	.....1,617	.....1,268
4. 2012.....	.....XXX.....	.....XXX.....	.....3,779	.....6,513	.....7,612	.....8,052	.....8,251	.....8,291	.....8,290	.....8,290	.....1,544	.....1,206
5. 2013.....	.....XXX.....	.....XXX.....	.....XXX.....	.....3,409	.....5,469	.....6,158	.....6,448	.....6,545	.....6,544	.....6,547	.....1,692	.....1,265
6. 2014.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....2,918	.....4,627	.....5,281	.....5,662	.....5,780	.....5,812	.....1,497	.....1,353
7. 2015.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....2,672	.....4,539	.....6,126	.....6,468	.....6,537	.....1,259	.....1,288
8. 2016.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....3,074	.....5,190	.....5,965	.....6,337	.....1,142	.....1,317
9. 2017.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....3,402	.....5,781	.....6,941	.....999	.....1,050
10. 2018.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....2,589	.....3,979	.....753	.....742
11. 2019.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....2,387	.....609	.....637

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

1. Prior.....	.000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....27	.....10
2. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2011.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2012.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2013.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2014.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2015.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....
8. 2016.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....
9. 2017.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....
10. 2018.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....
11. 2019.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....

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

1. Prior.....	.000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....6	.....6
2. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2011.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2012.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2013.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2014.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2015.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....
8. 2016.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....
9. 2017.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....
10. 2018.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....
11. 2019.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	.000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....302	.....130
2. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2011.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2012.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2013.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2014.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2015.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....
8. 2016.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....
9. 2017.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....
10. 2018.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....
11. 2019.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....

**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 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019		
1. Prior.....	.000.....											
2. 2010.....												
3. 2011.....	.XXX.....											
4. 2012.....	.XXX.....	.XXX.....										
5. 2013.....	.XXX.....	.XXX.....	.XXX.....									
6. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....								
7. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....							
8. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....						
9. 2017.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....					
10. 2018.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....				
11. 2019.....	.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. 2010.....												
3. 2011.....	.XXX.....											
4. 2012.....	.XXX.....	.XXX.....										
5. 2013.....	.XXX.....	.XXX.....	.XXX.....									
6. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....								
7. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....							
8. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....						
9. 2017.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....					
10. 2018.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....				
11. 2019.....	.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. 2010.....											.XXX.....	.XXX.....
3. 2011.....	.XXX.....										.XXX.....	.XXX.....
4. 2012.....	.XXX.....	.XXX.....									.XXX.....	.XXX.....
5. 2013.....	.XXX.....	.XXX.....	.XXX.....								.XXX.....	.XXX.....
6. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....							.XXX.....	.XXX.....
7. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....						.XXX.....	.XXX.....
8. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....					.XXX.....	.XXX.....
9. 2017.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....				.XXX.....	.XXX.....
10. 2018.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....			.XXX.....	.XXX.....
11. 2019.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....		.XXX.....	.XXX.....

NONE

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

1. Prior.....	.000.....	.....33	.....36	.....29	.....29	.....29	.....29	.....29	.....29	.....29	.....2,225	.....2,425
2. 2010.....	.....26	.....143	.....222	.....231	.....260	.....260	.....260	.....260	.....260	.....260	.....24	.....14
3. 2011.....	.XXX.....	.....15	.....110	.....115	.....140	.....140	.....140	.....140	.....140	.....140	.....34	.....14
4. 2012.....	.XXX.....	.XXX.....	.....98	.....62	.....69	.....69	.....69	.....69	.....69	.....69	.....11	.....2
5. 2013.....	.XXX.....	.XXX.....	.XXX.....	.....25	.....25	.....25	.....25	.....25	.....25	.....25	.....8	.....10
6. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....137	.....137	.....162	.....162	.....162	.....162	.....16	.....5
7. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....32	.....85	.....85	.....87	.....87	.....14	.....3
8. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....21	.....21	.....24	.....74	.....10	.....2
9. 2017.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....27	.....39	.....85	.....16	.....1
10. 2018.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.....3	.....10	.....3	.....3
11. 2019.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....			

