



PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

**ANNUAL STATEMENT
For the Year Ended December 31, 2020
OF THE CONDITION AND AFFAIRS OF THE
GRANGE INSURANCE COMPANY OF MICHIGAN**

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

OFFICERS

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

OTHER OFFICERS

OTHER OFFICERS

DIRECTORS OR TRUSTEES

JOHN (NMN) AMMENDOLA KATHIE JANE ANDRADE # MARK LEWIS BOXER TERESA JEAN BROWN
DOUGLAS PAUL BUTH MICHAEL DESMOND FRAIZER ROBERT ENLOW HOYT SUZAN BULYABA KEREERE
MARY MARNETTE PERRY THOMAS SIMRALL STEWART CHRISTIANNA (NMN) WOOD

State of Ohio

ss

County of Franklin.....

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

JOHN (NMN) AMMENDOLA
PRESIDENT & CEO

LAVAWN DEE COLEMAN
EVP & SECRETARY

TERESA JEAN BROWN
EVP & CFO

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

Teresa J. Burchwell, Notary Public
April 28, 2022



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00267	Line of Business	BUSINESS IN THE STATE OF Michigan		DURING THE YEAR 2020							NAIC Company Code 11136	
			1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1. Fire		284,990	303,289		151,603	45,629	45,262	19,279	4,228	3,182	1,802	47,531	14,572
2.1 Allied lines		151,551	161,534		80,402	96,985	85,250	7,539		(871)	993	25,581	7,749
2.2 Multiple peril crop													
2.3 Federal flood													
2.4 Private crop													
2.5 Private flood													
3. Farmowners multiple peril		251,189	272,511		139,186	119,532	116,711	6,576	57,365	(1,851)	4,419	43,602	12,844
4. Homeowners multiple peril		6,226,659	6,966,637		3,330,115	2,511,003	2,538,722	1,395,053	91,834	57,418	112,102	959,879	318,382
5.1 Commercial multiple peril (non-liability portion)		6,594,209	6,336,990		3,229,844	3,882,605	3,726,936	966,792	209,283	130,929	92,537	1,143,063	337,175
5.2 Commercial multiple peril (liability portion)		3,280,848	3,230,994		1,498,790	749,523	702,730	3,569,964		313,007	2,019,880	563,732	167,756
6. Mortgage guaranty													
8. Ocean marine													
9. Inland marine		134,982	145,866		68,458	179,291	123,480	(694)	794	38	228	20,647	6,902
10. Financial guaranty													
11. Medical professional liability													
12. Earthquake		736	943		333							125	38
13. Group accident and health (b.)													
14. Credit A & H (group and individual)													
15.1 Collectively renewable A & H (b.)													
15.2 Non-cancelable A & H (b.)													
15.3 Guaranteed renewable A & H (b.)													
15.4 Non-renewable for stated reasons only (b.)													
15.5 Other accident only													
15.6 Medicare Title XVIII exempt from state taxes or fees													
15.7 All other A & H (b.)													
15.8 Federal Employees Health Benefits Plan premium (b.)													
16. Workers' compensation		1,020,114	996,761		331,689	284,203	514,892	1,143,125	49,746	34,709	141,270	106,147	52,161
17.1 Other liability-Occurrence		653,725	573,785		329,414		(95,590)	612,005		1,070	1,070	14,763	115,113
17.2 Other Liability-Claims-Made		1,367	2,236		866	15,000	6,982	526	2,581	(2,336)	907	237	70
17.3 Excess workers' compensation													
18. Products liability		30,948	29,547		20,837		.32	.6,090		553	.10,509	.5,341	.1,582
19.1 Private passenger auto no-fault (personal injury protection)		2,292,766	2,700,949		465,703	1,238,456	(20,237,828)	128,474,108	298,506	(529,982)	1,419,154	294,938	117,234
19.2 Other private passenger auto liability		977,272	1,022,567		256,108	1,478,839	535,085	1,113,622	322,091	131,092	488,614	158,104	46,442
19.3 Commercial auto no-fault (personal injury protection)		1,604,920	1,763,825		743,166	970,796	705,826	1,643,080	121,925	(208,303)	307,528	164,675	82,063
19.4 Other commercial auto liability		2,544,312	2,489,601		1,331,229	1,547,009	920,224	2,783,961	216,988	12,493	568,561	357,767	130,096
21.1 Private passenger auto physical damage		1,637,989	1,825,634		372,575	713,675	736,700	(23,536)	.158	(1,239)	.54	268,305	83,754
21.2 Commercial auto physical damage		2,424,386	2,273,252		1,234,817	1,220,948	1,818,265	621,587	.6,356	4,323	3,580	363,636	123,964
22. Aircraft (all perils)													
23. Fidelity													
24. Surety													
26. Burglary and theft		10,787	6,525		5,400		.185	.284		(6)	.54	.1,874	.552
27. Boiler and machinery													
28. Credit													
29. International		XXX	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX
30. Warranty													
34. Aggregate write-ins for other lines of business		0	0		0	0	0	0	0	0	0	0	0
35. TOTAL (a)		30,123,751	31,103,446		13,590,536	15,053,495	(7,756,136)	142,339,360	1,381,854	(55,776)	5,186,958	4,640,297	1,536,761
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
3499. Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)		0	0		0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 227,119

(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



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EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00267	BUSINESS IN THE STATE OF Ohio		DURING THE YEAR 2020							NAIC Company Code 11136		
		1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
Line of Business		NONE											
1. Fire													
2.1 Allied lines													
2.2 Multiple peril crop													
2.3 Federal flood													
2.4 Private crop													
2.5 Private flood													
3. Farmowners multiple peril													
4. Homeowners multiple peril													
5.1 Commercial multiple peril (non-liability portion)													
5.2 Commercial multiple peril (liability portion)													
6. Mortgage guaranty													
8. Ocean marine													
9. Inland marine													
10. Financial guaranty													
11. Medical professional liability													
12. Earthquake													
13. Group accident and health (b)													
14. Credit A & H (group and individual)													
15.1 Collectively renewable A & H (b)													
15.2 Non-cancelable A & H (b)													
15.3 Guaranteed renewable A & H (b)													
15.4 Non-renewable for stated reasons only (b)													
15.5 Other accident only													
15.6 Medicare Title XVIII exempt from state taxes or fees													
15.7 All other A & H (b)													
15.8 Federal Employees Health Benefits Plan premium (b)													
16. Workers' compensation													
17.1 Other liability-Occurrence													
17.2 Other Liability-Claims-Made													
17.3 Excess workers' compensation													
18. Products liability													
19.1 Private passenger auto no-fault (personal injury protection)													
19.2 Other private passenger auto liability													
19.3 Commercial auto no-fault (personal injury protection)													
19.4 Other commercial auto liability													
21.1 Private passenger auto physical damage													
21.2 Commercial auto physical damage													
22. Aircraft (all perils)													
23. Fidelity													
24. Surety													
26. Burglary and theft													
27. Boiler and machinery													
28. Credit													
29. International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30. Warranty													
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	0	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

