



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

# ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021  
OF THE CONDITION AND AFFAIRS OF THE

## JAMES RIVER INSURANCE COMPANY

NAIC Group Code 3494 3494 NAIC Company Code 12203 Employer's ID Number 22-2824607  
(Current) (Prior)

Organized under the Laws of Ohio, State of Domicile or Port of Entry OH  
Country of Domicile United States of America

Incorporated/Organized 06/30/1987 Commenced Business 09/11/1987

Statutory Home Office 50 WEST BROAD STREET, SUITE 1330, COLUMBUS, OH, US 43215  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 6641 WEST BROAD STREET, SUITE 300  
(Street and Number)  
RICHMOND, VA, US 23230 804-289-2713  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address P.O. BOX 27648, RICHMOND, VA, US 23261  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 6641 WEST BROAD STREET, SUITE 300  
(Street and Number)  
RICHMOND, VA, US 23230 804-289-2713  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.jamesriverins.com

Statutory Statement Contact PATRICIA AILEEN SELLS, 804-289-2711  
(Name) (Area Code) (Telephone Number)  
Patricia.Sells@jamesriverins.com 804-420-1059  
(E-mail Address) (FAX Number)

### OFFICERS

PRESIDENT AND CEO RICHARD JOHN SCHMITZER SVP AND CFO TIMOTHY SEAN MACALEESE  
TREASURER AND CONTROLLER PATRICIA AILEEN SELLS CHAIRPERSON OF THE BOARD SARAH CASEY DORAN

### OTHER

PAMELA LLULL KNOWLES, SECRETARY DONALD TODD HIERMAN, ASSISTANT SECRETARY

### DIRECTORS OR TRUSTEES

RICHARD JOHN SCHMITZER JOHN GORDON CLARKE SARAH CASEY DORAN  
ANGELA JENKINS BURNETT # TIMOTHY SEAN MACALEESE

State of VIRGINIA SS  
County of HENRICO

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.

Richard John Schmitzer  
President and CEO

Patricia Aileen Sells  
Treasurer and Controller

Timothy Sean MacAleese  
SVP and CFO

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_

- 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.....



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Earthquake, Auto, and various liability lines, ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Earthquake, and Auto liability, ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF California

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied lines, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril (non-liability portion), Commercial multiple peril (liability portion), Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health (b), Credit accident and health (group and individual), Collectively renewable accident and health (b), Non-cancelable accident and health(b), Guaranteed renewable accident and health(b), Non-renewable for stated reasons only (b), Other accident only, Medicare Title XVIII exempt from state taxes or fees, All other accident and health (b), Federal employees health benefits plan premium (b), Workers' compensation, Other Liability - occurrence, Other Liability - claims made, Excess workers' compensation, Products liability, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Aggregate write-ins for other lines of business, TOTALS (a), and DETAILS OF WRITE-INS (3401-3403, 3498, 3499).

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Earthquake, Auto, etc., and a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Earthquake, Auto, etc., and a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Earthquake, Auto, and a TOTALS row.

(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

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**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 3494

BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2021

NAIC Company Code 12203

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	1,913,970	1,696,514	.0	814,050	.0	285,514	448,733	(806)	94,499	149,478	317,567	743
2.1 Allied lines	9,269,198	6,704,482	.0	4,469,953	1,572,874	4,010,524	5,063,967	.0	112,717	987,956	1,448,454	3,599
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1 Commercial multiple peril (non-liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	10,515	10,440	.0	2,995	.0	1,600	6,836	.0	533	2,279	549	4
10. Financial guaranty	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability	948,345	829,494	.0	432,967	78,021	566,426	1,357,429	106,688	133,255	400,643	161,286	368
12. Earthquake	234,490	219,397	.0	90,969	.0	51,010	51,010	.0	17,003	17,003	37,234	91
13. Group accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit accident and health (group and individual)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable accident and health(b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable accident and health(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 accident and health (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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other Liability - occurrence	103,235,419	94,525,806	.0	45,742,944	22,690,477	55,397,624	104,444,546	4,779,346	12,211,252	23,597,227	17,939,516	40,088
17.2 Other Liability - claims made	3,078,438	2,835,962	.0	1,615,163	.0	1,082,938	3,131,617	494,463	608,201	898,392	573,965	1,195
17.3 Excess workers' compensation	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability	13,586,133	13,939,254	.0	7,177,815	1,825,515	6,296,109	15,088,180	753,687	3,155,617	7,908,282	2,437,831	5,276
19.1 Private passenger auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Commercial auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability	5,603,052	5,829,080	.0	1,117,191	4,525,795	3,062,664	15,212,827	745,732	1,076,668	2,465,778	1,019,185	2,176
21.1 Private passenger auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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. TOTALS (a)	137,879,560	126,590,429	0	61,464,047	30,692,682	70,754,409	144,805,145	6,879,110	17,409,745	36,427,038	23,935,586	53,540
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

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

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2021

NAIC Company Code 12203

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	219,140	201,160	.0	80,502	.0	23,609	53,172	.0	7,903	17,724	35,309	.85
2.1 Allied lines	941,791	755,368	.0	433,996	.0	(110,935)	333,927	.0	(36,978)	111,309	130,770	366
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1 Commercial multiple peril (non-liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	4,702	3,543	.0	1,159	.0	2,320	2,320	.0	773	773	823	2
10. Financial guaranty	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability	370,562	385,160	.0	154,006	597,500	397,512	405,440	47,098	58,490	194,225	69,753	144
12. Earthquake	46,543	45,387	.0	18,606	.0	10,552	10,552	.0	3,517	3,517	8,191	18
13. Group accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit accident and health (group and individual)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable accident and health(b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable accident and health(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 accident and health (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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other Liability - occurrence	10,948,442	9,938,367	.0	5,003,724	1,997,518	3,245,957	9,430,251	404,006	768,881	2,169,623	1,805,709	4,251
17.2 Other Liability - claims made	570,552	517,215	.0	291,014	.0	48,673	253,690	.0	19,667	91,832	109,118	222
17.3 Excess workers' compensation	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability	1,743,670	1,554,683	.0	996,785	8,100	303,657	1,775,355	.0	200,552	985,808	265,804	677
19.1 Private passenger auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Commercial auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability	676,639	885,016	.0	279,593	2,601,746	467,952	2,811,359	371,888	411,014	723,652	128,926	263
21.1 Private passenger auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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. TOTALS (a)	15,522,041	14,285,899	0	7,259,385	5,204,864	4,389,297	15,076,066	822,992	1,433,819	4,298,463	2,554,403	6,028
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

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

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Earthquake, and Auto, ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 3494

BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2021

NAIC Company Code 12203

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	95,340	134,590	.0	46,356	0	18,600	35,676	0	6,200	11,859	15,501	37
2.1 Allied lines	324,567	314,536	.0	189,152	0	(38,048)	139,048	0	(12,683)	46,349	49,840	126
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	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	177,714	201,825	.0	71,239	652,500	(34,935)	4,451,708	259,627	(348,258)	1,454,666	35,341	69
12. Earthquake	0	3,070	0	0	0	714	714	0	238	238	0	0
13. Group accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable accident and health(b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable accident and health(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 accident and health (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	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - occurrence	13,281,623	12,881,493	0	7,449,515	438,839	4,966,585	14,311,742	205,429	905,107	2,601,041	1,879,328	5,157
17.2 Other Liability - claims made	830,181	1,095,444	0	502,240	0	7,607	1,207,308	33,707	(86,699)	374,531	152,845	322
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	3,437,814	3,244,598	0	1,541,814	710,503	1,092,001	2,932,359	9,346	411,663	1,703,113	512,064	1,335
19.1 Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability	862,742	764,459	0	338,415	1,773,120	(3,243,380)	0	376,487	(603,288)	0	141,304	335
21.1 Private passenger auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0
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. TOTALS (a)	19,009,981	18,640,015	0	10,138,731	3,574,962	2,769,144	23,078,555	884,596	272,280	6,191,797	2,786,223	7,381
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Earthquake, Auto, etc., and a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2021

NAIC Company Code 12203

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	98,916	104,051	.0	17,268	.0	15,312	27,503	.0	5,104	9,168	17,310	.38
2.1 Allied lines	121,806	141,034	.0	21,690	.0	(15,621)	62,347	.0	(5,207)	20,782	21,316	.47
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1 Commercial multiple peril (non-liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
10. Financial guaranty	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability	44,724	43,311	.0	17,684	.0	9,107	30,411	.0	3,903	13,033	8,414	.17
12. Earthquake	14,878	14,876	.0	11,087	.0	3,459	3,459	.0	1,153	1,153	2,604	.6
13. Group accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit accident and health (group and individual)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable accident and health(b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable accident and health(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 accident and health (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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other Liability - occurrence	1,386,537	1,098,714	.0	561,178	1,700,000	851,107	908,845	20,832	16,280	192,353	224,280	538
17.2 Other Liability - claims made	301,146	285,067	.0	145,474	.0	74,915	159,823	.0	45,727	75,614	56,413	117
17.3 Excess workers' compensation	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability	206,077	201,503	.0	91,074	.0	75,298	190,656	.0	40,637	104,711	33,724	.80
19.1 Private passenger auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Commercial auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability	3,750	3,431	.0	319	172,372	(109,451)	.0	34,897	3,171	.0	881	.1
21.1 Private passenger auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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. TOTALS (a)	2,177,834	1,891,987	0	865,774	1,872,372	904,126	1,383,044	55,729	110,788	416,814	364,942	844
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

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

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Earthquake, and Auto, ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2021

NAIC Company Code 12203

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	657,346	588,326	.0	239,558	0	(62,027)	155,510	.0	29,324	51,837	99,517	255
2.1 Allied lines	2,903,854	2,635,318	.0	1,211,001	739,114	67,428,799	67,876,788	.0	(7,300)	388,334	460,340	1,128
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1 Commercial multiple peril (non-liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
10. Financial guaranty	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability	68,506	52,288	.0	37,714	0	27,463	36,714	.0	11,770	15,735	13,772	27
12. Earthquake	105,739	113,501	.0	40,622	0	26,389	26,389	.0	8,796	8,796	10,366	41
13. Group accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit accident and health (group and individual)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable accident and health(b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable accident and health(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 accident and health (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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other Liability - occurrence	10,341,823	10,212,087	.0	3,977,496	1,235,794	1,825,997	12,228,281	612,433	129,049	2,453,691	1,737,115	4,016
17.2 Other Liability - claims made	236,451	199,390	.0	103,131	0	53,418	97,799	.0	19,780	35,402	46,039	92
17.3 Excess workers' compensation	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability	918,599	897,316	.0	435,968	35,000	244,466	1,045,215	58,931	146,475	551,978	157,657	357
19.1 Private passenger auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Commercial auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability	490,673	410,928	.0	223,652	6,570,503	3,356,119	7,577,925	1,157,817	833,296	1,838,010	114,412	191
21.1 Private passenger auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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. TOTALS (a)	15,722,991	15,109,154	0	6,269,142	8,580,411	72,900,624	89,044,621	1,829,181	1,171,190	5,343,783	2,639,218	6,107
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2021

NAIC Company Code 12203

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	9,262	3,295	.0	5,967	.0	(97)	871	.0	(32)	290	1,663	4
2.1 Allied lines	37,215	28,455	.0	33,810	.0	7,080	12,579	.0	2,360	4,193	11,137	14
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1 Commercial multiple peril (non-liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
10. Financial guaranty	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability	84,566	58,282	.0	48,751	.0	22,301	40,923	.0	9,558	17,538	16,418	33
12. Earthquake	3,270	3,270	.0	.0	.0	760	760	.0	253	253	572	1
13. Group accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit accident and health (group and individual)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable accident and health(b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable accident and health(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 accident and health (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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other Liability - occurrence	447,615	428,907	.0	189,929	.0	78,356	352,445	.0	24,259	75,089	66,976	174
17.2 Other Liability - claims made	184,284	157,214	.0	94,563	.0	25,363	77,112	.0	9,698	27,913	35,058	72
17.3 Excess workers' compensation	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability	226,569	194,958	.0	97,956	.0	17,520	86,256	.0	12,152	52,510	41,103	88
19.1 Private passenger auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Commercial auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability	.0	.0	.0	.0	9,925	(36,399)	.0	7,158	(15,355)	.0	.0	.0
21.1 Private passenger auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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. TOTALS (a)	992,781	874,381	0	470,976	9,925	114,884	570,946	7,158	42,893	177,786	172,927	386
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

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

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Earthquake, Auto, etc., and a TOTALS row.

(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

19.MI



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied lines, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril (non-liability portion), Commercial multiple peril (liability portion), Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health (b), Credit accident and health (group and individual), Collectively renewable accident and health (b), Non-cancelable accident and health(b), Guaranteed renewable accident and health(b), Non-renewable for stated reasons only (b), Other accident only, Medicare Title XVIII exempt from state taxes or fees, All other accident and health (b), Federal employees health benefits plan premium (b), Workers' compensation, Other Liability - occurrence, Other Liability - claims made, Excess workers' compensation, Products liability, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Aggregate write-ins for other lines of business, TOTALS (a), DETAILS OF WRITE-INS, 3401, 3402, 3403, 3498, 3499.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

19 MS



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 3494

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2021

NAIC Company Code 12203

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	199,421	189,266	.0	70,047	.0	33,972	50,028	.0	11,324	16,676	32,066	.77
2.1 Allied lines	416,106	322,106	.0	309,288	.0	20,803	142,394	.0	6,934	47,465	58,757	162
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1 Commercial multiple peril (non-liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	(130)	.0	.0	(43)	.0	.0	.0
10. Financial guaranty	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability	133,011	160,764	.0	75,140	88,310	62,203	412,881	3,804	(20,161)	115,958	24,154	52
12. Earthquake	153,074	133,337	.0	74,540	.0	31,001	31,001	.0	10,334	10,334	21,079	59
13. Group accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit accident and health (group and individual)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable accident and health(b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable accident and health(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 accident and health (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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other Liability - occurrence	7,160,574	6,480,755	.0	3,745,209	516,799	6,060,093	14,847,228	158,535	493,789	1,587,152	1,210,108	2,781
17.2 Other Liability - claims made	232,278	279,990	.0	107,347	5,000	(164,873)	137,333	1,820	(54,842)	49,712	43,351	90
17.3 Excess workers' compensation	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability	2,378,858	2,224,300	.0	1,598,607	10,000	1,386,411	3,312,965	11,154	883,222	1,790,445	416,320	924
19.1 Private passenger auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Commercial auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability	1,293,997	1,199,324	.0	483,512	634,798	6,582,039	8,907,135	487,756	1,926,848	1,827,543	193,244	502
21.1 Private passenger auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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. TOTALS (a)	11,967,319	10,989,842	0	6,463,690	1,254,907	14,011,519	27,840,965	663,069	3,257,405	5,445,285	1,999,079	4,647
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

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

19 MO



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril (non-liability and liability portions), Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health (b), Credit accident and health (group and individual), Collectively renewable accident and health (b), Non-cancelable accident and health(b), Guaranteed renewable accident and health(b), Non-renewable for stated reasons only (b), Other accident only, Medicare Title XVIII exempt from state taxes or fees, All other accident and health (b), Federal employees health benefits plan premium (b), Workers' compensation, Other Liability - occurrence, Other Liability - claims made, Excess workers' compensation, Products liability, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Aggregate write-ins for other lines of business, TOTALS (a), and DETAILS OF WRITE-INS (3401-3403, 3498, 3499).

(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

19 MT



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied lines, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril (non-liability portion), Commercial multiple peril (liability portion), Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health (b), Credit accident and health (group and individual), Collectively renewable accident and health (b), Non-cancelable accident and health(b), Guaranteed renewable accident and health(b), Non-renewable for stated reasons only (b), Other accident only, Medicare Title XVIII exempt from state taxes or fees, All other accident and health (b), Federal employees health benefits plan premium (b), Workers' compensation, Other Liability - occurrence, Other Liability - claims made, Excess workers' compensation, Products liability, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Aggregate write-ins for other lines of business, TOTALS (a), DETAILS OF WRITE-INS, 3401, 3402, 3403, 3498, 3499.

(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

19 NIE



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2021

NAIC Company Code 12203

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	5,967	8,171	0	0	0	(2,716)	2,160	0	(905)	720	1,044	2
2.1 Allied lines	9,491	9,984	0	24,200	0	(43,507)	4,414	0	(14,502)	1,471	1,276	4
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	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	67,200	59,374	0	33,268	0	14,825	41,689	0	6,354	17,867	12,899	26
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable accident and health(b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable accident and health(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 accident and health (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	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - occurrence	4,907,532	4,616,129	0	2,163,434	991,539	3,095,777	5,222,710	317,513	548,179	1,087,476	837,630	1,906
17.2 Other Liability - claims made	428,588	434,960	0	143,174	93,253	(185,132)	288,347	21,350	16,187	159,755	77,888	166
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	1,862,170	1,587,551	0	792,229	86,000	1,190,590	2,742,306	101,072	217,355	1,153,435	306,726	723
19.1 Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability	89,599	62,563	0	27,376	8,447,970	(11,342,435)	0	1,667,921	(1,176,930)	0	17,579	35
21.1 Private passenger auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0
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. TOTALS (a)	7,370,547	6,778,732	0	3,183,681	9,618,762	(7,272,598)	8,301,626	2,107,856	(404,262)	2,420,724	1,255,042	2,862
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

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

19 NV



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

19 NH



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

19 NJ



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

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

NAIC Group Code 3494

BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2021

NAIC Company Code 12203

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied lines	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	67,421	65,971	0	31,351	0	11,290	46,322	0	4,839	19,852	13,612	26
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable accident and health(b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable accident and health(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 accident and health (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	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - occurrence	1,018,545	1,112,092	0	695,135	2,775	217,961	938,939	13	30,540	194,695	149,914	396
17.2 Other Liability - claims made	91,695	92,160	0	25,342	0	7,574	45,204	0	3,117	16,363	16,860	36
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	266,715	254,764	0	133,598	0	(46,446)	195,803	0	(24,355)	109,905	39,791	104
19.1 Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability	3,500	3,366	0	134	80,215	48,739	37,485	6,869	207,226	207,923	823	1
21.1 Private passenger auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0
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. TOTALS (a)	1,447,876	1,528,353	0	885,560	82,990	239,118	1,263,753	6,882	221,367	548,738	221,000	563
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

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

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

19 NM



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF New York

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Earthquake, Auto, and a TOTALS row.

(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

19.NY



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

19 NC



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2021

NAIC Company Code 12203

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	141,417	99,294	.0	54,972	.0	26,025	26,246	.0	8,675	8,749	25,349	.55
2.1 Allied lines	221,795	145,895	.0	91,607	.0	63,242	64,496	.0	21,081	21,499	39,731	.86
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1 Commercial multiple peril (non-liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
10. Financial guaranty	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability	672,000	394,102	.0	290,668	.0	276,314	276,719	.0	118,420	118,594	77,818	261
12. Earthquake	7,068	3,506	.0	3,562	.0	815	815	.0	272	272	1,237	3
13. Group accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit accident and health (group and individual)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable accident and health(b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable accident and health(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 accident and health (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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other Liability - occurrence	10,616,288	5,479,402	.0	5,326,104	.0	4,782,786	4,800,587	(91)	960,154	964,283	1,508,146	4,122
17.2 Other Liability - claims made	268,630	125,898	.0	151,462	.0	61,287	61,752	.0	22,190	22,353	50,293	104
17.3 Excess workers' compensation	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability	283,093	182,509	.0	128,937	.0	102,267	103,485	.0	59,645	60,456	49,818	110
19.1 Private passenger auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Commercial auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability	1,311,267	450,911	.0	860,356	.0	.0	.0	.0	.0	.0	232,497	509
21.1 Private passenger auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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. TOTALS (a)	13,521,558	6,881,517	0	6,907,688	0	5,312,736	5,334,100	(91)	1,190,437	1,196,206	1,984,889	5,250
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

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

NAIC Group Code 3494

BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2021

NAIC Company Code 12203

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	315,844	253,407	.0	166,648	.0	3,343,090	3,366,982	.0	14,397	22,327	45,480	123
2.1 Allied lines	977,404	880,961	.0	494,770	.0	3,946	389,449	.0	1,315	129,816	153,959	380
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1 Commercial multiple peril (non-liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	726	.0	.0	.0	(412)	476	.0	(137)	159	.0	.0
10. Financial guaranty	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability	403,079	385,804	.0	190,924	.0	144,683	420,892	5,493	65,892	196,576	70,382	157
12. Earthquake	7,772	9,618	.0	3,371	.0	2,236	2,236	.0	745	745	1,240	3
13. Group accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit accident and health (group and individual)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable accident and health(b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable accident and health(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 accident and health (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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other Liability - occurrence	3,726,328	3,427,515	.0	1,977,785	178,059	1,153,423	3,429,593	42,784	250,028	827,000	628,787	1,447
17.2 Other Liability - claims made	704,393	677,615	.0	326,306	25,629	128,056	337,916	5,184	97,509	175,127	113,013	274
17.3 Excess workers' compensation	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability	897,109	882,508	.0	424,687	.0	75,447	490,028	.0	54,327	287,179	161,026	348
19.1 Private passenger auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Commercial auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability	592,964	313,463	.0	288,557	95,134	(968,137)	750	115,426	(37,147)	.0	139,347	230
21.1 Private passenger auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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. TOTALS (a)	7,624,893	6,831,617	0	3,873,048	298,822	3,882,332	8,438,322	168,887	446,929	1,638,929	1,313,234	2,962
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

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

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

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**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 3494

BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2021

NAIC Company Code 12203

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	18,430	50,831	.0	13,029	.0	(9,554)	13,436	.0	(3,185)	4,479	3,321	.7
2.1 Allied lines	100,721	122,832	.0	51,468	.0	(37,090)	54,301	.0	(12,363)	18,100	16,466	.39
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1 Commercial multiple peril (non-liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
10. Financial guaranty	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability	223,036	175,349	.0	112,530	.0	67,960	123,121	.0	29,126	52,766	44,708	.87
12. Earthquake	413,202	400,725	.0	230,450	.0	93,169	93,169	.0	31,056	31,056	46,429	160
13. Group accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit accident and health (group and individual)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable accident and health(b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable accident and health(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 accident and health (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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other Liability - occurrence	4,488,120	4,320,087	.0	2,127,501	407,371	1,858,545	4,416,893	69,641	228,292	894,300	736,289	1,743
17.2 Other Liability - claims made	717,262	675,984	.0	244,380	.0	143,670	332,565	.0	53,532	120,021	136,625	279
17.3 Excess workers' compensation	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability	1,377,965	1,362,350	.0	557,255	403,167	633,716	1,668,954	175,544	396,494	951,502	242,746	535
19.1 Private passenger auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Commercial auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability	162,643	160,441	.0	3,490	357,304	(691,082)	374,848	128,338	187,708	286,124	29,730	.63
21.1 Private passenger auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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. TOTALS (a)	7,501,379	7,268,599	0	3,340,103	1,167,842	2,059,334	7,077,287	373,523	910,680	2,358,348	1,256,314	2,913
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

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

19 OR



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

19.PA



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril (non-liability and liability portions), Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health (b), Credit accident and health (group and individual), Collectively renewable accident and health (b), Non-cancelable accident and health(b), Guaranteed renewable accident and health(b), Non-renewable for stated reasons only (b), Other accident only, Medicare Title XVIII exempt from state taxes or fees, All other accident and health (b), Federal employees health benefits plan premium (b), Workers' compensation, Other Liability - occurrence, Other Liability - claims made, Excess workers' compensation, Products liability, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Aggregate write-ins for other lines of business, TOTALS (a), DETAILS OF WRITE-INS (3401-3403, 3498, 3499).

(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

19.RI



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2021

NAIC Company Code 12203

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	195,431	179,497	.0	92,208	0	31,429	47,446	0	10,510	15,815	32,136	76
2.1 Allied lines	1,467,442	1,143,076	.0	681,768	(393,750)	(261,478)	505,423	(33,750)	10,341	168,441	235,426	570
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	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion)	0	0	0	0	0	0	0	0	0	0	0	0
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	492	288	0	204	0	189	189	0	63	63	86	0
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	156,692	163,124	0	54,649	400,000	477,108	289,539	25,922	40,157	95,560	31,197	61
12. Earthquake	125,743	114,255	0	54,054	0	26,564	26,564	0	8,855	8,855	20,417	49
13. Group accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable accident and health(b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable accident and health(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 accident and health (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	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - occurrence	3,128,333	2,998,522	0	1,549,267	380,647	1,757,293	4,333,399	101,545	217,076	699,779	503,394	1,215
17.2 Other Liability - claims made	241,695	220,229	0	110,366	15,000	(3,259)	108,020	8,809	(5,624)	39,102	48,344	94
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	85,293	118,945	0	32,544	1,000,250	958,162	116,939	14,719	(19,014)	63,995	14,951	33
19.1 Private passenger auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability	563,385	570,519	0	106,077	1,771,022	(636,561)	1,311,968	157,384	(347,481)	0	128,783	219
21.1 Private passenger auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0
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. TOTALS (a)	5,964,506	5,508,455	0	2,681,137	3,173,169	2,349,447	6,739,487	274,629	(85,117)	1,091,610	1,014,734	2,317
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

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

19 SC



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril, Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health, Credit accident and health, Collectively renewable accident and health, Non-cancelable accident and health, Guaranteed renewable accident and health, Non-renewable for stated reasons only, Other accident only, Medicare Title XVIII exempt from state taxes or fees, All other accident and health, Federal employees health benefits plan premium, Workers' compensation, Other Liability - occurrence, Other Liability - claims made, Excess workers' compensation, Products liability, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Aggregate write-ins for other lines of business, TOTALS (a), DETAILS OF WRITE-INS, 3401, 3402, 3403, 3498, 3499.