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

1. Prior.....	.000.....											
2. 2010.....												
3. 2011.....	.XXX.....											
4. 2012.....	.XXX.....	.XXX.....										
5. 2013.....	.XXX.....	.XXX.....	.XXX.....									
6. 2014.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....								
7. 2015.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....							
8. 2016.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....						
9. 2017.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....					
10. 2018.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....	.XXX.....				
11. 2019.....	.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)**

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019		
1. Prior.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....000.....	.....220	.....165	....XXX.....	....XXX.....
2. 2018.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....903	.....981	....XXX.....	....XXX.....
3. 2019.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....945	....XXX.....	....XXX.....

**SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE**

1. Prior.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....000.....	.....106	.....89	.....64,535	.....8,703
2. 2018.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....4,344	.....4,402	.....1,569	.....385
3. 2019.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	.....4,397	.....1,464	.....338

**SCHEDULE P - PART 3K - FIDELITY/SURETY**

1. Prior.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....000.....			....XXX.....	....XXX.....
2. 2018.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....			....XXX.....	....XXX.....
3. 2019.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....		....XXX.....	....XXX.....

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

1. Prior.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....000.....			....XXX.....	....XXX.....
2. 2018.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....			....XXX.....	....XXX.....
3. 2019.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....		....XXX.....	....XXX.....

**SCHEDULE P - PART 3M - INTERNATIONAL**

1. Prior.....	....000.....										....XXX.....	....XXX.....
2. 2010.....											....XXX.....	....XXX.....
3. 2011.....	....XXX.....										....XXX.....	....XXX.....
4. 2012.....	....XXX.....	....XXX.....									....XXX.....	....XXX.....
5. 2013.....	....XXX.....	....XXX.....	....XXX.....								....XXX.....	....XXX.....
6. 2014.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....							....XXX.....	....XXX.....
7. 2015.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....						....XXX.....	....XXX.....
8. 2016.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....					....XXX.....	....XXX.....
9. 2017.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....				....XXX.....	....XXX.....
10. 2018.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....			....XXX.....	....XXX.....
11. 2019.....	....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**

BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....	.....363	.....105	.....	.....	.....	.....	.....	.....	.....	.....
2. 2010.....	.....1,135	.....216	.....124	.....	.....	.....	.....	.....	.....	.....
3. 2011.....	XXX.....	.....1,135	.....256	.....118	.....	.....	.....	.....	.....	.....
4. 2012.....	XXX.....	XXX.....	.....1,169	.....244	.....129	.....	.....	.....	.....	.....
5. 2013.....	XXX.....	XXX.....	XXX.....	.....1,147	.....267	.....175	.....	.....	.....	.....
6. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	.....807	.....281	.....100	.....	.....	.....
7. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....1,079	.....211	.....87	.....	.....
8. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....887	.....199	.....82	.....
9. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....884	.....161	.....92
10. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....666	.....194
11. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....739

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

1. Prior.....	.....1,581	.....304	.....	.....	.....	.....	.....	.....	.....	.....
2. 2010.....	.....2,083	.....1,172	.....224	.....	.....	.....	.....	.....	.....	.....
3. 2011.....	XXX.....	.....2,003	.....855	.....236	.....	.....	.....	.....	.....	.....
4. 2012.....	XXX.....	XXX.....	.....1,615	.....903	.....260	.....	.....	.....	.....	.....
5. 2013.....	XXX.....	XXX.....	XXX.....	.....1,574	.....1,005	.....228	.....	.....	.....	.....
6. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	.....1,217	.....665	.....174	.....	.....	.....
7. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....1,059	.....654	.....174	.....	.....
8. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....1,113	.....721	.....224	.....
9. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....1,330	.....811	.....194
10. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....1,322	.....393
11. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....1,502

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

1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2010.....	.....2	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2011.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2012.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2013.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
6. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
7. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
8. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
9. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
10. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
11. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....

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

1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2011.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2012.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2013.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
6. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
7. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
8. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
9. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
10. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
11. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2011.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2012.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2013.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
6. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
7. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
8. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
9. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
10. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
11. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....