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

and number of persons insured under indemnity only products



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EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00267	BUSINESS IN THE STATE OF Consolidated				DURING THE YEAR 2020					NAIC Company Code 11136	
		1 Line of Business	2 Direct Premiums Written	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1. Fire	284,990	.303,289	0	.151,603	.45,629	.45,262	.19,279	.4,228	.3,182	.1,802	.47,531	14,572
2.1 Allied lines	151,551	161,534	0	80,402	.96,985	.85,250	.7,539	0	0	.993	.25,581	.7,749
2.2 Multiple peril crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private flood	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril	251,189	.272,511	0	.139,186	.119,532	.116,711	.6,576	.57,365	0	.4,419	.43,602	12,844
4. Homeowners multiple peril	.6,226,659	6,966,637	0	.3,330,115	.2,511,003	.2,538,722	.1,395,053	.91,834	.57,418	.112,102	.959,879	.318,382
5.1 Commercial multiple peril (non-liability portion)	.6,594,209	6,336,990	0	.3,229,844	.3,882,605	.3,726,936	.966,792	.209,283	.130,929	.92,537	.1,143,063	.337,175
5.2 Commercial multiple peril (liability portion)	3,280,848	3,230,994	0	1,498,790	.749,523	.702,730	.3,569,964	0	.313,007	2,019,880	.563,732	.167,756
6. Mortgage guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine	134,982	.145,866	0	.68,458	.179,291	.123,480	0	.794	.38	.228	.20,647	.6,902
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	736	.943	0	.333	0	0	0	0	0	0	0	.125
13. Group accident and health (b.)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A & H (group and individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A & H (b.)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A & H (b.)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A & H (b.)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b.)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A & H (b.)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan premium (b.)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation	1,020,114	.996,761	0	.331,689	.284,203	.514,892	.1,143,125	.49,746	.34,709	.141,270	.106,147	.52,161
17.1 Other liability-Occurrence	653,725	.573,785	0	.329,414	0	(95,590)	.612,005	0	0	.1,070	.14,763	.115,113
17.2 Other Liability-Claims-Made	1,367	2,236	0	.866	.15,000	.6,982	.526	.2,581	(2,336)	.907	.237	.70
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	.30,948	.29,547	0	.20,837	0	.32	.6,090	0	0	.553	.10,509	.5,341
19.1 Private passenger auto no-fault (personal injury protection)	2,292,766	2,700,949	0	.465,703	.1,238,456	(20,237,828)	.128,474,108	.298,506	(529,982)	.1,419,154	.294,938	.117,234
19.2 Other private passenger auto liability	.977,272	1,022,567	0	.256,108	.1,478,839	.535,085	.1,113,622	.322,091	.131,092	.488,614	.158,104	.46,442
19.3 Commercial auto no-fault (personal injury protection)	1,604,920	1,763,825	0	.743,166	.970,796	.705,826	.1,643,080	.121,925	(208,303)	.307,528	.164,675	.82,063
19.4 Other commercial auto liability	2,544,312	2,489,601	0	.1,331,229	.1,547,009	.920,224	.2,783,961	.216,988	.12,493	.568,561	.357,767	.130,096
21.1 Private passenger auto physical damage	.1,637,989	1,825,634	0	.372,575	.713,675	.736,700	(23,536)	.158	(1,239)	.54	.268,305	.83,754
21.2 Commercial auto physical damage	2,424,386	2,273,252	0	.1,234,817	.1,220,948	.1,818,265	.621,587	.6,356	.4,323	.3,580	.363,636	.123,964
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft	10,787	.6,525	0	.5,400	0	.185	.284	0	(6)	.54	.1,874	.552
27. Boiler and machinery	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTAL (a)	30,123,751	31,103,446	0	13,590,536	15,053,495	(7,756,136)	142,339,360	1,381,854	(55,776)	5,186,958	4,640,297	1,536,761
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 \$ 227,119

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 1

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust	
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 +7								
Pools and Associations - Mandatory Pools, Associations or Other Similar Facilities															
AA-999218.....00000	NATIONAL WORKERS COMP RETNS POOL		NY	.63		94	94			.18					
1099999 - Pools and Associations - Mandatory Pools, Associations or Other Similar Facilities				63	0	94	94	0	0	18	0	0	0	0	0
1299999 - Pools and Associations - Total Pools and Associations				63	0	94	94	0	0	18	0	0	0	0	0
9999999 Totals				63	0	94	94	0	0	18	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsur- ance Premiums Ceded	Reinsurance Recoverable On									16	Reinsurance Payable		19 Net Amount Recover- able From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held By Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commiss- ions	15 Cols. 7 through 14 Totals	16 Amount in Dispute Included in Column 15	17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers			
Authorized - Affiliates - U.S. Intercompany Pooling																				
31-4192970	14060	GRANGE INS CO	OH		27,837			11,734		.5,723		12,992		30,448					30,448	
0199999	- Total Authorized - Affiliates - U.S. Intercompany Pooling				27,837	0	0	11,734	0	5,723	0	12,992	0	30,448	0	0	0	30,448	0	
0899999	- Total Authorized - Affiliates - Total Authorized - Affiliates				27,837	0	0	11,734	0	5,723	0	12,992	0	30,448	0	0	0	30,448	0	
Authorized - Other U.S. Unaffiliated Insurers																				
06-1430254	10348	ARCH REINS CO	DE		5			.0		.0				0					0	
51-0434766	20370	AXIS REINS CO	NY	2																0
47-0574325	32603	BERKLEY INS CO	DE	161										70					70	
42-0234980	21415	EMPLOYERS MUT CAS CO	IA	32				.0		.0									0	
35-2293075	11551	ENDURANCE ASSUR CORP	DE	51															.47	
22-2005057	26921	EVEREST REINS CO	DE	3				.0		.47									0	
13-2673100	22039	GENERAL REINS CORP	DE	131				.0		.0									.67	
06-0384680	11452	HARTFORD STEAM BOIL INSPEC & INS CO	CT	378				.10											193	
13-4924125	10227	MUNICH REINS AMER INC	DE	147				.14											146	
47-0355979	20087	NATIONAL IND CO	NE	4															0	
13-3138390	42307	NAVIGATORS INS CO	NY	1				.0		.0									0	
13-3031176	38636	PARTNER REINS CO OF THE US	NY	34															0	
23-1641984	10219	QBE REINS CORP	PA	1															0	
52-1952955	10357	RENAISSANCE REINS US INC	MD	26						.59									.59	
43-0727872	15105	SAFETY NATL CAS CORP	MO	5															0	
13-1675535	25364	SWISS REINS AMER CORP	NY	78				.74		.150									224	
13-5616275	19453	TRANSATLANTIC REINS CO	NY	3				.4		.0									4	
13-1290712	20583	XI REINS AMER INC	NY	5															0	
95-2769232	27847	INSURANCE CO OF THE WEST	CA	7															0	
0999999	- Total Authorized - Other U.S. Unaffiliated Insurers				1,071	0	0	101	0	389	0	321	0	811	0	0	0	811	0	
Authorized - Pools - Mandatory Pools																				
AA-9991159	00000	MICHIGAN CATASTROPHIC CLAIMS ASSN	MI		1,073	3,629		124,351											128,275	
1099999	- Total Authorized - Pools - Mandatory Pools				1,073	3,629	0	124,351	0	0	0	296	0	128,275	0	0	0	128,275	0	
Authorized - Other Non-U.S. Insurers																				
AA-1126033	00000	LLOYD'S SYNDICATE NUMBER 33	GBR		4			.9		1									10	
AA-1126435	00000	LLOYD'S SYNDICATE NUMBER 435	GBR	3				.4		.0									4	
AA-1126510	00000	LLOYD'S SYNDICATE NUMBER 510	GBR	0				.2		.0									2	
AA-1126623	00000	LLOYD'S SYNDICATE NUMBER 623	GBR	0				.0											0	
AA-1127084	00000	LLOYD'S SYNDICATE NUMBER 1084	GBR	7				.1		.0									1	
AA-1127414	00000	Lloyd's Syndicate Number 1414	GBR	2															0	
AA-1120156	00000	LLOYD'S SYNDICATE NUMBER 1686	GBR	0															0	
AA-1120157	00000	LLOYD'S SYNDICATE NUMBER 1729	GBR	0															0	
AA-1120171	00000	Lloyd's Syndicate Number 1856	GBR	0				.0		.0									0	
AA-1127861	00000	LLOYD'S SYNDICATE NUMBER 1861	GBR	0				.0											0	
AA-1120084	00000	Lloyd's Syndicate Number 1955	GBR	1															0	
AA-1120106	00000	Lloyd's Syndicate Number 1969	GBR	0				.0		.0									0	
AA-1128001	00000	LLOYD'S SYNDICATE NUMBER 2001	GBR	.10				.13		1									.14	
AA-1128003	00000	LLOYD'S SYNDICATE NUMBER 2003	GBR	2				.0		.0									0	
AA-1120071	00000	Lloyd's Syndicate Number 2007	GBR	0															0	
AA-1128010	00000	LLOYD'S SYNDICATE NUMBER 2010	GBR	1															0	
AA-1128623	00000	Lloyd's Syndicate Number 2623	GBR	0				.0		.0									0	
AA-1128791	00000	LLOYD'S SYNDICATE NUMBER 2791	GBR	0															0	
AA-1128987	00000	Lloyd's Syndicate Number 2987	GBR	3				.0											0	
AA-1120075	00000	Lloyd's Syndicate Number 4020	GBR	2															0	
AA-1126004	00000	LLOYD'S SYNDICATE NUMBER 4444	GBR	0				.0		.0									0	
AA-1120181	00000	Lloyd's Syndicate Number 5886	GBR	3															0	
AA-1340125	00000	HANNOVER RUECK SE	DEU	126				.14		.96									110	
AA-1840000	00000	MAPFRE RE COMPANIA DE REASEGUROS SA	ESP	2				.0		.0									0	
AA-3190870	00000	Validus Reins Ltd	BMU	1				.2		.0									2	
AA-3194130	00000	Endurance Specialty Ins Ltd	BMU	1				.0		.0									0	
1299999	- Total Authorized - Other Non-U.S. Insurers				171	0	0	44	0	100	0	0	0	144	0	0	0	144	0	
1499999	- Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				30,153	3,629	0	136,230	0	6,212	0	13,608	0	159,679	0	0	0	159,679	0	

