



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

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

Mid-Continent Casualty Company

NAIC Group Code 0084 (Current) 0084 (Prior) NAIC Company Code 23418 Employer's ID Number 73-0556513

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

Incorporated/Organized 02/26/1947 Commenced Business 02/26/1948

Statutory Home Office 301 E. 4th Street, Cincinnati, OH, US 45202
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 1437 South Boulder Dr., Tulsa, OK, US 74119
(Street and Number) (City or Town, State, Country and Zip Code)
(Area Code) (Telephone Number)

Mail Address P.O. Box 1409, Tulsa, OK, US 74101
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 1437 South Boulder Dr., Tulsa, OK, US 74119
(Street and Number) (City or Town, State, Country and Zip Code)
(Area Code) (Telephone Number)

Internet Website Address http://www.mcq-ins.com/

Statutory Statement Contact Gregory Patrick Jones, 918-587-7221-6125
(Name) (Area Code) (Telephone Number)
gjoness@mcq-ins.com, 918-588-1253
(E-mail Address) (FAX Number)

OFFICERS

President and COO James Steven Davis Senior Vice President, CFO & Treasurer Gregory Patrick Jones
Assistant Secretary Sharon Lee Anne Hackl

OTHER

Gary John Gruber, Chairman David Lawrence Thompson Jr., Vice Chairman Stephen Kirby Pancoast, Senior Vice President
Todd Anthony Bazata, Vice President John Allen Gant, Senior Vice President Barrett Farmer Leahy, Senior Vice President
Robert Dewayne Martin, Senior Vice President & Chief Information Officer Magdalena Franziska Kulik Grossman, Chief Compliance Officer
Stephen Charles Beraha, Assistant Secretary Howard Kim Baird, Assistant Treasurer Matthew David Felvus, Secretary
Robert Jude Zbacnik, Assistant Treasurer David John Witzgall, Assistant Treasurer

DIRECTORS OR TRUSTEES

David Lawrence Thompson Jr. Michelle Ann Gillis Gary John Gruber
Michael Eugene Sullivan Jr David John Witzgall Anthony Joseph Mercurio #

State of Ohio SS
County of Hamilton

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.

Barrett Farmer Leahy
President and COO (Effective 01/03/2022)

Sharon Lee Anne Hackl
Assistant Secretary

Gregory Patrick Jones
Senior Vice President, CFO & Treasurer

Subscribed and sworn to before me this
15th day of February, 2022

- 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.....

Sonya L. Embry
Notary Public, State of Oklahoma
My Commission expires December 28, 2024



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2021

NAIC Company Code 23418

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	86,326	59,225	0	44,278	0	(1,202)	0	0	0	0	14,187	1,727
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	270,879	254,284	0	142,294	0	(19,045)	77,946	5,319	(2,873)	11,792	66,992	5,418
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	71,727	69,476	0	28,730	0	314	314	297	297	0	17,242	1,435
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	0	0	0	0	0	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	114,967	179,663	0	60,819	0	0	0	0	0	0	28,754	2,299
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)	543,899	562,648	0	276,121	0	(19,933)	78,260	5,616	(2,576)	11,792	127,175	10,879
<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 \$ .....220

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 375

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 13,440

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF California

DURING THE YEAR 2021

NAIC Company Code 23418

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, Federal flood, etc., and a TOTALS row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,380

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 4,625

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2021

NAIC Company Code 23418

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	4,564	4,543	0	461	0	0	0	0	0	0	698	105
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	413,330	260,906	0	317,521	6,522	218,133	211,611	11,984	43,063	31,079	114,185	9,507
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	29,547	28,343	0	5,759	0	0	0	0	0	0	7,308	680
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	12,521	1,564	0	10,957	0	0	0	0	0	0	2,192	288
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	2,539	317	0	2,222	0	0	0	0	0	0	445	58
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)	462,501	295,673	0	336,920	6,522	218,133	211,611	11,984	43,063	31,079	124,828	10,638
<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 \$ 315

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2021

NAIC Company Code 23418

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	7,185	6,229	0	2,269	0	0	0	0	0	0	1,077	180
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	35,971	27,383	0	20,701	0	0	0	0	0	0	8,594	899
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	10,574	9,970	0	6,164	0	0	0	0	0	0	2,518	264
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	0	0	0	0	0	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)	53,730	43,582	0	29,134	0	0	0	0	0	0	12,189	1,343
<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 DE



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2021

NAIC Company Code 23418

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

NONE

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

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

19.DC



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2021

NAIC Company Code 23418

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., and a TOTALS row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 3,718

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2021

NAIC Company Code 23418

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	171,219	145,801	0	67,430	95,942	105,844	9,958	2,950	2,950	0	29,872	4,623
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	919,791	841,380	0	401,779	64,510	(267,171)	300,954	15,127	(69,955)	31,835	197,912	24,834
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	473,542	452,456	0	174,417	0	(114,820)	386,680	17,543	(6,066)	94,338	100,132	12,786
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	533,795	175,315	0	377,468	20,832	84,044	63,212	385	8,481	8,096	93,194	14,412
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	44,120	15,610	0	30,987	2,564	8,278	6,209	0	210	210	7,688	1,191
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	13,620	14,403	0	16,647	0	0	0	0	0	0	4,277	368
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)	2,156,087	1,644,965	0	1,068,728	183,848	(183,825)	767,013	36,005	(64,380)	134,479	433,075	58,214
<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 \$ 3,594

(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 GA



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2021

NAIC Company Code 23418

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

NONE

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

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

19.HI



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 2,325

(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

191D



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 150

(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

19.1L



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 145

(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 IN



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 35

(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

191A



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 31,712

(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 KS



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 1,035

(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 KY



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2021

NAIC Company Code 23418

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	(134)	(134)	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	20,051	17,688	0	9,310	0	0	0	0	0	0	3,856	802
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	1,434,427	1,387,344	0	1,207,031	0	(35,697)	24,957	5,574	5,331	10,031	426,061	57,377
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	41,863	39,508	0	19,796	0	0	0	0	0	0	8,385	1,675
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	0	0	0	0	0	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	143,282	101,291	0	90,026	(1,680)	31,968	44,618	6,526	9,550	4,347	45,797	5,731
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)	1,639,623	1,545,831	0	1,326,163	(1,680)	(3,729)	69,575	11,966	14,747	14,378	484,099	65,585
<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 \$ 1,220

(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

191A



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2021

NAIC Company Code 23418

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	2,000	2,333	0	626	0	0	0	0	0	0	300	40
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	125,123	117,506	0	62,843	821	(8,854)	1,240	80	80	0	24,964	2,502
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	47,289	44,851	0	26,777	0	0	0	0	0	0	11,808	946
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	0	0	0	0	0	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)	174,412	164,690	0	90,246	821	(8,854)	1,240	80	80	0	37,072	3,488
<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 ME



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 830

(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 MD



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2021

NAIC Company Code 23418

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, Flood, etc., and a TOTALS row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 420

(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 MA



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2021

NAIC Company Code 23418

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	26,991	24,579	0	9,179	0	0	0	0	0	0	4,298	729
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	548,370	531,427	0	267,143	0	(44,030)	0	0	0	0	132,937	14,806
17.2 Other Liability - claims made	434,861	411,602	0	228,279	0	1,376	1,796	1,305	1,305	0	84,152	11,741
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	37,501	34,714	0	11,157	0	0	0	0	0	0	8,341	1,013
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	0	0	0	0	0	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)	1,047,723	1,002,322	0	515,758	0	(42,654)	1,796	1,305	1,305	0	229,728	28,289
<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 \$ 1,715

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2021

NAIC Company Code 23418

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.

19 MN

(a) Finance and service charges not included in Lines 1 to 35 \$ 110
(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2021

NAIC Company Code 23418

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, Other private passenger auto liability, Commercial auto no-fault, Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft, 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 \$ .660

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 3,750

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2021

NAIC Company Code 23418

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	91,600	84,182	0	44,379	(63)	(776)	(3)	0	0	0	14,184	2,107
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	751,656	714,618	0	476,291	13,901	(725,917)	265,803	29,505	44,187	79,912	164,880	17,288
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	120,315	128,453	0	58,212	405,500	2,392,308	3,391,350	608,275	835,265	595,090	24,817	2,767
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	130,835	128,531	0	58,918	7,030	6,653	1,670	0	(1)	8	22,273	3,009
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	76,808	81,271	0	33,492	41,881	(18,588)	5,246	823	(1,380)	0	12,827	1,767
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	5,250	3,250	0	4,114	0	0	0	0	0	0	1,725	121
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)	1,176,464	1,140,305	0	675,406	468,249	1,653,680	3,664,066	638,603	878,071	675,010	240,706	27,059
<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 \$ 5,215

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2021

NAIC Company Code 23418

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	31,020	27,153	0	13,444	(1,000)	(4,714)	(101)	0	0	0	4,725	776
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	134,332	111,692	0	64,501	2,000	(35,380)	16,311	4,643	(5,317)	1,197	26,704	3,358
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	44,363	38,298	0	17,343	980	(9,508)	3,643	2,476	1,509	0	9,575	1,109
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	68,726	48,267	0	20,871	4,658	10,254	5,596	135	759	624	10,945	1,718
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	17,639	11,673	0	6,009	8,861	32,486	23,625	366	1,167	801	2,730	441
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	250	284	0	137	0	0	0	0	0	0	75	6
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)	296,330	237,367	0	122,305	15,499	(6,862)	49,074	7,620	(1,882)	2,622	54,754	7,408
<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 \$ .945