NONE

**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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX								
5. 2013.....	XXX	XXX	XXX							
6. 2014.....	XXX	XXX	XXX	XXX						
7. 2015.....	XXX	XXX	XXX	XXX	XXX					
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX								
5. 2013.....	XXX	XXX	XXX							
6. 2014.....	XXX	XXX	XXX	XXX						
7. 2015.....	XXX	XXX	XXX	XXX	XXX					
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019.....	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. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX								
5. 2013.....	XXX	XXX	XXX							
6. 2014.....	XXX	XXX	XXX	XXX						
7. 2015.....	XXX	XXX	XXX	XXX	XXX					
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....	236	16								
2. 2010.....	168	214	19							
3. 2011.....	XXX	114	55	20						
4. 2012.....	XXX	XXX	112	59	21					
5. 2013.....	XXX	XXX		120	65	23				
6. 2014.....	XXX	XXX	XXX	XXX	127	69	25			
7. 2015.....	XXX	XXX	XXX	XXX	XXX	138	76	28		
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	153	84	31	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	169	93	2
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	185	4
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16

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

1. Prior.....										
2. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX								
5. 2013.....	XXX	XXX	XXX							
6. 2014.....	XXX	XXX	XXX	XXX						
7. 2015.....	XXX	XXX	XXX	XXX	XXX					
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019.....	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)**

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	182.....	34.....	3.....
2. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	86.....	8.....
3. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	28.....

**SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE**

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	465.....	120.....	51.....
2. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	307.....	103.....
3. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	367.....

**SCHEDULE P - PART 4K - FIDELITY/SURETY**

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
2. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
3. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....

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

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
2. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
3. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....

**SCHEDULE P - PART 4M - INTERNATIONAL**

1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2011.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2012.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2013.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
6. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
7. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
8. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
9. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
10. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
11. 2019.....	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**

SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS

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 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019
1. Prior.....	.....711	.....66	.....29	.....31	.....16	.....13		.....1	.....1	
2. 2010.....	.....3,349	.....3,812	.....3,829	.....3,846	.....3,855	.....3,885	.....3,890	.....3,890	.....3,890	.....3,890
3. 2011.....	.....XXX	.....4,620	.....5,525	.....5,567	.....5,581	.....5,608	.....5,613	.....5,622	.....5,622	.....5,622
4. 2012.....	.....XXX	.....XXX	.....2,682	.....3,087	.....3,111	.....3,121	.....3,130	.....3,136	.....3,136	.....3,136
5. 2013.....	.....XXX	.....XXX	.....XXX	.....1,724	.....2,097	.....2,113	.....2,114	.....2,123	.....2,125	.....2,130
6. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....1,729	.....2,108	.....2,126	.....2,139	.....2,144	.....2,144
7. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,070	.....1,369	.....1,386	.....1,393	.....1,396
8. 2016.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,171	.....1,475	.....1,486	.....1,493
9. 2017.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,261	.....1,501	.....1,514
10. 2018.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....871	.....987
11. 2019.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....930

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019
1. Prior.....	.....35	.....14	.....10	.....11		.....7	.....7	.....6	.....6	.....6
2. 2010.....	.....330	.....21	.....7	.....2	.....2	.....1	.....1	.....1	.....1	.....1
3. 2011.....	.....XXX	.....765	.....37	.....6	.....2	.....2	.....1	.....1		
4. 2012.....	.....XXX	.....XXX	.....356	.....14	.....3	.....5	.....2			
5. 2013.....	.....XXX	.....XXX	.....XXX	.....407	.....11	.....10	.....10			
6. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....501	.....28	.....16	.....1		
7. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....338	.....13	.....4		
8. 2016.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....367	.....10	.....10	.....5
9. 2017.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....257	.....8	.....5
10. 2018.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....105	.....7
11. 2019.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....155

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019
1. Prior.....	.....685	.....62	.....36	.....41	.....4	.....19			.....1	
2. 2010.....	.....5,690	.....6,028	.....6,049	.....6,066	.....6,075	.....6,113	.....6,119	.....6,119	.....6,119	.....6,119
3. 2011.....	.....XXX	.....7,885	.....8,453	.....8,493	.....8,510	.....8,540	.....8,547	.....8,559	.....8,559	.....8,559
4. 2012.....	.....XXX	.....XXX	.....5,060	.....5,337	.....5,366	.....5,384	.....5,394	.....5,399	.....5,399	.....5,399
5. 2013.....	.....XXX	.....XXX	.....XXX	.....3,352	.....3,606	.....3,630	.....3,632	.....3,638	.....3,642	.....3,647
6. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....3,565	.....3,742	.....3,755	.....3,761	.....3,770	.....3,770
7. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,264	.....2,446	.....2,460	.....2,467	.....2,470
8. 2016.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,650	.....2,830	.....2,849	.....2,852
9. 2017.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,476	.....2,623	.....2,639
10. 2018.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,614	.....1,707
11. 2019.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,938