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsur- ance Premiums Ceded	Reinsurance Recoverable On									16	Reinsurance Payable		19 Net Amount Recover- able From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held By Company Under Reinsurance Treaties		
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Cols. 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers				
Unauthorized - Other non-U.S. Insurers																					
AA-319070...	00000...	Chubb Tempest Reins Ltd...		BMU		4				.18										.20	
AA-9240012...	00000...	CHINA PROP & CAS REINS CO LTD...		CHN		1				.0										0	
AA-1120191...	00000...	Convex Ins UK Ltd...		GBR		5														0	
AA-3191289...	00000...	Fidelis Ins Bermuda Ltd...		BMU		1				.2										2	
AA-1120175...	00000...	Fidelis Underwriting Ltd...		GBR		2				.0										0	
AA-3191190...	00000...	Hamilton Re Ltd...		BMU		1				.4										4	
AA-3190875...	00000...	Hiscox Ins Co (Bermuda) Ltd...		BMU		5				.15										.16	
AA-5420050...	00000...	KOREAN REINS CO...		KOR		1				.1										1	
AA-1460019...	00000...	MS Amlin AG...		CHE		5				.8										9	
AA-1440076...	00000...	SIRIUS INTL INS CORP...		SWE		1				.1										1	
AA-5324100...	00000...	TAIPING REINS CO LTD...		HKG		1				.0										1	
2699999 - Total Unauthorized - Other Non-U.S. Insurers						27	0	0	49	0	5	0	0	0	54	0	0	0	0	54	0
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)						27	0	0	49	0	5	0	0	0	54	0	0	0	0	54	0
Certified - Other Non-U.S. Insurers																				0	
CR-3194126...	00000...	Arch Reins Ltd...		BMU		5				.0										0	
CR-1460023...	00000...	RenaissanceRe Europe AG...		CHE		0														0	
CR-3191315...	00000...	XL Bermuda Ltd...		BMU		1				.0										0	
4099999 - Total Certified - Other Non-U.S. Insurers						7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4299999 - Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)						7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)						30,187	3,629	0	136,279	0	6,217	0	13,608	0	159,733	0	0	0	0	159,733	0
9999999 Totals						30,187	3,629	0	136,279	0	6,217	0	13,608	0	159,733	0	0	0	0	159,733	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk									
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of (Col. 28 * 120%)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of (Col. 29)	31 Stressed Net Recoverable (Cols. 29 - 30)	32 Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	34 Reinsurer Designation Equivalent	35 Credit Risk Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	
Authorized - Affiliates - U.S. Intercompany Pooling																		
31-4192970	GRANGE INS CO					0	.30,448		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999	- Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	XXX	0	0	30,448		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999	- Total Authorized - Affiliates - Total Authorized - Affiliates	0	0	XXX	0	0	30,448		0	0	0	0	0	0	0	XXX	0	0
Authorized - Other U.S. Unaffiliated Insurers																		
06-1430254	ARCH REINS CO					0	.0	0	0	0	0	0	0	0	0	0	2	0
51-0434766	AXIS REINS CO					0	.0	0	0	0	0	0	0	0	0	0	2	0
47-0574325	BERKLEY INS CO					0	.70	0	.70	.84	0	.84	0	.84	0	2	0	
42-0234980	EMPLOYERS MUT CAS CO					0	.0	0	0	0	0	0	0	0	0	3	0	
35-2293075	ENDURANCE ASSUR CORP					0	.47	0	.47	.57	0	.57	0	.57	0	2	0	
22-2005057	EVEREST REINS CO					0	.0	0	0	0	0	0	0	0	0	2	0	
13-2673100	GENERAL REINS CORP					0	.67	0	.67	.81	0	.81	0	.81	0	1	0	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO					0	.193	0	.193	.231	0	.231	0	.231	0	1	0	
13-4924125	MUNICH REINS AMER INC					0	.146	0	.146	.175	0	.175	0	.175	0	2	0	
47-0355979	NATIONAL IND CO					0	.0	0	0	0	0	0	0	0	0	1	0	
13-3138390	NAVIGATORS INS CO					0	.0	0	0	0	0	0	0	0	0	2	0	
13-3031176	PARTNER REINS CO OF THE US					0	.0	0	0	0	0	0	0	0	0	2	0	
23-1641984	QBE REINS CORP					0	.0	0	0	0	0	0	0	0	0	3	0	
52-1952955	RENAISSANCE REINS US INC					0	.59	0	.59	.71	0	.71	0	.71	0	2	0	
43-0727872	SAFETY NATL CAS CORP					0	.0	0	0	0	0	0	0	0	0	2	0	
13-1675535	SWISS REINS AMER CORP					0	.224	0	.224	.269	0	.269	0	.269	0	2	0	
13-5616275	TRANSATLANTIC REINS CO					0	.4	0	.4	.5	0	.5	0	.5	0	1	0	
13-1290712	XL REINS AMER INC					0	.0	0	0	0	0	0	0	0	0	3	0	
95-2769232	INSURANCE CO OF THE WEST					0	.0	0	0	.0	0	0	0	0	0	3	0	
0999999	- Total Authorized - Other U.S. Unaffiliated Insurers	0	0	XXX	0	0	811		0	811	973	0	973	0	973	XXX	0	
Authorized - Pools - Mandatory Pools																		
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN					0	.128,275	0	.XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999	- Total Authorized - Pools - Mandatory Pools	0	0	XXX	0	0	128,275		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Authorized - Other Non-U.S. Insurers																		
AA-1126033	LLOYD'S SYNDICATE NUMBER 33					0	.10	0	.10	.12	0	.12	0	.12	0	3	0	
AA-1126435	LLOYD'S SYNDICATE NUMBER 435					0	.4	0	.4	.5	0	.5	0	.5	0	3	0	
AA-1126510	LLOYD'S SYNDICATE NUMBER 510					0	.2	0	.2	.3	0	.3	0	.3	0	3	0	
AA-1126623	LLOYD'S SYNDICATE NUMBER 623					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084					0	.1	0	.1	.1	0	.1	0	.1	0	3	0	
AA-1127414	Lloyd's Syndicate Number 1414					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1120156	LLOYD'S SYNDICATE NUMBER 1686					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1120157	LLOYD'S SYNDICATE NUMBER 1729					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1120171	Lloyd's Syndicate Number 1856					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1127861	LLOYD'S SYNDICATE NUMBER 1861					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1120084	Lloyd's Syndicate Number 1955					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1120106	Lloyd's Syndicate Number 1969					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001					0	.14	0	.14	.17	0	.17	0	.17	0	3	0	
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1120071	Lloyd's Syndicate Number 2007					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1128623	Lloyd's Syndicate Number 2623					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1128987	Lloyd's Syndicate Number 2987					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1120075	Lloyd's Syndicate Number 4020					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1126004	LLOYD'S SYNDICATE NUMBER 4444					0	.0	0	0	0	0	0	0	0	0	3	0	
AA-1120181	Lloyd's Syndicate Number 5886					0	.0	0	0	0	0	0	0	0	0	3	0	