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2021

NAIC Company Code 23418

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	11,496	9,014	0	7,616	0	0	0	0	0	0	2,379	402
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	16,645	17,633	0	13,489	0	0	0	0	0	0	3,675	583
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	693	2,147	0	3,941	0	0	0	0	0	0	174	24
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	0	0	0	0	0	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	494	454	0	53	0	0	0	0	0	0	154	17
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)	29,328	29,248	0	25,099	0	0	0	0	0	0	6,382	1,026
<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 \$ 155

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ .205

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ .665
(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2021

NAIC Company Code 23418

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 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 \$ 3,920

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF New York

DURING THE YEAR 2021

NAIC Company Code 23418

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., and a TOTALS row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 140

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2021

NAIC Company Code 23418

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., and a TOTALS row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,240

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 23,755

(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

19ND



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ .745

(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 OH



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 122,038

(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 OK



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ .....210

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 2,095

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2021

NAIC Company Code 23418

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	0	0	0	0	0	0	0	0	0	0	0	0
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	12,234	21,960	0	7,801	0	0	0	0	0	0	3,208	245
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	917	953	0	937	0	0	0	0	0	0	217	18
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	0	0	0	0	0	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)	13,151	22,913	0	8,738	0	0	0	0	0	0	3,425	263
<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.RI



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2021

NAIC Company Code 23418

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	93,824	65,664	0	69,635	37,162	35,490	3,767	247	247	0	15,682	2,346
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	2,625,895	2,404,122	0	1,218,363	(7,340)	(534,839)	1,857,738	65,988	68,513	294,740	499,304	65,647
17.2 Other Liability - claims made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	1,516,013	1,381,711	0	723,851	449,400	2,646,455	6,674,665	444,583	695,188	1,457,628	290,224	37,900
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	31,406	31,615	0	6,930	0	0	0	0	0	0	5,331	785
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	14,117	13,747	0	2,318	0	0	0	0	0	0	2,456	353
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	10,100	5,100	0	9,438	0	0	0	0	0	0	3,635	253
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)	4,291,355	3,901,959	0	2,030,535	479,222	2,147,106	8,536,170	510,818	763,948	1,752,368	816,632	107,284
<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 \$ 13,110

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2021

NAIC Company Code 23418

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., and a TOTALS row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 170

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 2,690

(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 MID-CONTINENT CASUALTY COMPANY**  
**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0084

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2021

NAIC Company Code 23418

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	2,483,386	2,239,141	.0	1,193,607	657,352	744,118	265,546	19,275	20,660	5,766	393,247	54,634
10. Financial guaranty	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
12. Earthquake	.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	(54,925)	.0	.0	(1,058)	.0	.0	.0
17.1 Other Liability - occurrence	19,794,870	18,803,404	.0	9,104,945	1,994,928	9,026,501	29,447,239	1,501,460	1,492,137	2,792,592	3,616,558	435,487
17.2 Other Liability - claims made	15,699,415	15,301,187	.0	7,457,600	1,790,375	3,021,240	11,628,980	463,307	576,842	887,197	3,141,914	345,387
17.3 Excess workers' compensation	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability	10,044,718	9,351,201	.0	4,369,043	2,370,314	7,119,797	21,650,362	1,236,142	127,935	3,714,077	1,919,954	220,984
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)	11,160	11,895	.0	5,095	6,105	(6,171)	3,116	.0	.0	.0	1,759	246
19.4 Other commercial auto liability	3,468,840	3,152,133	.0	1,741,783	1,933,691	2,155,818	4,625,896	403,867	446,991	564,634	549,203	76,314
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	990,664	921,131	.0	476,749	282,419	295,296	108,834	9,053	7,952	2,121	156,064	21,795
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	1,346,635	1,213,868	310,868	819,047	.0	25,966	113,376	5,500	8,384	2,884	397,714	29,626
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)	53,839,688	50,993,960	310,868	25,167,869	9,035,184	22,327,640	67,843,349	3,638,604	2,679,843	7,969,271	10,176,413	1,184,473
<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 \$ 82,584

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ 6,642

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2021

NAIC Company Code 23418

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., and a TOTALS row.

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

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ .590

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2021

NAIC Company Code 23418

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, Federal flood, 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/W/A



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2021

NAIC Company Code 23418

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	1,100	1,100	0	1,054	19,445	21,541	2,096	1,370	1,370	0	165	22
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	42,969	39,453	0	13,338	0	0	0	0	0	0	8,185	859
17.2 Other Liability - claims made	654,080	611,894	0	338,903	112,813	(190,890)	336,934	6,535	(25,335)	8,485	130,362	13,082
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	10,739	9,955	0	3,376	0	0	0	0	0	0	2,203	215
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	0	0	0	0	0	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)	708,888	662,402	0	356,671	132,258	(169,349)	339,030	7,905	(23,965)	8,485	140,915	14,178
<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 \$ 460

(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

191WV



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2021

NAIC Company Code 23418

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 \$ .500

(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.WI



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2021

NAIC Company Code 23418

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., and a TOTALS row.

19.WV

(a) Finance and service charges not included in Lines 1 to 35 \$ 12,650

(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 MID-CONTINENT CASUALTY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2021

NAIC Company Code 23418

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	(134)	(134)	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	13,497,744	12,520,884	0	5,006,700	3,952,460	4,329,442	1,107,540	164,855	168,123	23,394	2,269,742	371,559
10. Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	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	172,780	(80,197)	664,120	2,242	(5,446)	9,977	0	0
17.1 Other Liability - occurrence	57,083,167	54,524,799	0	28,476,038	9,168,227	12,128,327	69,730,517	3,169,263	834,099	6,593,499	11,326,097	1,464,010
17.2 Other Liability - claims made	22,705,623	21,391,024	0	11,304,011	3,456,977	5,826,673	15,498,609	588,641	605,504	958,828	4,529,431	518,504
17.3 Excess workers' compensation	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability	23,756,841	22,575,044	0	10,536,737	19,008,231	18,725,273	129,498,205	12,222,064	3,922,134	21,932,386	4,721,394	591,734
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	5,000	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection)	41,323	46,133	0	21,686	14,238	(26,702)	31,710	0	0	0	6,968	674
19.4 Other commercial auto liability	12,341,419	10,581,569	0	6,338,327	4,299,568	4,482,266	7,434,412	635,403	657,220	879,707	2,069,534	283,350
21.1 Private passenger auto physical damage	0	0	0	0	0	(433)	3,006	0	433	498	0	0
21.2 Commercial auto physical damage	3,429,184	3,209,170	0	1,644,740	1,462,965	1,191,131	296,416	38,239	24,910	11,399	574,848	85,138
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	6,498,210	6,068,462	310,868	3,637,084	(1,638)	10,764	788,407	33,174	39,020	7,231	1,935,031	191,985
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)	139,353,511	130,917,085	310,868	66,965,323	41,533,808	46,586,544	225,057,942	16,853,747	6,245,863	30,416,919	27,433,045	3,506,954
<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 \$ 352,533

(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 MID-CONTINENT CASUALTY 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								
73-0773259	23426	Oklahoma Surety Company	OH	15,421	0	7,301	7,301	0	0	7,452	0	0	0	0
73-1406844	15380	Mid-Continent Assurance Company	OH	1,771	0	832	832	0	0	777	0	0	0	0
38-3803661	13794	Mid-Continent Excess and Surplus Insurance Company	OH	2,986	0	2,476	2,476	0	0	1,324	0	0	0	0
0199999. Affiliates - U.S. Intercompany Pooling				20,178	0	10,609	10,609	0	0	9,553	0	0	0	0
31-0501234	16691	Great American Insurance Company	OH	1,756	0	4,684	4,684	0	0	778	0	0	0	0
0299999. Affiliates - U.S. Non-Pool - Captive				1,756	0	4,684	4,684	0	0	778	0	0	0	0
0499999. Total - U.S. Non-Pool				1,756	0	4,684	4,684	0	0	778	0	0	0	0
0799999. Total - Other (Non-U.S.)				0	0	0	0	0	0	0	0	0	0	0
0899999. Total - Affiliates				21,934	0	15,293	15,293	0	0	10,331	0	0	0	0
74-2564217	10085	Tank Owner Members Insurance Company	TX	0	0	161	161	0	0	0	0	0	0	0
0999999. Total Other U.S. Unaffiliated Insurers				0	0	161	161	0	0	0	0	0	0	0
AA-9991146		AIPSO	RI	23	0	16	16	0	0	9	0	0	0	0
1199999. Total Pools, Associations or Other Similar Facilities - Voluntary Pools				23	0	16	16	0	0	9	0	0	0	0
1299999. Total - Pools and Associations				23	0	16	16	0	0	9	0	0	0	0
9999999 Totals				21,957	0	15,470	15,470	0	0	10,340	0	0	0	0