(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

19 SD



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril, Commercial multiple peril, etc., ending with a TOTALS row.

(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

19.TN



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

(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

19.TX



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Earthquake, and Auto, ending with a TOTALS row.

(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

19 UT



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied lines, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril (non-liability and liability portions), Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health, Credit accident and health, Collectively renewable accident and health, Non-cancelable accident and health, Guaranteed renewable accident and health, Non-renewable for stated reasons only, Other accident only, Medicare Title XVIII exempt from state taxes or fees, All other accident and health, Federal employees health benefits plan premium, Workers' compensation, Other Liability - occurrence and claims made, Excess workers' compensation, Products liability, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Aggregate write-ins for other lines of business, and TOTALS (a). Includes a section for DETAILS OF WRITE-INS (3401-3403, 3498, 3499).

(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

19 VT



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Earthquake, Auto, and a TOTALS row.

(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

19 VA



**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 3494

BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2021

NAIC Company Code 12203

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	176,550	202,733	.0	94,939	.0	35,742	53,588	.0	11,914	17,863	28,689	69
2.1 Allied lines	626,281	730,364	.0	416,453	.0	(16,909)	322,874	.0	(5,636)	107,625	97,532	243
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1 Commercial multiple peril (non-liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
10. Financial guaranty	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability	834,677	699,493	.0	423,017	140,000	450,339	566,150	70,180	208,390	260,492	167,034	324
12. Earthquake	1,468,361	1,233,280	.0	912,507	.0	286,737	286,737	.0	95,579	95,579	209,468	570
13. Group accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit accident and health (group and individual)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable accident and health (b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable accident and health(b)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable accident and health(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 accident and health (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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17.1 Other Liability - occurrence	11,046,767	8,983,369	.0	5,537,645	2,271,269	4,326,623	9,558,612	464,123	804,958	1,924,108	1,843,818	4,290
17.2 Other Liability - claims made	3,036,702	2,201,408	.0	1,757,434	29,554	429,865	1,109,874	42,906	240,999	447,855	574,038	1,179
17.3 Excess workers' compensation	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability	4,870,572	4,557,305	.0	2,325,901	384,662	1,276,855	4,750,778	147,313	523,629	2,490,295	865,853	1,891
19.1 Private passenger auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Commercial auto no-fault (personal injury protection)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability	718,282	662,911	.0	263,568	3,013,517	1,397,766	3,561,055	557,467	245,615	480,915	131,518	279
21.1 Private passenger auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial auto physical damage	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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. TOTALS (a)	22,778,192	19,270,863	0	11,731,464	5,839,002	8,187,018	20,209,668	1,281,989	2,125,448	5,824,732	3,917,950	8,845
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

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

19/W/A



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril, Commercial multiple peril, and a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Earthquake, and Auto, ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Federal flood, etc., ending with a TOTALS row.

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2021

NAIC Company Code 12203

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied lines, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril (non-liability portion), Commercial multiple peril (liability portion), Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health (b), Credit accident and health (group and individual), Collectively renewable accident and health (b), Non-cancelable accident and health(b), Guaranteed renewable accident and health(b), Non-renewable for stated reasons only (b), Other accident only, Medicare Title XVIII exempt from state taxes or fees, All other accident and health (b), Federal employees health benefits plan premium (b), Workers' compensation, Other Liability - occurrence, Other Liability - claims made, Excess workers' compensation, Products liability, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Aggregate write-ins for other lines of business, TOTALS (a), and DETAILS OF WRITE-INS (3401-3403, 3498, 3499).

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**SCHEDULE F - PART 1**

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8 Cols. 6 + 7	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									
42-1019055	31925	Falls Lake National Insurance Co	OH	96,917	56,038	158,387	214,425	0	23,349	45,899	408,914	0	0	0	
0199999. Affiliates - U.S. Intercompany Pooling					96,917	56,038	158,387	214,425	0	23,349	45,899	408,914	0	0	0
0499999. Total - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0
0799999. Total - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0
0899999. Total - Affiliates					96,917	56,038	158,387	214,425	0	23,349	45,899	408,914	0	0	0
1299999. Total - Pools and Associations					0	0	0	0	0	0	0	0	0	0	0
9999999 Totals					96,917	56,038	158,387	214,425	0	23,349	45,899	408,914	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**SCHEDULE F - PART 2**

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

1 ID Number	2 NAIC Com- pany Code	3  Name of Company	4  Date of Contract	5  Original Premium	6  Reinsurance Premium
<b>NONE</b>					

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable 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 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
42-1019055	31925	Falls Lake Natl Ins Co	OH		157,753	79,617	25,856	237,510	35,234	179,047	104,936	74,562	0	736,762	0	48,167	0	688,595	688,595	
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling					157,753	79,617	25,856	237,510	35,234	179,047	104,936	74,562	0	736,762	0	48,167	0	688,595	688,595	
0499999. Total Authorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0899999. Total Authorized - Affiliates					157,753	79,617	25,856	237,510	35,234	179,047	104,936	74,562	0	736,762	0	48,167	0	688,595	688,595	
95-4387273	19489	Allied World Assur Co US Inc	DE		969	0	0	401	4	372	146	317	0	1,240	0	96	0	1,144	0	
06-1430254	10348	Arch Reins Co	DE		6,289	17	4	1,234	147	1,870	631	3,493	0	7,396	0	87	0	6,579	0	
51-0434766	20370	Axis Reins Co	NY		3,088	0	0	150	1	1,319	148	1,481	0	3,099	0	346	0	2,753	0	
47-0574325	32603	Berkley Ins Co	DE		98,317	3,044	755	28,016	437	84,575	10,657	43,149	0	170,633	0	10,030	0	160,603	0	
31-0542366	10677	The Cincinnati Ins Co	OH		0	86	145	2,401	239	1,571	524	0	0	4,966	0	0	0	4,966	0	
42-0234980	21415	Employers Mut Cas Co	IA		52	0	0	0	0	21	7	24	0	52	0	1	0	51	0	
36-2950161	35378	Evanston Ins Co	IL		0	0	0	0	0	20	7	0	0	27	0	0	0	27	0	
22-2005057	26921	Everest Reins Co	DE		6,597	0	0	14,108	663	2,104	705	3,073	0	20,653	0	1,205	0	19,448	0	
13-2673100	22039	General Reins Corp	DE		5,912	1,441	33	9,254	224	1,967	668	3,131	0	16,718	0	843	0	15,875	0	
95-2769232	27847	Insurance Co of the West	CA		3,143	0	0	150	1	1,341	150	1,523	0	3,165	0	358	0	2,807	0	
13-4924125	10227	Munich Reins Amer Inc	DE		885	192	5	0	0	548	154	612	0	1,511	0	250	0	1,261	0	
47-0355979	20087	National Ind Co	NE		182	0	0	0	0	54	18	59	0	131	0	1	0	130	0	
47-0698507	23680	Odyssey Reins Co	CT		1,325	0	0	0	0	193	30	953	0	1,176	0	211	0	965	0	
13-3031176	38636	Partner Reins Co of the US	NY		37	0	0	0	0	10	3	18	0	31	0	0	0	31	0	
23-1641984	10219	QBE Reins Corp	PA		238	0	59	1,470	5	708	104	0	0	2,346	0	1	0	2,345	0	
75-1444207	30058	SCOR Reins Co	NY		1,102	299	45	1,957	41	5,370	609	3	0	8,324	0	7	0	8,317	0	
13-2997499	38776	Sirius Amer Ins Co	NY		8,766	0	0	0	0	987	111	6,605	0	7,703	0	1,443	0	6,260	0	
13-1675535	25364	Swiss Reins Amer Corp	NY		81,973	2,962	1,938	26,509	479	71,983	8,533	30,571	0	142,975	0	9,421	0	133,554	0	
13-2918573	42439	Toa Re Ins Co of Amer	DE		13,085	466	74	4,108	68	13,922	1,564	4,712	0	24,914	0	1,132	0	23,782	0	
13-5616275	19453	Transatlantic Reins Co	NY		152	0	0	0	0	64	21	113	0	198	0	1	0	197	0	
06-0566050	25658	Travelers Ind Co	CT		33	0	0	0	0	15	5	16	0	36	0	7	0	29	0	
13-1290712	20583	XL Reins Amer Inc	NY		1,925	0	0	0	0	422	105	1,292	0	1,819	0	285	0	1,534	0	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					234,070	8,507	3,058	89,758	2,309	189,436	24,900	101,145	0	419,113	0	26,455	0	392,658	0	
AA-9991159	00000	Michigan Catastrophic Claims Assn	MI		0	3,620	0	2,337	0	558	186	0	0	6,701	0	0	0	6,701	0	
1099999. Total Authorized - Pools - Mandatory Pools					0	3,620	0	2,337	0	558	186	0	0	6,701	0	0	0	6,701	0	
AA-1120337		Aspen Ins UK Ltd	GBR		12,148	561	143	1,595	65	5,649	991	4,835	0	13,839	0	941	0	12,898	0	
AA-3194139		Axis Specialty Ltd	BMU		97	0	0	0	0	34	11	0	0	45	0	(1)	0	46	0	
AA-3191435		Conduit Reins Ltd	BMU		2,527	0	0	0	0	311	35	1,906	0	2,252	0	422	0	1,830	0	
AA-1340125		Hannover Rueck SE	DEU		14,216	462	36	2,766	46	10,087	1,328	6,626	0	21,351	0	1,488	0	19,863	0	
AA-1126033		Lloyd's Syndicate Number 33	GBR		2	2	1	1	0	23	9	0	0	36	0	44	0	(8)	0	
AA-1126382		Lloyd's Syndicate Number 382	GBR		0	0	0	0	0	31	10	0	0	41	0	0	0	41	0	
AA-1126435		Lloyd's Syndicate Number 435	GBR		754	0	0	0	0	39	9	0	0	48	0	(100)	0	148	0	
AA-1126623		Lloyd's Syndicate Number 623	GBR		83	0	0	0	0	17	6	0	0	23	0	(20)	0	43	0	
AA-1126780		Lloyd's Syndicate Number 780	GBR		38	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1127084		Lloyd's Syndicate Number 1084	GBR		2,221	714	108	780	60	1,606	649	368	0	4,285	0	972	0	3,313	0	
AA-1127200		Lloyd's Syndicate Number 1200	GBR		0	0	0	0	0	2	1	0	0	3	0	0	0	3	0	
AA-1120085		Lloyd's Syndicate Number 1274	GBR		0	0	0	0	0	1	0	0	0	1	0	0	0	1	0	
AA-1127414		Lloyd's Syndicate Number 1414	GBR		802	204	4	307	10	441	175	229	0	1,370	0	269	0	1,101	0	
AA-1120102		Lloyd's Syndicate Number 1458	GBR		(213)	1,376	102	12,427	786	4,093	1,377	2	0	20,163	0	38	0	20,125	0	
AA-1120198		Lloyd's Syndicate Number 1618	GBR		225	0	0	0	0	0	0	0	0	0	0	(113)	0	113	0	
AA-1120156		Lloyd's Syndicate Number 1686	GBR		401	0	0	0	0	89	31	160	0	280	0	(153)	0	433	0	
AA-1120171		Lloyd's Syndicate Number 1856	GBR		6,101	379	42	10,388	381	1,734	578	2,681	0	16,183	0	821	0	15,362	0	
AA-1127861		Lloyd's Syndicate Number 1861	GBR		24	0	0	0	0	8	3	0	0	11	0	5	0	6	0	
AA-1120124		Lloyd's Syndicate Number 1945	GBR		1,795	3	1	602	7	668	261	571	0	2,113	0	80	0	2,033	0	
AA-1120084		Lloyd's Syndicate Number 1955	GBR		1,362	255	27	484	19	728	286	330	0	2,129	0	308	0	1,821	0	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable 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 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
AA-1120103		Lloyd's Syndicate Number 1967	GBR		.0	.0	.0	.0	.0	.7	.3	.0	.0	.10	.0	.0	.0	.10	.0	
AA-1120106		Lloyd's Syndicate Number 1969	GBR		.14	.0	.0	.0	.0	.7	.2	.0	.0	.9	.0	.3	.0	.6	.0	
AA-1120161		Lloyd's Syndicate Number 1980	GBR		.12	.0	.0	.0	.0	.3	.1	.0	.0	.4	.0	.0	.4	.0		
AA-1128001		Lloyd's Syndicate Number 2001	GBR		.74	.0	.0	.0	.0	.11	.4	.54	.0	.69	.0	(.51)	.120	.0		
AA-1128003		Lloyd's Syndicate Number 2003	GBR		3,245	929	109	1,780	.71	1,779	.718	636	.0	6,022	.0	1,559	4,463	.0		
AA-1120071		Lloyd's Syndicate Number 2007	GBR		.0	.0	.0	.0	.0	.17	.6	.0	.0	.23	.0	.0	.23	.0		
AA-1128488		Lloyd's Syndicate Number 2488	GBR		.0	.0	.0	.0	.0	.2	.1	.0	.0	.3	.0	.0	.3	.0		
AA-1128623		Lloyd's Syndicate Number 2623	GBR		.162	.0	.0	.0	.0	.35	.12	.4	.0	.51	.0	(.28)	.79	.0		
AA-1120182		Lloyd's Syndicate Number 2689	GBR		.11	.0	.0	.0	.0	.2	.1	.0	.0	.3	.0	(.3)	.6	.0		
AA-1128987		Lloyd's Syndicate Number 2987	GBR		2,703	253	(38)	1,033	.65	1,066	.421	723	.0	3,523	.0	674	2,849	.0		
AA-1129000		Lloyd's Syndicate Number 3000	GBR		.75	.0	.0	.0	.0	.46	.16	.0	.0	.62	.0	.15	.47	.0		
AA-1120113		Lloyd's Syndicate Number 3334	GBR		.90	.0	.0	.0	.0	.22	.7	.0	.0	.29	.0	(.5)	.34	.0		
AA-1120116		Lloyd's Syndicate Number 3902	GBR		.3	.0	.0	.0	.0	.7	.2	.0	.0	.9	.0	.0	.9	.0		
AA-1120075		Lloyd's Syndicate Number 4020	GBR		.227	.198	.13	.59	.17	.260	.104	.0	.0	.651	.0	.174	.477	.0		
AA-1120067		Lloyd's Syndicate Number 4242	GBR		.30	.0	.0	.0	.0	.6	.2	.0	.0	.8	.0	(.8)	.16	.0		
AA-1126004		Lloyd's Syndicate Number 4444	GBR		.727	.58	.1	.201	.2	.306	.116	.190	.0	.874	.0	.67	.807	.0		
AA-1126006		Lloyd's Syndicate Number 4472	GBR		5,444	1,231	.224	4,371	.144	7,816	1,518	1,016	.0	16,320	.0	1,040	15,280	.0		
AA-1120048		Lloyd's Syndicate Number 5820	GBR		.0	.0	.0	.0	.0	.1	.0	.0	.0	.1	.0	.0	.1	.0		
AA-1840000		Mapfre Re Compania de Reaseguros SA	ESP		.0	.0	.0	.0	.0	.13	.4	.0	.0	.17	.0	.0	.17	.0		
AA-3190686		Partner Reins Co Ltd	BMU		.10	.0	.0	.0	.0	.34	.11	.8	.0	.53	.0	.0	.53	.0		
1299999. Total Authorized - Other Non-U.S. Insurers					55,410	6,625	773	36,794	1,673	37,001	8,709	20,339	0	111,914	0	8,438	103,476	0		
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					447,233	98,369	29,687	366,399	39,216	406,042	138,731	196,046	0	1,274,490	0	83,060	1,191,430	688,595		
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0		
AA-3191387	.00000	Carolina Re Ltd	BMU		348,316	16,644	5,062	110,435	23,897	225,561	82,407	169,214	0	633,220	0	64,997	568,223	0		
AA-3190958	.00000	JRG Reins Co Ltd	BMU		.0	4,914	1,906	56,032	15,925	32,481	12,439	30	0	123,727	0	.0	123,727	0		
2099999. Total Unauthorized - Affiliates - Other (Non-U.S.) - Other					348,316	21,558	6,968	166,467	39,822	258,042	94,846	169,244	0	756,947	0	64,997	691,950	0		
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					348,316	21,558	6,968	166,467	39,822	258,042	94,846	169,244	0	756,947	0	64,997	691,950	0		
2299999. Total Unauthorized - Affiliates					348,316	21,558	6,968	166,467	39,822	258,042	94,846	169,244	0	756,947	0	64,997	691,950	0		
46-3590210	.15615	Pacific Valley Insurance Company	HI		.0	.0	.18	.398	.74	.47	.16	.0	.0	.553	.0	.0	.553	0		
2399999. Total Unauthorized - Other U.S. Unaffiliated Insurers					0	0	18	398	74	47	16	0	0	553	0	0	553	0		
AA-1580015	.00000	Aioi Nissay Dowa Ins Co Ltd	JPN		.0	4,667	.758	24,009	2,387	15,709	5,236	.0	.0	52,766	.0	.0	52,766	0		
AA-3191352	.00000	Ascot Reins Co Ltd	BMU		.447	.0	.0	.15	.0	.779	.448	.90	.0	1,332	.0	.55	1,277	0		
AA-1120191	.00000	Convex Ins UK Ltd	GBR		.450	.0	.0	.0	.0	.71	.27	.150	.0	248	.0	(.169)	417	0		
AA-3191400	.00000	Convex Re LTD	BMU		.244	.0	.0	.0	.0	.71	.27	.150	.0	248	.0	(.169)	417	0		
AA-3190060	.00000	Hannover Re (Bermuda) Ltd	BMU		.176	.0	.0	.0	.0	.81	.27	.10	.0	118	.0	(.3)	121	0		
AA-1460019	.00000	MS Amlin AG	CHE		.146	.0	.0	.0	.0	.38	.13	.54	.0	105	.0	(.58)	163	0		
AA-5320039	.00000	Peak Reins Co Ltd	HKG		13,969	.0	.1	.332	.5	3,875	.942	8,084	.0	13,239	.0	1,216	12,023	0		
AA-3191321	.00000	Sirius Bermuda Ins Co Ltd	BMU		2,402	.350	.36	2,826	.57	9,739	1,380	.5	.0	14,393	.0	.4	14,389	0		
AA-1440076	.00000	Siriuspoint Intl Ins Corp (Publ)	SWE		13,206	.0	.2	1,111	.12	8,677	1,423	3,053	.0	14,278	.0	.761	13,517	0		
2699999. Total Unauthorized - Other Non-U.S. Insurers					31,040	5,017	797	28,293	2,461	39,040	9,523	11,596	0	96,727	0	1,637	95,090	0		
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					379,356	26,575	7,783	195,158	42,357	297,129	104,385	180,840	0	854,227	0	66,634	787,593	0		
3299999. Total Certified - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0		
3599999. Total Certified - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0		
3699999. Total Certified - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0		
CR-1460023	.00000	RenaissanceRe Europe AG	CHE		11,802	.0	.3	17,257	.537	1,373	.458	5,361	.0	24,989	.0	1,610	23,379	0		
4099999. Total Certified - Other Non-U.S. Insurers					11,802	0	3	17,257	537	1,373	458	5,361	0	24,989	0	1,610	23,379	0		

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**SCHEDULE F - PART 3**

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On							16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable 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 Columns 7 through 14 Totals			17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					11,802	0	3	17,257	537	1,373	458	5,361	0	24,989	0	1,610	0	23,379	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5099999. Total Reciprocal Jurisdiction - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					0	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)					838,391	124,944	37,473	578,814	82,110	704,544	243,574	382,247	0	2,153,706	0	151,304	0	2,002,402	688,595
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9999999 Totals					838,391	124,944	37,473	578,814	82,110	704,544	243,574	382,247	0	2,153,706	0	151,304	0	2,002,402	688,595