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk									35	36			
		21	22	23	24				Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 - 27)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 28 * 120%)	30	31	32	33	34	Credit Risk 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)
AA-1340125	HANNOVER RUECK SE					0	.110	0		.110	0		.132	0		0		132	2	0	5	
AA-1840000	MAPFRE RE COMPANIA DE REASEGUROS SA					0	0	0		0	0		0	0		0		0	0	0	0	
AA-3190870	Validus Reins Ltd.					0	.2	0		.2	0		0	0		2		0	0	0	0	
AA-3194130	Endurance Specialty Ins Ltd.					0	0	0		0	0		0	0		0		0	0	0	0	
1299999	- Total Authorized - Other Non-U.S. Insurers	0	0	XXX	0	0	144	0		144	0		173	0		173	0	173	XXX	0	7	
1499999	- Total Authorized Excluding Protected Cells (Sum of 089999, 099999, 109999, 119999 and 129999)	0	0	XXX	0	0	159,679	0		955	0		1,146	0		1,146	0	1,146	XXX	0	46	
Unauthorized - Other non-U.S. Insurers																						
AA-3190770	Chubb Tempest Reins Ltd.			20	.0001					20	0	0	20	.24	0	.24		20	4	2	1	0
AA-9240012	CHINA PROP & CAS REINS CO LTD			0	.0002					0	0	0	0	0	0	0		0	3	0	0	0
AA-1120191	Convex Ins UK Ltd.			0	.0003					0	0	0	0	0	0	0		0	0	0	0	0
AA-3191289	Fidelis Ins Bermuda Ltd.			2	.0004					2	0	0	2	2	0	2		2	0	4	0	0
AA-1120175	Fidelis Underwriting Ltd.			0	.0005					0	0	0	0	0	0	0		0	0	0	0	0
AA-3191190	Hamilton Re Ltd.			4	.0012					4	0	0	4	5	0	5		4	1	4	0	0
AA-3190875	Hiscox Ins Co (Bermuda) Ltd.			16	.0011					.16	0	0	16	.20	0	.20		16	3	3	1	0
AA-5420050	KOREAN REINS CO			1	.0006					1	0	0	1	1	0	1		1	0	3	0	0
AA-1460019	MS Am1in AG			9	.0007					9	0	0	9	.10	0	.10		9	2	3	0	0
AA-1440076	SIRIUS INTL INS CORP				1					1	0	0	1	1	0	1		1	0	3	0	0
AA-5324100	TAIPING REINS CO LTD			1	.0009					1	0	0	1	1	0	1		1	0	3	0	0
2699999	- Total Unauthorized - Other Non-U.S. Insurers	0	53	XXX	1	54	0	0		54	65	0	65	0	65	54	11	XXX	2	0		
2899999	- Total Unauthorized Excluding Protected Cells (Sum of 229999, 239999, 249999, 259999 and 269999)	0	53	XXX	1	54	0	0		54	65	0	65	0	65	54	11	XXX	2	0		
Certified - Other Non-U.S. Insurers																						
CR-3194126	Arch Reins Ltd.			.0	.0010					0	0	0	0	0	0	0	0	0	0	3	0	0
CR-1460023	RenaissanceRe Europe AG									0	0	0	0	0	0	0	0	0	0	3	0	0
CR-3191315	XL Bermuda Ltd.			0	.0008					0	0	0	0	0	0	0	0	0	0	3	0	0
4099999	- Total Certified - Other Non-U.S. Insurers	0	0	XXX	0	0	0	0		0	0	0	0	0	0	0	0	0	XXX	0	0	
4299999	- Total Certified Excluding Protected Cells (Sum of 369999, 379999, 389999, 399999 and 409999)	0	0	XXX	0	0	0	0		0	0	0	0	0	0	0	0	0	XXX	0	0	
5799999	- Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 149999, 289999, 429999 and 569999)	0	53	XXX	1	54	159,679	0		1,009	1,211	0	1,211	0	1,211	54	1,157	XXX	2	46		
9999999	Totals	0	53	XXX	1	54	159,679	0		1,009	1,211	0	1,211	0	1,211	54	1,157	XXX	2	46		