**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 MID-CONTINENT CASUALTY 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			
31-0501234	16691	Great American Insurance Company	OH		409	0	0	85	30	0	0	202	0	317	0	22	0	295	0	
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other					409	0	0	85	30	0	0	202	0	317	0	22	0	295	0	
0499999. Total Authorized - Affiliates - U.S. Non-Pool					409	0	0	85	30	0	0	202	0	317	0	22	0	295	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					409	0	0	85	30	0	0	202	0	317	0	22	0	295	0	
48-0921045	39845	Westport Insurance Corporation	MO		0	0	799	11	0	0	0	0	0	810	0	0	0	810	0	
13-2673100	22039	General Reinsurance Corporation	DE		320	0	12	198	500	0	0	176	0	886	0	66	0	821	0	
13-1675535	25364	Swiss Reinsurance America Corporation	NY		3,580	0	165	9	1,000	0	1,853	0	3,027	0	174	0	2,854	0		
06-1430254	10348	Arch Reinsurance Company	DE		927	0	1,010	88	500	0	427	0	2,025	0	39	0	1,986	0		
13-2997499	38776	Sirius Amer Ins Co	NY		0	0	345	13	0	0	0	0	358	0	0	0	358	0		
22-2005057	26921	Everest Reinsurance Company	DE		164	0	43	0	0	0	86	0	129	0	47	0	81	0		
47-0574325	32603	Berkley Insurance Company	DE		0	0	258	0	0	0	0	0	258	0	0	0	258	0		
51-0434766	20370	AXIS Reinsurance Company	NY		52	0	34	33	0	0	20	0	87	0	7	0	80	0		
47-0698507	23680	Odyssey Reinsurance Company	CT		0	0	7	0	0	0	0	0	7	0	0	0	7	0		
13-1290712	20583	XL Reinsurance America Inc	NY		1,711	0	222	18	1,000	0	814	0	2,054	0	79	0	1,974	0		
13-2918573	42439	The Toa Reinsurance Company of America	DE		1,331	0	288	24	1,000	0	633	0	1,945	0	47	0	1,898	0		
13-1963496	20281	Federal Insurance Company	IN		0	0	34	33	0	0	0	0	67	0	0	0	67	0		
06-0237820	20699	ACE Property & Casualty Ins Co	PA		0	0	295	0	0	0	0	0	295	0	0	0	295	0		
06-1182357	22730	Allied World Ins Co	NH		61	0	0	0	0	0	23	0	23	0	8	0	15	0		
13-4924125	10227	Munich Reinsurance America, Inc.	DE		16	0	10	0	0	0	34	0	44	0	0	0	44	0		
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					8,163	0	0	3,522	426	4,000	0	4,067	0	12,015	0	466	0	11,549	0	
AA-3194168		Aspen Bermuda Limited	BMU		0	0	20	0	0	0	0	0	20	0	0	0	20	0		
AA-3190686		Partner Reinsurance Co., Ltd	BMU		169	0	16	0	0	0	88	0	104	0	48	0	56	0		
AA-3190829		Markel Bermuda Limited	BMU		0	0	13	0	0	0	0	0	13	0	0	0	13	0		
AA-3194139		Axis Specialty Limited	BMU		0	0	10	0	0	0	0	0	10	0	0	0	10	0		
AA-1120084		Lloyd's Syndicate #1955	GBR		0	0	3	0	0	0	0	0	3	0	0	0	3	0		
AA-1128001		Lloyd's Syndicate #2001	GBR		0	0	29	0	0	0	0	0	29	0	0	0	29	0		
AA-1128003		Lloyd's Syndicate #2003	GBR		0	0	24	0	0	0	0	0	24	0	0	0	24	0		
AA-1128010		Lloyd's Syndicate #2010	GBR		0	0	16	0	0	0	0	0	16	0	0	0	16	0		
AA-1128121		Lloyd's Syndicate #2121	GBR		70	0	0	0	0	0	27	0	27	0	9	0	18	0		
AA-1120152		Lloyd's Syndicate #2357	GBR		0	0	16	0	0	0	0	0	16	0	0	0	16	0		
AA-1128623		Lloyd's Syndicate #2623	GBR		0	0	7	0	0	0	0	0	7	0	0	0	7	0		
AA-1128987		Lloyd's Syndicate #2987	GBR		0	0	24	0	0	0	0	0	24	0	0	0	24	0		
AA-1129000		Lloyd's Syndicate #3000	GBR		0	0	20	0	0	0	0	0	20	0	0	0	20	0		
AA-1126382		Lloyd's Syndicate #0382	GBR		0	0	7	0	0	0	0	0	7	0	0	0	7	0		
AA-1120181		Lloyd's Syndicate #5886	GBR		0	0	7	0	0	0	0	0	7	0	0	0	7	0		
AA-1126623		Lloyd's Syndicate #0623	GBR		0	0	1	0	0	0	0	0	1	0	0	0	1	0		
AA-3191435		Conduit Reinsurance Limited	BMU		341	0	0	0	0	0	162	0	162	0	23	0	139	0		
AA-3190870		Valdius Reinsurance, Ltd.	BMU		3	0	0	0	0	0	1	0	1	0	0	0	1	0		
1299999. Total Authorized - Other Non-U.S. Insurers					584	0	0	213	0	0	0	278	0	491	0	80	0	411	0	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					9,156	0	0	3,820	456	4,000	0	4,547	0	12,824	0	569	0	12,255	0	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0		
2299999. Total Unauthorized - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0		
00-0000000	10165	The Pollution Liability Insurance Agency	WA		0	0	2,520	3	0	0	0	0	2,523	0	0	0	2,523	0		
2399999. Total Unauthorized - Other U.S. Unaffiliated Insurers					0	0	0	2,520	3	0	0	0	0	2,523	0	0	0	2,523	0	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					0	0	0	2,520	3	0	0	0	0	2,523	0	0	0	2,523	0	
3299999. Total Certified - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	
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-1340125		Hannover Rueck SE	DEU		3,256	0	0	317	24	1,000	0	1,540	0	2,880	0	167	0	2,714	0	
CR-3191315		XL Bermuda LTD	BMU		0	0	49	0	0	0	0	0	0	49	0	0	0	49	0	
4099999. Total Certified - Other Non-U.S. Insurers						3,256	0	366	24	1,000	0	1,540	0	2,929	0	167	0	2,763	0	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)						3,256	0	366	24	1,000	0	1,540	0	2,929	0	167	0	2,763	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)						12,412	0	6,706	483	5,000	0	6,087	0	18,275	0	735	0	17,540	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
9999999 Totals						12,412	0	6,706	483	5,000	0	6,087	0	18,275	0	735	0	17,540	0	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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)
31-0501234	Great American Insurance Company	0	0		0	22	295	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other	0	0	XXX	0	22	295	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	22	295	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	22	295	0	0	0	0	0	0	0	XXX	0	0
48-0921045	Westport Insurance Corporation	0	0		0	0	810	0	810	972	0	972	0	972	2	0	40
13-2673100	General Reinsurance Corporation	0	0		0	66	821	0	886	1,063	66	998	0	998	2	0	41
13-1675535	Swiss Reinsurance America Corporation	0	0		0	174	2,854	0	3,027	3,633	174	3,459	0	3,459	2	0	142
06-1430254	Arch Reinsurance Company	0	0		0	39	1,986	0	2,025	2,430	39	2,391	0	2,391	3	0	115
13-2997499	Sirius Amer Ins Co	0	0		0	0	358	0	358	430	0	430	0	430	4	0	23
22-2005057	Everest Reinsurance Company	0	0		0	47	81	0	129	154	47	107	0	107	3	0	5
47-0574325	Berkley Insurance Company	0	0		0	0	258	0	258	310	0	310	0	310	3	0	15
51-0434766	AXIS Reinsurance Company	0	0		0	7	80	0	87	104	7	97	0	97	3	0	5
47-0698507	Odyssey Reinsurance Company	0	0		0	0	7	0	7	8	0	8	0	8	4	0	0
13-1290712	XL Reinsurance America Inc	0	0		0	79	1,974	0	2,054	2,464	79	2,385	0	2,385	2	0	98
13-2918573	The Toa Reinsurance Company of America	0	0		0	47	1,898	0	1,945	2,334	47	2,287	0	2,287	3	0	110
13-1963496	Federal Insurance Company	0	0		0	0	67	0	67	80	0	80	0	80	2	0	3
06-0237820	ACE Property & Casualty Ins Co	0	0		0	0	295	0	295	354	0	354	0	354	2	0	15
06-1182357	Allied World Ins Co	0	0		0	8	15	0	23	28	8	20	0	20	4	0	1
13-4924125	Munich Reinsurance America, Inc.	0	0		0	0	44	0	44	53	0	53	0	53	2	0	2
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	0	0	XXX	0	466	11,549	0	12,015	14,418	466	13,952	0	13,952	XXX	0	614
AA-3194168	Aspen Bermuda Limited	0	0		0	0	20	0	20	24	0	24	0	24	4	0	1
AA-3190686	Partner Reinsurance Co., Ltd	0	0		0	48	56	0	104	124	48	76	0	76	3	0	4
AA-3190829	Markel Bermuda Limited	0	0		0	0	13	0	13	16	0	16	0	16	3	0	1
AA-3194139	Axis Specialty Limited	0	0		0	0	10	0	10	12	0	12	0	12	3	0	1
AA-1120084	Lloyd's Syndicate #1955	0	0		0	0	3	0	3	4	0	4	0	4	3	0	0
AA-1128001	Lloyd's Syndicate #2001	0	0		0	0	29	0	29	35	0	35	0	35	3	0	2
AA-1128003	Lloyd's Syndicate #2003	0	0		0	0	24	0	24	29	0	29	0	29	3	0	1
AA-1128010	Lloyd's Syndicate #2010	0	0		0	0	16	0	16	19	0	19	0	19	3	0	1
AA-1128121	Lloyd's Syndicate #2121	0	0		0	9	18	0	27	32	9	23	0	23	3	0	1
AA-1120152	Lloyd's Syndicate #2357	0	0		0	0	16	0	16	19	0	19	0	19	3	0	1
AA-1128623	Lloyd's Syndicate #2623	0	0		0	0	7	0	7	8	0	8	0	8	3	0	0
AA-1128987	Lloyd's Syndicate #2987	0	0		0	0	24	0	24	29	0	29	0	29	3	0	1
AA-1129000	Lloyd's Syndicate #3000	0	0		0	0	20	0	20	24	0	24	0	24	3	0	1
AA-1126382	Lloyd's Syndicate #0382	0	0		0	0	7	0	7	8	0	8	0	8	3	0	0
AA-1120181	Lloyd's Syndicate #5886	0	0		0	0	7	0	7	8	0	8	0	8	3	0	0
AA-1126623	Lloyd's Syndicate #0623	0	0		0	0	1	0	1	1	0	1	0	1	3	0	0
AA-3191435	Conduit Reinsurance Limited	0	0		0	23	139	0	162	195	23	171	0	171	4	0	9
AA-3190870	Valdius Reinsurance, Ltd.	0	0		0	0	1	0	1	2	0	2	0	2	3	0	0
1299999	Total Authorized - Other Non-U.S. Insurers	0	0	XXX	0	80	411	0	491	589	80	509	0	509	XXX	0	25
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	0	XXX	0	569	12,255	0	12,506	15,007	547	14,461	0	14,461	XXX	0	639
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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)
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2299999. Total Unauthorized - Affiliates		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
00-0000000 The Pollution Liability Insurance Agency		0	0		0	2,523	2,523	0	0	0	0	0	0	0	6	0	0
2399999. Total Unauthorized - Other U.S. Unaffiliated Insurers		0	0	XXX	0	0	2,523	2,523	0	0	0	0	0	0	XXX	0	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	XXX	0	0	2,523	2,523	0	0	0	0	0	0	XXX	0	0
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-1340125 Hannover Rueck SE		288	0		0	455	2,426	0	2,880	3,456	167	3,290	288	3,002	2	12	123
CR-3191315 XL Bermuda LTD		10	0		0	10	39	0	49	59	0	59	10	49	3	0	2
4099999. Total Certified - Other Non-U.S. Insurers		298	0	XXX	0	464	2,465	0	2,929	3,515	167	3,349	298	3,051	XXX	12	125
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		298	0	XXX	0	464	2,465	0	2,929	3,515	167	3,349	298	3,051	XXX	12	125
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)		298	0	XXX	0	1,033	17,242	2,523	15,436	18,523	713	17,809	298	17,512	XXX	12	765
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		298	0	XXX	0	1,033	17,242	2,523	15,436	18,523	713	17,809	298	17,512	XXX	12	765