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	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 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	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 on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
42-1019055	Falls Lake Natl Ins Co	0	0		0	736,762	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	XXX	0	736,762	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
0899999	Total Authorized - Affiliates	0	0	XXX	0	736,762	0	0	0	0	0	0	0	0	0	XXX	0
95-4387273	Allied World Assur Co US Inc	0	0		0	96	1,144	0	1,240	1,488	96	1,392	0	1,392	3	0	67
06-1430254	Arch Reins Co	0	0		0	817	6,579	0	7,396	8,875	817	8,058	0	8,058	2	0	330
51-0434766	Axis Reins Co	0	0		0	346	2,753	0	3,099	3,719	346	3,373	0	3,373	3	0	162
47-0574325	Berkley Ins Co	0	0		0	10,030	160,603	0	170,633	204,760	10,030	194,730	0	194,730	2	0	7,984
31-0542366	The Cincinnati Ins Co	0	0		0	0	4,966	0	4,966	5,959	0	5,959	0	5,959	2	0	244
42-0234980	Employers Mut Cas Co	0	0		0	1	51	0	52	62	1	61	0	61	3	0	3
36-2950161	Evanston Ins Co	0	0		0	0	27	0	27	32	0	32	0	32	3	0	2
22-2005057	Everest Reins Co	0	0		0	1,205	19,448	0	20,653	24,784	1,205	23,579	0	23,579	2	0	967
13-2673100	General Reins Corp	0	0		0	843	15,875	0	16,718	20,062	843	19,219	0	19,219	1	0	692
95-2769232	Insurance Co of the West	0	0		0	358	2,807	0	3,165	3,798	358	3,440	0	3,440	3	0	165
13-4924125	Munich Reins Amer Inc	0	0		0	250	1,261	0	1,511	1,813	250	1,563	0	1,563	2	0	64
47-0355979	National Ind Co	0	0		0	1	130	0	131	157	1	156	0	156	1	0	6
47-0698507	Odyssey Reins Co	0	0		0	211	965	0	1,176	1,411	211	1,200	0	1,200	3	0	58
13-3031176	Partner Reins Co of the US	0	0		0	0	31	0	31	37	0	37	0	37	2	0	2
23-1641984	QBE Reins Corp	0	0		0	1	2,345	0	2,346	2,815	1	2,814	0	2,814	3	0	135
75-1444207	SCOR Reins Co	0	0		0	7	8,317	0	8,324	9,989	7	9,982	0	9,982	2	0	409
13-2997499	Sirius Amer Ins Co	0	0		0	1,443	6,260	0	7,703	9,244	1,443	7,801	0	7,801	4	0	413
13-1675535	Swiss Reins Amer Corp	0	0		0	9,421	133,554	0	142,975	171,570	9,421	162,149	0	162,149	2	0	6,648
13-2918573	Toa Re Ins Co of Amer	0	0		0	1,132	23,782	0	24,914	29,897	1,132	28,765	0	28,765	3	0	1,381
13-5616275	Transatlantic Reins Co	0	0		0	1	197	0	198	238	1	237	0	237	2	0	10
06-0566050	Travelers Ind Co	0	0		0	7	29	0	36	43	7	36	0	36	2	0	1
13-1290712	XL Reins Amer Inc	0	0		0	285	1,534	0	1,819	2,183	285	1,898	0	1,898	2	0	78
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	0	0	XXX	0	26,455	392,658	0	419,113	502,936	26,455	476,481	0	476,481	XXX	0	19,820
AA-9991159	Michigan Catastrophic Claims Assn	0	0		0	0	6,701	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999	Total Authorized - Pools - Mandatory Pools	0	0	XXX	0	0	6,701	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120337	Aspen Ins UK Ltd	0	0		0	941	12,898	0	13,839	16,607	941	15,666	0	15,666	3	0	752
AA-3194139	Axis Specialty Ltd	0	0		0	(1)	46	0	45	54	(1)	55	0	55	3	0	3
AA-3191435	Conduit Reins Ltd	0	0		0	422	1,830	0	2,252	2,702	422	2,280	0	2,280	4	0	121
AA-1340125	Hannover Rueck SE	0	0		0	1,488	19,863	0	21,351	25,621	1,488	24,133	0	24,133	2	0	989
AA-1126033	Lloyd's Syndicate Number 33	0	0		0	36	0	0	36	43	36	0	0	0	3	0	0
AA-1126382	Lloyd's Syndicate Number 382	0	0		0	0	41	0	41	49	0	49	0	49	3	0	2
AA-1126435	Lloyd's Syndicate Number 435	0	0		0	(100)	148	0	48	58	(100)	158	0	158	3	0	8
AA-1126623	Lloyd's Syndicate Number 623	0	0		0	(20)	43	0	23	28	(20)	48	0	48	3	0	2
AA-1126780	Lloyd's Syndicate Number 780	0	0		0	0	0	0	0	0	0	0	0	0	3	0	0
AA-1127084	Lloyd's Syndicate Number 1084	0	0		0	972	3,313	0	4,285	5,142	972	4,170	0	4,170	3	0	200
AA-1127200	Lloyd's Syndicate Number 1200	0	0		0	0	3	0	3	4	0	4	0	4	3	0	0
AA-1120085	Lloyd's Syndicate Number 1274	0	0		0	0	1	0	1	1	0	1	0	1	3	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	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 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	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 on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-1127414	Lloyd's Syndicate Number 1414	.0	0		0	269	1,101	.0	1,370	1,644	269	1,375	0	1,375	3	.0	.66
AA-1120102	Lloyd's Syndicate Number 1458	.0	0		0	38	20,125	.0	20,163	24,196	38	24,158	0	24,158	3	.0	1,160
AA-1120198	Lloyd's Syndicate Number 1618	.0	0		0	(113)	113	.0	0	0	(113)	113	0	113	3	.0	5
AA-1120156	Lloyd's Syndicate Number 1686	.0	0		0	(153)	433	.0	280	336	(153)	489	0	489	3	.0	23
AA-1120171	Lloyd's Syndicate Number 1856	.0	0		0	821	15,362	.0	16,183	19,420	821	18,599	0	18,599	3	.0	893
AA-1127861	Lloyd's Syndicate Number 1861	.0	0		0	5	6	.0	11	13	5	8	0	8	3	.0	0
AA-1120124	Lloyd's Syndicate Number 1945	.0	0		0	80	2,033	.0	2,113	2,536	80	2,456	0	2,456	3	.0	118
AA-1120084	Lloyd's Syndicate Number 1955	.0	0		0	308	1,821	.0	2,129	2,555	308	2,247	0	2,247	3	.0	108
AA-1120103	Lloyd's Syndicate Number 1967	.0	0		0	0	10	.0	10	12	0	12	0	12	3	.0	1
AA-1120106	Lloyd's Syndicate Number 1969	.0	0		0	3	6	.0	9	11	3	8	0	8	3	.0	0
AA-1120161	Lloyd's Syndicate Number 1980	.0	0		0	0	4	.0	4	5	0	5	0	5	3	.0	0
AA-1128001	Lloyd's Syndicate Number 2001	.0	0		0	(51)	120	.0	69	83	(51)	134	0	134	3	.0	6
AA-1128003	Lloyd's Syndicate Number 2003	.0	0		0	1,559	4,463	.0	6,022	7,226	1,559	5,667	0	5,667	3	.0	272
AA-1120071	Lloyd's Syndicate Number 2007	.0	0		0	0	23	.0	23	28	0	28	0	28	3	.0	1
AA-1128488	Lloyd's Syndicate Number 2488	.0	0		0	0	3	.0	3	4	0	4	0	4	3	.0	0
AA-1128623	Lloyd's Syndicate Number 2623	.0	0		0	(28)	79	.0	51	61	(28)	89	0	89	3	.0	4
AA-1120182	Lloyd's Syndicate Number 2689	.0	0		0	(3)	6	.0	3	4	(3)	7	0	7	3	.0	0
AA-1128987	Lloyd's Syndicate Number 2987	.0	0		0	674	2,849	.0	3,523	4,228	674	3,554	0	3,554	3	.0	171
AA-1129000	Lloyd's Syndicate Number 3000	.0	0		0	15	47	.0	62	74	15	59	0	59	3	.0	3
AA-1120113	Lloyd's Syndicate Number 3334	.0	0		0	(5)	34	.0	29	35	(5)	40	0	40	3	.0	2
AA-1120116	Lloyd's Syndicate Number 3902	.0	0		0	0	9	.0	9	11	0	11	0	11	3	.0	1
AA-1120075	Lloyd's Syndicate Number 4020	.0	0		0	174	477	.0	651	781	174	607	0	607	3	.0	29
AA-1120067	Lloyd's Syndicate Number 4242	.0	0		0	(8)	16	.0	8	10	(8)	18	0	18	3	.0	1
AA-1126004	Lloyd's Syndicate Number 4444	.0	0		0	67	807	.0	874	1,049	67	982	0	982	3	.0	47
AA-1126006	Lloyd's Syndicate Number 4472	.0	0		0	1,040	15,280	.0	16,320	19,584	1,040	18,544	0	18,544	3	.0	890
AA-1120048	Lloyd's Syndicate Number 5820	.0	0		0	0	1	.0	1	1	0	1	0	1	3	.0	0
AA-1840000	Mapfre Re Compania de Reaseguros SA	.0	0		0	0	17	.0	17	20	0	20	0	20	3	.0	1
AA-3190686	Partner Reins Co Ltd	.0	0		0	0	53	.0	53	64	0	64	0	64	2	.0	3
1299999	Total Authorized - Other Non-U.S. Insurers	0	0	XXX	0	8,430	103,484	0	111,914	134,297	8,437	125,860	0	125,860	XXX	0	5,883
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	0	XXX	0	771,647	502,843	0	531,027	637,232	34,892	602,340	0	602,340	XXX	0	25,703
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	0	XXX	XXX	XXX	XXX
AA-3191387	Carolina Re Ltd	.0	0		0	596,479	633,220	.0	633,220	759,864	64,997	694,867	0	694,867	4	29,824	5,215
AA-3190958	JRG Reins Co Ltd	.0	0		0	145,879	123,727	.0	123,727	148,472	0	148,472	0	148,472	4	7,294	137
2099999	Total Unauthorized - Affiliates - Other (Non-U.S.) - Other	0	0	XXX	742,358	756,947	0	0	756,947	908,336	64,997	843,339	742,358	100,981	XXX	37,118	5,352
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	XXX	742,358	756,947	0	0	756,947	908,336	64,997	843,339	742,358	100,981	XXX	37,118	5,352
2299999	Total Unauthorized - Affiliates	0	0	XXX	742,358	756,947	0	0	756,947	908,336	64,997	843,339	742,358	100,981	XXX	37,118	5,352
46-3590210	Pacific Valley Insurance Company	.0	0		0	778	553	.0	553	664	0	664	664	0	6	33	0
2399999	Total Unauthorized - Other U.S. Unaffiliated Insurers	0	0	XXX	778	553	0	0	553	664	0	664	664	0	XXX	33	0
AA-1580015	Aioi Nissay Dowa Ins Co Ltd	.0	52,884	.0001	0	52,766	0	.0	52,766	63,319	0	63,319	52,884	10,435	2	2,168	428
AA-3191352	Ascot Reins Co Ltd	.0	3,029	.0002	0	1,332	0	.0	1,332	1,598	.55	1,543	0	1,543	0	74	0
AA-1120191	Convex Ins UK Ltd	.0	183	.0003	0	14	234	.234	14	17	(169)	186	183	3	4	9	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	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 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	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 on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-3191400	Convex Re LTD	0	183	0004	0	14	234	234	14	17	(169)	186	183	3	4	9	0
AA-3190060	Hannover Re (Bermuda) Ltd	0	0		0	(3)	121	118	0	0	(3)	3	0	3	2	0	0
AA-1460019	MS Amlin AG	0	0		0	(58)	163	105	0	0	(58)	58	0	58	3	0	3
AA-5320039	Peak Reins Co Ltd	0	11,540	0005	0	12,756	483	483	12,756	15,307	1,216	14,091	11,540	2,551	4	577	135
AA-3191321	Sirius Bermuda Ins Co Ltd	0	16,496	0006	0	14,393	0	0	14,393	17,272	4	17,268	16,496	772	4	825	41
AA-1440076	Siriuspoint Intl Ins Corp (Publ)	0	14,804	0007	0	14,278	0	0	14,278	17,134	761	16,373	14,804	1,569	4	740	83
2699999	Total Unauthorized - Other Non-U.S. Insurers	0	99,119	XXX	0	95,492	1,235	1,174	95,553	114,664	1,637	113,027	97,633	15,393	XXX	4,403	690
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	99,119	XXX	743,136	852,992	1,235	1,174	853,053	1,023,664	66,634	957,030	840,655	116,375	XXX	41,554	6,042
3299999	Total Certified - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999	Total Certified - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3699999	Total Certified - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
CR-1460023	RenaissanceRe Europe AG	5,175	0		0	6,785	18,204	0	24,989	29,987	1,610	28,377	5,175	23,202	2	212	951
4099999	Total Certified - Other Non-U.S. Insurers	5,175	0	XXX	0	6,785	18,204	0	24,989	29,987	1,610	28,377	5,175	23,202	XXX	212	951
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	5,175	0	XXX	0	6,785	18,204	0	24,989	29,987	1,610	28,377	5,175	23,202	XXX	212	951
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5099999	Total Reciprocal Jurisdiction - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	0	XXX	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 1499999, 2899999, 4299999 and 5699999)	5,175	99,119	XXX	743,136	1,631,424	522,282	1,174	1,409,069	1,690,883	103,136	1,587,747	845,830	741,917	XXX	41,766	32,697
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999	Totals	5,175	99,119	XXX	743,136	1,631,424	522,282	1,174	1,409,069	1,690,883	103,136	1,587,747	845,830	741,917	XXX	41,766	32,697

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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						43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)	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	Overdue				42 Total Overdue Cols. 38+39 +40+41											
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												
42-1019055	Falls Lake Natl Ins Co	105,473	0	0	0	0	105,473	0	0	105,473	0	0	0.0	0.0	0.0	0.0	XXX	0
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	105,473	0	0	0	0	105,473	0	0	105,473	0	0	0.0	0.0	0.0	0.0	XXX	0
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
0899999	Total Authorized - Affiliates	105,473	0	0	0	0	105,473	0	0	105,473	0	0	0.0	0.0	0.0	0.0	XXX	0
95-4387273	Allied World Assur Co US Inc	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
06-1430254	Arch Reins Co	21	0	0	0	0	21	0	0	21	0	0	0.0	0.0	0.0	0.0	YES	0
51-0434766	Axis Reins Co	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
47-0574325	Berkley Ins Co	3,799	0	0	0	0	3,799	0	0	3,799	0	0	0.0	0.0	0.0	0.0	YES	0
31-0542366	The Cincinnati Ins Co	231	0	0	0	0	231	0	0	231	0	0	0.0	0.0	0.0	0.0	YES	0
42-0234980	Employers Mut Cas Co	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
36-2950161	Evanston Ins Co	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
22-2005057	Everest Reins Co	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
13-2673100	General Reins Corp	1,474	0	0	0	0	1,474	0	0	1,474	0	0	0.0	0.0	0.0	0.0	YES	0
95-2769232	Insurance Co of the West	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
13-4924125	Munich Reins Amer Inc	197	0	0	0	0	197	0	0	197	0	0	0.0	0.0	0.0	0.0	YES	0
47-0355979	National Ind Co	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
47-0698507	Odyssey Reins Co	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
13-3031176	Partner Reins Co of the US	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
23-1641984	QBE Reins Corp	59	0	0	0	0	59	0	0	59	0	0	0.0	0.0	0.0	0.0	YES	0
75-1444207	SCOR Reins Co	344	0	0	0	0	344	0	0	344	0	0	0.0	0.0	0.0	0.0	YES	0
13-2997499	Sirius Amer Ins Co	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
13-1675535	Swiss Reins Amer Corp	4,900	0	0	0	0	4,900	0	0	4,900	0	0	0.0	0.0	0.0	0.0	YES	0
13-2918573	Toa Re Ins Co of Amer	540	0	0	0	0	540	0	0	540	0	0	0.0	0.0	0.0	0.0	YES	0
13-5616275	Transatlantic Reins Co	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
06-0566050	Travelers Ind Co	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
13-1290712	XL Reins Amer Inc	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	11,565	0	0	0	0	11,565	0	0	11,565	0	0	0.0	0.0	0.0	0.0	XXX	0
AA-9991159	Michigan Catastrophic Claims Assn	3,620	0	0	0	0	3,620	0	0	3,620	0	0	0.0	0.0	0.0	0.0	YES	0
1099999	Total Authorized - Pools - Mandatory Pools	3,620	0	0	0	0	3,620	0	0	3,620	0	0	0.0	0.0	0.0	0.0	XXX	0
AA-1120337	Aspen Ins UK Ltd	704	0	0	0	0	704	0	0	704	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3194139	Axis Specialty Ltd	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3191435	Conduit Reins Ltd	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1340125	Hannover Rueck SE	498	0	0	0	0	498	0	0	498	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1126033	Lloyd's Syndicate Number 33	3	0	0	0	0	3	0	0	3	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1126382	Lloyd's Syndicate Number 382	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1126435	Lloyd's Syndicate Number 435	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1126623	Lloyd's Syndicate Number 623	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1126780	Lloyd's Syndicate Number 780	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1127084	Lloyd's Syndicate Number 1084	822	0	0	0	0	822	0	0	822	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1127200	Lloyd's Syndicate Number 1200	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120085	Lloyd's Syndicate Number 1274	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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						43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)	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 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	Overdue				42 Total Overdue Cols. 38+39 +40+41											
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												
AA-1127414	Lloyd's Syndicate Number 1414	208	0	0	0	0	208	0	0	208	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120102	Lloyd's Syndicate Number 1458	1,478	0	0	0	0	1,478	0	0	1,478	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120198	Lloyd's Syndicate Number 1618	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120156	Lloyd's Syndicate Number 1686	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120171	Lloyd's Syndicate Number 1856	421	0	0	0	0	421	0	0	421	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1127861	Lloyd's Syndicate Number 1861	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120124	Lloyd's Syndicate Number 1945	4	0	0	0	0	4	0	0	4	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120084	Lloyd's Syndicate Number 1955	282	0	0	0	0	282	0	0	282	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120103	Lloyd's Syndicate Number 1967	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120106	Lloyd's Syndicate Number 1969	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120161	Lloyd's Syndicate Number 1980	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1128001	Lloyd's Syndicate Number 2001	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1128003	Lloyd's Syndicate Number 2003	1,038	0	0	0	0	1,038	0	0	1,038	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120071	Lloyd's Syndicate Number 2007	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1128488	Lloyd's Syndicate Number 2488	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1128623	Lloyd's Syndicate Number 2623	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120182	Lloyd's Syndicate Number 2689	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1128987	Lloyd's Syndicate Number 2987	215	0	0	0	0	215	0	0	215	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1129000	Lloyd's Syndicate Number 3000	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120113	Lloyd's Syndicate Number 3334	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120116	Lloyd's Syndicate Number 3902	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120075	Lloyd's Syndicate Number 4020	211	0	0	0	0	211	0	0	211	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120067	Lloyd's Syndicate Number 4242	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1126004	Lloyd's Syndicate Number 4444	59	0	0	0	0	59	0	0	59	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1126006	Lloyd's Syndicate Number 4472	1,455	0	0	0	0	1,455	0	0	1,455	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120048	Lloyd's Syndicate Number 5820	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1840000	Mapfre Re Compania de Reaseguros SA	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3190686	Partner Reins Co Ltd	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
1299999	Total Authorized - Other Non-U.S. Insurers	7,398	0	0	0	0	7,398	0	0	7,398	0	0	0.0	0.0	0.0	0.0	XXX	0
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	128,056	0	0	0	0	128,056	0	0	128,056	0	0	0.0	0.0	0.0	0.0	XXX	0
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
AA-3191387	Carolina Re Ltd	21,706	0	0	0	0	21,706	0	0	21,706	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3190958	JRG Reins Co Ltd	6,820	0	0	0	0	6,820	0	0	6,820	0	0	0.0	0.0	0.0	0.0	YES	0
2099999	Total Unauthorized - Affiliates - Other (Non-U.S.) - Other	28,526	0	0	0	0	28,526	0	0	28,526	0	0	0.0	0.0	0.0	0.0	XXX	0
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	28,526	0	0	0	0	28,526	0	0	28,526	0	0	0.0	0.0	0.0	0.0	XXX	0
2299999	Total Unauthorized - Affiliates	28,526	0	0	0	0	28,526	0	0	28,526	0	0	0.0	0.0	0.0	0.0	XXX	0
46-3590210	Pacific Valley Insurance Company	18	0	0	0	0	18	0	0	18	0	0	0.0	0.0	0.0	0.0	YES	0
2399999	Total Unauthorized - Other U.S. Unaffiliated Insurers	18	0	0	0	0	18	0	0	18	0	0	0.0	0.0	0.0	0.0	XXX	0
AA-1580015	Aioi Nissay Dowa Ins Co Ltd	2,313	3,112	0	0	0	3,112	5,425	0	5,425	0	0	57.4	0.0	0.0	0.0	YES	0
AA-3191352	Ascot Reins Co Ltd	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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	38 Overdue				42 Total Overdue Cols. 38+39 +40+41	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													
AA-1120191	Convex Ins UK Ltd	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	YES	0
AA-3191400	Convex Re LTD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	YES	0
AA-3190060	Hannover Re (Bermuda) Ltd	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	YES	0
AA-1460019	MS Amlin AG	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	YES	0
AA-5320039	Peak Reins Co Ltd	1	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	YES	0
AA-3191321	Sirius Bermuda Ins Co Ltd	386	0	0	0	0	0	386	0	0	386	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1440076	Siriuspoint Intl Ins Corp (Publ)	2	0	0	0	0	0	2	0	0	2	0	0	0.0	0.0	0.0	0.0	YES	0
2699999	Total Unauthorized - Other Non-U.S. Insurers	2,702	3,112	0	0	0	0	3,112	5,814	0	5,814	0	0	53.5	0.0	0.0	0.0	XXX	0
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	31,246	3,112	0	0	0	0	3,112	34,358	0	34,358	0	0	9.1	0.0	0.0	0.0	XXX	0
3299999	Total Certified - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
3599999	Total Certified - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
3699999	Total Certified - Affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
CR-1460023	RenaissanceRe Europe AG	3	0	0	0	0	0	3	0	0	3	0	0	0.0	0.0	0.0	0.0	YES	0
4099999	Total Certified - Other Non-U.S. Insurers	3	0	0	0	0	0	3	0	0	3	0	0	0.0	0.0	0.0	0.0	XXX	0
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	3	0	0	0	0	0	3	0	0	3	0	0	0.0	0.0	0.0	0.0	XXX	0
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
5099999	Total Reciprocal Jurisdiction - Affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	159,305	3,112	0	0	0	0	3,112	162,417	0	162,417	0	0	1.9	0.0	0.0	0.0	XXX	0
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
9999999	Totals	159,305	3,112	0	0	0	0	3,112	162,417	0	162,417	0	0	1.9	0.0	0.0	0.0	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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													Complete if Col. 52 = "No"; Otherwise Enter 0			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	66	67	68		
		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. 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		
42-1019055	Falls Lake Natl 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	
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999. Total Authorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-4387273	Allied World Assur Co US Inc	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
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	
31-0542366	The Cincinnati 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	
36-2950161	Evanston Ins Co	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	
95-2769232	Insurance Co of the West	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	
47-0698507	Odyssey Reins 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	
75-1444207	SCOR Reins Co	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2997499	Sirius Amer Ins Co	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	
13-2918573	Toa Re Ins Co of Amer	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	
06-0566050	Travelers Ind Co	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1290712	XL Reins Amer Inc	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
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	
AA-1120337	Aspen Ins UK Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194139	Axis Specialty Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191435	Conduit Reins Ltd	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-1126033	Lloyd's Syndicate Number 33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126382	Lloyd's Syndicate Number 382	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-1126623	Lloyd's Syndicate Number 623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126780	Lloyd's Syndicate Number 780	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-1127200	Lloyd's Syndicate Number 1200	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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													Complete if Col. 52 = "No"; Otherwise Enter 0			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	66	67	68		
		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. 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-1120085	Lloyd's Syndicate Number 1274	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-1120102	Lloyd's Syndicate Number 1458	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120198	Lloyd's Syndicate Number 1618	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-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-1120124	Lloyd's Syndicate Number 1945	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-1120103	Lloyd's Syndicate Number 1967	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-1120161	Lloyd's Syndicate Number 1980	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-1128488	Lloyd's Syndicate Number 2488	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-1120182	Lloyd's Syndicate Number 2689	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128987	Lloyd's Syndicate Number 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1129000	Lloyd's Syndicate Number 3000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120113	Lloyd's Syndicate Number 3334	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120116	Lloyd's Syndicate Number 3902	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120075	Lloyd's Syndicate Number 4020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120067	Lloyd's Syndicate Number 4242	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-1126006	Lloyd's Syndicate Number 4472	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120048	Lloyd's Syndicate Number 5820	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-3190686	Partner Reins Co 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	
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191387	Carolina Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190958	JRG Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2099999	Total Unauthorized - Affiliates - Other (Non-U.S.) - Other			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2299999	Total Unauthorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
46-3590210	Pacific Valley Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2399999	Total Unauthorized - Other U.S. Unaffiliated Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1580015	Aioi Nissay Dowa Ins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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														Complete if Col. 52 = "No"; Otherwise Enter 0			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	66	67	68			
		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. 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. 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-3191352	Ascot 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-3191400	Convex Re LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3190060	Hannover Re (Bermuda) Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1460019	MS Amlin AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-5320039	Peak Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3191321	Sirius Bermuda Ins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1440076	Siriuspoint Intl Ins Corp (Publ)	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		
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3299999	Total Certified - Affiliates - U.S. Non-Pool			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0		
3599999	Total Certified - Affiliates - Other (Non-U.S.)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0		
3699999	Total Certified - Affiliates			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0		
CR-1460023	RenaissanceRe Europe AG	3	01/01/2016	20.0	0	23,379	4,676	22.1	100.0	0	23,379	0	0	0	0	0	0		
4099999	Total Certified - Other Non-U.S. Insurers			XXX	0	23,379	4,676	XXX	XXX	0	23,379	0	0	0	0	0	0		
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX	0	23,379	4,676	XXX	XXX	0	23,379	0	0	0	0	0	0		
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
5099999	Total Reciprocal Jurisdiction - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)			XXX	0	23,379	4,676	XXX	XXX	0	23,379	0	0	0	0	0	0		
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0		
9999999	Totals			XXX	0	23,379	4,676	XXX	XXX	0	23,379	0	0	0	0	0	0		

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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%)	71 Provision for Unauthorized Reinsurance		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 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  20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0  Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
42-1019055	Falls Lake Natl Ins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	XXX	XXX	0	0	0	XXX	XXX	0
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
0899999	Total Authorized - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
95-4387273	Allied World Assur Co US Inc	0	XXX	XXX	0	0	0	XXX	XXX	0
06-1430254	Arch Reins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
51-0434766	Axis Reins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
47-0574325	Berkley Ins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
31-0542366	The Cincinnati Ins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
42-0234980	Employers Mut Cas Co	0	XXX	XXX	0	0	0	XXX	XXX	0
36-2950161	Evanston Ins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
22-2005057	Everest Reins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2673100	General Reins Corp	0	XXX	XXX	0	0	0	XXX	XXX	0
95-2769232	Insurance Co of the West	0	XXX	XXX	0	0	0	XXX	XXX	0
13-4924125	Munich Reins Amer Inc	0	XXX	XXX	0	0	0	XXX	XXX	0
47-0355979	National Ind Co	0	XXX	XXX	0	0	0	XXX	XXX	0
47-0698507	Odyssey Reins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
13-3031176	Partner Reins Co of the US	0	XXX	XXX	0	0	0	XXX	XXX	0
23-1641984	QBE Reins Corp	0	XXX	XXX	0	0	0	XXX	XXX	0
75-1444207	SCOR Reins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2997499	Sirius Amer Ins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
13-1675535	Swiss Reins Amer Corp	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2918573	Toa Re Ins Co of Amer	0	XXX	XXX	0	0	0	XXX	XXX	0
13-5616275	Transatlantic Reins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
06-0566050	Travelers Ind Co	0	XXX	XXX	0	0	0	XXX	XXX	0
13-1290712	XL Reins Amer Inc	0	XXX	XXX	0	0	0	XXX	XXX	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-9991159	Michigan Catastrophic Claims Assn	0	XXX	XXX	0	0	0	XXX	XXX	0
1099999	Total Authorized - Pools - Mandatory Pools	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120337	Aspen Ins UK Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3194139	Axis Specialty Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3191435	Conduit Reins Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1340125	Hannover Rueck SE	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126033	Lloyd's Syndicate Number 33	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126382	Lloyd's Syndicate Number 382	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126435	Lloyd's Syndicate Number 435	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126623	Lloyd's Syndicate Number 623	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126780	Lloyd's Syndicate Number 780	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127084	Lloyd's Syndicate Number 1084	0	XXX	XXX	0	0	0	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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  20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0  Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
AA-1127200	Lloyd's Syndicate Number 1200	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120085	Lloyd's Syndicate Number 1274	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127414	Lloyd's Syndicate Number 1414	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120102	Lloyd's Syndicate Number 1458	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120198	Lloyd's Syndicate Number 1618	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120156	Lloyd's Syndicate Number 1686	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120171	Lloyd's Syndicate Number 1856	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127861	Lloyd's Syndicate Number 1861	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120124	Lloyd's Syndicate Number 1945	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120084	Lloyd's Syndicate Number 1955	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120103	Lloyd's Syndicate Number 1967	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120106	Lloyd's Syndicate Number 1969	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120161	Lloyd's Syndicate Number 1980	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128001	Lloyd's Syndicate Number 2001	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128003	Lloyd's Syndicate Number 2003	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120071	Lloyd's Syndicate Number 2007	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128488	Lloyd's Syndicate Number 2488	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128623	Lloyd's Syndicate Number 2623	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120182	Lloyd's Syndicate Number 2689	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128987	Lloyd's Syndicate Number 2987	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1129000	Lloyd's Syndicate Number 3000	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120113	Lloyd's Syndicate Number 3334	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120116	Lloyd's Syndicate Number 3902	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-1120067	Lloyd's Syndicate Number 4242	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-1126006	Lloyd's Syndicate Number 4472	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120048	Lloyd's Syndicate Number 5820	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-3190686	Partner Reins Co 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
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191387	Carolina Re Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190958	JRG Reins Co Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
2099999	Total Unauthorized - Affiliates - Other (Non-U.S.) - Other	0	0	0	XXX	XXX	XXX	0	XXX	0
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	0	XXX	XXX	XXX	0	XXX	0
2299999	Total Unauthorized - Affiliates	0	0	0	XXX	XXX	XXX	0	XXX	0
46-3590210	Pacific Valley Insurance Company	0	0	0	XXX	XXX	XXX	0	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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%)	71 Provision for Unauthorized Reinsurance		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 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  20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0  Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
2399999	Total Unauthorized - Other U.S. Unaffiliated Insurers	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1580015	Aioi Nissay Dowa Ins Co Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191352	Ascot Reins Co Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1120191	Convex Ins UK Ltd	0	234	0	XXX	XXX	XXX	234	XXX	234
AA-3191400	Convex Re LTD	0	234	0	XXX	XXX	XXX	234	XXX	234
AA-3190060	Hannover Re (Bermuda) Ltd	0	121	0	XXX	XXX	XXX	118	XXX	118
AA-1460019	MS Amlin AG	0	163	0	XXX	XXX	XXX	105	XXX	105
AA-5320039	Peak Reins Co Ltd	0	483	0	XXX	XXX	XXX	483	XXX	483
AA-3191321	Sirius Bermuda Ins Co Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1440076	Siriuspoint Intl Ins Corp (Publ)	0	0	0	XXX	XXX	XXX	0	XXX	0
2699999	Total Unauthorized - Other Non-U.S. Insurers	0	1,235	0	XXX	XXX	XXX	1,174	XXX	1,174
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	1,235	0	XXX	XXX	XXX	1,174	XXX	1,174
3299999	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3599999	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3699999	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
CR-1460023	RenaissanceRe Europe AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4099999	Total Certified - Other Non-U.S. Insurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
5099999	Total Reciprocal Jurisdiction - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	XXX	XXX	0	0	0	XXX	XXX	0
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	0	1,235	0	0	0	0	1,174	0	1,174
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	0	0	0	0	0	0	0
9999999	Totals	0	1,235	0	0	0	0	1,174	0	1,174