**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 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019
1. Prior.....	.....356	.....51	.....26	.....21	.....10	.....1			.....1	
2. 2010.....	.....1,445	.....1,723	.....1,758	.....1,775	.....1,781	.....1,781	.....1,781	.....1,781	.....1,781	.....1,781
3. 2011.....	.....XXX	.....1,320	.....1,560	.....1,597	.....1,609	.....1,612	.....1,615	.....1,617	.....1,617	.....1,617
4. 2012.....	.....XXX	.....XXX	.....1,234	.....1,484	.....1,529	.....1,535	.....1,540	.....1,543	.....1,544	.....1,544
5. 2013.....	.....XXX	.....XXX	.....XXX	.....1,344	.....1,653	.....1,678	.....1,686	.....1,691	.....1,691	.....1,692
6. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....1,238	.....1,462	.....1,480	.....1,491	.....1,495	.....1,497
7. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....949	.....1,200	.....1,242	.....1,257	.....1,259
8. 2016.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....843	.....1,088	.....1,130	.....1,142
9. 2017.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....775	.....970	.....999
10. 2018.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....618	.....753
11. 2019.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....609

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019
1. Prior.....	.....95	.....40	.....21	.....2	.....1	.....5	.....5	.....5	.....5	.....5
2. 2010.....	.....365	.....88	.....27	.....7						
3. 2011.....	.....XXX	.....281	.....65	.....27	.....12	.....8	.....4	.....1		
4. 2012.....	.....XXX	.....XXX	.....300	.....73	.....25	.....12	.....7	.....1	.....1	
5. 2013.....	.....XXX	.....XXX	.....XXX	.....329	.....59	.....18	.....7		.....2	.....2
6. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....357	.....79	.....29	.....10	.....5	.....3
7. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....417	.....98	.....23	.....8	.....3
8. 2016.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....374	.....73	.....17	.....4
9. 2017.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....275	.....55	.....18
10. 2018.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....162	.....24
11. 2019.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....144

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019
1. Prior.....	.....195	.....31	.....14	.....13	.....3	.....1			.....2	
2. 2010.....	.....2,650	.....2,874	.....2,889	.....2,901	.....2,911	.....2,911	.....2,917	.....2,917	.....2,917	.....2,917
3. 2011.....	.....XXX	.....2,611	.....2,842	.....2,870	.....2,876	.....2,881	.....2,884	.....2,885	.....2,885	.....2,885
4. 2012.....	.....XXX	.....XXX	.....2,469	.....2,715	.....2,740	.....2,743	.....2,746	.....2,749	.....2,750	.....2,750
5. 2013.....	.....XXX	.....XXX	.....XXX	.....2,620	.....2,929	.....2,944	.....2,949	.....2,955	.....2,958	.....2,959
6. 2014.....	.....XXX	.....XXX	.....XXX	.....XXX	.....2,650	.....2,831	.....2,846	.....2,851	.....2,853	.....2,853
7. 2015.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,344	.....2,514	.....2,540	.....2,548	.....2,550
8. 2016.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....2,220	.....2,435	.....2,454	.....2,463
9. 2017.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,889	.....2,044	.....2,067
10. 2018.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,404	.....1,519
11. 2019.....	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....1,390