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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)
			1 - 29 Days	30 - 90 Days	91 - 120 Days	Over 120 Days												
31-0501234	Great American Insurance Company	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0	
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other	0	0	0	0	0	0	0	0	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	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	XXX	0	
0899999	Total Authorized - Affiliates	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0	
48-0921045	Westport Insurance Corporation	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
13-2673100	General Reinsurance Corporation	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
13-1675535	Swiss Reinsurance America Corporation	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
06-1430254	Arch Reinsurance Company	0	0	0	0	0	0	0	0	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	YES	0	
22-2005057	Everest Reinsurance Company	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
47-0574325	Berkley Insurance Company	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
51-0434766	AXIS Reinsurance Company	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
47-0698507	Odyssey Reinsurance Company	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
13-1290712	XL Reinsurance America Inc	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
13-2918573	The Toa Reinsurance Company of America	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
13-1963496	Federal Insurance Company	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
06-0237820	ACE Property & Casualty Ins Co	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
06-1182357	Allied World Ins Co	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
13-4924125	Munich Reinsurance America, Inc.	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	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0	
AA-3194168	Aspen Bermuda Limited	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-3190686	Partner Reinsurance Co., Ltd	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-3190829	Markel Bermuda Limited	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-3194139	Axis Specialty Limited	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1120084	Lloyd's Syndicate #1955	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 #2001	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 #2003	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1128010	Lloyd's Syndicate #2010	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1128121	Lloyd's Syndicate #2121	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1120152	Lloyd's Syndicate #2357	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 #2623	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 #2987	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1129000	Lloyd's Syndicate #3000	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1126382	Lloyd's Syndicate #0382	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1120181	Lloyd's Syndicate #5886	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 #0623	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-3191435	Conduit Reinsurance Limited	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-3190870	Valdius Reinsurance, Ltd.	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	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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												
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0	0	0	0	0	0	0	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	XXX	0	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
2299999. Total Unauthorized - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
00-000000 The Pollution Liability Insurance Agency		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
2399999. Total Unauthorized - Other U.S. Unaffiliated Insurers		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	0	0	0	0	0	0	0	0	0.0	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	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	XXX	0	
3699999. Total Certified - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
CR-1340125 Hannover Rueck SE		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
CR-3191315 XL Bermuda LTD		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
4099999. Total Certified - Other Non-U.S. Insurers		0	0	0	0	0	0	0	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)		0	0	0	0	0	0	0	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	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	XXX	0	
5099999. Total Reciprocal Jurisdiction - Affiliates		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	XXX	0	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		0	0	0	0	0	0	0	0	0	0	0	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	XXX	0	
9999999 Totals		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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		
31-0501234	Great American Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other			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	
48-0921045	Westport Insurance Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2673100	General Reinsurance Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1675535	Swiss Reinsurance America Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1430254	Arch Reinsurance Company	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	
22-2005057	Everest Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0574325	Berkley Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
51-0434766	AXIS Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0698507	Odyssey Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1290712	XL Reinsurance America Inc	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2918573	The Toa Reinsurance Company of America	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1963496	Federal Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-0237820	ACE Property & Casualty Ins Co	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1182357	Allied World Ins Co	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-4924125	Munich Reinsurance America, 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-3194168	Aspen Bermuda Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190686	Partner Reinsurance Co., Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190829	Markei Bermuda Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194139	Axis Specialty Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120084	Lloyd's Syndicate #1955	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128001	Lloyd's Syndicate #2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128003	Lloyd's Syndicate #2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128010	Lloyd's Syndicate #2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128121	Lloyd's Syndicate #2121	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120152	Lloyd's Syndicate #2357	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128623	Lloyd's Syndicate #2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128987	Lloyd's Syndicate #2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1129000	Lloyd's Syndicate #3000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126382	Lloyd's Syndicate #0382	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120181	Lloyd's Syndicate #5886	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126623	Lloyd's Syndicate #0623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191435	Conduit Reinsurance Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190870	Valdius Reinsurance, 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	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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
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	XXX	XXX
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		XXX	XXX	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	XXX	XXX
2299999. Total Unauthorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
00-000000 The Pollution Liability Insurance Agency	XXX	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	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	XXX	XXX
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
3699999. Total Certified - Affiliates		XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
CR-1340125 Hannover Rueck SE	2	07/01/2015	10.0	0	2,714	271	10.6	100.0	0	2,714	0	0	0	0	0	0	0
CR-3191315 XL Bermuda LTD	3	11/01/2019	20.0	0	49	10	20.0	100.0	0	49	0	0	0	0	0	0	0
4099999. Total Certified - Other Non-U.S. Insurers		XXX	0	2,763	281	XXX	XXX	0	2,763	0	0	0	0	0	0	0	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	0	2,763	281	XXX	XXX	0	2,763	0	0	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	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	XXX	XXX
5099999. Total Reciprocal Jurisdiction - Affiliates		XXX	XXX	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	XXX	XXX
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		XXX	0	2,763	281	XXX	XXX	0	2,763	0	0	0	0	0	0	0	0
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
9999999 Totals		XXX	0	2,763	281	XXX	XXX	0	2,763	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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)
31-0501234	Great American Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other	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
48-0921045	Westport Insurance Corporation	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2673100	General Reinsurance Corporation	0	XXX	XXX	0	0	0	XXX	XXX	0
13-1675535	Swiss Reinsurance America Corporation	0	XXX	XXX	0	0	0	XXX	XXX	0
06-1430254	Arch Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2997499	Sirius Amer Ins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
22-2005057	Everest Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
47-0574325	Berkley Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
51-0434766	AXIS Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
47-0698507	Odyssey Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
13-1290712	XL Reinsurance America Inc	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2918573	The Toa Reinsurance Company of America	0	XXX	XXX	0	0	0	XXX	XXX	0
13-1963496	Federal Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
06-0237820	ACE Property & Casualty Ins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
06-1182357	Allied World Ins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
13-4924125	Munich Reinsurance America, 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-3194168	Aspen Bermuda Limited	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3190686	Partner Reinsurance Co., Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3190829	Markel Bermuda Limited	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3194139	Axis Specialty Limited	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120084	Lloyd's Syndicate #1955	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128001	Lloyd's Syndicate #2001	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128003	Lloyd's Syndicate #2003	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128010	Lloyd's Syndicate #2010	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128121	Lloyd's Syndicate #2121	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120152	Lloyd's Syndicate #2357	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128623	Lloyd's Syndicate #2623	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128987	Lloyd's Syndicate #2987	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1129000	Lloyd's Syndicate #3000	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126382	Lloyd's Syndicate #0382	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120181	Lloyd's Syndicate #5886	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126623	Lloyd's Syndicate #0623	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3191435	Conduit Reinsurance Limited	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3190870	Valdius Reinsurance, 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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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 Jurisdiction 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)
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
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
00-000000 ... The Pollution Liability Insurance Agency		0	2,523	0	XXX	XXX	XXX	2,523	XXX	2,523
2399999. Total Unauthorized - Other U.S. Unaffiliated Insurers		0	2,523	0	XXX	XXX	XXX	2,523	XXX	2,523
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	2,523	0	XXX	XXX	XXX	2,523	XXX	2,523
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-1340125 ... Hannover Rueck SE		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
CR-3191315 ... XL Bermuda LTD		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	2,523	0	0	0	0	2,523	0	2,523
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	0	0	0	0	0	0	0
9999999 Totals		0	2,523	0	0	0	0	2,523	0	2,523