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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 <u>Name of Reinsurer</u>	2 <u>Commission Rate</u>	3 <u>Ceded Premium</u>
1.	.....	0.000	0
2.	.....	0.000	0
3.	.....	0.000	0
4.	.....	0.000	0
5.	.....	0.000	0

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 <u>Name of Reinsurer</u>	2 <u>Total Recoverables</u>	3 <u>Ceded Premiums</u>	4 <u>Affiliated</u>
6.	Falls Lake Natl Ins Co .....	736,763	157,753	Yes [ X ] No [ ]
7.	Carolina Re Ltd .....	633,220	348,316	Yes [ X ] No [ ]
8.	Berkley Ins Co .....	170,632	98,317	Yes [ ] No [ X ]
9.	Swiss Reins Amer Corp .....	142,975	81,973	Yes [ ] No [ X ]
10.	JRG Reins Co LTD .....	123,727	0	Yes [ X ] No [ ]

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**SCHEDULE F - PART 6**

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	579,280,528	0	579,280,528
2. Premiums and considerations (Line 15) .....	133,974,840	0	133,974,840
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) .....	162,417,406	(162,417,406)	0
4. Funds held by or deposited with reinsured companies (Line 16.2) .....	408,914,335	0	408,914,335
5. Other assets .....	97,649,407	0	97,649,407
6. Net amount recoverable from reinsurers .....	0	1,273,657,213	1,273,657,213
7. Protected cell assets (Line 27) .....	0	0	0
8. Totals (Line 28) .....	1,382,236,516	1,111,239,807	2,493,476,323
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	386,364,241	1,605,960,531	1,992,324,772
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	1,350,000	0	1,350,000
11. Unearned premiums (Line 9) .....	45,898,702	382,247,056	428,145,758
12. Advance premiums (Line 10) .....	0	0	0
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....	0	0	0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) .....	151,303,779	(151,303,779)	0
15. Funds held by company under reinsurance treaties (Line 13) .....	688,594,822	(688,594,822)	0
16. Amounts withheld or retained by company for account of others (Line 14) .....	0	0	0
17. Provision for reinsurance (Line 16) .....	1,174,000	(1,174,000)	0
18. Other liabilities .....	(94,341,327)	(35,895,179)	(130,236,506)
19. Total liabilities excluding protected cell business (Line 26) .....	1,180,344,217	1,111,239,807	2,291,584,024
20. Protected cell liabilities (Line 27) .....	0	0	0
21. Surplus as regards policyholders (Line 37)	201,892,299	XXX	201,892,299
22. Totals (Line 38)	1,382,236,516	1,111,239,807	2,493,476,323

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 above exhibit includes restatements for unaffiliated reinsurance, affiliated reinsurance, as well as intercompany pooling arrangement. ....

Schedule H - Part 1 - Analysis of Underwriting Operations

**N O N E**

Schedule H - Part 2 - Reserves and Liabilities

**N O N E**

Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities

**N O N E**

Schedule H - Part 4 - Reinsurance

**N O N E**

Schedule H - Part 5 - Health Claims

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 1A - HOMEOWNERS/FAROWNERS**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019	0	0	0	0	0	0	0	0	0	0	0	1
10. 2020	20	20	0	17	17	2	2	10	10	0	0	2
11. 2021	348	348	0	110	110	17	17	26	26	2	0	23
12. Totals	XXX	XXX	XXX	127	127	18	18	36	36	2	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						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020	0	0	1	1	0	0	0	0	0	0	0	0	0
11. 2021	64	64	0	0	9	9	0	0	0	0	0	0	7
12. Totals	64	64	2	2	9	9	0	0	0	0	0	0	7

	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
2. 2012	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
3. 2013	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
4. 2014	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
5. 2015	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
6. 2016	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
7. 2017	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
8. 2018	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
9. 2019	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
10. 2020	30	30	0	147.9	147.9	0.0	0	0	55.0	0	0
11. 2021	226	226	0	64.8	64.8	0.0	0	0	55.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2012	284	284	0	0	0	0	0	0	0	0	0	0
3. 2013	7	6	1	31	31	0	0	1	5	0	(4)	1
4. 2014	409	383	25	613	613	10	7	33	38	1	(2)	114
5. 2015	282	273	9	535	535	8	6	22	22	1	2	138
6. 2016	2	2	0	0	0	0	0	0	0	0	0	1
7. 2017	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018	6,552	6,370	183	1,553	1,505	881	855	485	471	7	87	641
9. 2019	25,475	24,549	926	9,869	9,518	4,600	4,418	1,861	1,787	17	605	2,067
10. 2020	23,960	22,909	1,051	4,752	4,512	1,906	1,819	1,867	1,781	22	413	1,576
11. 2021	18,903	17,737	1,166	1,945	1,809	535	507	1,446	1,356	6	253	1,245
12. Totals	XXX	XXX	XXX	19,296	18,524	7,940	7,612	5,714	5,459	53	1,355	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	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014	0	0	32	28	0	0	6	5	0	0	0	5	0
5. 2015	0	0	(236)	(236)	0	0	(42)	(42)	0	0	0	0	0
6. 2016	0	0	410	370	0	0	72	65	0	0	0	47	0
7. 2017	0	0	177	148	0	0	31	26	0	0	0	35	0
8. 2018	463	449	(474)	(454)	67	65	(84)	(80)	0	0	0	(8)	9
9. 2019	4,021	3,882	(290)	(293)	1,126	1,080	(53)	(53)	74	67	0	196	125
10. 2020	1,980	1,890	2,335	2,236	809	772	410	393	327	288	0	281	165
11. 2021	1,686	1,571	8,485	8,172	301	284	1,501	1,445	966	807	0	661	305
12. Totals	8,149	7,792	10,439	9,972	2,302	2,200	1,842	1,760	1,367	1,161	0	1,216	604

	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	0	0	XXX	0	0
2. 2012	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
3. 2013	31	36	(4)	475.0	650.0	(400.0)	0	0	55.0	0	0
4. 2014	694	691	3	169.9	180.3	11.4	0	0	55.0	4	1
5. 2015	287	285	2	101.7	104.5	20.8	0	0	55.0	0	0
6. 2016	482	436	47	29,232.3	26,398.3	0.0	0	0	55.0	40	7
7. 2017	208	174	35	0.0	0.0	0.0	0	0	55.0	29	5
8. 2018	2,890	2,811	79	44.1	44.1	43.2	0	0	55.0	(7)	(2)
9. 2019	21,207	20,406	801	83.2	83.1	86.5	0	0	55.0	142	54
10. 2020	14,385	13,691	694	60.0	59.8	66.0	0	0	55.0	189	92
11. 2021	16,866	15,951	915	89.2	89.9	78.4	0	0	55.0	428	234
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	825	390

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
	1. Prior	XXX	XXX	XXX	0	0	0	0	0			
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	938	657	282	659	462	13	9	(53)	8	0	141	67
4. 2014	20,798	16,119	4,679	17,684	15,034	1,705	1,693	2,287	722	413	4,228	8,518
5. 2015	45,323	36,323	9,000	29,678	25,218	3,751	3,501	5,177	1,459	3,229	8,429	44,802
6. 2016	79,225	60,943	18,283	81,041	64,072	11,611	9,152	10,595	1,460	9,307	28,564	86,301
7. 2017	168,077	126,047	42,030	164,521	136,949	21,413	17,707	20,437	2,472	13,892	49,243	76,177
8. 2018	205,301	152,306	52,995	128,817	122,554	15,367	15,416	29,096	10,791	14,117	24,519	56,117
9. 2019	252,095	197,766	54,328	107,238	126,727	10,223	16,137	25,430	6,311	13,252	(6,283)	41,556
10. 2020	49,983	44,010	5,973	9,427	8,830	735	621	2,645	2,157	256	1,200	1,260
11. 2021	69,917	61,861	8,055	7,134	6,568	262	181	2,731	904	357	2,473	1,381
12. Totals	XXX	XXX	XXX	546,201	506,413	65,081	64,418	98,345	26,283	54,823	112,513	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						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	0	0	1	1	0	0	0	0	0	0	0	0	0
4. 2014	252	148	373	274	65	49	104	73	33	17	0	266	7
5. 2015	668	387	(4)	(253)	63	37	45	(37)	28	7	0	658	29
6. 2016	4,485	1,023	3,838	1,819	524	186	977	316	51	2	0	6,529	149
7. 2017	20,540	3,502	5,000	981	1,900	129	1,549	225	33	(3)	0	24,186	587
8. 2018	38,285	7,099	9,337	196	3,887	510	3,034	(138)	159	994	0	46,043	1,014
9. 2019	65,180	21,809	34,785	12,625	6,785	1,947	10,875	3,494	458	(1,382)	0	79,590	1,434
10. 2020	9,857	8,946	6,538	5,819	589	424	1,115	877	1,843	1,010	0	2,867	156
11. 2021	13,314	12,261	24,194	21,788	626	504	4,984	4,245	2,487	2,344	0	4,462	454
12. Totals	152,580	55,176	84,062	43,250	14,439	3,786	22,683	9,055	5,091	2,989	0	164,601	3,830

	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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2012	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
3. 2013	621	479	141	66.1	73.0	50.2	0	0	55.0	0	0
4. 2014	22,504	18,010	4,494	108.2	111.7	96.0	0	0	55.0	203	63
5. 2015	39,406	30,318	9,087	86.9	83.5	101.0	0	0	55.0	529	129
6. 2016	113,123	78,030	35,093	142.8	128.0	191.9	0	0	55.0	5,481	1,048
7. 2017	235,392	161,963	73,429	140.0	128.5	174.7	0	0	55.0	21,056	3,130
8. 2018	227,983	157,421	70,562	111.0	103.4	133.1	0	0	55.0	40,328	5,715
9. 2019	260,974	187,667	73,306	103.5	94.9	134.9	0	0	55.0	65,530	14,059
10. 2020	32,751	28,684	4,066	65.5	65.2	68.1	0	0	55.0	1,631	1,236
11. 2021	55,731	48,796	6,935	79.7	78.9	86.1	0	0	55.0	3,458	1,004
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	138,216	26,384

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**SCHEDULE P - PART 1D - WORKERS' COMPENSATION**  
**(EXCLUDING EXCESS WORKERS' COMPENSATION)**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	49	19	6	4	3	0	0	36	XXX
2. 2012	19,296	14,061	5,235	13,272	9,599	2,114	1,479	1,049	0	81	5,356	752
3. 2013	11,136	8,161	2,975	4,476	3,136	911	638	747	8	81	2,353	304
4. 2014	16,540	12,153	4,387	5,654	3,992	1,310	928	996	59	20	2,982	570
5. 2015	24,877	18,591	6,286	10,846	8,188	1,905	1,379	1,143	147	69	4,180	837
6. 2016	39,449	32,242	7,208	12,244	10,108	2,856	2,409	1,693	726	449	3,551	951
7. 2017	125,739	115,674	10,066	41,846	38,587	9,924	9,271	4,945	3,733	1,124	5,125	2,736
8. 2018	142,811	134,833	7,978	43,013	40,507	9,200	8,759	5,181	3,757	578	4,371	2,854
9. 2019	113,977	106,382	7,595	36,568	33,849	6,420	6,060	5,521	2,947	173	5,653	2,584
10. 2020	107,910	100,346	7,564	31,189	28,892	4,530	4,265	5,755	3,388	31	4,930	2,339
11. 2021	104,044	96,930	7,113	12,382	11,517	1,033	966	2,522	914	3	2,542	1,690
12. Totals	XXX	XXX	XXX	211,541	188,392	40,210	36,157	29,557	15,678	2,609	41,079	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						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior	566	115	399	194	39	28	42	29	62	0	0	741	3
2. 2012	2	2	123	87	0	0	17	11	19	0	0	62	0
3. 2013	1	1	106	75	0	0	22	16	9	0	0	48	1
4. 2014	47	33	181	137	15	11	39	29	17	0	0	90	3
5. 2015	167	131	495	407	21	17	86	69	35	0	0	180	6
6. 2016	572	530	2,407	2,215	69	64	428	393	102	45	0	332	14
7. 2017	7,354	7,057	12,502	11,912	742	715	2,192	2,090	921	701	0	1,236	171
8. 2018	12,124	11,798	17,066	16,258	1,399	1,353	2,942	2,808	1,427	1,212	0	1,528	318
9. 2019	15,398	14,776	18,497	17,596	2,079	1,990	3,233	3,084	1,976	1,676	0	2,062	418
10. 2020	25,742	24,528	11,507	10,915	3,910	3,725	1,965	1,863	2,485	1,418	0	3,159	645
11. 2021	22,587	21,139	26,503	25,069	3,763	3,528	4,588	4,342	3,326	2,056	0	4,632	829
12. Totals	84,561	80,111	89,787	84,864	12,038	11,431	15,555	14,735	10,380	7,109	0	14,069	2,406

	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	0	0	XXX	655	86
2. 2012	16,596	11,178	5,418	86.0	79.5	103.5	0	0	55.0	37	24
3. 2013	6,274	3,872	2,402	56.3	47.4	80.7	0	0	55.0	32	16
4. 2014	8,261	5,189	3,073	49.9	42.7	70.0	0	0	55.0	59	32
5. 2015	14,699	10,339	4,360	59.1	55.6	69.4	0	0	55.0	124	55
6. 2016	20,372	16,489	3,883	51.6	51.1	53.9	0	0	55.0	234	97
7. 2017	80,426	74,066	6,361	64.0	64.0	63.2	0	0	55.0	886	349
8. 2018	92,352	86,453	5,899	64.7	64.1	73.9	0	0	55.0	1,134	394
9. 2019	89,693	81,978	7,714	78.7	77.1	101.6	0	0	55.0	1,522	539
10. 2020	87,083	78,994	8,090	80.7	78.7	106.9	0	0	55.0	1,806	1,353
11. 2021	76,705	69,532	7,173	73.7	71.7	100.8	0	0	55.0	2,881	1,750
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	9,372	4,698

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
	1. Prior	XXX	XXX	XXX	0	0	0	0	0			
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014	1,170	1,138	32	733	711	114	110	11	11	16	26	21
5. 2015	3,804	3,746	58	3,489	3,459	168	165	12	12	33	33	81
6. 2016	6,147	6,104	43	5,767	5,746	1,127	1,113	31	31	31	34	150
7. 2017	8,177	8,135	43	6,494	6,458	876	869	48	48	31	43	212
8. 2018	7,530	7,523	7	1,895	1,893	352	352	25	25	118	3	122
9. 2019	17,467	17,467	0	4,261	4,256	556	558	130	130	47	4	146
10. 2020	21,391	21,354	36	8,185	8,185	461	461	157	155	32	2	123
11. 2021	18,385	18,345	40	3,123	3,123	186	186	37	34	5	3	19
12. Totals	XXX	XXX	XXX	33,948	33,831	3,841	3,815	451	444	313	149	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	0	0	0	0	0	0	0	0			
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014	0	0	1	1	0	0	0	0	0	0	0	0	0
5. 2015	0	0	206	194	0	0	36	34	0	0	0	14	0
6. 2016	211	209	669	635	4	4	118	113	0	0	0	41	0
7. 2017	694	693	1,561	1,550	34	34	275	274	0	0	0	13	0
8. 2018	898	899	2,157	2,139	46	46	381	378	0	0	0	21	0
9. 2019	1,149	1,150	2,286	2,290	129	129	403	404	0	0	0	(5)	2
10. 2020	2,396	2,396	3,148	3,148	198	198	556	555	0	0	0	1	5
11. 2021	2,950	2,950	5,254	5,244	278	278	928	926	0	0	0	12	10
12. Totals	8,298	8,296	15,283	15,202	689	689	2,699	2,685	0	0	0	96	18

	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	0		0	XXX
2. 2012	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
3. 2013	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
4. 2014	860	834	26	73.5	73.3	82.3	0	0	55.0	0	0
5. 2015	3,911	3,864	47	102.8	103.2	81.1	0	0	55.0	12	2
6. 2016	7,926	7,852	74	128.9	128.6	171.3	0	0	55.0	36	5
7. 2017	9,983	9,927	56	122.1	122.0	131.3	0	0	55.0	12	2
8. 2018	5,755	5,731	24	76.4	76.2	356.1	0	0	55.0	17	4
9. 2019	8,915	8,916	(1)	51.0	51.0	0.0	0	0	55.0	(5)	(1)
10. 2020	15,101	15,098	3	70.6	70.7	7.6	0	0	55.0	0	0
11. 2021	12,757	12,742	15	69.4	69.5	38.0	0	0	55.0	10	2
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	82	14

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 1F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2012	106	70	36	73	51	27	19	15	3	0	42	4
3. 2013	178	129	49	0	0	0	0	0	0	0	0	1
4. 2014	248	177	71	51	36	18	12	6	1	0	27	2
5. 2015	292	209	83	0	0	4	4	2	0	0	2	2
6. 2016	289	208	81	19	13	14	10	2	0	0	13	1
7. 2017	295	154	141	0	0	0	0	13	5	0	8	24
8. 2018	292	208	83	69	48	21	15	14	1	0	40	36
9. 2019	268	192	76	0	0	0	0	5	0	0	5	11
10. 2020	107	76	31	0	0	0	0	1	0	0	1	2
11. 2021	10	8	2	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	212	148	85	59	58	9	0	138	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	0	1	1	0	0	1	0	0	0	0	1	0
2. 2012	0	0	1	1	0	0	1	0	0	0	0	1	0
3. 2013	0	0	4	3	0	0	2	1	0	0	0	2	0
4. 2014	0	0	11	8	0	0	5	3	1	0	0	6	0
5. 2015	0	0	28	20	0	0	12	8	2	0	0	14	0
6. 2016	41	29	16	12	12	9	7	5	3	0	0	26	1
7. 2017	0	0	58	40	0	0	25	17	4	0	0	29	0
8. 2018	55	39	53	40	35	24	23	17	6	0	0	51	1
9. 2019	41	29	104	75	22	15	44	32	10	0	0	69	2
10. 2020	0	0	67	48	0	0	29	20	5	0	0	32	0
11. 2021	0	0	7	5	0	0	3	2	0	0	0	3	0
12. Totals	138	96	349	251	69	48	150	108	31	0	0	233	3

	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	0	0	XXX	0	0
2. 2012	117	74	43	110.2	105.1	120.2	0	0	55.0	0	0
3. 2013	6	4	2	3.3	3.0	3.9	0	0	55.0	1	1
4. 2014	92	60	32	37.2	33.8	45.7	0	0	55.0	3	2
5. 2015	48	32	16	16.4	15.2	19.5	0	0	55.0	8	6
6. 2016	115	76	39	39.7	36.6	47.7	0	0	55.0	17	8
7. 2017	99	63	37	33.7	40.7	26.0	0	0	55.0	17	12
8. 2018	274	183	91	94.1	87.9	109.6	0	0	55.0	29	22
9. 2019	226	151	75	84.2	78.9	97.6	0	0	55.0	41	28
10. 2020	101	68	33	94.4	89.2	107.4	0	0	55.0	19	13
11. 2021	10	7	3	99.7	87.9	149.7	0	0	55.0	2	1
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	140	93

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 1F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	1	1	2	0	0	3	XXX
2. 2012.....	4,755	3,434	1,321	2,996	2,157	1,196	842	208	72	0	1,330	48
3. 2013.....	4,369	3,122	1,247	2,116	1,481	916	641	122	31	0	1,000	40
4. 2014.....	3,850	2,734	1,117	508	355	663	465	99	24	0	426	45
5. 2015.....	4,495	3,166	1,329	2,994	2,096	1,591	1,114	136	14	0	1,496	72
6. 2016.....	4,666	3,353	1,312	2,278	1,595	1,147	803	164	52	0	1,139	52
7. 2017.....	5,504	3,937	1,567	3,893	2,724	1,838	1,287	227	93	0	1,855	68
8. 2018.....	8,592	6,120	2,472	4,633	3,243	1,683	1,178	437	159	0	2,174	151
9. 2019.....	6,521	4,695	1,826	5,135	3,614	1,520	1,073	606	315	0	2,260	106
10. 2020.....	6,799	4,868	1,931	1,920	1,344	386	270	167	13	0	845	90
11. 2021.....	8,278	5,996	2,282	327	229	125	88	76	3	0	209	64
12. Totals	XXX	XXX	XXX	26,801	18,839	11,066	7,760	2,244	775	0	12,737	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.....	14	10	65	46	5	4	28	20	5	0	0	38	2
2. 2012.....	0	0	6	4	0	0	3	2	0	0	0	3	0
3. 2013.....	0	0	3	2	0	0	1	1	0	0	0	1	0
4. 2014.....	0	0	7	5	0	0	3	2	1	0	0	4	0
5. 2015.....	124	87	70	49	86	60	30	21	10	0	0	103	1
6. 2016.....	54	38	150	105	47	33	64	45	13	0	0	108	1
7. 2017.....	454	318	225	163	94	66	96	70	30	0	0	282	2
8. 2018.....	2,237	1,566	446	318	683	478	191	136	135	21	0	1,172	20
9. 2019.....	1,365	964	487	344	359	251	209	147	144	47	0	811	14
10. 2020.....	1,520	1,064	1,266	898	443	310	542	389	141	1	0	1,250	14
11. 2021.....	1,775	1,243	3,162	2,319	646	452	1,355	994	286	0	0	2,216	24
12. Totals	7,543	5,288	5,886	4,253	2,363	1,654	2,522	1,827	766	68	0	5,989	78

	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	0	0	XXX	23	15
2. 2012.....	4,410	3,076	1,333	92.7	89.6	100.9	0	0	55.0	2	1
3. 2013.....	3,158	2,157	1,002	72.3	69.1	80.3	0	0	55.0	1	1
4. 2014.....	1,281	851	429	33.3	31.1	38.5	0	0	55.0	2	1
5. 2015.....	5,040	3,441	1,600	112.1	108.7	120.3	0	0	55.0	58	45
6. 2016.....	3,918	2,671	1,247	84.0	79.6	95.0	0	0	55.0	61	47
7. 2017.....	6,857	4,721	2,137	124.6	119.9	136.4	0	0	55.0	198	84
8. 2018.....	10,444	7,098	3,346	121.6	116.0	135.4	0	0	55.0	799	373
9. 2019.....	9,825	6,755	3,071	150.7	143.9	168.2	0	0	55.0	544	267
10. 2020.....	6,384	4,289	2,095	93.9	88.1	108.5	0	0	55.0	823	427
11. 2021.....	7,753	5,328	2,425	93.7	88.9	106.2	0	0	55.0	1,375	841
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	3,887	2,102