**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**

**SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE**

SECTION 1A

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	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....	.....6	.....6	.....1	.....0						
2. 2010.....	.....11	.....23	.....23	.....23	.....24	.....24	.....24	.....24	.....24	.....24
3. 2011.....	...XXX.....	.....21	.....28	.....29	.....34	.....34	.....34	.....34	.....34	.....34
4. 2012.....	...XXX.....	...XXX.....	.....9	.....9	.....11	.....11	.....11	.....11	.....11	.....11
5. 2013.....	...XXX.....	...XXX.....	...XXX.....	.....5	.....8	.....8	.....8	.....8	.....8	.....8
6. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....15	.....15	.....16	.....16	.....16	.....16
7. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....11	.....13	.....13	.....14	.....14
8. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....8	.....8	.....9	.....10
9. 2017.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....12	.....15	.....16
10. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....2	.....3
11. 2019.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....	.....19	.....2		.....1						
2. 2010.....	.....13		.....1	.....1						
3. 2011.....	...XXX.....	.....11	.....4	.....2						
4. 2012.....	...XXX.....	...XXX.....	.....6	.....2						
5. 2013.....	...XXX.....	...XXX.....	...XXX.....	.....10						
6. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....5	.....1				
7. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....3	.....1	.....1		
8. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....3	.....1	.....1	
9. 2017.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....3	.....1	
10. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....3	.....1
11. 2019.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....1

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....	.....(236)	.....5		.....2						
2. 2010.....	.....27	.....35	.....38	.....38	.....38	.....38	.....38	.....38	.....38	.....38
3. 2011.....	...XXX.....	.....44	.....45	.....45	.....48	.....48	.....48	.....48	.....48	.....48
4. 2012.....	...XXX.....	...XXX.....	.....16	.....13	.....13	.....13	.....13	.....13	.....13	.....13
5. 2013.....	...XXX.....	...XXX.....	...XXX.....	.....16	.....18	.....18	.....18	.....18	.....18	.....18
6. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....21	.....21	.....21	.....21	.....21	.....21
7. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....16	.....16	.....17	.....17	.....17
8. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....11	.....11	.....12	.....12
9. 2017.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....16	.....17	.....17
10. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....6	.....7
11. 2019.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....1

**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**

**SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL**

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....										.0	
2. 2010.....										.0	
3. 2011.....	XXX									.0	
4. 2012.....	XXX	XXX								.0	
5. 2013.....	XXX	XXX	XXX							.0	
6. 2014.....	XXX	XXX	XXX	XXX						.0	
7. 2015.....	XXX	XXX	XXX	XXX	XXX					.0	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX				.0	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.0	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Prems.(P-Pt 1)											.XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....										.0	
2. 2010.....										.0	
3. 2011.....	XXX									.0	
4. 2012.....	XXX	XXX								.0	
5. 2013.....	XXX	XXX	XXX							.0	
6. 2014.....	XXX	XXX	XXX	XXX						.0	
7. 2015.....	XXX	XXX	XXX	XXX	XXX					.0	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX				.0	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.0	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Prems.(P-Pt 1)											.XXX

**SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE**

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....										.0	
2. 2010.....	1,413	1,413	1,413	1,413	1,413	1,413	1,413	1,413	1,413	1,413	
3. 2011.....	XXX	1,462	1,462	1,462	1,462	1,462	1,462	1,462	1,462	1,462	
4. 2012.....	XXX	XXX	1,513	1,513	1,513	1,513	1,513	1,513	1,513	1,513	
5. 2013.....	XXX	XXX	XXX	1,057	1,057	1,057	1,057	1,057	1,057	1,057	
6. 2014.....	XXX	XXX	XXX	XXX	1,128	1,128	1,128	1,128	1,128	1,128	
7. 2015.....	XXX	XXX	XXX	XXX	XXX	1,149	1,149	1,149	1,149	1,149	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	1,162	1,162	1,162	1,162	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,062	1,062	1,062	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	795	795	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	536	536
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	536
13. Earned Prems.(P-Pt 1)	1,575	1,466	1,046	1,057	1,128	1,149	1,162	1,062	795	536	.XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior.....										.0	
2. 2010.....	1,053	1,053	1,053	1,053	1,053	1,053	1,053	1,053	1,053	1,053	
3. 2011.....	XXX	1,074	1,074	1,074	1,074	1,074	1,074	1,074	1,074	1,074	
4. 2012.....	XXX	XXX	1,513	1,513	1,513	1,513	1,513	1,513	1,513	1,513	
5. 2013.....	XXX	XXX	XXX	679	679	679	679	679	679	679	
6. 2014.....	XXX	XXX	XXX	XXX	743	743	743	743	743	743	
7. 2015.....	XXX	XXX	XXX	XXX	XXX	732	732	732	732	732	
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	703	703	703	703	
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	666	666	666	
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	555	555	
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	506	506
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	506
13. Earned Prems.(P-Pt 1)	1,082	1,074	667	679	743	732	703	666	555	506	.XXX