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

**SCHEDULE F - PART 4**

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

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
<b>NONE</b>				
Total				

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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.	Swiss Reinsurance America Corporation .....	3,027	3,580	Yes [ ] No [ X ]
7.	Hannover Rueck SE .....	2,880	3,256	Yes [ ] No [ X ]
8.	The Pollution Liability Insurance Agency .....	2,523	0	Yes [ ] No [ X ]
9.	XL Reinsurance America Inc .....	2,054	1,711	Yes [ ] No [ X ]
10.	Arch Reinsurance Company .....	2,025	927	Yes [ ] No [ X ]

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12) .....	563,394,447	0	563,394,447
2. Premiums and considerations (Line 15) .....	30,072,152	0	30,072,152
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) .....	0	0	0
4. Funds held by or deposited with reinsured companies (Line 16.2) .....	0	0	0
5. Other assets .....	12,494,773	0	12,494,773
6. Net amount recoverable from reinsurers .....	0	15,752,259	15,752,259
7. Protected cell assets (Line 27) .....	0	0	0
8. Totals (Line 28) .....	605,961,372	15,752,259	621,713,631
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	308,568,296	12,187,833	320,756,129
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	15,109,566	0	15,109,566
11. Unearned premiums (Line 9) .....	71,219,271	6,086,656	77,305,927
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) .....	735,968	0	735,968
15. Funds held by company under reinsurance treaties (Line 13) .....	0	0	0
16. Amounts withheld or retained by company for account of others (Line 14) .....	681,037	0	681,037
17. Provision for reinsurance (Line 16) .....	2,522,230	(2,522,230)	0
18. Other liabilities .....	(58,386,376)	0	(58,386,376)
19. Total liabilities excluding protected cell business (Line 26) .....	340,449,992	15,752,259	356,202,251
20. Protected cell liabilities (Line 27) .....	0	0	0
21. Surplus as regards policyholders (Line 37)	265,511,380	XXX	265,511,380
22. Totals (Line 38)	605,961,372	15,752,259	621,713,631

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: Mid-Continent Casualty Company participates in a reinsurance pooling agreement with affiliate companies. See Footnote 26 for more details. ....

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

**NONE**

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

**NONE**

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

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	1	0	1	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	0
10. 2020	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior	5	0	0	0	0	0	0	0	1	0	0	6	1
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	0	0	0	0	0	0	0	0	0	0	0
11. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	5	0	0	0	0	0	0	0	1	0	0	6	1

	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	5	1
2. 2012	0	0	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	0	0
4. 2014	0	0	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	0	0
6. 2016	0	0	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	0	0
8. 2018	0	0	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	0	0
10. 2020	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	5	1

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	0	0	0	XXX
2. 2012.....	12,546	120	12,426	8,476	0	1,551	0	1,160	0	81	11,187	306
3. 2013.....	12,910	122	12,788	8,044	0	1,652	0	1,345	0	57	11,041	308
4. 2014.....	13,340	125	13,215	3,957	0	367	0	1,075	0	82	5,399	234
5. 2015.....	11,867	106	11,761	2,461	0	374	0	942	0	36	3,777	226
6. 2016.....	10,234	79	10,155	6,067	0	476	0	660	0	31	7,203	174
7. 2017.....	9,900	76	9,824	2,990	0	327	0	587	0	25	3,904	155
8. 2018.....	10,696	79	10,617	5,583	0	960	21	826	0	23	7,348	201
9. 2019.....	10,588	77	10,511	1,792	0	237	0	614	0	24	2,643	155
10. 2020.....	13,269	97	13,172	2,402	0	223	0	611	0	67	3,236	163
11. 2021.....	15,987	117	15,870	843	0	34	0	420	0	8	1,297	162
12. Totals	XXX	XXX	XXX	42,615	0	6,201	21	8,240	0	434	57,035	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.....	(3)	0	0	0	0	0	0	0	14	0	3	11	1
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	14	0	0	14	1
4. 2014.....	43	0	0	0	8	0	0	0	14	0	0	65	1
5. 2015.....	1	0	0	0	0	0	0	0	28	0	0	29	2
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	348	0	1	0	49	0	0	0	28	0	0	426	3
8. 2018.....	630	0	2	0	100	0	0	0	112	0	0	844	7
9. 2019.....	2,381	0	2	0	354	0	0	0	198	0	8	2,935	13
10. 2020.....	2,730	0	1,003	0	451	0	0	0	507	0	51	4,691	33
11. 2021.....	1,809	0	3,502	0	301	0	0	0	840	0	5	6,452	69
12. Totals	7,939	0	4,510	0	1,263	0	0	0	1,755	0	67	15,467	130

	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	(3)	14
2. 2012.....	11,187	0	11,187	89.2	0.0	90.0	0	0	0.0	0	0
3. 2013.....	11,055	0	11,055	85.6	0.0	86.4	0	0	0.0	0	14
4. 2014.....	5,464	0	5,464	41.0	0.0	41.3	0	0	0.0	43	22
5. 2015.....	3,806	0	3,806	32.1	0.0	32.4	0	0	0.0	1	28
6. 2016.....	7,203	0	7,203	70.4	0.0	70.9	0	0	0.0	0	0
7. 2017.....	4,330	0	4,330	43.7	0.0	44.1	0	0	0.0	349	77
8. 2018.....	8,213	21	8,192	76.8	26.6	77.2	0	0	0.0	632	212
9. 2019.....	5,578	0	5,578	52.7	0.0	53.1	0	0	0.0	2,383	552
10. 2020.....	7,927	0	7,927	59.7	0.0	60.2	0	0	0.0	3,733	958
11. 2021.....	7,749	0	7,749	48.5	0.0	48.8	0	0	0.0	5,311	1,141
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	12,449	3,018

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	173	75	2	0	0	0	0	100	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	0
10. 2020	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	173	75	2	0	0	0	0	100	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	664	799	0	0	10	11	0	0	62	0	0	(74)	23
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	0	0	0	0	0	0	0	0	0	0	0
11. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	664	799	0	0	10	11	0	0	62	0	0	(74)	23

	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	(135)	61
2. 2012	0	0	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	0	0
4. 2014	0	0	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	0	0
6. 2016	0	0	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	0	0
8. 2018	0	0	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	0	0
10. 2020	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	(135)	61

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	0	0	0	XXX
2. 2012	496	14	482	68	0	0	0	7	0	6	75	23
3. 2013	308	10	298	16	0	1	0	7	0	0	24	5
4. 2014	290	10	280	49	0	0	0	9	0	0	58	2
5. 2015	119	5	114	0	0	0	0	1	0	0	1	1
6. 2016	59	26	33	37	19	2	0	1	0	0	21	1
7. 2017	167	85	82	33	19	5	0	8	0	0	27	3
8. 2018	74	35	39	22	11	0	1	9	0	0	19	2
9. 2019	4	4	0	0	0	0	0	0	0	0	0	0
10. 2020	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	225	49	8	1	42	0	6	225	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	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	0	0	0	0	0	0	0	0	0	0	0
11. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0
12. 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
2. 2012	75	0	75	15.1	0.0	15.6	0	0	0.0	0	0
3. 2013	24	0	24	7.8	0.0	8.1	0	0	0.0	0	0
4. 2014	58	0	58	20.0	0.0	20.7	0	0	0.0	0	0
5. 2015	1	0	1	0.8	0.0	0.9	0	0	0.0	0	0
6. 2016	40	19	21	67.8	73.1	63.6	0	0	0.0	0	0
7. 2017	46	19	27	27.5	22.4	32.9	0	0	0.0	0	0
8. 2018	31	12	19	41.9	34.3	48.7	0	0	0.0	0	0
9. 2019	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence

**N O N E**

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made

**N O N E**

Schedule P - Part 1G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	2,479	0	604	0	28			
2. 2012.....	79,017	10,189	68,828	10,340	304	7,768	0	4,471	0	59	22,275	472
3. 2013.....	82,842	11,149	71,693	20,585	5,656	8,964	175	4,360	0	152	28,077	413
4. 2014.....	85,894	11,993	73,901	19,925	5,654	7,489	0	4,595	0	106	26,355	419
5. 2015.....	79,419	11,255	68,164	7,566	0	6,408	0	3,690	0	23	17,664	327
6. 2016.....	68,015	10,064	57,951	9,554	3,616	3,921	0	3,281	0	46	13,140	298
7. 2017.....	65,167	10,542	54,625	6,521	0	3,496	0	2,701	0	5	12,718	262
8. 2018.....	65,596	9,494	56,102	10,731	4,416	2,694	258	1,899	0	8	10,651	216
9. 2019.....	64,001	9,395	54,606	2,784	0	778	0	1,416	0	17	4,979	197
10. 2020.....	61,138	9,326	51,812	2,949	0	323	0	1,002	0	98	4,274	155
11. 2021.....	62,625	9,816	52,809	1,868	0	51	0	296	0	3	2,216	80
12. Totals	XXX	XXX	XXX	95,301	19,646	42,497	433	27,740	0	517	145,460	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.....	3,122	1,504	1,854	1,100	895	469	0	0	1,177			
2. 2012.....	1,590	990	1,000	0	111	0	0	0	318	0	0	2,030	9
3. 2013.....	310	0	951	0	164	0	0	0	235	0	9	1,661	5
4. 2014.....	682	0	3,121	0	353	0	0	0	431	0	0	4,586	11
5. 2015.....	1,057	0	3,210	0	631	0	0	0	516	0	5	5,414	13
6. 2016.....	967	0	4,301	0	566	0	0	0	675	0	3	6,509	17
7. 2017.....	2,087	325	5,449	0	1,106	0	0	0	1,333	0	9	9,650	37
8. 2018.....	3,669	0	5,347	1,200	1,766	0	0	0	1,749	0	23	11,331	46
9. 2019.....	1,336	0	7,234	700	904	0	0	0	1,572	0	8	10,347	35
10. 2020.....	2,571	328	10,387	800	1,221	0	0	0	2,106	0	14	15,157	40
11. 2021.....	837	0	14,894	200	374	0	0	0	2,471	0	0	18,376	32
12. Totals	18,229	3,147	57,748	4,000	8,091	469	0	0	12,583	0	73	89,035	277