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),**  
**BOILER AND MACHINERY)**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed	
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments					
	Direct and Assumed	Ceded	Net (1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	XXX
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2013	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2014	36	31	6	0	0	0	0	0	0	0	0	0	XXX
5. 2015	37	37	0	7	7	0	0	0	0	0	0	0	XXX
6. 2016	39	45	(6)	31	31	1	1	0	0	0	0	0	XXX
7. 2017	73	73	0	4	4	0	0	0	0	0	0	0	XXX
8. 2018	79	79	0	2	2	0	0	0	0	0	0	0	XXX
9. 2019	270	270	0	5	4	5	5	0	0	0	0	0	XXX
10. 2020	3,207	3,119	87	171	167	24	24	8	9	0	0	4	XXX
11. 2021	12,283	11,817	466	851	803	32	30	17	16	34	51	XXX	
12. Totals	XXX	XXX	XXX	1,071	1,017	62	60	25	25	34	55	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	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015	0	0	1	1	0	0	0	0	0	0	0	0	0
6. 2016	0	0	1	1	0	0	0	0	0	0	0	0	0
7. 2017	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019	1	1	1	1	0	0	0	0	0	0	0	0	0
10. 2020	19	18	813	789	5	5	144	140	0	0	0	28	3
11. 2021	829	780	3,399	3,296	59	56	600	582	0	0	0	174	47
12. Totals	849	800	4,215	4,088	64	61	745	722	0	0	0	202	51

	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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2012	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
3. 2013	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
4. 2014	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
5. 2015	8	8	0	20.7	20.7	0.0	0	0	55.0	0	0
6. 2016	33	33	0	85.7	75.1	0.0	0	0	55.0	0	0
7. 2017	4	4	0	5.0	5.0	0.0	0	0	55.0	0	0
8. 2018	2	2	0	2.4	2.4	0.0	0	0	55.0	0	0
9. 2019	13	12	1	4.7	4.4	0.0	0	0	55.0	0	0
10. 2020	1,184	1,152	32	36.9	36.9	36.5	0	0	55.0	24	4
11. 2021	5,788	5,563	225	47.1	47.1	48.2	0	0	55.0	153	21
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	177	25

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	220	10	147	32	153	8	0	470	XXX
2. 2012.....	41,084	32,295	8,789	19,418	15,207	8,195	6,047	2,419	1,089	15	7,688	468
3. 2013.....	51,867	40,610	11,257	15,915	12,158	6,141	4,298	2,363	776	44	7,187	808
4. 2014.....	64,833	50,232	14,601	25,949	21,098	10,448	7,605	3,123	1,348	7	9,468	895
5. 2015.....	74,322	56,976	17,346	19,929	14,741	9,339	6,673	6,068	3,922	58	9,999	1,104
6. 2016.....	85,443	65,881	19,562	37,782	30,364	9,516	6,903	4,088	1,761	233	12,357	1,315
7. 2017.....	101,101	79,367	21,734	39,593	33,799	7,663	5,558	3,265	1,245	142	9,919	1,351
8. 2018.....	114,368	90,315	24,053	34,620	29,204	7,149	5,240	3,441	992	23	9,773	1,736
9. 2019.....	165,538	131,083	34,455	17,536	13,114	4,015	2,937	3,977	786	47	8,691	2,245
10. 2020.....	243,901	198,961	44,940	14,324	11,391	1,513	1,105	3,264	406	34	6,199	1,975
11. 2021.....	331,348	277,559	53,789	3,399	2,419	249	189	1,858	249	7	2,648	1,517
12. Totals	XXX	XXX	XXX	228,684	183,506	64,374	46,588	34,017	12,581	609	84,400	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						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....	363	240	1,607	1,200	121	52	347	226	144	19	0	844	57
2. 2012.....	6,168	5,892	751	671	83	59	127	105	142	12	0	532	12
3. 2013.....	1,255	953	833	742	156	109	149	125	122	38	0	549	15
4. 2014.....	2,113	1,558	1,512	1,405	420	294	262	234	161	26	0	952	23
5. 2015.....	5,543	4,747	914	704	1,001	766	218	154	448	187	0	1,566	46
6. 2016.....	8,994	6,906	3,761	3,378	1,352	962	621	526	550	148	0	3,357	112
7. 2017.....	13,727	10,374	4,958	4,552	2,166	1,549	724	635	719	140	0	5,044	150
8. 2018.....	20,994	17,070	7,035	5,689	2,865	2,048	1,821	1,419	1,089	179	0	7,400	212
9. 2019.....	25,370	20,128	37,702	32,043	4,735	3,365	7,894	6,236	2,658	224	0	16,363	347
10. 2020.....	29,148	24,389	72,091	61,542	3,754	2,732	14,553	11,480	4,125	321	0	23,206	479
11. 2021.....	17,963	14,340	141,091	119,610	2,099	1,484	30,615	24,150	7,773	704	0	39,253	696
12. Totals	131,637	106,596	272,253	231,537	18,753	13,419	57,330	45,288	17,930	1,997	0	99,066	2,148

	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	0	0	XXX	530	314
2. 2012.....	37,303	29,083	8,220	90.8	90.1	93.5	0	0	55.0	356	176
3. 2013.....	26,933	19,198	7,736	51.9	47.3	68.7	0	0	55.0	393	156
4. 2014.....	43,987	33,567	10,420	67.8	66.8	71.4	0	0	55.0	662	290
5. 2015.....	43,459	31,895	11,564	58.5	56.0	66.7	0	0	55.0	1,005	561
6. 2016.....	66,663	50,948	15,715	78.0	77.3	80.3	0	0	55.0	2,471	887
7. 2017.....	72,814	57,851	14,963	72.0	72.9	68.8	0	0	55.0	3,758	1,286
8. 2018.....	79,013	61,840	17,173	69.1	68.5	71.4	0	0	55.0	5,270	2,130
9. 2019.....	103,887	78,833	25,054	62.8	60.1	72.7	0	0	55.0	10,901	5,463
10. 2020.....	142,771	113,366	29,406	58.5	57.0	65.4	0	0	55.0	15,307	7,899
11. 2021.....	205,046	163,145	41,901	61.9	58.8	77.9	0	0	55.0	25,103	14,150
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	65,757	33,309

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
	1. Prior.....	XXX	XXX	XXX	0	0	(4)	(3)	3			
2. 2012.....	10,729	8,014	2,715	2,803	1,966	1,539	1,079	592	266	0	1,624	105
3. 2013.....	10,998	8,160	2,838	2,955	1,299	2,715	1,711	496	164	0	2,993	101
4. 2014.....	11,019	8,158	2,861	1,318	923	1,397	979	287	131	6	970	79
5. 2015.....	12,126	8,873	3,254	2,621	1,971	604	423	288	103	24	1,017	103
6. 2016.....	11,906	8,956	2,950	3,499	2,517	1,612	1,144	361	154	0	1,658	111
7. 2017.....	12,748	9,503	3,244	1,582	1,120	1,982	1,432	461	257	0	1,216	123
8. 2018.....	15,506	11,502	4,005	1,370	988	505	375	233	97	42	649	119
9. 2019.....	14,429	10,852	3,577	687	491	570	401	182	44	0	504	96
10. 2020.....	17,868	13,528	4,340	268	190	111	78	164	27	0	249	85
11. 2021.....	21,169	16,053	5,116	304	213	26	18	109	12	0	196	83
12. Totals	XXX	XXX	XXX	17,409	11,678	11,057	7,635	3,178	1,254	73	11,077	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	0	48	28	0	0	20	12	3			
2. 2012.....	380	266	20	16	34	24	8	6	13	1	0	142	2
3. 2013.....	0	0	82	75	0	0	20	17	4	0	0	14	0
4. 2014.....	8	6	68	53	1	1	29	23	11	4	0	30	2
5. 2015.....	165	150	106	87	5	4	32	25	9	0	0	52	1
6. 2016.....	358	254	152	119	81	56	56	43	21	0	0	195	2
7. 2017.....	603	442	215	174	237	167	71	55	38	5	0	321	3
8. 2018.....	525	370	684	558	161	113	221	172	55	0	0	434	8
9. 2019.....	623	440	957	779	247	176	311	243	80	2	0	579	7
10. 2020.....	448	315	2,571	2,036	132	93	909	688	196	16	0	1,109	8
11. 2021.....	498	386	5,540	4,311	73	52	2,099	1,597	377	2	0	2,240	19
12. Totals	3,608	2,628	10,441	8,236	973	685	3,776	2,879	806	30	0	5,146	53

	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	0		0	XXX
2. 2012.....	5,390	3,624	1,766	50.2	45.2	65.0	0	0	55.0	118	24
3. 2013.....	6,272	3,265	3,006	57.0	40.0	105.9	0	0	55.0	7	6
4. 2014.....	3,118	2,118	1,000	28.3	26.0	34.9	0	0	55.0	17	13
5. 2015.....	3,831	2,763	1,068	31.6	31.1	32.8	0	0	55.0	34	18
6. 2016.....	6,139	4,286	1,853	51.6	47.9	62.8	0	0	55.0	136	59
7. 2017.....	5,189	3,652	1,538	40.7	38.4	47.4	0	0	55.0	201	120
8. 2018.....	3,755	2,672	1,083	24.2	23.2	27.0	0	0	55.0	281	153
9. 2019.....	3,658	2,575	1,083	25.4	23.7	30.3	0	0	55.0	361	218
10. 2020.....	4,800	3,441	1,358	26.9	25.4	31.3	0	0	55.0	669	440
11. 2021.....	9,026	6,591	2,435	42.6	41.1	47.6	0	0	55.0	1,342	898
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	3,185	1,961

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 11 - 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	2	3	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	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	XXX	XXX	XXX	(38)	(14)	32	30	244	214	21	9	XXX
2. 2020	25,154	24,524	630	7,743	7,411	120	115	580	478	124	439	XXX
3. 2021	36,449	35,664	784	2,147	2,049	44	42	252	210	8	143	XXX
4. Totals	XXX	XXX	XXX	9,852	9,446	196	186	1,076	901	153	591	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		Adjusting and Other Unpaid				
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	1,166	999	1,305	1,224	20	19	414	386	232	117	0	392	11
2. 2020	10,096	9,575	3,695	3,530	23	24	1,157	1,101	693	494	0	940	48
3. 2021	38,126	36,886	6,198	6,215	67	63	1,778	1,790	1,472	1,145	0	1,542	49
4. Totals	49,388	47,460	11,198	10,969	110	105	3,348	3,277	2,397	1,756	0	2,874	108

	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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	249	144
2. 2020	24,106	22,728	1,378	95.8	92.7	218.9	0	0	55.0	686	254
3. 2021	50,084	48,399	1,685	137.4	135.7	214.8	0	0	55.0	1,224	318
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	2,158	716

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	(14)	(9)	15	16	5	5	23	(5)	XXX
2. 2020	6,739	6,475	264	3,548	3,403	332	319	376	352	448	183	520
3. 2021	10,674	10,014	660	5,054	4,741	213	199	359	318	308	368	570
4. Totals	XXX	XXX	XXX	8,588	8,135	560	534	741	675	780	545	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		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior	(7)	(5)	460	422	(1)	(1)	81	74	1	1	0	43	15
2. 2020	37	35	93	94	51	49	16	17	0	0	0	3	66
3. 2021	1,126	1,055	462	441	107	100	82	78	0	0	0	103	136
4. Totals	1,156	1,085	1,015	956	157	149	179	169	1	1	0	149	217

	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	0		0	XXX
2. 2020	4,453	4,268	185	66.1	65.9	70.1	0	0	55.0	1	2
3. 2021	7,402	6,931	471	69.3	69.2	71.5	0	0	55.0	93	10
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	130	19

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
**SCHEDULE P - PART 1K - FIDELITY/SURETY**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed					
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments									
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded								
1. Prior	XXX	XXX	XXX	<b>NONE</b>								XXX					
2. 2020																	XXX
3. 2021																	XXX
4. Totals	XXX	XXX	XXX														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		Other Unpaid								
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded							
1. Prior					<b>NONE</b>												
2. 2020																	
3. 2021																	
4. Totals																	

	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
2. 2020											
3. 2021											
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 1L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**  
(\$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 (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	0	0	0	0	0	0	0	XXX
2. 2020	213	213	0	270	270	6	6	0	0	0	0	XXX
3. 2021	4,378	4,378	0	1,720	1,720	21	21	0	0	0	0	XXX
4. Totals	XXX	XXX	XXX	1,990	1,990	27	27	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		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2020	0	0	178	166	0	0	31	29	0	0	0	15	18
3. 2021	54	54	584	584	0	(2)	103	103	0	0	0	3	70
4. Totals	54	54	762	749	0	(2)	134	132	0	0	0	17	88

	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	0		0	XXX
2. 2020	485	470	15	228.0	221.1	0.0	0	0	55.0	12	2
3. 2021	2,482	2,479	3	56.7	56.6	0.0	0	0	55.0	0	2
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	13	5

Schedule P - Part 1M - International

**N O N E**

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

**N O N E**

Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability

**N O N E**

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
	1. Prior.....	XXX	XXX	XXX	1,083	368	288	178	59			
2. 2012.....	15,326	10,836	4,490	7,120	4,997	5,602	3,927	856	336	52	4,318	225
3. 2013.....	18,183	12,813	5,370	10,657	7,996	2,858	2,009	956	355	75	4,112	234
4. 2014.....	23,901	16,843	7,059	6,031	4,297	3,733	2,612	846	362	42	3,339	200
5. 2015.....	24,288	17,093	7,195	7,788	5,518	3,623	2,536	1,282	617	37	4,021	233
6. 2016.....	24,679	17,466	7,213	5,033	3,523	3,175	2,222	962	372	4	3,052	266
7. 2017.....	25,152	17,754	7,398	3,179	2,249	1,961	1,375	686	217	38	1,984	265
8. 2018.....	25,332	17,917	7,415	3,208	2,458	3,522	2,849	823	219	0	2,026	491
9. 2019.....	29,833	21,234	8,598	1,934	1,353	724	507	762	93	0	1,467	573
10. 2020.....	36,355	25,733	10,622	395	276	133	93	482	47	0	593	307
11. 2021.....	42,725	30,535	12,189	170	119	26	18	83	9	0	132	64
12. Totals	XXX	XXX	XXX	46,598	33,155	25,645	18,327	7,796	2,642	250	25,914	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.....	280	163	718	423	275	166	387	228	92			
2. 2012.....	1,181	827	232	189	264	185	125	102	60	4	0	556	8
3. 2013.....	1,145	854	544	394	316	221	293	212	115	26	0	705	21
4. 2014.....	1,012	712	1,090	817	476	333	587	440	133	9	0	986	14
5. 2015.....	2,471	1,814	997	707	1,635	1,144	537	380	295	81	0	1,808	27
6. 2016.....	1,246	872	2,009	1,423	738	517	1,075	759	239	25	0	1,711	41
7. 2017.....	2,382	1,667	3,119	2,207	670	469	1,682	1,191	351	24	0	2,647	36
8. 2018.....	2,901	2,031	5,681	3,998	776	543	3,051	2,145	590	44	0	4,239	43
9. 2019.....	1,660	1,162	8,651	6,117	837	586	4,649	3,285	749	16	0	5,381	57
10. 2020.....	2,191	1,534	9,902	7,017	502	352	5,325	3,771	910	58	0	6,100	65
11. 2021.....	645	452	18,148	12,882	153	107	9,753	6,919	1,454	29	0	9,764	29
12. Totals	17,114	12,088	51,091	36,173	6,643	4,624	27,463	19,432	4,987	324	0	34,659	362

	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	0		0	XXX	412	351
	2. 2012.....	15,441	10,568	4,874	100.8	97.5	108.5	0		0	55.0	397	158
3. 2013.....	16,884	12,067	4,817	92.9	94.2	89.7	0	0	55.0	440	265		
4. 2014.....	13,906	9,582	4,325	58.2	56.9	61.3	0	0	55.0	572	414		
5. 2015.....	18,627	12,798	5,829	76.7	74.9	81.0	0	0	55.0	947	861		
6. 2016.....	14,477	9,714	4,763	58.7	55.6	66.0	0	0	55.0	960	751		
7. 2017.....	14,030	9,399	4,631	55.8	52.9	62.6	0	0	55.0	1,627	1,020		
8. 2018.....	20,552	14,287	6,265	81.1	79.7	84.5	0	0	55.0	2,554	1,685		
9. 2019.....	19,966	13,119	6,848	66.9	61.8	79.6	0	0	55.0	3,032	2,349		
10. 2020.....	19,841	13,148	6,693	54.6	51.1	63.0	0	0	55.0	3,543	2,557		
11. 2021.....	30,431	20,535	9,896	71.2	67.2	81.2	0	0	55.0	5,459	4,305		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	19,945	14,714		

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 1R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
	1. Prior.....	XXX	XXX	XXX	0	0	0	0	0			
2. 2012.....	4,757	3,419	1,338	127	94	122	90	79	25	0	119	113
3. 2013.....	5,453	3,881	1,572	226	158	805	563	212	104	0	418	149
4. 2014.....	5,414	3,841	1,572	329	231	134	93	93	40	0	192	36
5. 2015.....	5,217	3,689	1,528	761	609	287	213	65	12	0	278	41
6. 2016.....	5,326	3,812	1,514	505	354	175	123	36	12	0	228	14
7. 2017.....	5,514	3,881	1,634	187	132	45	31	41	18	0	90	17
8. 2018.....	6,436	4,770	1,665	85	60	45	31	62	32	0	70	17
9. 2019.....	8,152	6,764	1,387	37	26	11	8	43	15	0	42	15
10. 2020.....	11,347	8,979	2,368	0	0	20	14	38	8	0	37	19
11. 2021.....	13,580	10,363	3,217	0	0	17	0	25	1	0	40	20
12. Totals	XXX	XXX	XXX	2,257	1,664	1,660	1,166	694	267	0	1,514	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	0	50	37	0	0	33	25	4			
2. 2012.....	0	0	8	5	0	0	5	4	1	0	0	4	0
3. 2013.....	8	6	55	39	24	17	37	26	6	1	0	43	1
4. 2014.....	0	0	19	14	0	0	13	9	2	0	0	11	0
5. 2015.....	0	0	15	10	0	0	10	7	1	0	0	9	1
6. 2016.....	0	0	20	14	0	0	14	10	2	0	0	12	0
7. 2017.....	0	0	26	16	0	0	17	11	3	0	0	20	0
8. 2018.....	110	77	153	117	0	0	102	78	16	0	0	109	1
9. 2019.....	292	204	373	311	28	20	249	215	41	2	0	232	2
10. 2020.....	281	197	1,101	821	64	45	734	568	100	0	0	650	3
11. 2021.....	76	54	2,150	1,751	78	55	1,433	1,165	184	1	0	897	8
12. Totals	766	537	3,971	3,136	194	136	2,647	2,116	360	3	0	2,011	15

	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	0		0	XXX
2. 2012.....	341	218	123	7.2	6.4	9.2	0	0	55.0	2	2
3. 2013.....	1,375	913	461	25.2	23.5	29.3	0	0	55.0	19	24
4. 2014.....	590	387	203	10.9	10.1	12.9	0	0	55.0	6	5
5. 2015.....	1,139	852	287	21.8	23.1	18.8	0	0	55.0	4	4
6. 2016.....	752	512	239	14.1	13.4	15.8	0	0	55.0	6	6
7. 2017.....	318	208	110	5.8	5.4	6.7	0	0	55.0	10	10
8. 2018.....	573	395	179	8.9	8.3	10.7	0	0	55.0	69	40
9. 2019.....	1,074	799	275	13.2	11.8	19.8	0	0	55.0	150	82
10. 2020.....	2,339	1,652	686	20.6	18.4	29.0	0	0	55.0	364	286
11. 2021.....	3,963	3,026	937	29.2	29.2	29.1	0	0	55.0	422	475
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,064	947

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 1S - FINANCIAL GUARANTY/MORTGAGE GUARANTY**  
(\$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 (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	(33)	(23)	0	0	0	0	0	(10)	XXX
2. 2020	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2021	0	0	0	0	0	0	0	26	18	0	8	XXX
4. Totals	XXX	XXX	XXX	(33)	(23)	0	0	26	18	0	(2)	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		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 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	0		0	XXX
2. 2020	0	0	0	0.0	0.0	0.0	0	0	55.0	0	0
3. 2021	26	18	8	0.0	0.0	0.0	0	0	55.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
**SCHEDULE P - PART 1T - WARRANTY**  
(\$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 (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	<b>NONE</b>								XXX				
2. 2020																
3. 2021																
4. Totals	XXX	XXX	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		Other Unpaid							
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior					<b>NONE</b>											
2. 2020																
3. 2021																
4. Totals																

	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
2. 2020											
3. 2021											
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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**SCHEDULE P - PART 2A - HOMEOWNERS/FAROWNERS**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	(1)	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	(1)	3	3	15	3	3	6	8	2	5
5. 2015.....	XXX	XXX	XXX	1	1	2	3	2	(9)	2	10	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	28	47	18	47
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	12	35	23	35
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	114	116	64	65	1	(51)
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	627	549	720	171	93
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	646	568	(78)	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	666	XXX	XXX
12. Totals											147	129

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	194	206	229	215	206	202	203	202	202	0	(1)
4. 2014.....	XXX	XXX	2,981	1,922	2,516	2,762	2,873	2,639	2,776	2,912	137	273
5. 2015.....	XXX	XXX	XXX	3,942	4,010	5,027	5,133	5,187	5,315	5,349	34	162
6. 2016.....	XXX	XXX	XXX	XXX	10,160	16,764	19,751	23,016	24,577	25,908	1,331	2,892
7. 2017.....	XXX	XXX	XXX	XXX	XXX	30,681	31,371	41,838	48,988	55,429	6,442	13,591
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	38,039	33,199	41,208	53,092	11,884	19,893
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38,994	34,581	52,347	17,767	13,353
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,121	2,745	(1,376)	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,965	XXX	XXX
12. Totals											36,218	50,164

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

1. Prior.....	8,819	8,488	7,288	7,116	6,656	6,379	6,196	6,126	5,763	5,612	(151)	(514)
2. 2012.....	5,123	5,134	4,997	4,714	4,485	4,483	4,487	4,486	4,405	4,350	(55)	(136)
3. 2013.....	XXX	1,997	2,165	2,011	1,822	1,722	1,724	1,717	1,656	1,652	(4)	(65)
4. 2014.....	XXX	XXX	2,868	2,798	2,510	2,366	2,167	2,151	2,114	2,119	5	(32)
5. 2015.....	XXX	XXX	XXX	3,980	4,289	3,980	3,765	3,557	3,376	3,328	(47)	(229)
6. 2016.....	XXX	XXX	XXX	XXX	4,091	4,247	3,855	3,331	2,994	2,858	(135)	(473)
7. 2017.....	XXX	XXX	XXX	XXX	XXX	6,306	5,894	5,493	5,333	4,929	(405)	(564)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	4,673	5,001	4,947	4,261	(686)	(740)
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,424	4,657	4,840	182	415
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,424	4,655	232	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,294	XXX	XXX
12. Totals											(1,064)	(2,336)

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	18	17	12	19	28	27	26	27	0	0
5. 2015.....	XXX	XXX	XXX	39	39	27	31	31	30	47	17	16
6. 2016.....	XXX	XXX	XXX	XXX	13	13	56	60	81	74	(7)	14
7. 2017.....	XXX	XXX	XXX	XXX	XXX	26	33	51	52	56	5	5
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	11	8	13	23	10	15
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(165)	0	(2)	(1)	163
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	XXX	XXX
12. Totals											23	214

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**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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior	112	100	76	59	63	60	58	58	59	59	0	1
2. 2012	22	26	36	35	37	35	33	32	31	31	0	(2)
3. 2013	XXX	38	37	26	17	6	5	1	2	2	0	1
4. 2014	XXX	XXX	54	47	37	36	27	26	26	26	0	0
5. 2015	XXX	XXX	XXX	64	50	38	17	12	12	12	0	0
6. 2016	XXX	XXX	XXX	XXX	58	50	33	32	34	34	0	1
7. 2017	XXX	XXX	XXX	XXX	XXX	61	57	42	33	25	(8)	(18)
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	66	65	83	72	(11)	7
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	67	66	60	(6)	(7)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	28	27	0	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	XXX	XXX
12. Totals											(26)	(16)

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

1. Prior	2,417	1,478	872	677	619	628	619	618	713	713	0	95
2. 2012	831	1,312	1,310	1,225	1,195	1,203	1,198	1,197	1,196	1,196	0	(1)
3. 2013	XXX	741	818	933	1,005	939	911	911	911	911	0	1
4. 2014	XXX	XXX	678	608	491	384	373	355	353	353	0	(2)
5. 2015	XXX	XXX	XXX	848	944	1,211	1,414	1,443	1,467	1,467	0	25
6. 2016	XXX	XXX	XXX	XXX	918	1,111	1,093	1,146	1,146	1,121	(25)	(24)
7. 2017	XXX	XXX	XXX	XXX	XXX	1,079	1,742	1,988	1,981	1,973	(8)	(15)
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1,858	2,523	2,995	2,954	(41)	431
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,674	2,641	2,682	41	1,009
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,705	1,802	97	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,065	XXX	XXX
12. Totals											64	1,517

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

1. Prior	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	1	0	0	0	0	0	0	0	0	0
5. 2015	XXX	XXX	XXX	0	1	0	0	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	1	1	1
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41	33	(9)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	224	XXX	XXX
12. Totals											(8)	1