**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**



**SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS**

(\$000 Omitted)

**SECTION 1**

	1	2	3	4	5	6
	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P - Part 1						
1. Homeowners/farmowners.....	2,184		0.0	14,726		0.0
2. Private passenger auto liability/medical.....	4,608		0.0	7,355		0.0
3. Commercial auto/truck liability/medical.....			0.0			0.0
4. Workers' compensation.....			0.0			0.0
5. Commercial multiple peril.....			0.0			0.0
6. Medical professional liability - occurrence.....			0.0			0.0
7. Medical professional liability - claims-made.....			0.0			0.0
8. Special liability.....			0.0			0.0
9. Other liability - occurrence.....	164		0.0	20		0.0
10. Other liability - claims-made.....			0.0			0.0
11. Special property.....	49		0.0	1,751		0.0
12. Auto physical damage.....	203		0.0	6,189		0.0
13. Fidelity/surety.....			0.0			0.0
14. Other.....			0.0			0.0
15. International.....			0.0			0.0
16. Reinsurance - nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX
19. Products liability - occurrence.....			0.0			0.0
20. Products liability - claims-made.....			0.0			0.0
21. Financial guaranty/mortgage guaranty.....			0.0			0.0
22. Warranty.....			0.0			0.0
23. Totals.....	7,208	0	0.0	30,042	0	0.0

**SECTION 2**

Years in Which Policies Were Issued	Incurred Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX								
5. 2013.....	XXX	XXX	XXX							
6. 2014.....	XXX	XXX	XXX	XXX						
7. 2015.....	XXX	XXX	XXX	XXX	XXX					
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3**

Years in Which Policies Were Issued	Bulk and Incurred But Not Reported Reserves for Losses and Defense and Cost Containment Expenses at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX								
5. 2013.....	XXX	XXX	XXX							
6. 2014.....	XXX	XXX	XXX	XXX						
7. 2015.....	XXX	XXX	XXX	XXX	XXX					
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (continued)**

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX								
5. 2013.....	XXX	XXX	XXX							
6. 2014.....	XXX	XXX	XXX	XXX						
7. 2015.....	XXX	XXX	XXX	XXX	XXX					
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5

Years in Which Policies Were Issued	Net Reserve for Premium Adjustments and Accrued Retrospective Premiums at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX								
5. 2013.....	XXX	XXX	XXX							
6. 2014.....	XXX	XXX	XXX	XXX						
7. 2015.....	XXX	XXX	XXX	XXX	XXX					
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS**

(\$000 Omitted)

**SECTION 1**

	1	2	3	4	5	6
	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P - Part 1						
1. Homeowners/farmowners.....	2,184		0.0	14,726		0.0
2. Private passenger auto liability/medical.....	4,608		0.0	7,355		0.0
3. Commercial auto/truck liability/medical.....			0.0			0.0
4. Workers' compensation.....			0.0			0.0
5. Commercial multiple peril.....			0.0			0.0
6. Medical professional liability - occurrence.....			0.0			0.0
7. Medical professional liability - claims-made.....			0.0			0.0
8. Special liability.....			0.0			0.0
9. Other liability - occurrence.....	164		0.0	20		0.0
10. Other liability - claims-made.....			0.0			0.0
11. Special property.....	49		0.0	1,751		0.0
12. Auto physical damage.....	203		0.0	6,189		0.0
13. Fidelity/surety.....			0.0			0.0
14. Other.....			0.0			0.0
15. International.....			0.0			0.0
16. Reinsurance - nonproportional assumed property.....			0.0			0.0
17. Reinsurance - nonproportional assumed liability.....			0.0			0.0
18. Reinsurance - nonproportional assumed financial lines.....			0.0			0.0
19. Products liability - occurrence.....			0.0			0.0
20. Products liability - claims-made.....			0.0			0.0
21. Financial guaranty/mortgage guaranty.....			0.0			0.0
22. Warranty.....			0.0			0.0
23. Totals	7,208	0	0.0	30,042	0	0.0

**SECTION 2**

Years in Which Policies Were Issued	Incurred Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX								
5. 2013.....	XXX	XXX	XXX							
6. 2014.....	XXX	XXX	XXX	XXX						
7. 2015.....	XXX	XXX	XXX	XXX	XXX					
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3**