	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.....	25,599	1,294	24,305	32.4	12.7	35.3	0	0	0.0	1,600	430
3. 2013.....	35,569	5,831	29,738	42.9	52.3	41.5	0	0	0.0	1,261	400
4. 2014.....	36,595	5,654	30,941	42.6	47.1	41.9	0	0	0.0	3,803	783
5. 2015.....	23,078	0	23,078	29.1	0.0	33.9	0	0	0.0	4,267	1,147
6. 2016.....	23,265	3,616	19,649	34.2	35.9	33.9	0	0	0.0	5,268	1,241
7. 2017.....	22,693	325	22,368	34.8	3.1	40.9	0	0	0.0	7,211	2,438
8. 2018.....	27,856	5,874	21,982	42.5	61.9	39.2	0	0	0.0	7,816	3,514
9. 2019.....	16,025	700	15,325	25.0	7.5	28.1	0	0	0.0	7,870	2,477
10. 2020.....	20,559	1,128	19,431	33.6	12.1	37.5	0	0	0.0	11,830	3,327
11. 2021.....	20,792	200	20,592	33.2	2.0	39.0	0	0	0.0	15,531	2,845
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	68,830	20,205

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	17	0	3	0	0	0	0	20	XXX
2. 2012.....	6,567	231	6,336	980	0	239	0	458	0	45	1,677	38
3. 2013.....	6,569	227	6,342	542	0	132	0	250	0	0	924	22
4. 2014.....	6,773	224	6,549	369	0	241	0	206	0	0	816	22
5. 2015.....	7,425	222	7,203	1,309	0	279	0	379	0	0	1,967	26
6. 2016.....	7,951	211	7,740	657	0	215	0	341	0	0	1,213	15
7. 2017.....	8,610	217	8,393	979	0	163	0	581	0	0	1,722	26
8. 2018.....	14,375	268	14,107	4,055	867	493	0	482	0	0	4,163	49
9. 2019.....	19,775	311	19,464	3,945	991	443	4	652	0	0	4,045	64
10. 2020.....	21,348	330	21,018	1,249	0	198	0	221	0	26	1,669	38
11. 2021.....	23,445	341	23,104	1,235	0	180	0	102	0	0	1,517	51
12. Totals	XXX	XXX	XXX	15,338	1,858	2,585	4	3,673	0	71	19,734	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.....	100	0	246	0	59	0	0	0	60	0	0	465	3
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	28	0	49	0	4	0	0	0	12	0	0	93	1
4. 2014.....	114	0	379	0	148	0	0	0	100	0	0	742	4
5. 2015.....	97	0	290	0	15	0	0	0	50	0	0	451	3
6. 2016.....	73	0	199	0	11	0	0	0	33	0	0	316	2
7. 2017.....	25	0	51	0	4	0	0	0	11	0	0	90	1
8. 2018.....	1,388	1,160	1,353	0	233	0	0	0	641	0	0	2,454	18
9. 2019.....	1,853	682	1,966	0	226	0	0	0	741	0	0	4,104	27
10. 2020.....	1,224	437	2,913	0	138	2	0	0	495	0	0	4,331	25
11. 2021.....	1,791	241	4,444	0	359	1	0	0	828	0	0	7,180	50
12. Totals	6,692	2,520	11,890	0	1,198	3	0	0	2,970	0	0	20,227	134

	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.....	1,677	0	1,677	25.5	0.0	26.5	0	0	0.0	0	0
3. 2013.....	1,016	0	1,016	15.5	0.0	16.0	0	0	0.0	76	16
4. 2014.....	1,558	0	1,558	23.0	0.0	23.8	0	0	0.0	494	248
5. 2015.....	2,419	0	2,419	32.6	0.0	33.6	0	0	0.0	387	64
6. 2016.....	1,530	0	1,530	19.2	0.0	19.8	0	0	0.0	272	44
7. 2017.....	1,812	0	1,812	21.0	0.0	21.6	0	0	0.0	75	15
8. 2018.....	8,644	2,027	6,617	60.1	756.3	46.9	0	0	0.0	1,581	873
9. 2019.....	9,826	1,677	8,149	49.7	539.1	41.9	0	0	0.0	3,136	968
10. 2020.....	6,439	439	6,000	30.2	133.0	28.5	0	0	0.0	3,700	631
11. 2021.....	8,939	242	8,697	38.1	71.0	37.6	0	0	0.0	5,994	1,186
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	16,062	4,165

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	(34)	0	49	0	4	0	7	19	XXX
2. 2020	10,287	625	9,662	2,623	0	78	0	67	0	39	2,768	XXX
3. 2021	12,572	653	11,919	3,462	0	103	0	87	0	86	3,652	XXX
4. Totals	XXX	XXX	XXX	6,051	0	230	0	158	0	132	6,439	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	(59)	0	0	0	0	0	0	0	21	0	61	(38)	4
2. 2020	(16)	0	0	0	0	0	0	0	13	0	26	(3)	3
3. 2021	682	0	500	0	23	0	0	0	129	0	21	1,334	38
4. Totals	607	0	500	0	23	0	0	0	163	0	108	1,293	45

	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	(59)	21
2. 2020	2,765	0	2,765	26.9	0.0	28.6	0	0	0.0	(16)	13
3. 2021	4,986	0	4,986	39.7	0.0	41.8	0	0	0.0	1,182	152
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,107	186

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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						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	(46)	0	4	0	18	0	80	(24)	XXX
2. 2020	4,544	43	4,501	1,950	0	59	0	249	0	189	2,258	266
3. 2021	4,945	46	4,899	1,543	0	44	0	178	0	42	1,765	241
4. Totals	XXX	XXX	XXX	3,447	0	107	0	445	0	311	3,999	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	(92)	0	0	0	4	0	0	0	39	0	182	(49)	41
2. 2020	5	0	0	0	3	0	0	0	12	0	95	20	11
3. 2021	312	0	250	0	12	0	0	0	46	0	11	620	50
4. Totals	225	0	250	0	19	0	0	0	97	0	288	591	102

	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	2,278	0	2,278	50.1	0.0	50.6	0	0	0.0	5	15
3. 2021	2,385	0	2,385	48.2	0.0	48.7	0	0	0.0	562	58
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	475	116

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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							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	48	0	231	0	322	0	0	601	XXX
2. 2020	8,174	553	7,621	0	0	0	0	0	0	0	0	XXX
3. 2021	8,057	537	7,520	0	0	0	0	0	0	0	0	XXX
4. Totals	XXX	XXX	XXX	48	0	231	0	322	0	0	601	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	317	0	0	0	934	0	0	0	198	0	0	1,449	16
2. 2020	0	0	0	0	0	0	0	0	13	0	0	13	1
3. 2021	0	0	500	0	0	0	0	0	0	0	0	500	0
4. Totals	317	0	500	0	934	0	0	0	211	0	0	1,962	17

	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	13	0	13	0.2	0.0	0.2	0	0	0.0	0	13
3. 2021	500	0	500	6.2	0.0	6.6	0	0	0.0	500	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	817	1,145

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

**N O N E**

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 MID-CONTINENT CASUALTY 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	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				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	7,642	1,642	4,751	0	2,546	0	0	13,297	XXX
2. 2012	25,586	245	25,341	8,350	0	7,275	0	4,226	0	64	19,851	360
3. 2013	28,690	270	28,420	5,591	0	4,054	0	6,135	0	220	15,780	535
4. 2014	31,488	296	31,192	13,469	0	11,795	0	9,075	0	79	34,339	898
5. 2015	28,763	213	28,550	9,250	0	8,132	0	7,116	0	42	24,498	742
6. 2016	24,020	186	23,834	2,505	0	2,723	0	1,839	0	88	7,067	141
7. 2017	23,944	183	23,761	3,185	0	3,360	0	2,014	0	154	8,559	170
8. 2018	25,694	191	25,503	2,702	0	2,019	0	1,149	0	76	5,870	120
9. 2019	24,386	180	24,206	2,945	0	2,514	0	1,292	0	48	6,751	168
10. 2020	23,967	177	23,790	1,266	0	704	0	648	0	87	2,618	99
11. 2021	25,570	187	25,383	485	0	87	0	287	0	0	859	64
12. Totals	XXX	XXX	XXX	57,390	1,642	47,414	0	36,327	0	858	139,489	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	11,550	0	7,000	0	6,874	0	0	0	8,642	0	4	34,066	377
2. 2012	1,675	240	4,500	1,000	1,198	0	0	0	790	0	0	6,923	37
3. 2013	1,209	0	6,500	0	802	0	0	0	764	0	28	9,275	46
4. 2014	3,450	0	8,000	0	2,432	0	0	0	4,175	0	19	18,057	172
5. 2015	8,648	0	8,000	0	2,610	0	0	0	3,992	0	5	23,250	175
6. 2016	1,949	0	8,000	0	1,519	0	0	0	444	0	11	11,912	20
7. 2017	1,033	0	7,500	0	760	0	0	0	547	0	20	9,840	26
8. 2018	1,952	0	7,500	0	1,370	0	0	0	817	0	28	11,639	37
9. 2019	3,610	0	7,500	0	2,530	0	0	0	1,547	0	68	15,187	68
10. 2020	2,164	0	10,250	0	1,569	0	0	0	996	0	31	14,979	46
11. 2021	1,556	0	21,650	0	1,125	0	0	0	600	0	0	24,931	38
12. Totals	38,796	240	96,400	1,000	22,789	0	0	0	23,314	0	214	180,059	1,042