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

1. Prior	26,197	21,080	16,074	15,626	15,655	17,516	17,484	16,824	16,553	16,482	(71)	(342)
2. 2012	5,967	5,966	5,645	5,971	6,095	6,219	6,272	6,365	6,646	6,762	115	396
3. 2013	XXX	7,488	7,410	6,442	6,125	6,320	6,246	6,087	6,063	6,063	0	(24)
4. 2014	XXX	XXX	9,295	8,407	6,996	6,651	7,281	8,038	8,288	8,509	222	471
5. 2015	XXX	XXX	XXX	10,999	9,499	8,584	8,338	8,427	8,824	9,158	334	731
6. 2016	XXX	XXX	XXX	XXX	12,621	11,594	11,777	11,897	11,969	12,985	1,017	1,089
7. 2017	XXX	XXX	XXX	XXX	XXX	13,205	12,112	12,104	11,785	12,364	579	260
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	15,591	14,652	13,704	13,815	111	(837)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,948	20,141	19,428	(713)	(2,520)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25,615	22,744	(2,871)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33,223	XXX	XXX
12. Totals											(1,277)	(775)

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

1. Prior	6,785	4,599	3,961	4,117	4,040	4,028	4,134	4,046	4,043	4,038	(5)	(8)
2. 2012	1,614	1,625	1,559	1,569	1,532	1,469	1,425	1,442	1,440	1,427	(13)	(15)
3. 2013	XXX	1,645	1,559	1,579	2,625	2,655	2,699	2,678	2,671	2,670	(1)	(8)
4. 2014	XXX	XXX	1,565	1,396	1,159	972	884	864	862	837	(25)	(27)
5. 2015	XXX	XXX	XXX	1,730	1,417	1,308	986	941	875	875	0	(66)
6. 2016	XXX	XXX	XXX	XXX	1,594	1,351	1,580	1,745	1,627	1,625	(2)	(120)
7. 2017	XXX	XXX	XXX	XXX	XXX	1,484	1,209	1,167	1,347	1,301	(46)	134
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1,822	1,291	899	890	(8)	(401)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,609	920	867	(53)	(742)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,607	1,041	(566)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,963	XXX	XXX
12. Totals											(721)	(1,253)

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
**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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	238	68	240	172	2
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	893	1,078	184	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,316	XXX	XXX
4. Totals											356	2

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	52	73	22	73
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	229	161	(68)	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	430	XXX	XXX
4. Totals											(47)	73

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Totals												

**NONE**

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15	15	0	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	XXX	XXX
4. Totals											0	0

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

1. Prior.....												
2. 2012.....												
3. 2013.....	XXX											
4. 2014.....	XXX	XXX										
5. 2015.....	XXX	XXX	XXX									
6. 2016.....	XXX	XXX	XXX	XXX								
7. 2017.....	XXX	XXX	XXX	XXX	XXX							
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**NONE**

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property

**N O N E**

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

**N O N E**

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
SCHEDULE P - PART 2R - SECTION 1 - PRODUCTS 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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior	11,255	9,097	9,128	9,651	9,719	10,474	11,699	10,788	10,138	10,395	258	(393)
2. 2012	2,788	2,835	2,977	2,853	3,051	3,390	3,637	3,803	4,051	4,298	247	496
3. 2013	XXX	3,416	3,465	3,598	3,367	3,712	3,960	3,960	3,961	4,126	165	166
4. 2014	XXX	XXX	4,374	4,239	3,963	3,755	3,714	3,796	3,799	3,716	(83)	(80)
5. 2015	XXX	XXX	XXX	4,395	4,167	3,711	3,878	4,042	4,455	4,950	495	908
6. 2016	XXX	XXX	XXX	XXX	4,509	4,043	3,960	3,878	3,795	3,960	165	82
7. 2017	XXX	XXX	XXX	XXX	XXX	4,725	4,488	4,488	3,794	3,835	41	(653)
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	5,294	4,951	4,538	5,116	578	165
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,373	5,528	5,446	(82)	(927)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,697	5,406	(1,291)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,398	XXX	XXX
12. Totals											493	(236)

**SCHEDULE P - PART 2R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE**

1. Prior	1,574	1,202	764	786	685	1,057	1,046	677	677	677	0	0
2. 2012	740	707	480	166	72	75	70	70	69	69	0	(1)
3. 2013	XXX	904	879	578	463	377	331	348	348	348	0	0
4. 2014	XXX	XXX	854	664	449	248	156	149	148	148	0	0
5. 2015	XXX	XXX	XXX	751	705	600	338	290	232	232	0	(57)
6. 2016	XXX	XXX	XXX	XXX	649	461	378	287	246	213	(33)	(74)
7. 2017	XXX	XXX	XXX	XXX	XXX	575	430	266	138	85	(53)	(181)
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	569	413	190	133	(58)	(280)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	502	261	207	(54)	(295)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	543	555	12	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	730	XXX	XXX
12. Totals											(186)	(889)

**SCHEDULE P - PART 2S - FINANCIAL GUARANTY/MORTGAGE GUARANTY**

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	(10)	(10)	(10)
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
4. Totals											(10)	(10)

**SCHEDULE P - PART 2T - WARRANTY**

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Totals												

**NONE**

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**SCHEDULE P - PART 3A - HOMEOWNERS/FAROWNERS**

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			
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021			
1. Prior	.000	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	0	0	0	0	0	0	0	0	0	0	0
5. 2015	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	1
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	2	1
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	14	2

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

1. Prior	.000	0	0	0	0	0	0	0	0	0	0	4	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0	0	1	0
4. 2014	XXX	XXX	0	2	3	3	3	3	3	3	3	84	30
5. 2015	XXX	XXX	XXX	1	1	1	2	2	2	2	2	98	39
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0	1
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	7	35	54	73	259	373	373
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	77	249	531	844	1,098	1,098
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	103	326	810	601	601
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	164	538	402	402

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

1. Prior	.000	0	0	0	0	0	0	0	0	0	0	1	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	200	187	204	205	202	202	202	202	202	202	26	41
4. 2014	XXX	XXX	650	927	1,669	2,315	2,699	2,548	2,627	2,662	1,904	6,608	6,608
5. 2015	XXX	XXX	XXX	350	1,548	3,085	4,301	4,800	4,993	4,711	2,510	42,263	42,263
6. 2016	XXX	XXX	XXX	XXX	1,676	7,126	13,049	19,065	21,783	19,428	12,351	73,801	73,801
7. 2017	XXX	XXX	XXX	XXX	XXX	4,157	14,143	28,178	37,695	31,279	14,704	60,886	60,886
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	4,026	14,724	25,090	6,214	12,181	42,921	42,921
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,776	12,559	(25,403)	9,249	30,873	30,873
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	143	712	552	552	552
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	646	539	388	388

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

1. Prior	.000	2,533	3,849	4,279	4,505	4,763	4,837	4,870	4,900	4,932	261	0	0
2. 2012	1,397	3,136	3,875	4,163	4,255	4,270	4,275	4,283	4,306	4,308	562	190	190
3. 2013	XXX	606	1,296	1,502	1,579	1,594	1,607	1,612	1,613	1,613	227	76	76
4. 2014	XXX	XXX	650	1,673	1,943	1,998	2,033	2,040	2,043	2,046	407	161	161
5. 2015	XXX	XXX	XXX	1,099	2,432	2,880	3,104	3,137	3,185	3,183	545	286	286
6. 2016	XXX	XXX	XXX	XXX	699	1,860	2,373	2,504	2,564	2,584	647	289	289
7. 2017	XXX	XXX	XXX	XXX	XXX	1,195	2,713	3,408	3,787	3,913	2,295	271	271
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	779	1,998	2,700	2,948	2,286	250	250
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	762	2,363	3,079	1,947	219	219
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,009	2,563	1,635	59	59
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	933	809	52	52

**SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL**

1. Prior	.000	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	2	7	7	14	18	26	26	26	12	9	9
5. 2015	XXX	XXX	XXX	11	17	23	25	32	33	33	42	39	39
6. 2016	XXX	XXX	XXX	XXX	6	12	26	31	32	34	91	59	59
7. 2017	XXX	XXX	XXX	XXX	XXX	12	23	33	36	43	134	79	79
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	2	2	3	3	65	57	57
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	4	83	61	61
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	47	71	71
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	6	3	3

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**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		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior.....	.000	31	34	38	57	57	57	57	58	58	2	0
2. 2012.....	0	4	5	31	31	31	31	31	30	30	4	1
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	1
4. 2014.....	XXX	XXX	0	1	1	4	5	6	21	21	1	2
5. 2015.....	XXX	XXX	XXX	0	1	1	1	1	1	1	0	2
6. 2016.....	XXX	XXX	XXX	XXX	0	0	6	7	10	11	1	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	24
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	12	27	2	34
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	9
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	2
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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

1. Prior.....	.000	253	310	491	549	592	596	596	680	680	19	0
2. 2012.....	130	655	897	997	1,036	1,194	1,194	1,194	1,194	1,194	12	36
3. 2013.....	XXX	16	355	504	801	853	910	910	910	910	14	25
4. 2014.....	XXX	XXX	34	209	308	321	347	350	350	350	5	40
5. 2015.....	XXX	XXX	XXX	31	399	711	1,148	1,294	1,312	1,374	15	56
6. 2016.....	XXX	XXX	XXX	XXX	24	392	680	977	1,002	1,027	17	34
7. 2017.....	XXX	XXX	XXX	XXX	XXX	187	945	1,440	1,679	1,720	23	42
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	137	1,026	1,588	1,896	28	103
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	301	1,025	1,969	25	67
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	165	692	7	69
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	136	2	39

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

1. Prior.....	.000	0	0	0	0	0	0	0	0	0	XXX	XXX
2. 2012.....	0	0	0	0	0	0	0	0	0	0	XXX	XXX
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	XXX	XXX
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	XXX	XXX
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	XXX	XXX
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	XXX	XXX
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	XXX	XXX
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	XXX	XXX
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	1	XXX	XXX
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	5	XXX	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50	XXX	XXX

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

1. Prior.....	.000	2,943	5,420	7,789	9,937	13,303	14,621	15,302	15,438	15,763	405	0
2. 2012.....	201	880	2,129	3,500	4,551	5,072	5,488	6,013	6,311	6,359	154	302
3. 2013.....	XXX	221	1,025	1,985	3,380	4,701	5,079	5,346	5,477	5,599	176	617
4. 2014.....	XXX	XXX	165	1,081	2,047	3,606	5,331	6,892	7,341	7,693	220	652
5. 2015.....	XXX	XXX	XXX	174	889	2,400	4,349	6,216	7,189	7,853	237	821
6. 2016.....	XXX	XXX	XXX	XXX	285	1,735	4,275	6,709	8,751	10,030	306	897
7. 2017.....	XXX	XXX	XXX	XXX	XXX	185	1,516	3,594	6,082	7,899	287	914
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	284	1,995	4,498	7,324	377	1,147
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	402	2,397	5,499	419	1,479
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	574	3,341	215	1,281
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,039	102	719

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

1. Prior.....	.000	1,392	1,937	2,975	3,392	3,782	3,934	4,021	4,012	4,011	73	0
2. 2012.....	118	574	965	1,112	1,256	1,254	1,261	1,275	1,282	1,297	29	74
3. 2013.....	XXX	111	232	1,085	2,377	2,474	2,563	2,568	2,660	2,660	28	73
4. 2014.....	XXX	XXX	87	569	691	719	751	805	812	813	25	53
5. 2015.....	XXX	XXX	XXX	91	397	821	824	826	831	832	34	69
6. 2016.....	XXX	XXX	XXX	XXX	50	425	769	1,267	1,377	1,451	29	80
7. 2017.....	XXX	XXX	XXX	XXX	XXX	90	282	524	929	1,012	32	87
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	54	248	417	512	20	91
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	200	366	14	75
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15	111	15	63
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	99	12	52

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**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 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		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	(16)	(37)	XXX	XXX
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52	337	XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	101	XXX	XXX

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	36	30	0	0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	115	158	383	72
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	327	356	78

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000			XXX	XXX
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE**

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	0	0	XXX	XXX
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

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

1. Prior	.000										XXX	XXX
2. 2012											XXX	XXX
3. 2013	XXX										XXX	XXX
4. 2014	XXX	XXX									XXX	XXX
5. 2015	XXX	XXX	XXX								XXX	XXX
6. 2016	XXX	XXX	XXX	XXX							XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE**

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property

**N O N E**

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability

**N O N E**

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
SCHEDULE P - PART 3R - SECTION 1 - PRODUCTS 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		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior.....	.000	1,288	3,319	4,539	5,674	7,465	7,964	8,592	8,892	9,716	135	0
2. 2012.....	15	566	675	1,093	1,630	2,157	2,699	3,067	3,547	3,799	52	165
3. 2013.....	XXX	50	129	1,008	1,246	2,143	2,690	3,093	3,394	3,510	62	151
4. 2014.....	XXX	XXX	72	286	636	1,376	2,004	2,391	2,684	2,855	50	136
5. 2015.....	XXX	XXX	XXX	64	176	467	1,349	2,034	2,841	3,356	64	141
6. 2016.....	XXX	XXX	XXX	XXX	30	251	527	1,042	1,994	2,462	59	166
7. 2017.....	XXX	XXX	XXX	XXX	XXX	122	370	582	891	1,515	49	180
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	88	189	653	1,423	83	364
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	359	798	91	425
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30	158	30	212
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	59	7	28

**SCHEDULE P - PART 3R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE**

1. Prior.....	.000	269	407	424	454	602	680	650	656	656	9	0
2. 2012.....	12	62	67	68	67	66	66	66	65	65	3	111
3. 2013.....	XXX	17	193	238	249	295	298	300	307	310	4	144
4. 2014.....	XXX	XXX	2	46	56	139	139	139	139	139	4	32
5. 2015.....	XXX	XXX	XXX	7	264	304	219	224	225	225	1	39
6. 2016.....	XXX	XXX	XXX	XXX	8	66	157	158	203	203	2	13
7. 2017.....	XXX	XXX	XXX	XXX	XXX	7	60	62	69	68	2	15
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	3	20	40	40	1	15
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	3	14	1	12
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	6	0	16
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	0	13

**SCHEDULE P - PART 3S - FINANCIAL GUARANTY/MORTGAGE GUARANTY**

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	.0	(10)	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

**SCHEDULE P - PART 3T - WARRANTY**

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

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**SCHEDULE P - PART 4A - HOMEOWNERS/FAROWNERS**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	1	1	0	12	0	0	3	5
5. 2015.....	XXX	XXX	XXX	(1)	0	1	1	0	(11)	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	28	47
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	12	35
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	91	63	(8)	(24)
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	456	173	3
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	441	116
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	369

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	91	13	26	10	4	1	1	0	0
4. 2014.....	XXX	XXX	2,012	439	638	136	89	20	48	130
5. 2015.....	XXX	XXX	XXX	2,542	921	835	290	55	108	331
6. 2016.....	XXX	XXX	XXX	XXX	3,161	3,170	1,600	908	592	2,680
7. 2017.....	XXX	XXX	XXX	XXX	XXX	16,103	3,936	2,047	667	5,341
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	24,676	5,564	1,158	12,314
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26,756	6,445	29,541
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,516	957
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,145

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

1. Prior.....	3,377	3,045	2,066	1,773	1,312	979	760	713	374	217
2. 2012.....	732	706	598	405	199	135	172	184	96	42
3. 2013.....	XXX	224	429	312	183	91	94	102	42	39
4. 2014.....	XXX	XXX	561	730	416	295	117	100	65	54
5. 2015.....	XXX	XXX	XXX	616	881	704	487	293	137	104
6. 2016.....	XXX	XXX	XXX	XXX	1,428	1,351	1,046	678	354	227
7. 2017.....	XXX	XXX	XXX	XXX	XXX	2,088	1,949	1,271	1,123	692
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	2,317	1,750	1,689	942
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,278	1,006	1,050
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,184	694
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,680

**SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL**

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	13	7	4	1	0	1	0	0
5. 2015.....	XXX	XXX	XXX	7	12	1	1	(2)	(2)	14
6. 2016.....	XXX	XXX	XXX	XXX	4	1	26	28	48	39
7. 2017.....	XXX	XXX	XXX	XXX	XXX	10	5	12	10	12
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	8	6	10	21
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(166)	0	(5)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12

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**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	98	50	34	7	6	3	1	1	1	0
2. 2012	13	14	7	5	7	4	3	2	1	1
3. 2013	XXX	38	37	26	17	6	5	1	2	2
4. 2014	XXX	XXX	53	39	29	11	2	1	5	5
5. 2015	XXX	XXX	XXX	62	47	36	17	12	12	12
6. 2016	XXX	XXX	XXX	XXX	54	46	28	11	7	7
7. 2017	XXX	XXX	XXX	XXX	XXX	57	56	42	31	25
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	51	19	19	18
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	63	58	41
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	28	27
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2

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

1. Prior	1,990	1,000	380	129	46	21	9	7	15	27
2. 2012	387	249	138	114	35	10	4	2	3	3
3. 2013	XXX	466	97	110	88	19	1	1	1	1
4. 2014	XXX	XXX	519	266	136	31	7	4	3	3
5. 2015	XXX	XXX	XXX	543	183	70	37	26	23	30
6. 2016	XXX	XXX	XXX	XXX	645	184	78	79	81	64
7. 2017	XXX	XXX	XXX	XXX	XXX	421	153	110	104	88
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	585	72	94	183
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	139	239	204
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	909	521
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,203

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

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	1	0	0	0	0	0	0	0
5. 2015	XXX	XXX	XXX	0	1	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	40	28
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	122

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

1. Prior	22,534	14,109	7,938	4,798	4,276	2,349	2,076	1,032	917	528
2. 2012	5,040	3,699	2,095	1,308	892	531	204	130	135	101
3. 2013	XXX	6,324	5,237	2,952	1,422	971	592	315	242	115
4. 2014	XXX	XXX	8,151	5,977	3,051	1,222	365	260	196	136
5. 2015	XXX	XXX	XXX	9,810	6,552	3,684	1,335	407	284	273
6. 2016	XXX	XXX	XXX	XXX	11,135	7,213	3,417	1,047	731	477
7. 2017	XXX	XXX	XXX	XXX	XXX	11,428	7,366	4,143	2,139	495
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	13,028	9,051	4,892	1,748
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,773	13,406	7,317
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22,520	13,621
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,946

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

1. Prior	5,291	2,134	1,106	623	405	114	57	23	32	27
2. 2012	1,214	749	336	190	101	54	31	12	8	6
3. 2013	XXX	1,357	1,038	365	177	102	59	21	11	10
4. 2014	XXX	XXX	1,320	691	378	178	83	45	47	21
5. 2015	XXX	XXX	XXX	1,480	717	397	153	102	26	26
6. 2016	XXX	XXX	XXX	XXX	1,219	637	230	200	69	46
7. 2017	XXX	XXX	XXX	XXX	XXX	1,153	570	257	109	57
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1,311	714	200	175
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,340	448	247
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,422	756
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,731

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	228	83	109
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	497	220
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(29)

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	48	18	45
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	82	(1)
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15	15
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XXX	XXX						
7. 2017	XXX	XXX	XXX	XXX	XXX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property

**N O N E**

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability

**N O N E**

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
**SCHEDULE P - PART 4R - SECTION 1 - PRODUCTS 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	9,036	5,976	4,039	3,485	2,988	2,464	1,542	1,295	840	453
2. 2012	2,481	1,933	1,817	1,197	821	671	368	122	67	66
3. 2013	XXX	3,016	2,803	1,981	1,528	974	834	441	252	230
4. 2014	XXX	XXX	4,121	3,606	2,877	1,906	1,337	1,135	762	419
5. 2015	XXX	XXX	XXX	4,063	3,509	2,482	1,425	408	403	447
6. 2016	XXX	XXX	XXX	XXX	4,310	3,379	2,657	1,988	1,291	902
7. 2017	XXX	XXX	XXX	XXX	XXX	4,464	3,638	3,255	2,060	1,404
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	4,910	4,197	2,800	2,590
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,060	4,614	3,899
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,317	4,440
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,100

**SCHEDULE P - PART 4R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE**

1. Prior	1,297	804	305	162	50	41	28	26	21	21
2. 2012	703	636	411	98	4	9	4	4	4	4
3. 2013	XXX	640	633	295	153	73	28	12	12	28
4. 2014	XXX	XXX	826	581	383	106	17	9	9	9
5. 2015	XXX	XXX	XXX	695	416	267	114	65	7	7
6. 2016	XXX	XXX	XXX	XXX	579	341	187	97	42	10
7. 2017	XXX	XXX	XXX	XXX	XXX	531	370	204	69	17
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	550	369	126	60
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	469	223	97
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	493	446
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	667

**SCHEDULE P - PART 4S - FINANCIAL GUARANTY/MORTGAGE GUARANTY**

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

**SCHEDULE P - PART 4T - WARRANTY**

1. Prior	XXX	XXX	XX	XXX	XXX	XX	XX	XXX		
2. 2020	XXX	XXX	XX	XX	XX	XX	XXX	XXX		
3. 2021	XXX	XXX	XX	XX	XX	XX	XXX	XXX	XXX	

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**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	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	2
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14

**SECTION 2**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

**SECTION 3**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	1
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	2
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
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	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	10	2	2	1	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	1	1	1	1	1	1	1	1	1
4. 2014	XXX	XXX	32	79	80	84	84	84	84	84
5. 2015	XXX	XXX	XXX	73	98	98	98	98	98	98
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	43	100	251	259
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	193	794	844
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	493	810
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	538

**SECTION 2**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	8	4	2	1	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	1	0	0	0	0	0	0	0
4. 2014	XXX	XXX	21	2	1	0	0	0	0	0
5. 2015	XXX	XXX	XXX	28	2	1	1	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	86	0	17	9
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	156	125
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	335	165
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	305

**SECTION 3**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	19	0	1	0	0	0	0	0	16	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	1	1	1	1	1	1	1	1	1
4. 2014	XXX	XXX	67	100	100	102	102	102	113	114
5. 2015	XXX	XXX	XXX	123	125	125	126	124	138	138
6. 2016	XXX	XXX	XXX	XXX	0	0	0	1	1	1
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	290	424	641	641
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,161	2,047	2,067
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,324	1,576
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,245

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK 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	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	0	0	0	0	0	0	0	1	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	1	6	7	9	17	17	17	18	26
4. 2014	XXX	XXX	386	800	905	1,706	1,730	1,741	1,833	1,904
5. 2015	XXX	XXX	XXX	1,495	1,048	2,115	2,198	2,278	2,403	2,510
6. 2016	XXX	XXX	XXX	XXX	4,593	10,048	10,998	11,444	12,145	12,351
7. 2017	XXX	XXX	XXX	XXX	XXX	8,549	11,755	13,438	14,089	14,704
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	7,405	9,924	11,274	12,181
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,806	7,904	9,249
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	237	552
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	539

**SECTION 2**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	8	3	1	0	0	0	0	0	0
4. 2014	XXX	XXX	1,233	200	124	81	42	27	29	7
5. 2015	XXX	XXX	XXX	3,674	890	557	357	222	197	29
6. 2016	XXX	XXX	XXX	XXX	9,205	2,523	1,673	1,047	824	149
7. 2017	XXX	XXX	XXX	XXX	XXX	12,788	3,984	2,461	1,813	587
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	9,285	3,027	2,157	1,014
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,931	2,319	1,434
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	277	156
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	454

**SECTION 3**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	0	0	0	0	0	0	0	2	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	13	25	29	30	57	57	57	59	67
4. 2014	XXX	XXX	3,829	4,257	4,319	8,028	8,037	8,042	8,466	8,518
5. 2015	XXX	XXX	XXX	21,886	22,901	42,343	42,427	42,504	44,710	44,802
6. 2016	XXX	XXX	XXX	XXX	46,440	81,333	81,994	82,226	86,106	86,301
7. 2017	XXX	XXX	XXX	XXX	XXX	70,206	73,998	75,023	75,587	76,177
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	51,555	54,039	55,056	56,117
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38,000	39,800	41,556
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	988	1,260
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,381

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**SCHEDULE P - PART 5D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

**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	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	430	131	37	7	6	2	1	0	78	0
2. 2012	220	439	485	499	503	503	505	505	561	562
3. 2013	XXX	89	183	197	202	203	204	205	227	227
4. 2014	XXX	XXX	152	330	355	358	360	360	400	407
5. 2015	XXX	XXX	XXX	222	400	439	446	450	502	545
6. 2016	XXX	XXX	XXX	XXX	152	458	516	548	630	647
7. 2017	XXX	XXX	XXX	XXX	XXX	832	1,528	1,751	2,149	2,295
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	907	1,548	2,053	2,286
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	693	1,627	1,947
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	804	1,635
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	809

**SECTION 2**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	159	59	20	11	4	4	4	3	3	3
2. 2012	293	67	21	7	2	2	1	1	1	0
3. 2013	XXX	121	20	7	1	1	1	0	0	1
4. 2014	XXX	XXX	221	40	7	3	1	1	0	3
5. 2015	XXX	XXX	XXX	287	50	13	7	3	4	6
6. 2016	XXX	XXX	XXX	XXX	325	109	63	28	14	14
7. 2017	XXX	XXX	XXX	XXX	XXX	857	447	248	153	171
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	909	450	301	318
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	871	485	418
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	955	645
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	829