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Col. 40 & 41	46 Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 43 – 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 40 + 41 – 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Col. 46 + 48])	51 Percentage More Than 120 Days Overdue (Col. 50 Less Than 20% (Yes or No)	52 Is the Amount in Col. 50 Less Than 20% (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50										
		37 Current	Overdue																								
			38 1 – 29 Days	39 30 – 90 Days	40 91 – 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38 + 39 + 40 + 41																				
Authorized - Affiliates - U.S. Intercompany Pooling	GRANGE INS CO						0	.0			0	.0		.000	.000	.000	YES	.0									
0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0									
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0									
Authorized - Other U.S. Unaffiliated Insurers							0	.0			0	.0		.000	.000	.000	YES	.0									
06-1430254	ARCH REINS CO						0	.0			0	.0		.000	.000	.000	YES	.0									
51-0434766	AXIS REINS CO						0	.0			0	.0		.000	.000	.000	YES	.0									
47-0574325	BERKLEY INS CO						0	.0			0	.0		.000	.000	.000	YES	.0									
42-0234980	EMPLOYERS MUT CAS CO						0	.0			0	.0		.000	.000	.000	YES	.0									
35-2293075	ENDURANCE ASSUR CORP						0	.0			0	.0		.000	.000	.000	YES	.0									
22-2005057	EVEREST REINS CO						0	.0			0	.0		.000	.000	.000	YES	.0									
13-2673100	GENERAL REINS CORP						0	.0			0	.0		.000	.000	.000	YES	.0									
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO						0	.0			0	.0		.000	.000	.000	YES	.0									
13-4924125	MUNICH REINS AMER INC						0	.0			0	.0		.000	.000	.000	YES	.0									
47-0355979	NATIONAL IND CO						0	.0			0	.0		.000	.000	.000	YES	.0									
13-3138390	NAVIGATORS INS CO						0	.0			0	.0		.000	.000	.000	YES	.0									
13-3031176	PARTNER REINS CO OF THE US						0	.0			0	.0		.000	.000	.000	YES	.0									
23-1641984	QBE REINS CORP						0	.0			0	.0		.000	.000	.000	YES	.0									
52-1952955	RENAISSANCE REINS US INC						0	.0			0	.0		.000	.000	.000	YES	.0									
43-0727872	SAFETY NATL CAS CORP						0	.0			0	.0		.000	.000	.000	YES	.0									
13-1675535	SWISS REINS AMER CORP						0	.0			0	.0		.000	.000	.000	YES	.0									
13-5616275	TRANSATLANTIC REINS CO						0	.0			0	.0		.000	.000	.000	YES	.0									
13-1290712	XL REINS AMER INC						0	.0			0	.0		.000	.000	.000	YES	.0									
95-2769232	INSURANCE CO OF THE WEST						0	.0			0	.0		.000	.000	.000	YES	.0									
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0									
Authorized - Pools - Mandatory Pools																											
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN	3,629					0	3,629			3,629	.0		.000	.000	.000	YES	.0									
1099999 - Total Authorized - Pools - Mandatory Pools		3,629	0	0	0	0	0	3,629	0	0	3,629	0	0	0.000	0.000	0.000	XXX	0									
Authorized - Other Non-U.S. Insurers																											
AA-1126033	LLOYD'S SYNDICATE NUMBER 33						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1126435	LLOYD'S SYNDICATE NUMBER 435						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1126510	LLOYD'S SYNDICATE NUMBER 510						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1126623	LLOYD'S SYNDICATE NUMBER 623						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1127414	Lloyd's Syndicate Number 1414						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1120156	LLOYD'S SYNDICATE NUMBER 1686						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1120157	LLOYD'S SYNDICATE NUMBER 1729						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1120171	Lloyd's Syndicate Number 1856						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1127861	LLOYD'S SYNDICATE NUMBER 1861						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1120084	Lloyd's Syndicate Number 1955						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1120106	Lloyd's Syndicate Number 1969						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1120071	Lloyd's Syndicate Number 2007						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1128623	Lloyd's Syndicate Number 2623						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1128987	Lloyd's Syndicate Number 2987						0	.0			0	.0		.000	.000	.000	YES	.0									
AA-1120075	Lloyd's Syndicate Number 4020						0	.0			0	.0		.000	.000	.000	YES	.0									

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44	45	46	47	48	49	50	51	52	53											
		37	Overdue																									
			38	39	40	41	42																					
			Current	1 – 29 Days	30 – 90 Days	91 – 120 Days	Over 120 Days	Total Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)	Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 43)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 43)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 50/ Col. 43)	Is the Amount in Col. 50 Less Than 20% (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50										
AA-112604...	LLOYD'S SYNDICATE NUMBER 4444...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-1120181...	Lloyd's Syndicate Number 5886...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-1340125...	HANNOVER RUECK SE...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-1840000...	MAPFRE RE COMPANIA DE REASEGUROS SA...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-3190870...	Validus Reins Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-3194130...	Endurance Specialty Ins Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
1299999 - Total Authorized - Other Non-U.S. Insurers		0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	0.000	XXX	0										
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		3,629	0	0	0	0	0	3,629	0	0	3,629	0	0.000	0.000	0.000	0.000	XXX	0										
Unauthorized - Other non-U.S. Insurers																												
AA-3190770...	Chubb Tempest Reins Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-9240012...	CHINA PROP & CAS REINS CO LTD...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-1120191...	Convex Ins UK Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-3191289...	Fidelis Ins Bermuda Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-1120175...	Fidelis Underwriting Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-3191190...	Hamilton Re Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-3190875...	Hiscox Ins Co (Bermuda) Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-5420050...	KOREAN REINS CO...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-1460019...	MS AmLin AG...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-1440076...	SIRIUS INTL INS CORP...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
AA-5324100...	TAIPING REINS CO LTD...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
2699999 - Total Unauthorized - Other Non-U.S. Insurers		0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	0.000	XXX	0										
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	0.000	XXX	0										
Certified - Other Non-U.S. Insurers																												
CR-3194126...	Arch Reins Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
CR-1460023...	RenaissanceRe Europe AG...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
CR-3191315...	XL Bermuda Ltd...							0	0	0	0	0	0.000	0.000	0.000	0.000	YES.	0										
4099999 - Total Certified - Other Non-U.S. Insurers		0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	0.000	XXX	0										
4299999 - Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	0.000	XXX	0										
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		3,629	0	0	0	0	0	0	3,629	0	0	3,629	0	0	0.000	0.000	XXX	0										
9999999 Totals		3,629	0	0	0	0	0	0	3,629	0	0	3,629	0	0	0.000	0.000	XXX	0										

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 3 (Continued)