	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	18,550	15,516
2. 2012	28,014	1,240	26,774	109.5	506.1	105.7	0	0	0.0	4,935	1,988
3. 2013	25,055	0	25,055	87.3	0.0	88.2	0	0	0.0	7,709	1,566
4. 2014	52,396	0	52,396	166.4	0.0	168.0	0	0	0.0	11,450	6,607
5. 2015	47,748	0	47,748	166.0	0.0	167.2	0	0	0.0	16,648	6,602
6. 2016	18,979	0	18,979	79.0	0.0	79.6	0	0	0.0	9,949	1,963
7. 2017	18,399	0	18,399	76.8	0.0	77.4	0	0	0.0	8,533	1,307
8. 2018	17,509	0	17,509	68.1	0.0	68.7	0	0	0.0	9,452	2,187
9. 2019	21,938	0	21,938	90.0	0.0	90.6	0	0	0.0	11,110	4,077
10. 2020	17,597	0	17,597	73.4	0.0	74.0	0	0	0.0	12,414	2,565
11. 2021	25,790	0	25,790	100.9	0.0	101.6	0	0	0.0	23,206	1,725
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	133,956	46,103

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

**N O N E**

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

**N O N E**

Schedule P - Part 1T - Warranty

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY**  
**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.....												
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 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

1. Prior.....	824	695	674	771	688	628	623	621	621	621	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 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

1. Prior.....	9,980	7,978	7,642	7,643	7,661	7,623	7,528	7,524	7,526	7,528	2	4
2. 2012.....	7,603	10,082	9,453	9,607	10,162	10,188	10,021	10,021	10,021	10,027	6	6
3. 2013.....	XXX	7,754	8,065	9,033	9,564	11,046	9,745	9,728	9,696	9,696	0	(32)
4. 2014.....	XXX	XXX	5,615	4,283	4,750	3,748	3,682	3,680	3,755	4,375	620	695
5. 2015.....	XXX	XXX	XXX	4,086	3,794	2,601	2,678	2,811	2,953	2,836	(117)	25
6. 2016.....	XXX	XXX	XXX	XXX	5,549	6,617	6,614	6,602	6,505	6,543	38	(59)
7. 2017.....	XXX	XXX	XXX	XXX	XXX	4,816	3,551	3,836	3,793	3,715	(78)	(121)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	6,375	5,562	6,957	7,254	297	1,692
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,762	3,885	4,766	881	(996)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,287	6,809	1,522	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,489	XXX	XXX
12. Totals											3,171	1,214

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

1. Prior.....	(171)	(98)	3	65	44	61	37	93	155	191	36	98
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											36	98

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

1. Prior.....	1,388	1,015	632	375	213	48	(27)	(28)	(28)	(28)	0	0
2. 2012.....	325	318	318	318	68	68	68	68	68	68	0	0
3. 2013.....	XXX	261	267	267	267	17	17	17	17	17	0	0
4. 2014.....	XXX	XXX	294	299	299	299	49	49	49	49	0	0
5. 2015.....	XXX	XXX	XXX	250	250	250	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	250	282	289	20	20	20	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	289	289	20	19	19	0	(1)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	522	50	10	10	0	(40)
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	(41)

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

**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												
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 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

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

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 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

1. Prior	82,645	81,377	71,417	63,235	68,171	66,365	65,507	62,786	63,705	63,732	27	946
2. 2012	28,099	21,480	19,442	20,444	20,955	21,918	20,986	20,124	19,710	19,516	(194)	(608)
3. 2013	XXX	27,495	23,622	21,992	21,284	24,665	24,617	27,082	26,887	25,143	(1,744)	(1,939)
4. 2014	XXX	XXX	27,634	26,179	24,732	24,636	23,944	26,200	25,282	25,916	634	(284)
5. 2015	XXX	XXX	XXX	24,912	21,229	17,452	16,987	17,470	17,533	18,871	1,338	1,401
6. 2016	XXX	XXX	XXX	XXX	21,618	15,105	18,621	17,881	17,901	15,694	(2,207)	(2,187)
7. 2017	XXX	XXX	XXX	XXX	XXX	23,852	18,032	19,959	18,971	18,334	(637)	(1,625)
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	23,380	18,519	17,854	18,334	480	(185)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,565	11,678	12,337	659	(9,228)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22,507	16,323	(6,184)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,825	XXX	XXX
12. Totals											(7,829)	(13,709)

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

1. Prior	7,421	7,364	7,729	9,754	9,157	7,970	9,898	9,654	9,537	9,435	(102)	(219)
2. 2012	1,197	1,798	1,790	1,615	1,490	1,330	1,401	1,332	1,228	1,219	(9)	(113)
3. 2013	XXX	1,034	1,354	1,110	1,127	732	722	702	786	754	(32)	52
4. 2014	XXX	XXX	662	1,133	1,481	1,355	1,061	1,137	1,285	1,252	(33)	115
5. 2015	XXX	XXX	XXX	766	1,540	2,504	2,150	1,934	2,067	1,990	(77)	56
6. 2016	XXX	XXX	XXX	XXX	1,467	1,397	1,305	1,144	1,150	1,156	6	12
7. 2017	XXX	XXX	XXX	XXX	XXX	1,477	2,150	1,524	1,259	1,221	(38)	(303)
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	4,117	5,110	5,730	5,495	(235)	385
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,191	8,378	6,756	(1,622)	2,565
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,838	5,284	1,446	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,767	XXX	XXX
12. Totals											(697)	2,549

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	1,164	1,118	1,068	(50)	(96)
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,865	2,685	(180)	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,770	XXX	XXX
4. Totals											(230)	(96)

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	664	360	396	36	(268)
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,250	2,017	(233)	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,161	XXX	XXX
4. Totals											(197)	(268)

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	951	811	1,455	644	504
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	500	0	(500)	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	500	XXX	XXX
4. Totals											144	504

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

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											XXX	XXX

**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												

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 MID-CONTINENT CASUALTY 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	88,609	102,474	116,963	140,752	161,193	170,791	178,396	187,042	195,415	199,949	4,534	12,907
2. 2012	11,585	12,065	13,435	15,003	17,183	17,213	16,302	17,127	21,703	21,758	55	4,631
3. 2013	XXX	15,090	14,874	13,016	11,293	13,592	14,512	14,376	17,766	18,156	390	3,780
4. 2014	XXX	XXX	25,191	24,982	15,608	23,949	26,058	32,054	36,180	39,146	2,966	7,092
5. 2015	XXX	XXX	XXX	26,071	17,025	18,661	21,502	25,600	33,032	36,640	3,608	11,040
6. 2016	XXX	XXX	XXX	XXX	23,261	16,791	14,278	16,530	16,911	16,696	(215)	166
7. 2017	XXX	XXX	XXX	XXX	XXX	19,135	15,634	16,527	17,012	15,838	(1,174)	(689)
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	18,067	17,166	15,514	15,543	29	(1,623)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,191	21,153	19,099	(2,054)	(4,092)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,530	15,953	(8,577)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,903	XXX	XXX
12. Totals											(438)	33,212

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

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												

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2. 2020	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												

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2. 2020	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												

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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												
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 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

1. Prior	.000	.309	.369	.390	.621	.623	.618	.616	.616	.616	.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	0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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

1. Prior	.000	1,635	4,278	4,513	7,286	7,303	7,530	7,531	7,531	7,531	.0	.0
2. 2012	1,671	3,562	5,851	7,821	9,058	10,030	10,021	10,021	10,021	10,027	256	50
3. 2013	XXX	1,301	2,512	5,582	8,357	9,633	9,706	9,696	9,696	9,696	274	33
4. 2014	XXX	XXX	1,084	2,629	3,220	3,316	3,381	3,393	3,434	4,324	207	26
5. 2015	XXX	XXX	XXX	834	1,844	2,139	2,374	2,514	2,825	2,835	192	32
6. 2016	XXX	XXX	XXX	XXX	796	3,141	4,660	5,392	6,503	6,543	155	19
7. 2017	XXX	XXX	XXX	XXX	XXX	1,032	1,797	2,128	2,978	3,317	132	20
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1,135	2,308	4,249	6,522	161	33
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	706	1,511	2,029	130	12
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	472	2,625	118	12
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	877	92	1

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

1. Prior	.000	.290	.132	.319	.168	.200	.171	.401	.227	.327	.3	.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	0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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