**SECTION 3**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	118	47	(1)	1	0	1	0	2	2	1
2. 2012	698	748	751	752	752	752	752	752	752	752
3. 2013	XXX	290	299	300	301	302	302	302	303	304
4. 2014	XXX	XXX	514	549	553	553	553	553	560	570
5. 2015	XXX	XXX	XXX	688	737	739	740	742	792	837
6. 2016	XXX	XXX	XXX	XXX	716	845	859	860	933	951
7. 2017	XXX	XXX	XXX	XXX	XXX	2,088	2,446	2,493	2,573	2,736
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	2,196	2,468	2,603	2,854
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,947	2,321	2,584
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,801	2,339
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,690

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL**  
**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	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	1	3	5	7	9	10	12	12
5. 2015	XXX	XXX	XXX	23	31	36	39	42	42	42
6. 2016	XXX	XXX	XXX	XXX	26	48	73	79	91	91
7. 2017	XXX	XXX	XXX	XXX	XXX	36	101	114	134	134
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	35	64	65	65
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	83	83
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	47
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6

**SECTION 2**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	7	7	4	2	1	0	0	0
5. 2015	XXX	XXX	XXX	26	11	7	4	1	1	0
6. 2016	XXX	XXX	XXX	XXX	31	13	11	7	6	0
7. 2017	XXX	XXX	XXX	XXX	XXX	48	27	19	17	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	46	24	24	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64	40	2
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	87	5
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10

**SECTION 3**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	10	12	15	15	19	19	21	21
5. 2015	XXX	XXX	XXX	65	67	69	78	79	83	81
6. 2016	XXX	XXX	XXX	XXX	81	97	141	145	156	150
7. 2017	XXX	XXX	XXX	XXX	XXX	117	202	211	229	212
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	103	133	145	122
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	137	180	146
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	189	123
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE**

**SECTION 1A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	1	1	0	0	0	0	0	0	0
2. 2012	0	2	2	2	4	4	4	4	4	4
3. 2013	XXX	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	0	0	0	0	0	0	1	1
5. 2015	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	1	1	1	1
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	0	1	2
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

**SECTION 2A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	2	2	0	0	0	0	0	0	0	0
2. 2012	3	1	1	1	1	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	1	1	1	1	1	1	0	0
5. 2015	XXX	XXX	XXX	1	1	1	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	1	1	0	1	1	1
7. 2017	XXX	XXX	XXX	XXX	XXX	9	1	0	1	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1	4	2	1
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	1	2
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

**SECTION 3A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	0	1	0	0	0	0	0	0	0	0
2. 2012	4	4	5	5	5	5	5	5	4	4
3. 2013	XXX	0	1	1	1	1	1	1	1	1
4. 2014	XXX	XXX	2	2	2	3	3	3	2	2
5. 2015	XXX	XXX	XXX	1	1	1	2	2	2	2
6. 2016	XXX	XXX	XXX	XXX	1	1	1	1	1	1
7. 2017	XXX	XXX	XXX	XXX	XXX	21	24	24	24	24
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	31	35	36	36
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10	10	11
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**  
**SECTION 1B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	13	9	2	1	3	3	0	0	1	0
2. 2012	2	4	7	8	11	12	12	12	12	12
3. 2013	XXX	0	2	4	9	12	14	14	14	14
4. 2014	XXX	XXX	0	1	4	4	5	5	5	5
5. 2015	XXX	XXX	XXX	0	2	8	12	14	15	15
6. 2016	XXX	XXX	XXX	XXX	1	4	11	15	15	17
7. 2017	XXX	XXX	XXX	XXX	XXX	1	9	17	21	23
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	4	13	21	28
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	14	25
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	7
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2

**SECTION 2B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	37	19	15	14	9	2	2	2	2	2
2. 2012	31	15	9	7	2	0	0	0	0	0
3. 2013	XXX	25	14	10	4	1	0	0	0	0
4. 2014	XXX	XXX	29	13	4	1	1	1	0	0
5. 2015	XXX	XXX	XXX	39	19	9	4	2	2	1
6. 2016	XXX	XXX	XXX	XXX	35	17	8	4	2	1
7. 2017	XXX	XXX	XXX	XXX	XXX	35	20	11	4	2
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	46	31	26	20
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	37	23	14
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34	14
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24

**SECTION 3B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	1	0	0	1	0	0	0	0	1	0
2. 2012	47	48	47	48	48	48	48	48	48	48
3. 2013	XXX	38	39	39	39	39	39	39	40	40
4. 2014	XXX	XXX	44	45	45	45	45	45	45	45
5. 2015	XXX	XXX	XXX	72	72	72	72	72	72	72
6. 2016	XXX	XXX	XXX	XXX	51	51	51	51	52	52
7. 2017	XXX	XXX	XXX	XXX	XXX	66	67	67	68	68
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	134	145	150	151
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	98	104	106
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	90	90
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE**

**SECTION 1A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	131	88	160	23	79	32	4	5	8	6
2. 2012	18	56	69	83	118	134	141	149	153	154
3. 2013	XXX	11	35	59	119	157	164	169	174	176
4. 2014	XXX	XXX	17	47	105	149	182	204	214	220
5. 2015	XXX	XXX	XXX	22	79	128	169	200	221	237
6. 2016	XXX	XXX	XXX	XXX	46	145	195	248	285	306
7. 2017	XXX	XXX	XXX	XXX	XXX	66	139	204	253	287
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	75	208	302	377
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	123	303	419
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	71	215
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	102

**SECTION 2A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	613	518	283	240	118	81	79	76	66	57
2. 2012	150	113	119	94	56	31	28	17	11	12
3. 2013	XXX	229	202	184	95	50	31	27	16	15
4. 2014	XXX	XXX	300	237	158	101	64	44	30	23
5. 2015	XXX	XXX	XXX	318	194	168	120	86	57	46
6. 2016	XXX	XXX	XXX	XXX	355	246	224	176	135	112
7. 2017	XXX	XXX	XXX	XXX	XXX	358	264	202	182	150
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	462	306	249	212
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	580	370	347
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	513	479
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	696

**SECTION 3A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	279	171	87	43	17	33	15	25	53	44
2. 2012	266	389	439	468	427	436	447	455	463	468
3. 2013	XXX	395	555	656	672	722	746	777	796	808
4. 2014	XXX	XXX	542	714	801	836	863	881	889	895
5. 2015	XXX	XXX	XXX	629	896	996	1,044	1,072	1,086	1,104
6. 2016	XXX	XXX	XXX	XXX	818	1,082	1,195	1,258	1,293	1,315
7. 2017	XXX	XXX	XXX	XXX	XXX	865	1,115	1,230	1,311	1,351
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1,162	1,494	1,638	1,736
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,594	2,030	2,245
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,312	1,975
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,517

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE**

**SECTION 1B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	.37	.14	.29	.6	20	4	.1	.1	(.1)	0
2. 2012	.8	.12	.19	.21	.27	.29	.29	.29	.29	.29
3. 2013	XXX	.13	.17	.19	.24	.26	.26	.26	.28	.28
4. 2014	XXX	XXX	.5	.12	.19	.22	.24	.24	.25	.25
5. 2015	XXX	XXX	XXX	.16	.25	.31	.34	.34	.34	.34
6. 2016	XXX	XXX	XXX	XXX	.13	.18	.21	.25	.28	.29
7. 2017	XXX	XXX	XXX	XXX	XXX	.12	.19	.24	.30	.32
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	.9	.15	.19	.20
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.4	.9	.14
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.12	.15
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.12

**SECTION 2B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	.114	.90	.50	.41	.11	.5	.3	.3	.3	.3
2. 2012	.56	.35	.24	.15	.7	.3	.2	.2	.2	.2
3. 2013	XXX	.36	.18	.15	.8	.4	.1	.1	.0	.0
4. 2014	XXX	XXX	.37	.18	.9	.5	.4	.2	.2	.2
5. 2015	XXX	XXX	XXX	.43	.14	.7	.1	.1	.1	.1
6. 2016	XXX	XXX	XXX	XXX	.44	.19	.12	.8	.3	.2
7. 2017	XXX	XXX	XXX	XXX	XXX	.42	.14	.9	.6	.3
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	.25	.12	.9	.8
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.28	.13	.7
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.21	.8
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.19

**SECTION 3B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	.3	.5	.1	.7	.0	.0	.0	.0	.1	.0
2. 2012	.100	.103	.103	.105	.106	.106	.106	.106	.105	.105
3. 2013	XXX	.93	.97	.98	.99	.100	.100	.101	.101	.101
4. 2014	XXX	XXX	.76	.79	.79	.79	.79	.79	.79	.79
5. 2015	XXX	XXX	XXX	.97	.101	.102	.102	.103	.103	.103
6. 2016	XXX	XXX	XXX	XXX	.102	.105	.106	.110	.111	.111
7. 2017	XXX	XXX	XXX	XXX	XXX	.111	.117	.121	.123	.123
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	.100	.114	.117	.119
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.90	.94	.96
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.81	.85
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.83

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE**  
**SECTION 1A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	31	16	32	18	28	23	1	5	8	4
2. 2012	2	9	12	15	31	36	39	45	50	52
3. 2013	XXX	4	12	17	31	42	48	56	59	62
4. 2014	XXX	XXX	1	5	15	26	35	40	47	50
5. 2015	XXX	XXX	XXX	6	11	20	31	46	57	64
6. 2016	XXX	XXX	XXX	XXX	3	15	24	39	53	59
7. 2017	XXX	XXX	XXX	XXX	XXX	11	19	28	36	49
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	31	59	70	83
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56	80	91
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20	30
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

**SECTION 2A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	149	130	98	87	63	31	32	36	22	21
2. 2012	35	27	34	39	29	20	20	19	12	8
3. 2013	XXX	42	50	62	44	30	28	29	26	21
4. 2014	XXX	XXX	37	48	44	26	25	23	15	14
5. 2015	XXX	XXX	XXX	45	48	39	46	40	35	27
6. 2016	XXX	XXX	XXX	XXX	59	54	62	51	35	41
7. 2017	XXX	XXX	XXX	XXX	XXX	43	51	53	43	36
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	93	47	50	43
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	90	46	57
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45	65
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29

**SECTION 3A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	100	82	67	37	39	14	15	11	8	8
2. 2012	51	94	117	137	166	179	190	204	219	225
3. 2013	XXX	55	94	127	147	163	180	203	229	234
4. 2014	XXX	XXX	56	103	132	149	167	180	191	200
5. 2015	XXX	XXX	XXX	65	124	153	182	208	224	233
6. 2016	XXX	XXX	XXX	XXX	75	147	191	224	245	266
7. 2017	XXX	XXX	XXX	XXX	XXX	109	172	211	243	265
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	368	429	471	491
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	455	526	573
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	207	307
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**SCHEDULE P - PART 5R - PRODUCTS LIABILITY - CLAIMS-MADE**

**SECTION 1B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	2	3	3	1	2	1	0	0	1	0
2. 2012	1	1	1	2	3	3	3	3	3	3
3. 2013	XXX	0	0	1	1	3	4	4	4	4
4. 2014	XXX	XXX	1	1	3	4	4	4	4	4
5. 2015	XXX	XXX	XXX	0	1	1	1	1	1	1
6. 2016	XXX	XXX	XXX	XXX	0	1	1	1	1	2
7. 2017	XXX	XXX	XXX	XXX	XXX	1	2	2	2	2
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	0	1	1
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

**SECTION 2B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	14	9	4	3	1	1	1	0	0	0
2. 2012	15	6	1	1	0	0	0	0	0	0
3. 2013	XXX	23	8	7	4	1	1	1	2	1
4. 2014	XXX	XXX	14	4	1	1	1	0	0	0
5. 2015	XXX	XXX	XXX	7	1	1	1	1	1	1
6. 2016	XXX	XXX	XXX	XXX	8	2	1	1	1	0
7. 2017	XXX	XXX	XXX	XXX	XXX	7	0	1	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	6	1	1	1
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	3	2
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	3
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8

**SECTION 3B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	2	0	1	2	0	0	0	0	0	0
2. 2012	111	111	112	114	114	114	114	114	113	113
3. 2013	XXX	147	145	146	147	147	148	149	149	149
4. 2014	XXX	XXX	31	33	35	35	36	36	36	36
5. 2015	XXX	XXX	XXX	39	42	42	42	42	41	41
6. 2016	XXX	XXX	XXX	XXX	15	16	16	16	14	14
7. 2017	XXX	XXX	XXX	XXX	XXX	17	17	17	17	17
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	17	17	17	17
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	14	15
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	19
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20

Schedule P - Part 5T - Warranty - Section 1

**N O N E**

Schedule P - Part 5T - Warranty - Section 2

**N O N E**

Schedule P - Part 5T - Warranty - Section 3

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**  
**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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	938	938	938	938	938	938	938	938	938	0
4. 2014.....	XXX	XXX	20,798	20,798	20,798	20,798	20,798	20,798	20,798	20,798	0
5. 2015.....	XXX	XXX	XXX	45,323	45,323	45,323	45,323	45,323	45,323	45,323	0
6. 2016.....	XXX	XXX	XXX	XXX	79,225	79,225	79,225	79,225	79,225	79,225	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	168,077	168,077	167,597	167,597	167,597	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	205,781	205,781	205,781	205,781	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	252,095	252,095	252,095	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	49,983	49,983	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	69,917	69,917
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	69,917
13. Earned Premiums (Sch P-Pt. 1)	0	938	20,798	45,323	79,225	168,077	205,301	252,095	49,983	69,917	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	657	657	657	657	657	657	657	657	657	0
4. 2014.....	XXX	XXX	16,119	16,119	16,119	16,119	16,119	16,119	16,119	16,119	0
5. 2015.....	XXX	XXX	XXX	36,323	36,323	36,323	36,323	36,323	36,323	36,323	0
6. 2016.....	XXX	XXX	XXX	XXX	60,943	60,943	60,943	60,943	60,943	60,943	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	126,047	126,047	125,593	125,593	125,593	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	152,759	152,759	152,759	152,759	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	197,766	197,766	197,766	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44,010	44,010	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61,861	61,861
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61,861
13. Earned Premiums (Sch P-Pt. 1)	0	657	16,119	36,323	60,943	126,047	152,306	197,766	44,010	61,861	XXX

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION**  
**(EXCLUDING EXCESS WORKERS' COMPENSATION)**  
**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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	518	(125)	31	2	3	2	2	0	0	0	0
2. 2012.....	18,779	19,218	19,268	19,264	19,268	19,270	19,270	19,270	19,270	19,270	0
3. 2013.....	XXX	10,822	11,138	11,169	11,177	11,176	11,176	11,176	11,176	11,176	0
4. 2014.....	XXX	XXX	16,143	16,783	16,708	16,701	16,701	16,701	16,701	16,701	0
5. 2015.....	XXX	XXX	XXX	24,208	25,370	25,276	25,275	25,275	25,275	25,275	0
6. 2016.....	XXX	XXX	XXX	XXX	38,346	39,111	39,034	39,034	39,034	39,034	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	125,073	125,930	125,930	125,930	125,930	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	142,030	142,030	142,030	142,030	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	113,977	113,977	113,977	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	107,910	107,910	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	104,044	104,044
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	104,044
13. Earned Premiums (Sch P-Pt. 1)	19,296	11,136	16,540	24,877	39,449	125,739	142,811	113,977	107,910	104,044	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	480	(114)	15	2	1	2	1	0	0	0	0
2. 2012.....	13,581	13,906	13,931	13,928	13,934	13,935	13,935	13,935	13,935	13,935	0
3. 2013.....	XXX	7,951	8,175	8,198	8,205	8,204	8,204	8,204	8,204	8,204	0
4. 2014.....	XXX	XXX	11,888	12,351	12,296	12,292	12,292	12,292	12,292	12,292	0
5. 2015.....	XXX	XXX	XXX	18,106	18,946	18,872	18,871	18,871	18,871	18,871	0
6. 2016.....	XXX	XXX	XXX	XXX	31,442	31,994	31,936	31,936	31,936	31,936	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	115,201	115,666	115,666	115,666	115,666	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	134,427	134,427	134,427	134,427	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	106,382	106,382	106,382	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	100,346	100,346	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	96,930	96,930
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	96,930
13. Earned Premiums (Sch P-Pt. 1)	14,061	8,161	12,153	18,591	32,242	115,674	134,833	106,382	100,346	96,930	XXX

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	1,170	1,170	1,170	1,170	1,170	1,170	1,170	1,170	0
5. 2015.....	XXX	XXX	XXX	3,804	3,804	3,804	3,804	3,804	3,804	3,804	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	8,177	8,089	8,089	8,089	8,089	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	7,618	7,618	7,618	7,618	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,467	17,467	17,467	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,391	21,391	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,385	18,385
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,385
13. Earned Premiums (Sch P-Pt. 1)	0	0	1,170	3,804	6,147	8,177	7,530	17,467	21,391	18,385	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	1,138	1,138	1,138	1,138	1,138	1,138	1,138	1,138	0
5. 2015.....	XXX	XXX	XXX	3,746	3,746	3,746	3,746	3,746	3,746	3,746	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	8,135	8,047	8,047	8,047	8,047	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	7,610	7,610	7,610	7,610	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,467	17,467	17,467	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,354	21,354	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,345	18,345
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,345
13. Earned Premiums (Sch P-Pt. 1)	0	0	1,138	3,746	6,104	8,135	7,523	17,467	21,354	18,345	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	41,084	41,084	41,084	41,084	41,084	41,084	41,084	41,084	41,084	41,084	0
3. 2013.....	XXX	51,867	51,867	51,867	51,867	51,867	51,867	51,867	51,867	51,867	0
4. 2014.....	XXX	XXX	64,833	64,833	64,833	64,833	64,833	64,833	64,833	64,833	0
5. 2015.....	XXX	XXX	XXX	74,322	74,322	74,322	74,322	74,322	74,322	74,322	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	101,101	101,365	101,365	101,365	101,365	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	114,104	114,104	114,104	114,104	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	165,538	165,538	165,538	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	243,901	243,901	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	331,348	331,348
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	331,348
13. Earned Premiums (Sch P-Pt. 1)	41,084	51,867	64,833	74,322	85,443	101,101	114,368	165,538	243,901	331,348	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	32,295	32,295	32,295	32,295	32,295	32,295	32,295	32,295	32,295	32,295	0
3. 2013.....	XXX	40,610	40,610	40,610	40,610	40,610	40,610	40,610	40,610	40,610	0
4. 2014.....	XXX	XXX	50,232	50,232	50,232	50,232	50,232	50,232	50,232	50,232	0
5. 2015.....	XXX	XXX	XXX	56,976	56,976	56,976	56,976	56,976	56,976	56,976	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	79,367	79,627	79,627	79,627	79,627	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	90,055	90,055	90,055	90,055	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	131,083	131,083	131,083	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	198,961	198,961	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	277,559	277,559
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	277,559
13. Earned Premiums (Sch P-Pt. 1)	32,295	40,610	50,232	56,976	65,881	79,367	90,315	131,083	198,961	277,559	XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE**

**SECTION 1B**

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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	10,729	10,729	10,729	10,729	10,729	10,729	10,729	10,729	10,729	10,729	0
3. 2013.....	XXX	10,998	10,998	10,998	10,998	10,998	10,998	10,998	10,998	10,998	0
4. 2014.....	XXX	XXX	11,019	11,019	11,019	11,019	11,019	11,019	11,019	11,019	0
5. 2015.....	XXX	XXX	XXX	12,126	12,126	12,126	12,126	12,126	12,126	12,126	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	12,748	12,756	12,756	12,756	12,756	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	15,497	15,497	15,497	15,497	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14,429	14,429	14,429	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,868	17,868	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,169	21,169
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,169
13. Earned Premiums (Sch P-Pt. 1)	10,729	10,998	11,019	12,126	11,906	12,748	15,506	14,429	17,868	21,169	XXX

**SECTION 2B**

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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	8,014	8,014	8,014	8,014	8,014	8,014	8,014	8,014	8,014	8,014	0
3. 2013.....	XXX	8,160	8,160	8,160	8,160	8,160	8,160	8,160	8,160	8,160	0
4. 2014.....	XXX	XXX	8,158	8,158	8,158	8,158	8,158	8,158	8,158	8,158	0
5. 2015.....	XXX	XXX	XXX	8,873	8,873	8,873	8,873	8,873	8,873	8,873	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	9,503	9,514	9,514	9,514	9,514	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	11,490	11,490	11,490	11,490	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,852	10,852	10,852	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,528	13,528	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,053	16,053
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,053
13. Earned Premiums (Sch P-Pt. 1)	8,014	8,160	8,158	8,873	8,956	9,503	11,502	10,852	13,528	16,053	XXX

**SCHEDULE P - PART 6M - INTERNATIONAL**

**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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....											
2. 2012.....											
3. 2013.....	XXX										
4. 2014.....	XXX	XXX									
5. 2015.....	XXX	XXX									
6. 2016.....	XXX	XXX									
7. 2017.....	XXX	XXX									
8. 2018.....	XXX	XXX									
9. 2019.....	XXX	XXX									
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch 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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....											
2. 2012.....											
3. 2013.....	XXX										
4. 2014.....	XXX	XXX									
5. 2015.....	XXX	XXX									
6. 2016.....	XXX	XXX									
7. 2017.....	XXX	XXX									
8. 2018.....	XXX	XXX									
9. 2019.....	XXX	XXX									
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1

**N O N E**

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2

**N O N E**

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1

**N O N E**

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY**  
**SCHEDULE P - PART 6R - PRODUCTS 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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	15,326	15,326	15,326	15,326	15,326	15,326	15,326	15,326	15,326	15,326	0
3. 2013.....	XXX	18,183	18,183	18,183	18,183	18,183	18,183	18,183	18,183	18,183	0
4. 2014.....	XXX	XXX	23,901	23,901	23,901	23,901	23,901	23,901	23,901	23,901	0
5. 2015.....	XXX	XXX	XXX	24,288	24,288	24,288	24,288	24,288	24,288	24,288	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	25,152	25,170	25,170	25,170	25,170	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	25,314	25,314	25,314	25,314	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29,833	29,833	29,833	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36,355	36,355	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	42,725	42,725
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	42,725
13. Earned Premiums (Sch P-Pt. 1)	15,326	18,183	23,901	24,288	24,679	25,152	25,332	29,833	36,355	42,725	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	10,836	10,836	10,836	10,836	10,836	10,836	10,836	10,836	10,836	10,836	0
3. 2013.....	XXX	12,813	12,813	12,813	12,813	12,813	12,813	12,813	12,813	12,813	0
4. 2014.....	XXX	XXX	16,843	16,843	16,843	16,843	16,843	16,843	16,843	16,843	0
5. 2015.....	XXX	XXX	XXX	17,093	17,093	17,093	17,093	17,093	17,093	17,093	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	17,754	17,772	17,772	17,772	17,772	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	17,899	17,899	17,899	17,899	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,234	21,234	21,234	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25,733	25,733	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30,535	30,535
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30,535
13. Earned Premiums (Sch P-Pt. 1)	10,836	12,813	16,843	17,093	17,466	17,754	17,917	21,234	25,733	30,535	XXX

**SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE**  
**SECTION 1B**

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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	4,757	4,757	4,757	4,757	4,757	4,757	4,757	4,757	4,757	4,757	0
3. 2013.....	XXX	5,453	5,453	5,453	5,453	5,453	5,453	5,453	5,453	5,453	0
4. 2014.....	XXX	XXX	5,414	5,414	5,414	5,414	5,414	5,414	5,414	5,414	0
5. 2015.....	XXX	XXX	XXX	5,217	5,217	5,217	5,217	5,217	5,217	5,217	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	5,514	5,514	5,514	5,514	5,514	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	6,436	6,436	6,436	6,436	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,152	8,152	8,152	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,347	11,347	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,580	13,580
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,580
13. Earned Premiums (Sch P-Pt. 1)	4,757	5,453	5,414	5,217	5,326	5,514	6,436	8,152	11,347	13,580	XXX

**SECTION 2B**

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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	3,419	3,419	3,419	3,419	3,419	3,419	3,419	3,419	3,419	3,419	0
3. 2013.....	XXX	3,881	3,881	3,881	3,881	3,881	3,881	3,881	3,881	3,881	0
4. 2014.....	XXX	XXX	3,841	3,841	3,841	3,841	3,841	3,841	3,841	3,841	0
5. 2015.....	XXX	XXX	XXX	3,689	3,689	3,689	3,689	3,689	3,689	3,689	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	3,881	3,881	3,881	3,881	3,881	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	4,770	4,770	4,770	4,770	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,764	6,764	6,764	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,979	8,979	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,363	10,363
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,363
13. Earned Premiums (Sch P-Pt. 1)	3,419	3,881	3,841	3,689	3,812	3,881	4,770	6,764	8,979	10,363	XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
**SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)**  
**SECTION 1**

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	0	0	0.0	0	0	0.0
2. Private Passenger Auto Liability/ Medical	1,216	0	0.0	0	0	0.0
3. Commercial Auto/Truck Liability/ Medical	164,601	0	0.0	0	0	0.0
4. Workers' Compensation	14,069	0	0.0	0	0	0.0
5. Commercial Multiple Peril	96	0	0.0	0	0	0.0
6. Medical Professional Liability - Occurrence	233	0	0.0	0	0	0.0
7. Medical Professional Liability - Claims - Made	5,989	0	0.0	0	0	0.0
8. Special Liability	202	0	0.0	0	0	0.0
9. Other Liability - Occurrence	99,066	0	0.0	0	0	0.0
10. Other Liability - Claims-Made	5,146	0	0.0	0	0	0.0
11. Special Property	2,874	0	0.0	0	0	0.0
12. Auto Physical Damage	149	0	0.0	0	0	0.0
13. Fidelity/Surety	0	0	0.0	0	0	0.0
14. Other	17	0	0.0	0	0	0.0
15. International	0	0	0.0	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	34,659	0	0.0	0	0	0.0
20. Products Liability - Claims-Made	2,011	0	0.0	0	0	0.0
21. Financial Guaranty/Mortgage Guaranty	0	0	0.0	0	0	0.0
22. Warranty	0	0	0.0	0	0	0.0
23. Totals	330,326	0	0.0	0	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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
**SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)**  
**SECTION 1**

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	0	0	0.0	0	0	0.0
2. Private Passenger Auto Liability/Medical	1,216	0	0.0	1,177	0	0.0
3. Commercial Auto/Truck Liability/Medical	164,601	0	0.0	6,386	0	0.0
4. Workers' Compensation	14,069	0	0.0	6,828	0	0.0
5. Commercial Multiple Peril	96	0	0.0	60	0	0.0
6. Medical Professional Liability - Occurrence	233	0	0.0	(1)	0	0.0
7. Medical Professional Liability - Claims - Made	5,989	0	0.0	2,491	0	0.0
8. Special Liability	202	0	0.0	538	0	0.0
9. Other Liability - Occurrence	99,066	0	0.0	53,264	0	0.0
10. Other Liability - Claims-Made	5,146	0	0.0	5,379	0	0.0
11. Special Property	2,874	0	0.0	1,051	0	0.0
12. Auto Physical Damage	149	0	0.0	778	0	0.0
13. Fidelity/Surety	0	0	0.0	0	0	0.0
14. Other	17	0	0.0	0	0	0.0
15. International	0	0	0.0	0	0	0.0
16. Reinsurance - Nonproportional Assumed Property	0	0	0.0	0	0	0.0
17. Reinsurance - Nonproportional Assumed Liability	0	0	0.0	0	0	0.0
18. Reinsurance - Nonproportional Assumed Financial Lines	0	0	0.0	0	0	0.0
19. Products Liability - Occurrence	34,659	0	0.0	11,603	0	0.0
20. Products Liability - Claims-Made	2,011	0	0.0	2,995	0	0.0
21. Financial Guaranty/Mortgage Guaranty	0	0	0.0	0	0	0.0
22. Warranty	0	0	0.0	0	0	0.0
23. Totals	330,326	0	0.0	92,548	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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER 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 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)? .....\$ .....0
- 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	0	0
1.602	2012	0	0
1.603	2013	0	0
1.604	2014	0	0
1.605	2015	0	0
1.606	2016	0	0
1.607	2017	0	0
1.608	2018	0	0
1.609	2019	0	0
1.610	2020	0	0
1.611	2021	0	0
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 | 0 |
| 5.2 Surety   | 0 |
6. Claim count information is reported per claim or per claimant (Indicate which) ..... per claim.....  
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.)