Years in Which Policies Were Issued	Bulk and Incurred But Not Reported Reserves for Losses and Defense and Cost Containment Expenses at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	XXX									
4. 2012.....	XXX	XXX								
5. 2013.....	XXX	XXX	XXX							
6. 2014.....	XXX	XXX	XXX	XXX						
7. 2015.....	XXX	XXX	XXX	XXX	XXX					
8. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Annual Statement for the year 2019 of the

BUCKEYE STATE MUTUAL INSURANCE COMPANY

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

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums Reported At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	.XXX.									
4. 2012.....	.XXX.	.XXX.								
5. 2013.....	.XXX.	.XXX.	.XXX.							
6. 2014.....	.XXX.	.XXX.	.XXX.	.XXX.						
7. 2015.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.					
8. 2016.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.				
9. 2017.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.			
10. 2018.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.		
11. 2019.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	

SECTION 5

Years in Which Policies Were Issued	Net Reserve For Premium Adjustments And Accrued Retrospective Premiums At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	.XXX.									
4. 2012.....	.XXX.	.XXX.								
5. 2013.....	.XXX.	.XXX.	.XXX.							
6. 2014.....	.XXX.	.XXX.	.XXX.	.XXX.						
7. 2015.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.					
8. 2016.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.				
9. 2017.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.			
10. 2018.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.		
11. 2019.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	

SECTION 6

Years in Which Policies Were Issued	Incurred Adjustable Commissions Reported At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	.XXX.									
4. 2012.....	.XXX.	.XXX.								
5. 2013.....	.XXX.	.XXX.	.XXX.							
6. 2014.....	.XXX.	.XXX.	.XXX.	.XXX.						
7. 2015.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.					
8. 2016.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.				
9. 2017.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.			
10. 2018.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.		
11. 2019.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	

SECTION 7

Years in Which Policies Were Issued	Reserves For Commission Adjustments At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior.....										
2. 2010.....										
3. 2011.....	.XXX.									
4. 2012.....	.XXX.	.XXX.								
5. 2013.....	.XXX.	.XXX.	.XXX.							
6. 2014.....	.XXX.	.XXX.	.XXX.	.XXX.						
7. 2015.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.					
8. 2016.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.				
9. 2017.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.			
10. 2018.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.		
11. 2019.....	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	.XXX.	

BUCKEYE STATE MUTUAL INSURANCE COMPANY  
SCHEDULE P INTERROGATORIES

1.

The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims-Made insurance policies. EREs provided for reasons other than DDR are not be included.
- 1.1

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

Yes [ ]      No [X]
- 1.2

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

.....
- 1.3

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

Yes [ ]      No [X]
- 1.4

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

Yes [ ]      No [X]
- 1.5

If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2?

Yes [ ]      No [ ]      N/A[X]
- 1.6

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

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior.....	.....	.....
1.602	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).  
If not the same in all years, explain in Interrogatory 7.

PER CLAIMANT
- 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.

.....  
.....

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

		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
States, Etc.						
						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

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)	*
<b>Members</b>															
0046	Buckeye Insurance Group.....	16713...	31-6035649..	.....	.....	.....	Buckeye State Mutual Insurance Company.....	OH.....	UDP.....	.....	.....	.....	.....	.....N.....	.....
0046	Buckeye Insurance Group.....	17639...	31-1630739..	.....	.....	.....	Home and Farm Insurance Company.....	IN.....	DS.....	Buckeye State Mutual Insurance Company.....	Ownership.....	....100.000	Buckeye State Mutual Insurance Company.....	.....N.....	.....
.....	.....	.....	31-0784063..	.....	.....	.....	Hetuck Insurance Agency, Inc.....	OH.....	DS.....	Buckeye State Mutual Insurance Company.....	Ownership.....	....100.000	Buckeye State Mutual Insurance Company.....	.....N.....	.....