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance																69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0				
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20+Col. 21+Col. 22+Col. 24]/Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57+[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20+Col. 21+Col.22+Col. 24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	20% of Amount in Col. 67		
Authorized - Affiliates - U.S. Intercompany Pooling	GRANGE INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
31-4192970	GRANGE INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Authorized - Other U.S. Unaffiliated Insurers																		
06-1430254	ARCH REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
51-0434766	AXIS REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0574325	BERKLEY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0234980	EMPLOYERS MUT CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35-2293075	ENDURANCE ASSUR CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
22-2005057	EVEREST REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2673100	GENERAL REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-4924125	MUNICH REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0355979	NATIONAL IND CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3138390	NAVIGATORS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3031176	PARTNER REINS CO OF THE US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23-1641984	QBE REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
52-1952955	RENAISSANCE REINS US INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43-0727872	SAFETY NATL CAS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1675535	SWISS REINS AMER CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-5616275	TRANSATLANTIC REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1290712	XL REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-2769232	INSURANCE CO OF THE WEST	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Authorized - Pools - Mandatory Pools																		
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999 - Total Authorized - Pools - Mandatory Pools		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Authorized - Other Non-U.S. Insurers																		
AA-1126033	LLOYD'S SYNDICATE NUMBER 33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126435	LLOYD'S SYNDICATE NUMBER 435	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126510	LLOYD'S SYNDICATE NUMBER 510	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126623	LLOYD'S SYNDICATE NUMBER 623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127414	Lloyd's Syndicate Number 1414	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120156	LLOYD'S SYNDICATE NUMBER 1686	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120157	LLOYD'S SYNDICATE NUMBER 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120171	Lloyd's Syndicate Number 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127861	LLOYD'S SYNDICATE NUMBER 1861	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120084	Lloyd's Syndicate Number 1955	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120106	Lloyd's Syndicate Number 1969	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120071	Lloyd's Syndicate Number 2007	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128623	Lloyd's Syndicate Number 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128987	Lloyd's Syndicate Number 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)	
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0				
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20+Col. 21+Col. 22+Col. 24]/Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57+[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 58 * Col. 61)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20+Col. 21+Col. 22+Col. 24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	20% of Amount in Col. 67		
AA-1120075.....	Lloyd's Syndicate Number 4020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126004.....	LLOYD'S SYNDICATE NUMBER 4444.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120181.....	Lloyd's Syndicate Number 5886.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340125.....	HANNOVER RUECK SE.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1840000.....	MAPFRE RE COMPANIA DE REASEGUROS SA.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190870.....	Validus Reins Ltd.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194130.....	Endurance Specialty Ins Ltd.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1299999 - Total Authorized - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 099999, 109999, 119999 and 129999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Unauthorized - Other non-U.S. Insurers																		
AA-3190770.....	Chubb Tempest Reins Ltd.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9240012.....	CHINA PROP & CAS REINS CO LTD.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120191.....	Convex Ins UK Ltd.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191289.....	Fidelis Ins Bermuda Ltd.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120175.....	Fidelis Underwriting Ltd.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191190.....	Hamilton Re Ltd.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190875.....	Hiscox Ins Co (Bermuda) Ltd.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5420050.....	KOREAN REINS CO.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460019.....	MS Am'tin AG.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1440076.....	SIRIUS INT'L INS CORP.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5324100.....	TAIPING REINS CO LTD.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2699999 - Total Unauthorized - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 229999, 239999, 249999, 259999 and 269999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Certified - Other Non-U.S. Insurers																		
CR-3194126.....	Arch Reins Ltd.....	3.	07/01/2015	20,000	0	0	21,495	100,000	0	0	0	0	0	0	0	0	0	
CR-1460023.....	RenaissanceRe Europe AG.....	3.	01/01/2016	20,000	0	0	0,000	0,000	0	0	0	0	0	0	0	0	0	
CR-3191315.....	XL Bermuda Ltd.....	3.	01/01/2019	20,000	0	0	22,388	100,000	0	0	0	0	0	0	0	0	0	
4099999 - Total Certified - Other Non-U.S. Insurers		XXX	XXX	XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
4299999 - Total Certified Excluding Protected Cells (Sum of 3699999, 379999, 389999, 399999 and 409999)		XXX	XXX	XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
9999999 Totals		XXX	XXX	XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	70	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
				71	72	73	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
31-4192970	GRANGE INS CO	0	0	XXX	XXX	0	0	0	XXX	XXX	0
0199999	- Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	XXX	XXX	0	0	0	XXX	XXX	0
0899999	- Total Authorized - Affiliates - Total Authorized - Affiliates	0	0	XXX	XXX	0	0	0	XXX	XXX	0
Authorized - Affiliates - U.S. Intercompany Pooling											
31-4192970	GRANGE INS CO	0	0	XXX	XXX	0	0	0	XXX	XXX	0
0199999	- Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	XXX	XXX	0	0	0	XXX	XXX	0
0899999	- Total Authorized - Affiliates - Total Authorized - Affiliates	0	0	XXX	XXX	0	0	0	XXX	XXX	0
Authorized - Other U.S. Unaffiliated Insurers											
06-1430254	ARCH REINS CO	0	0	XXX	XXX	0	0	0	XXX	XXX	0
51-0434766	AXIS REINS CO	0	0	XXX	XXX	0	0	0	XXX	XXX	0
47-0574325	BERKLEY INS CO	0	0	XXX	XXX	0	0	0	XXX	XXX	0
42-0234980	EMPLOYERS MUT CAS CO	0	0	XXX	XXX	0	0	0	XXX	XXX	0
35-2293075	ENDURANCE ASSUR CORP	0	0	XXX	XXX	0	0	0	XXX	XXX	0
22-2005057	EVEREST REINS CO	0	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2673100	GENERAL REINS CORP	0	0	XXX	XXX	0	0	0	XXX	XXX	0
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	0	0	XXX	XXX	0	0	0	XXX	XXX	0
13-4924125	MUNICH REINS AMER INC	0	0	XXX	XXX	0	0	0	XXX	XXX	0
47-0355979	NATIONAL IND CO	0	0	XXX	XXX	0	0	0	XXX	XXX	0
13-3138390	NAVIGATORS INS CO	0	0	XXX	XXX	0	0	0	XXX	XXX	0
13-3031176	PARTNER REINS CO OF THE US	0	0	XXX	XXX	0	0	0	XXX	XXX	0
23-1641984	QBE REINS CORP	0	0	XXX	XXX	0	0	0	XXX	XXX	0
52-1952955	RENAISSANCE REINS US INC	0	0	XXX	XXX	0	0	0	XXX	XXX	0
43-0727872	SAFETY NATL CAS CORP	0	0	XXX	XXX	0	0	0	XXX	XXX	0
13-1675535	SWISS REINS AMER CORP	0	0	XXX	XXX	0	0	0	XXX	XXX	0
13-5616275	TRANSATLANTIC REINS CO	0	0	XXX	XXX	0	0	0	XXX	XXX	0
13-1290712	XL REINS AMER INC	0	0	XXX	XXX	0	0	0	XXX	XXX	0
95-2769232	INSURANCE CO OF THE WEST	0	0	XXX	XXX	0	0	0	XXX	XXX	0
0999999	- Total Authorized - Other U.S. Unaffiliated Insurers	0	0	XXX	XXX	0	0	0	XXX	XXX	0
Authorized - Pools - Mandatory Pools											
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN	0	0	XXX	XXX	0	0	0	XXX	XXX	0
1099999	- Total Authorized - Pools - Mandatory Pools	0	0	XXX	XXX	0	0	0	XXX	XXX	0
Authorized - Other Non-U.S. Insurers											
AA-1126033	LLOYD'S SYNDICATE NUMBER 33	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126435	LLOYD'S SYNDICATE NUMBER 435	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126510	LLOYD'S SYNDICATE NUMBER 510	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126623	LLOYD'S SYNDICATE NUMBER 623	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127414	Lloyd's Syndicate Number 1414	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120156	LLOYD'S SYNDICATE NUMBER 1686	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120157	LLOYD'S SYNDICATE NUMBER 1729	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120171	Lloyd's Syndicate Number 1856	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127861	LLOYD'S SYNDICATE NUMBER 1861	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120084	Lloyd's Syndicate Number 1955	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120106	Lloyd's Syndicate Number 1969	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120071	Lloyd's Syndicate Number 2007	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128623	Lloyd's Syndicate Number 2623	0	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791	0	0	XXX	XXX	0	0	0	XXX	XXX	0

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SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
AA-1128987...	Lloyd's Syndicate Number 2987...	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120075...	Lloyd's Syndicate Number 4020...	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126004...	LLOYD'S SYNDICATE NUMBER 4444...	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120181...	Lloyd's Syndicate Number 5886...	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1340125...	HANNOVER RUECK SE...	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1840000...	MAPFRE RE COMPANIA DE REASEGUROS SA...	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3190870...	Validus Reins Ltd...	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3194130...	Endurance Specialty Ins Ltd...	0	XXX	XXX	0	0	0	XXX	XXX	0
1299999 - Total Authorized - Other Non-U.S. Insurers		0	XXX	XXX	0	0	0	XXX	XXX	0
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0	XXX	XXX	0	0	0	XXX	XXX	0
Unauthorized - Other non-U.S. Insurers										
AA-3190770...	Chubb Tempest Reins Ltd...	0	0	0	0	XXX	XXX	XXX	XXX	0
AA-9240012...	CHINA PROP & CAS REINS CO LTD...	0	0	0	0	XXX	XXX	XXX	XXX	0
AA-1120191...	Convex Ins UK Ltd...	0	0	0	0	XXX	XXX	XXX	XXX	0
AA-3191289...	Fidelis Ins Bermuda Ltd...	0	0	0	0	XXX	XXX	XXX	XXX	0
AA-1120175...	Fidelis Underwriting Ltd...	0	0	0	0	XXX	XXX	XXX	XXX	0
AA-3191190...	Hamilton Re Ltd...	0	0	0	0	XXX	XXX	XXX	XXX	0
AA-3190875...	Hiscox Ins Co (Bermuda) Ltd...	0	0	0	0	XXX	XXX	XXX	XXX	0
AA-5420050...	KOREAN REINS CO...	0	0	0	0	XXX	XXX	XXX	XXX	0
AA-1460019...	MS Am1in AG...	0	0	0	0	XXX	XXX	XXX	XXX	0
AA-1440076...	SIRIUS INT'L INS CORP...	0	0	0	0	XXX	XXX	XXX	XXX	0
AA-5324100...	TAIPING REINS CO LTD...	0	0	0	0	XXX	XXX	XXX	XXX	0
2699999 - Total Unauthorized - Other Non-U.S. Insurers		0	0	0	0	XXX	XXX	XXX	XXX	0
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	0	XXX	XXX	XXX	XXX	0
Certified - Other Non-U.S. Insurers										
CR-3194126...	Arch Reins Ltd...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
CR-1460023...	RenaissanceRe Europe AG...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
CR-3191315...	XL Bermuda Ltd...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
4099999 - Total Certified - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
4299999 - Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		0	0	0	0	0	0	0	0	0
9999999 Totals		0	0	0	0	0	0	0	0	0