The Company became a party to an intercompany reinsurance pooling arrangement with its United States affiliated insurance carriers effective January 1, 2016. See NOTE 26. The Company's participation percentage is 55%. Schedule P reflects the pooled activity for all years presented. TPA expenses are recorded to paid AO based upon contractual terms which may be on a written, earned or collected premium basis. Effective January 1, 2017 the intercompany pool arrangement was changed to exclude the commercial auto business written by James River Insurance Company. Effective January 1, 2021, the intercompany reinsurance pooling agreement was revised to include the James River Insurance Company's commercial auto line of business. The participation percentages were also revised with the amendment. The results of Schedule P have been restated to reflect this change. Claims counts are reported as follows: workers' compensation claims are reported on a per claimant basis, all other lines of business are reported on a per claim basis. ....

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

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

Allocated by States and Territories

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

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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? (Yes/No)	*
			98-0585280	0	1620459	NASDAQ	James River Group Holdings, Ltd	BMU	UIP			0.000		NO	0
			05-0539572	0	0		James River Group Holdings UK, Ltd	GBR	UIP	James River Group Holdings, Ltd	Ownership	100.000	James River Group Holdings, Ltd	NO	0
			98-0684843	0	0		James River Group, Inc	DE	UDP	James River Group Holdings UK, Ltd	Ownership	100.000	James River Group Holdings, Ltd	NO	0
			35-2242298	0	0		JRG Reinsurance Company, Ltd	BMU	IA	James River Group Holdings, Ltd	Ownership	100.000	James River Group Holdings, Ltd	NO	0
3494	James River Insurance Group	12203	22-2824607	0	0		James River TPA Services, Inc	VA	NIA	James River Group, Inc	Ownership	100.000	James River Group Holdings, Ltd	NO	0
			03-0490731	0	0		James River Insurance Company	OH	RE	James River Group, Inc	Ownership	100.000	James River Group Holdings, Ltd	NO	0
3494	James River Insurance Group	13685	20-8946040	0	0		James River Management Company, Inc	DE	NIA	James River Group, Inc	Ownership	100.000	James River Group Holdings, Ltd	NO	0
3494	James River Insurance Group	31925	42-1019055	0	0		James River Casualty Company	VA	DS	James River Insurance Company	Ownership	100.000	James River Group Holdings, Ltd	NO	0
			20-0067235	0	0		Falls Lake National Insurance Company	OH	IA	James River Group, Inc	Ownership	100.000	James River Group Holdings, Ltd	NO	0
			0	0	0		Falls Lake Insurance Management Company, Inc								
3494	James River Insurance Group	15884	47-1588915	0	0		Falls Lake Fire and Casualty Company	CA	IA	James River Group, Inc	Ownership	100.000	James River Group Holdings, Ltd	NO	0
3494	James River Insurance Group	11828	20-0328998	0	0		Stonewood Insurance Company	NC	IA	Falls Lake National Insurance Company	Ownership	100.000	James River Group Holdings, Ltd	NO	0
			98-1412720	0	0		Carolina Re, Ltd	BMU	IA	James River Group, Inc	Ownership	100.000	James River Group Holdings, Ltd	NO	0

**NONE**

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**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)
	05-0539572	James River Group, Inc.	0	(62,847,901)	0	0	0	0		0	(62,847,901)	0
	98-0684843	JRG Reinsurance Company, Ltd.	0	0	0	0	0	(37,536,214)		0	(37,536,214)	(142,793,337)
	98-1412720	Carolina Re, Ltd	0	0	0	0	0	(49,949,646)		0	(49,949,646)	(713,935,239)
12203	22-2824607	James River Insurance Company	0	50,847,901	5,000,000	0	(69,740,505)	93,552,751	*	0	79,660,147	756,946,278
	03-0490731	James River Management Company, Inc.	0	0	0	0	70,444,955	0		0	70,444,955	0
13685	20-8946040	James River Casualty Company	0	0	0	0	(704,450)	(1,292,758)	*	0	(1,997,208)	5,642,793
31925	42-1019055	Falls Lake National Insurance Company	0	5,000,000	(5,000,000)	0	(11,979,655)	581,153	*	0	(11,398,502)	38,084,177
	20-0067235	Falls Lake Insurance Management Company,	0	0	0	0	26,621,455	0		0	26,621,455	0
11828	20-0328998	Stonewood Insurance Company	0	7,000,000	0	0	(5,324,291)	(4,390,665)	*	0	(2,714,956)	26,907,027
15884	47-1588915	Falls Lake Fire and Casualty Company	0	0	0	0	(9,317,509)	(964,621)	*	0	(10,282,130)	29,148,301
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0



# ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER 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.

	Responses
<b>MARCH FILING</b>	
1. Will an actuarial opinion be filed by March 1? .....	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? .....	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1? .....	YES
<b>APRIL FILING</b>	
5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1? .....	YES
6. Will Management's Discussion and Analysis be filed by April 1? .....	YES
7. Will the Supplemental Investment Risk Interrogatories be filed by April 1? .....	YES
<b>MAY FILING</b>	
8. Will this company be included in a combined annual statement which is filed with the NAIC by May 1? .....	YES
<b>JUNE FILING</b>	
9. Will an audited financial report be filed by June 1? .....	YES
10. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? .....	YES

The following supplemental reports are required to be filed as part of your annual 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.

<b>MARCH FILING</b>	
11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? .....	NO
12. Will the Financial Guaranty Insurance Exhibit be filed by March 1? .....	NO
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? .....	NO
14. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1? .....	YES
15. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? .....	NO
16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1? .....	NO
17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? .....	NO
18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)? .....	YES
20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1? .....	YES
21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1? .....	NO
22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
24. 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
25. 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
26. 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
27. 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
<b>APRIL FILING</b>	
28. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? .....	NO
29. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....	NO
30. Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....	NO
31. 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
32. 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
33. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1? .....	YES
34. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? .....	NO
35. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1? .....	NO
36. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1? .....	NO
<b>AUGUST FILING</b>	
37. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? .....	YES

**Explanations:**

11. The data for this supplement is not required to be filed.
12. The data for this supplement is not required to be filed.
13. The data for this supplement is not required to be filed.
15. The data for this supplement is not required to be filed.
16. The data for this supplement is not required to be filed.
17. The data for this supplement is not required to be filed.
18. The data for this supplement is not required to be filed.
21. The data for this supplement is not required to be filed.
22. The data for this supplement is not required to be filed.
23. The data for this supplement is not required to be filed.
24. The data for this supplement is not required to be filed.
25. The data for this supplement is not required to be filed.
26. The data for this supplement is not required to be filed.
27. The data for this supplement is not required to be filed.
28. The data for this supplement is not required to be filed.
29. The data for this supplement is not required to be filed.
30. The data for this supplement is not required to be filed.
31. The data for this supplement is not required to be filed.
32. The data for this supplement is not required to be filed.
34. The data for this supplement is not required to be filed.
35. The data for this supplement is not required to be filed.
36. The data for this supplement is not required to be filed.

**Bar Codes:**

11. SIS Stockholder Information Supplement [Document Identifier 420]



12. Financial Guaranty Insurance Exhibit [Document Identifier 240]



13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]



15. Trusteed Surplus Statement [Document Identifier 490]



16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]


















17. Reinsurance Summary Supplemental Filing [Document Identifier 401]



18. Medicare Part D Coverage Supplement [Document Identifier 365]



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

- 21. Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400] 
- 22. Bail Bond Supplement [Document Identifier 500] 
- 23. Director and Officer Insurance Coverage Supplement [Document Identifier 505] 
- 24. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224] 
- 25. Relief from the one-year cooling off period for independent CPA [Document Identifier 225] 
- 26. Relief from the Requirements for Audit Committees [Document Identifier 226] 
- 27. Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555] 
- 28. Credit Insurance Experience Exhibit [Document Identifier 230] 
- 29. Long-Term Care Experience Reporting Forms [Document Identifier 306] 
- 30. Accident and Health Policy Experience Exhibit [Document Identifier 210] 
- 31. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216] 
- 32. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217] 
- 34. Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290] 
- 35. Private Flood Insurance Supplement [Document Identifier 560] 
- 36. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565] 

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Assets Line 25

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols: 1 - 2)	4 Net Admitted Assets
2504. Deductible recoverable .....	3,254,746	1,713,675	1,541,071	946,670
2505. Other assets .....	400,000	0	400,000	2,175
2597. Summary of remaining write-ins for Line 25 from overflow page	3,654,746	1,713,675	1,941,071	948,845

Additional Write-ins for Liabilities Line 25

	1 Current Year	2 Prior Year
2504. Other liabilities .....	6,164,087	5,065,044
2505. Claims payable .....	15,230,208	0
2597. Summary of remaining write-ins for Line 25 from overflow page	21,394,295	5,065,044

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 24

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
2404. Other .....	264,223	35,639	0	299,862
2497. Summary of remaining write-ins for Line 24 from overflow page	264,223	35,639	0	299,862



SUPPLEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

Designate the type of health care providers reported on this page:  
Physicians, including surgeons and osteopaths

**SUPPLEMENT "A" TO SCHEDULE T  
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN  
ALLOCATED BY STATES AND TERRITORIES**

States, etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported	
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims		
1. Alabama	AL	(18)	6,297	0	0	2,284	0	0	11,620
2. Alaska	AK	0	0	0	0	0	0	0	0
3. Arizona	AZ	81,513	79,813	0	0	8,837	750,001	2	96,196
4. Arkansas	AR	147,770	112,755	0	0	27,832	5,000	0	103,559
5. California	CA	463,629	478,836	45,000	1	321,973	475,001	5	559,483
6. Colorado	CO	48,708	46,947	0	0	12,757	20,000	1	55,054
7. Connecticut	CT	0	0	0	0	0	0	0	0
8. Delaware	DE	9,420	4,749	0	0	2,935	0	0	7,352
9. District of Columbia	DC	11,260	11,260	0	0	3,287	0	0	13,450
10. Florida	FL	14,589	5,596	0	0	(1,923)	0	0	4,205
11. Georgia	GA	66,445	74,292	0	0	(127,816)	0	0	78,199
12. Hawaii	HI	0	0	0	0	0	0	0	0
13. Idaho	ID	5,196	5,282	0	0	960	0	0	9,448
14. Illinois	IL	24,516	28,756	0	0	5,636	0	0	23,423
15. Indiana	IN	0	0	0	0	0	0	0	0
16. Iowa	IA	0	0	0	0	0	0	0	0
17. Kansas	KS	0	0	0	0	0	0	0	0
18. Kentucky	KY	2,845	2,488	0	0	(2,920)	0	0	(1,557)
19. Louisiana	LA	0	0	0	0	0	0	0	0
20. Maine	ME	8,203	8,203	0	0	3,139	0	0	9,638
21. Maryland	MD	183,553	127,542	0	0	42,283	0	0	135,472
22. Massachusetts	MA	8,243	8,243	0	0	3,759	0	0	12,157
23. Michigan	MI	60,836	58,536	0	0	21,855	0	0	70,250
24. Minnesota	MN	13,344	13,324	0	0	3,473	0	0	9,734
25. Mississippi	MS	0	909	0	0	(150,372)	0	0	8,734
26. Missouri	MO	22,645	23,816	0	0	(29,052)	0	0	(9,659)
27. Montana	MT	17,284	17,523	0	0	5,007	0	0	6,928
28. Nebraska	NE	3,805	5,547	0	0	57	0	0	5,159
29. Nevada	NV	3,269	3,203	0	0	800	0	0	2,531
30. New Hampshire	NH	0	0	0	0	0	0	0	(5,367)
31. New Jersey	NJ	19,483	19,483	0	0	11,623	0	0	15,098
32. New Mexico	NM	40,375	39,403	0	0	6,743	0	0	31,429
33. New York	NY	0	0	0	0	0	0	0	0
34. North Carolina	NC	48,802	41,910	0	0	14,863	0	0	34,207
35. North Dakota	ND	3,500	2,052	0	0	995	0	0	995
36. Ohio	OH	105,338	33,643	0	0	23,588	0	0	23,588
37. Oklahoma	OK	17,762	14,848	0	0	3,663	0	0	16,233
38. Oregon	OR	10,870	10,868	0	0	4,212	0	0	11,994
39. Pennsylvania	PA	22,645	19,481	0	0	(755)	0	0	(755)
40. Rhode Island	RI	0	0	0	0	1,002	0	0	1,002
41. South Carolina	SC	14,054	14,788	0	0	(48,896)	0	0	(28,955)
42. South Dakota	SD	0	0	0	0	0	0	0	0
43. Tennessee	TN	73,283	81,226	0	0	6,936	0	0	80,758
44. Texas	TX	98,789	103,358	108,750	1	119,784	0	0	117,246
45. Utah	UT	6,159	6,159	0	0	2,249	0	0	11,237
46. Vermont	VT	0	0	0	0	0	0	0	0
47. Virginia	VA	159,352	159,731	0	0	43,175	200,000	1	156,058
48. Washington	WA	20,557	13,333	140,000	1	95,439	0	0	19,093
49. West Virginia	WV	0	0	0	0	0	0	0	0
50. Wisconsin	WI	0	0	0	0	(4,924)	0	0	(4,924)
51. Wyoming	WY	5,496	5,089	0	0	2,254	0	0	5,259
52. American Samoa	AS	0	0	0	0	0	0	0	0
53. Guam	GU	0	0	0	0	0	0	0	0
54. Puerto Rico	PR	0	0	0	0	0	0	0	0
55. U.S. Virgin Islands	VI	0	0	0	0	0	0	0	0
56. Northern Mariana Islands	MP	0	0	0	0	0	0	0	0
57. Canada	CAN	0	0	0	0	0	0	0	0
58. Aggregate other alien	OT	0	0	0	0	0	0	0	0
59. Total		1,843,520	1,689,289	293,750	3	436,742	1,450,002	9	1,695,572
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998. Summary of remaining write-ins for Line 58 from overflow page		0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003 plus 58998)(Line 58 above)		0	0	0	0	0	0	0	0



SUPPLEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

Designate the type of health care providers reported on this page: Hospitals

SUPPLEMENT "A" TO SCHEDULE T EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN ALLOCATED BY STATES AND TERRITORIES

Table with 8 columns: States, etc.; 1 Direct Premiums Written; 2 Direct Premiums Earned; 3 Direct Losses Paid Amount; 4 Direct Losses Paid Number of Claims; 5 Direct Losses Incurred; 6 Direct Losses Unpaid Amount Reported; 7 Direct Losses Unpaid Number of Claims; 8 Direct Losses Incurred But Not Reported. The table contains a large 'NONE' watermark across the center.



SUPPLEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

Designate the type of health care providers reported on this page:  
 Other health care professionals, including dentists, chiropractors, and podiatrists

**SUPPLEMENT "A" TO SCHEDULE T  
 EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN  
 ALLOCATED BY STATES AND TERRITORIES**

States, etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama .....AL								
2. Alaska .....AK								
3. Arizona .....AZ								
4. Arkansas .....AR								
5. California .....CA								
6. Colorado .....CO								
7. Connecticut .....CT								
8. Delaware .....DE								
9. District of Columbia .....DC								
10. Florida .....FL								
11. Georgia .....GA								
12. Hawaii .....HI								
13. Idaho .....ID								
14. Illinois .....IL								
15. Indiana .....IN								
16. Iowa .....IA								
17. Kansas .....KS								
18. Kentucky .....KY								
19. Louisiana .....LA								
20. Maine .....ME								
21. Maryland .....MD								
22. Massachusetts .....MA								
23. Michigan .....MI								
24. Minnesota .....MN								
25. Mississippi .....MS								
26. Missouri .....MO								
27. Montana .....MT								
28. Nebraska .....NE								
29. Nevada .....NV								
30. New Hampshire .....NH								
31. New Jersey .....NJ								
32. New Mexico .....NM								
33. New York .....NY								
34. North Carolina .....NC								
35. North Dakota .....ND								
36. Ohio .....OH								
37. Oklahoma .....OK								
38. Oregon .....OR								
39. Pennsylvania .....PA								
40. Rhode Island .....RI								
41. South Carolina .....SC								
42. South Dakota .....SD								
43. Tennessee .....TN								
44. Texas .....TX								
45. Utah .....UT								
46. Vermont .....VT								
47. Virginia .....VA								
48. Washington .....WA								
49. West Virginia .....WV								
50. Wisconsin .....WI								
51. Wyoming .....WY								
52. American Samoa .....AS								
53. Guam .....GU								
54. Puerto Rico .....PR								
55. U.S. Virgin Islands .....VI								
56. Northern Mariana Islands .....MP								
57. Canada .....CAN								
58. Aggregate other alien .....OT								
59. Total								
DETAILS OF WRITE-INS								
58001. ....								
58002. ....								
58003. ....								
58998. Summary of remaining write-ins for Line 58 from overflow page .....								
58999. Totals (Lines 58001 thru 58003 plus 58998)(Line 58 above)								

**NONE**



SUPPLEMENT FOR THE YEAR 2021 OF THE JAMES RIVER INSURANCE COMPANY

Designate the type of health care providers reported on this page:  
Other health care facilities

**SUPPLEMENT "A" TO SCHEDULE T  
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN  
ALLOCATED BY STATES AND TERRITORIES**

States, etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama	96,617	98,144	0	0	150,142	215,100	4	64,424
2. Alaska	69,592	67,676	0	0	6,432	0	0	45,333
3. Arizona	84,940	54,709	350,000	1	6,057	0	0	23,313
4. Arkansas	62,995	67,453	0	0	13,658	0	0	47,077
5. California	6,132,108	5,383,996	6,765,775	30	5,780,706	3,317,082	44	3,722,008
6. Colorado	189,924	156,807	0	0	92,608	50,000	3	89,792
7. Connecticut	99,214	92,925	0	0	33,628	0	0	66,465
8. Delaware	5,059	3,738	0	0	2,310	0	0	2,998
9. District of Columbia	30,711	27,469	0	0	8,019	0	0	17,766
10. Florida	933,756	823,898	78,022	3	568,350	775,000	13	566,292
11. Georgia	304,117	310,868	597,500	1	525,327	135,000	2	193,908
12. Hawaii	26,593	27,143	0	0	11,749	0	0	18,198
13. Idaho	82,769	70,608	0	0	87,838	200,000	2	40,010
14. Illinois	153,198	173,069	652,500	8	(40,571)	4,309,997	44	124,197
15. Indiana	36,395	22,951	0	0	(7,489)	0	0	13,510
16. Iowa	44,724	43,311	0	0	9,107	0	0	22,162
17. Kansas	14,798	10,782	0	0	4,309	0	0	7,524
18. Kentucky	132,757	199,476	615,000	4	(13,709)	125,000	3	59,458
19. Louisiana	68,506	52,288	0	0	27,463	0	0	37,772
20. Maine	76,363	50,079	0	0	19,162	0	0	34,808
21. Maryland	243,676	194,930	0	0	189,624	125,000	4	118,660
22. Massachusetts	282,457	159,365	0	0	72,681	0	0	118,268
23. Michigan	190,727	183,236	0	0	68,413	0	0	107,051
24. Minnesota	151,400	123,782	0	0	182,262	150,000	3	88,162
25. Mississippi	32,231	33,160	0	0	(13,550)	0	0	13,432
26. Missouri	110,366	136,948	88,310	1	91,255	300,000	3	121,028
27. Montana	31,166	29,661	60,000	1	(31,524)	0	0	22,428
28. Nebraska	6,485	5,554	0	0	57	0	0	4,382
29. Nevada	63,931	56,171	0	0	14,026	0	0	38,318
30. New Hampshire	1,259	1,225	0	0	(1,729)	0	0	77
31. New Jersey	737,792	385,996	199,000	2	465,350	150,000	11	311,613
32. New Mexico	27,046	26,568	0	0	4,547	0	0	23,300
33. New York	1,128,223	1,044,436	65,000	2	386,201	953,900	20	664,982
34. North Carolina	251,224	215,621	0	0	126,467	50,000	2	131,831
35. North Dakota	24,907	27,416	0	0	13,296	0	0	19,127
36. Ohio	566,662	360,460	0	0	252,726	0	0	253,126
37. Oklahoma	385,317	370,956	0	0	141,019	150,000	4	258,024
38. Oregon	212,166	164,481	0	0	63,748	0	0	102,256
39. Pennsylvania	252,347	225,471	0	0	69,515	0	2	162,486
40. Rhode Island	9,646	1,427	0	0	0	0	0	0
41. South Carolina	142,638	148,336	400,000	2	526,004	175,001	4	88,628
42. South Dakota	71,666	56,512	0	0	60,330	50,000	1	42,857
43. Tennessee	95,424	74,266	140,000	1	168,745	700,000	7	28,166
44. Texas	280,593	278,700	0	0	160,398	62,500	2	185,263
45. Utah	89,674	80,011	0	0	29,216	0	0	55,064
46. Vermont	36,600	35,644	25,000	1	(165,116)	0	0	21,092
47. Virginia	173,616	166,588	0	0	165,128	245,100	2	100,273
48. Washington	814,120	686,160	0	0	354,900	75,001	7	471,485
49. West Virginia	0	0	0	0	0	0	0	0
50. Wisconsin	173,677	159,815	47,500	1	69,205	0	0	99,071
51. Wyoming	5,722	5,785	0	0	2,562	0	0	5,541
52. American Samoa	0	0	0	0	0	0	0	0
53. Guam	0	0	0	0	0	0	0	0
54. Puerto Rico	0	0	0	0	0	0	0	0
55. U.S. Virgin Islands	0	0	0	0	0	0	0	0
56. Northern Mariana Islands	0	0	0	0	0	0	0	0
57. Canada	0	0	0	0	0	0	0	0
58. Aggregate other alien	0	0	0	0	0	0	0	0
59. Total	15,237,894	13,176,071	10,083,607	58	10,750,852	12,313,681	187	8,853,006
DETAILS OF WRITE-INS								
58001.								
58002.								
58003.								
58998. Summary of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003 plus 58998)(Line 58 above)	0	0	0	0	0	0	0	0