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
5.00%.....	31-0784063.....	Hetuck Insurance Agency, Inc.....	.....	.....	.....	.....	.....(3,000)	.....	.....	.....	.....(3,000)	.....
16713.....	31-6035649.....	Buckeye State Mutual Insurance Company.....	.....	.....	.....	.....	.....25,800	.....	.....	.....	.....25,800	.....1,198,000
17639.....	31-1630739.....	Home and Farm Insurance Company.....	.....	.....	.....	.....	.....(22,800)	.....	.....	.....	.....(22,800)	.....(1,198,000)
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 %
16713	Buckeye State Mutual Insurance Company	95.00%	17639	Home and Farm Insurance Company	5.00%



BUCKEYE STATE MUTUAL INSURANCE COMPANY  
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

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

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

MARCH FILING		
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
27.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
28.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?	NO
APRIL FILING		
29.	Will the Credit Insurance Experience Exhibit be filed with state of domicile and the NAIC by April 1?	NO
30.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
31.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
32.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
33.	Will the regulator-only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
34.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	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 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

BUCKEYE STATE MUTUAL INSURANCE COMPANY  
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

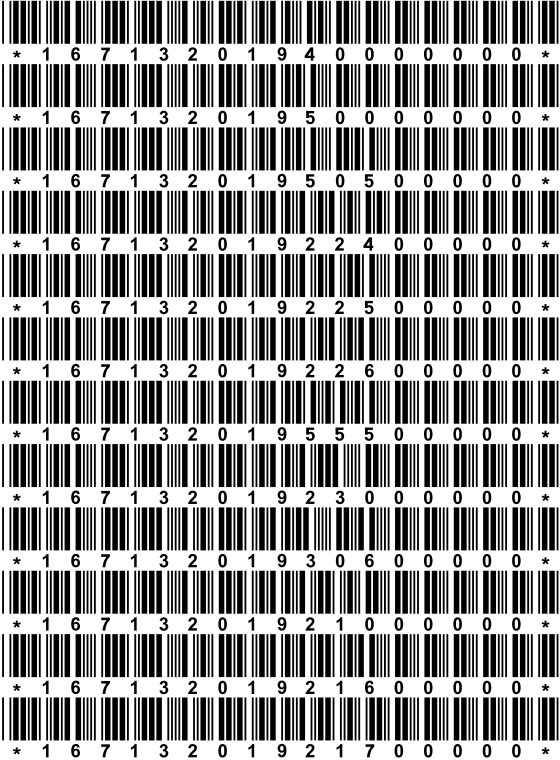
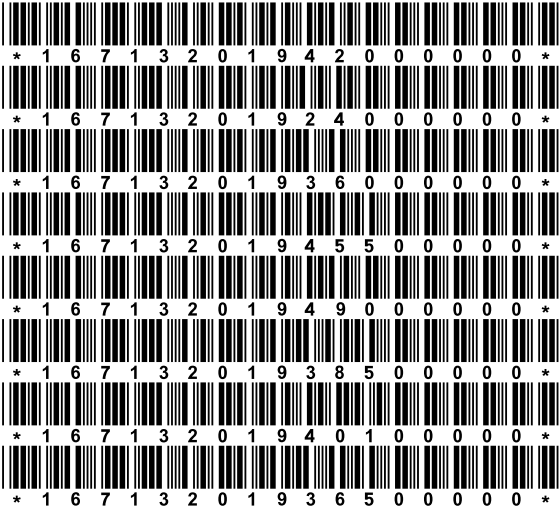
EXPLANATION:

BAR CODE:

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BUCKEYE STATE MUTUAL INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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



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



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



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REINSURANCE SUMMARY SUPPLEMENTAL FILING  
FOR GENERAL INTERROGATORY 9 (PART 2)

FOR THE YEAR ENDED DECEMBER 31, 2019

To Be Filed by March 1

NAIC Group Code: 46

NAIC Company Code: 16713...

	(A) Financial Impact		
	1	2	3
	As Reported	Interrogatory 9 Reinsurance Effect	Restated Without Interrogatory 9 Reinsurance
A01. Assets.....	.....53,208,419	.....	.....53,208,419
A02. Liabilities.....	.....31,123,106	.....	.....31,123,106
A03. Surplus as regards to policyholders.....	.....22,085,313	.....	.....22,085,313
A04. Income before taxes.....	.....824,444	.....	.....824,444

B. Summary of Reinsurance Contract Terms

C. Management's Objectives

D. If the response to General Interrogatory 9.4 (Part 2 Property & Casualty Interrogatories) is yes, explain below why the contracts are treated differently for GAAP and SAP.

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