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SCHEDULE F - PART 4

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

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
.0001	1.	021000089..	Citibank.	20
.0002	1.	026009917..	Australia & New Zealand Banking Group..	0
.0003	1.	021000089..	Citibank..	0
.0004	1.	021000089..	Citibank..	2
.0005	1.	981390502..	Lloyds Bank Corporate Markets..	0
.0006	1.	026004226..	Societe Generale..	1
.0007	1.	026002574..	Barclays..	9
.0008	1.	026009632..	MUFG Bank..	0
.0009	1.	021000089..	Citibank..	1
.0010	1.	026009593..	Bank of America..	0
.0011	1.	026008044..	Commerzbank..	16
0012	1.	073000228..	Wells Fargo..	4
Total				53

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	<u>1</u> Name of Reinsurer	<u>2</u> Commission Rate	<u>3</u> Ceded Premium
1.	GRANGE INS CO.....		27,837
2.	MICHIGAN CATASTROPHIC CLAIMS ASSN.....		1,073
3.	HARTFORD STEAM BOIL INSPEC & INS CO.....		378
4.	BERKLEY INS CO.....		161
5.	MUNICH REINS AMER INC.....		147

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

	<u>1</u> Name of Reinsurer	<u>2</u> Total Recoverables	<u>3</u> Ceded Premiums	<u>4</u> Affiliated
6.	GRANGE INS CO.....	30,448	27,837	Yes [X] No []
7.	MICHIGAN CATASTROPHIC CLAIMS ASSN.....	124,647	1,073	Yes [] No [X]
8.	SWISS REINS AMER CORP.....	224	78	Yes [] No [X]
9.	HARTFORD STEAM BOIL INSPEC & INS CO.....	193	378	Yes [] No [X]
10.	MUNICH REINS AMER INC.....	146	147	Yes [] No [X]

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	42,190,677		42,190,677
2. Premiums and considerations (Line 15)	0		0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	3,628,878	(3,628,878)	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....	0		0
5. Other assets	1,390,227		1,390,227
6. Net amount recoverable from reinsurers	43,111,413		43,111,413
7. Protected cell assets (Line 27)	0		0
8. Totals (Line 28)	47,209,782	39,482,535	86,692,317
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	0	25,874,234	25,874,234
10. Taxes, expenses, and other obligations (Lines 4 through 8)	135,515		135,515
11. Unearned premiums (Line 9)	0	13,608,301	13,608,301
12. Advance premiums (Line 10)	0		0
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)	0		0
15. Funds held by company under reinsurance treaties (Line 13)	0		0
16. Amounts withheld or retained by company for account of others (Line 14)	0		0
17. Provision for reinsurance (Line 16)	0		0
18. Other liabilities	0		0
19. Total liabilities excluding protected cell business (Line 26)	135,515	39,482,535	39,618,050
20. Protected cell liabilities (Line 27)	0		0
21. Surplus as regards policyholders (Line 37)	47,074,267	XXX	47,074,267
22. Totals (Line 38)	47,209,782	39,482,535	86,692,317

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

If yes, give full explanation:

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

Schedule H - Part 1

NONE

Schedule H - Part 2

NONE

Schedule H - Part 3

NONE

Schedule H - Part 4

NONE

Schedule H - Part 5 - Health Claims

NONE

Schedule P - Part 1A - Home/Farm

NONE

Schedule P - Part 1B - Private Passenger

NONE

Schedule P - Part 1C - Comm Auto/Truck

NONE

Schedule P - Part 1D - Workers' Comp

NONE

Schedule P - Part 1E - Comm Multi Peril

NONE

Schedule P - Part 1F - Med Pro Liab Occ

NONE

Schedule P - Part 1F - Med Pro Liab Clm

NONE

Schedule P - Part 1G - Special Liability

NONE

Schedule P - Part 1H - Other Liab Occur

NONE

Schedule P - Part 1H - Other Liab Claims

NONE

Schedule P - Part 1I - Special Property

NONE

Schedule P - Part 1J - Auto Physical

NONE

Schedule P - Part 1K - Fidelity/Surety

NONE

Schedule P - Part 1L - Other

NONE

Schedule P - Part 1M - International

NONE

Schedule P - Part 1N - Reinsurance

NONE

Schedule P - Part 1O - Reinsurance

NONE

Schedule P - Part 1P - Reinsurance

NONE

Schedule P - Part 1R - Prod Liab Occur

NONE

Schedule P - Part 1R - Prod Liab Claims

NONE

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

NONE

Schedule P - Part 1T - Warranty

NONE

Schedule P - Part 2A

NONE

Schedule P - Part 2B

NONE

Schedule P - Part 2C

NONE

Schedule P - Part 2D

NONE

Schedule P - Part 2E

NONE

Schedule P - Part 2F - Section 1

NONE

Schedule P - Part 2F - Med Pro Liab Clm

NONE

Schedule P - Part 2G

NONE

Schedule P - Part 2H - Other Liab Occur

NONE

Schedule P - Part 2H - Other Liab Claim

NONE

Schedule P - Part 2I

NONE

Schedule P - Part 2J

NONE

Schedule P - Part 2K

NONE

Schedule P - Part 2L

NONE

Schedule P - Part 2M

NONE

Schedule P - Part 2N

NONE

Schedule P - Part 2O

NONE

Schedule P - Part 2P

NONE

Schedule P - Part 2R - Prod Liab Occur

NONE

Schedule P - Part 2R - Prod Liab Claims

NONE

Schedule P - Part 2S

NONE

Schedule P - Part 2T

NONE

Schedule P - Part 3A

NONE

Schedule P - Part 3B

NONE

Schedule P - Part 3C

NONE

Schedule P - Part 3D

NONE

Schedule P - Part 3E

NONE

Schedule P - Part 3F - Med Pro Liab Occ

NONE

Schedule P - Part 3F - Med Pro Liab Clm

NONE

Schedule P - Part 3G

NONE

Schedule P - Part 3H - Other Liab Occur

NONE

Schedule P - Part 3H - Other Liab Claims

NONE

Schedule P - Part 3I

NONE

Schedule P - Part 3J

NONE

Schedule P - Part 3K

NONE

Schedule P - Part 3L

NONE

Schedule P - Part 3M

NONE

Schedule P - Part 3N

NONE

Schedule P - Part 3O

NONE

Schedule P - Part 3P

NONE

Schedule P - Part 3R - Prod Liab Occur

NONE

Schedule P - Part 3R - Prod Liab Claims

NONE

Schedule P - Part 3S

NONE

Schedule P - Part 3T

NONE

Schedule P - Part 4A

NONE

Schedule P - Part 4B

NONE

Schedule P - Part 4C

NONE

Schedule P - Part 4D

NONE

Schedule P - Part 4E

NONE

Schedule P - Part 4F - Med Pro Liab Occ

NONE

Schedule P - Part 4F - Med Pro Liab Clm

NONE

Schedule P - Part 4G

NONE

Schedule P - Part 4H - Other Liab Occur

NONE

Schedule P - Part 4H - Other Liab Claims

NONE

Schedule P - Part 4I

NONE

Schedule P - Part 4J

NONE

Schedule P - Part 4K

NONE

Schedule P - Part 4L

NONE

Schedule P - Part 4M

NONE

Schedule P - Part 4N

NONE

Schedule P - Part 4O

NONE

Schedule P - Part 4P

NONE

Schedule P - Part 4R - Prod Liab Occur

NONE

Schedule P - Part 4R - Prod Liab Claims

NONE

Schedule P - Part 4S

NONE

Schedule P - Part 4T - Warranty

NONE

Schedule P - Part 5A- SN1

NONE

Schedule P - Part 5A- SN2

NONE

Schedule P - Part 5A- SN3

NONE

Schedule P - Part 5B- SN1

NONE

Schedule P - Part 5B- SN2

NONE

Schedule P - Part 5B- SN3

NONE

Schedule P - Part 5C- SN1

NONE

Schedule P - Part 5C- SN2

NONE

Schedule P - Part 5C- SN3

NONE

Schedule P - Part 5D- SN1

NONE

Schedule P - Part 5D- SN2

NONE

Schedule P - Part 5D- SN3

NONE

Schedule P - Part 5E- SN1

NONE

Schedule P - Part 5E- SN2

NONE

Schedule P - Part 5E- SN3

NONE

Schedule P - Part 5F- SN1A

NONE

Schedule P - Part 5F- SN2A

NONE

Schedule P - Part 5F- SN3A

NONE

Schedule P - Part 5F- SN1B

NONE

Schedule P - Part 5F- SN2B

NONE

Schedule P - Part 5F- SN3B

NONE

Schedule P - Part 5H- SN1A

NONE

Schedule P - Part 5H- SN2A

NONE

Schedule P - Part 5H- SN3A

NONE

Schedule P - Part 5H- SN1B

NONE

Schedule P - Part 5H- SN2B

NONE

Schedule P - Part 5H- SN3B

NONE

Schedule P - Part 5R- SN1A

NONE

Schedule P - Part 5R- SN2A

NONE

Schedule P - Part 5R- SN3A

NONE

Schedule P - Part 5R- SN1B

NONE

Schedule P - Part 5R- SN2B

NONE

Schedule P - Part 5R- SN3B

NONE

Schedule P - Part 5T- SN1

NONE

Schedule P - Part 5T- SN2

NONE

Schedule P - Part 5T- SN3

NONE

Schedule P - Part 6C - SN1

NONE

Schedule P - Part 6C - SN2

NONE

Schedule P - Part 6D - SN1

NONE

Schedule P - Part 6D - SN2

NONE

Schedule P - Part 6E - SN1

NONE

Schedule P - Part 6E - SN2

NONE

Schedule P - Part 6H - SN1A

NONE

Schedule P - Part 6H - SN2A

NONE

Schedule P - Part 6H - SN1B

NONE

Schedule P - Part 6H - SN2B

NONE

Schedule P - Part 6M - SN1

NONE

Schedule P - Part 6M - SN2

NONE

Schedule P - Part 6N - SN1

NONE

Schedule P - Part 6N - SN2

NONE

Schedule P - Part 6O - SN1

NONE

Schedule P - Part 6O - SN2

NONE

Schedule P - Part 6R - SN1A

NONE

Schedule P - Part 6R - SN2A

NONE

Schedule P - Part 6R - SN1B

NONE

Schedule P - Part 6R - SN2B

NONE

Schedule P - Part 7A - Section 1

NONE

Schedule P - Part 7A - Section 2

NONE

Schedule P - Part 7A - Section 3

NONE

Schedule P - Part 7A - Section 4

NONE

Schedule P - Part 7A - Section 5

NONE

Schedule P - Part 7B - Section 1

NONE

Schedule P - Part 7B - Section 2

NONE

Schedule P - Part 7B - Section 3

NONE

Schedule P - Part 7B - Section 4

NONE

Schedule P - Part 7B - Section 5

NONE

Schedule P - Part 7B - Section 6

NONE

Schedule P - Part 7B - Section 7

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE P INTERROGATORIES

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

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

Yes [] No [X]

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

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

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

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

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

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

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior		
1.602 2011.....		
1.603 2012.....		
1.604 2013.....		
1.605 2014.....		
1.606 2015.....		
1.607 2016.....		
1.608 2017		
1.609 2018.....		
1.610 2019		
1.611 2020.....		
1.612 Totals	0	0

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

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

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

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

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

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

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

5.1 Fidelity \$

5.2 Surety \$

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

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

Allocated By States and Territories

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

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

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
14060	31-4192970	GRANGE INSURANCE COMPANY.....	(112,000,000)				19,719,953				(92,280,047)	(753,976,370)
40118	41-1405571	TRUSTGARD INSURANCE COMPANY.....									0	138,504,981
10322	31-1432675	GRANGE INDEMNITY INSURANCE COMPANY.....									0	230,127,698
11136	31-1769414	GRANGE INSURANCE COMPANY OF MICHIGAN.....									0	38,866,034
14303	39-0367560	INTEGRITY INSURANCE COMPANY.....						(25,030,994)			(25,030,994)	125,531,744
11982	42-1610213	GRANGE PROPERTY & CASUALTY INSURANCE COM.....									0	120,940,890
12986	41-2236417	INTEGRITY PROPERTY & CASUALTY INSURANCE.....									0	73,646,848
10288	81-3455935	INTEGRITY SELECT INSURANCE COMPANY.....									0	26,358,175
00000	31-1145043	GRANGEAMERICA.....									0	
00000	31-1193707	NORTHVIEW INSURANCE AGENCY.....						(111,865)			(111,865)	
00000	83-2982350	GRANGE MUTUAL HOLDING COMPANY.....									0	
00000	83-2949300	GRANGE HOLDINGS, INC.....	112,000,000					5,422,906			117,422,906	
9999999 Control Totals												
			0	0	0	0	0	0	0	XXX	0	0
												0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	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 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.....
<p>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.</p>		
	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?	.....YES.....
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....YES.....
25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	.....NO.....
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	.....NO.....
27.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	.....NO.....

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

APRIL FILING

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

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

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

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

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

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

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

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

37. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?NO.....

AUGUST FILING

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

Explanation:

12. No business written.

13. No business written.

14. No business written.

15. No business written.

16. No business written.

17. No business written.

18. No business written.

19. No business written.

23. No business written.

25. No business written.

26. No business written.

27. No business written.

28. No business written.

29. No business written.

30. No business written.

31. No business written.

32. No business written.

33. No business written.

35. No business written.

36. No business written.

37. No business written.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Bar Code:

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

OVERFLOW PAGE FOR WRITE-INS

P011 Additional Aggregate Lines for Page 11 Line 24.

*EXEXP - Underwriting and Investment - Part 3 - Expenses

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
2404. Investment Banking Fees.....			30,015	30,015
2497. Summary of remaining write-ins for Line 24 from page 11	0	0	30,015	30,015



SUPPLEMENT FOR THE YEAR 2020 OF THE GRANGE INSURANCE COMPANY OF MICHIGAN

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

For The Year Ended December 31, 2020
(To Be Filed by March 1)

NAIC Group Code 00267

NAIC Company Code 11136

Company Name GRANGE INSURANCE COMPANY OF MICHIGAN

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

1. Monoline Policies

Direct Premiums		Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Written	2 Earned	3 Paid	4 Incurred	5 Paid	6 Incurred	7 Claims Made	8 Occurrence
\$ 0	\$ 75	\$ 0	\$ (8)	\$ 0	\$ (12)	100.0 %	0.0 %

2. Commercial Multiple Peril (CMP) Packaged Policies

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

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

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

2.31 Amount quantified: \$

2.32 Amount estimated using reasonable assumptions: \$

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

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