1. Prior	.000	.64	.139	.193	.36	.38	(28)	(28)	(28)	(28)	.0	.0
2. 2012	60	68	68	68	68	68	68	68	68	68	20	3
3. 2013	XXX	8	17	17	17	17	17	17	17	17	5	0
4. 2014	XXX	XXX	44	44	49	49	49	49	49	49	1	1
5. 2015	XXX	XXX	XXX	0	0	0	0	0	0	0	1	0
6. 2016	XXX	XXX	XXX	XXX	0	1	39	20	20	20	1	0
7. 2017	XXX	XXX	XXX	XXX	XXX	3	33	20	19	19	3	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	21	10	10	1	1
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	0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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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												
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 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

1. Prior	.000												
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 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

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	XXX

NONE

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

1. Prior	.000	14,782	23,480	35,638	42,237	46,481	50,214	57,132	57,852	60,934	3	0
2. 2012	2,669	4,848	7,005	10,516	12,327	13,946	16,074	16,792	17,571	17,804	288	175
3. 2013	XXX	1,640	4,840	8,061	13,499	15,589	17,593	20,540	22,796	23,718	275	133
4. 2014	XXX	XXX	1,252	3,621	7,406	17,141	18,814	19,557	21,535	21,760	264	144
5. 2015	XXX	XXX	XXX	921	2,973	6,853	9,709	11,646	13,134	13,974	225	89
6. 2016	XXX	XXX	XXX	XXX	946	2,576	4,782	7,660	8,650	9,859	195	86
7. 2017	XXX	XXX	XXX	XXX	XXX	1,040	2,725	6,797	8,455	10,018	168	57
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1,696	5,109	7,321	8,752	121	49
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,444	2,786	3,562	133	29
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,169	3,272	96	19
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,919	44	4

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

1. Prior	.000	1,628	2,670	4,118	5,757	6,274	8,674	8,949	9,010	9,030	0	0
2. 2012	103	340	617	896	1,018	1,089	1,178	1,212	1,219	1,219	17	21
3. 2013	XXX	105	312	469	522	611	638	649	670	674	10	11
4. 2014	XXX	XXX	38	204	358	471	535	588	597	610	3	15
5. 2015	XXX	XXX	XXX	32	214	780	1,117	1,324	1,489	1,588	6	17
6. 2016	XXX	XXX	XXX	XXX	94	422	679	738	812	872	7	6
7. 2017	XXX	XXX	XXX	XXX	XXX	293	828	1,092	1,133	1,141	11	14
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	841	2,053	2,847	3,681	18	13
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	585	2,189	3,393	16	21
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	182	1,448	8	5
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,415	1	0

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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	1,112	1,127	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,120	2,701	XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,565	XXX	XXX

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	526	484	18	0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,442	2,009	247	8
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,587	187	4

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	(75)	204	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 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**

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 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 MID-CONTINENT CASUALTY 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	30,761	56,694	82,850	101,821	118,935	132,026	147,227	163,774	174,525	207	30
2. 2012.....	222	895	2,113	4,831	7,667	9,890	11,545	12,167	14,993	15,625	159	164
3. 2013.....	XXX	187	771	1,962	3,655	4,473	5,146	7,027	9,024	9,645	348	141
4. 2014.....	XXX	XXX	741	4,038	6,831	9,704	12,365	16,476	20,184	25,264	576	150
5. 2015.....	XXX	XXX	XXX	123	1,242	3,865	7,232	10,068	13,225	17,382	492	75
6. 2016.....	XXX	XXX	XXX	XXX	172	687	1,408	3,211	4,524	5,228	89	32
7. 2017.....	XXX	XXX	XXX	XXX	XXX	200	1,280	3,484	5,103	6,545	111	33
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	404	1,125	3,383	4,721	69	14
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	812	2,186	5,459	86	14
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	292	1,970	50	3
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	572	24	2

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

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

**NONE**

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

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

**NONE**

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

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

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

1. Prior.....										
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XXX							
6. 2016.....	XXX	XXX	XX	XX						
7. 2017.....	XXX	XXX	XX	XX	XX					
8. 2018.....	XXX	XXX	XX	XX	XX	XX				
9. 2019.....	XXX	XXX	XX	XXX	XXX	XX	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 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

1. Prior.....	4,002	1,002	2	1	0	0	0	0	0	0
2. 2012.....	1,025	1,000	500	1	0	0	0	0	0	0
3. 2013.....	XXX	2,025	500	1,000	1	0	0	0	0	0
4. 2014.....	XXX	XXX	3,025	1,000	1,000	1	1	0	0	0
5. 2015.....	XXX	XXX	XXX	2,025	1,002	1	1	1	0	0
6. 2016.....	XXX	XXX	XXX	XXX	2,026	1,001	2	2	1	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	3,025	1,001	1	1	1
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	3,026	752	2	2
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,276	753	2
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,276	1,003
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,502

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

1. Prior.....										
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XXX							
6. 2016.....	XXX	XXX	XX	XX						
7. 2017.....	XXX	XXX	XX	XX	XX					
8. 2018.....	XXX	XXX	XX	XX	XX	XX				
9. 2019.....	XXX	XXX	XX	XXX	XXX	XX	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 4E - COMMERCIAL MULTIPLE PERIL**

1. Prior.....	750	500	250	0	0	0	0	0	0	0
2. 2012.....	250	250	250	250	0	0	0	0	0	0
3. 2013.....	XXX	250	250	250	250	0	0	0	0	0
4. 2014.....	XXX	XXX	250	250	250	250	0	0	0	0
5. 2015.....	XXX	XXX	XXX	250	250	250	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	250	250	250	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	250	250	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	500	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

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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										
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 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

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

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 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

1. Prior	50,039	41,088	29,487	16,911	19,651	14,026	9,240	2,509	2,152	754
2. 2012	21,586	9,148	4,268	3,506	3,686	3,839	3,854	2,422	1,491	1,000
3. 2013	XXX	17,132	10,369	6,605	3,652	3,892	2,948	3,968	2,419	951
4. 2014	XXX	XXX	21,304	15,458	9,325	4,486	2,724	3,698	2,588	3,121
5. 2015	XXX	XXX	XXX	20,258	14,204	5,820	4,358	3,591	2,560	3,210
6. 2016	XXX	XXX	XXX	XXX	17,863	9,328	9,586	7,267	6,756	4,301
7. 2017	XXX	XXX	XXX	XXX	XXX	18,876	9,130	9,651	6,901	5,449
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	16,880	9,326	5,220	4,147
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,889	7,470	6,534
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,428	9,587
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14,694

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

1. Prior	4,461	2,912	2,513	3,089	2,349	974	760	491	348	246
2. 2012	552	852	732	494	314	161	146	78	9	0
3. 2013	XXX	506	631	395	348	108	52	32	81	49
4. 2014	XXX	XXX	334	542	675	514	276	302	412	379
5. 2015	XXX	XXX	XXX	380	796	1,180	642	409	440	290
6. 2016	XXX	XXX	XXX	XXX	775	672	414	233	244	199
7. 2017	XXX	XXX	XXX	XXX	XXX	762	870	349	99	51
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1,758	1,674	1,780	1,353
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,749	4,030	1,966
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,210	2,913
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,444

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	500	0	0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	500	0
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	500

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	250	0	0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	250	0
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	250

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	500	0	0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	500	0
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	500

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

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

**NONE**

**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 MID-CONTINENT CASUALTY 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	28,000	23,000	21,000	20,000	22,000	20,000	13,000	6,500	6,500	7,000
2. 2012	10,400	8,000	4,000	4,000	5,000	4,000	3,000	3,500	4,000	3,500
3. 2013	XXX	13,400	11,000	7,000	5,000	7,000	7,000	5,000	7,000	6,500
4. 2014	XXX	XXX	21,400	15,000	4,000	8,000	6,000	7,000	8,500	8,000
5. 2015	XXX	XXX	XXX	23,400	10,000	8,000	7,000	8,500	8,500	8,000
6. 2016	XXX	XXX	XXX	XXX	21,400	12,000	9,000	9,000	8,500	8,000
7. 2017	XXX	XXX	XXX	XXX	XXX	17,400	11,400	10,000	8,500	7,500
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	17,000	12,900	9,000	7,500
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,000	15,000	7,500
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,900	10,250
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,650

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

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 4S - FINANCIAL GUARANTY/MORTGAGE GUARANTY**

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 4T - WARRANTY**

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 5A - Homeowners/Farmowners - Section 1

**N O N E**

Schedule P - Part 5A - Homeowners/Farmowners - Section 2

**N O N E**

Schedule P - Part 5A - Homeowners/Farmowners - Section 3

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	49	18	15	31	11	8	4	1	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

**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	62	53	41	14	8	1	1	1	0	1
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

**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	11	7	5	2	0	(3)	0	1	(1)	1
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

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	118	33	21	28	6	3	3	1	0	0
2. 2012	148	217	234	246	250	254	256	256	256	256
3. 2013	XXX	145	230	255	265	272	274	274	274	274
4. 2014	XXX	XXX	116	186	199	206	207	207	207	207
5. 2015	XXX	XXX	XXX	114	173	182	186	189	190	192
6. 2016	XXX	XXX	XXX	XXX	82	139	149	152	154	155
7. 2017	XXX	XXX	XXX	XXX	XXX	71	116	128	131	132
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	72	141	150	161
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	60	119	130
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	58	118
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	92

**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	89	62	44	9	5	2	1	1	1	1
2. 2012	96	39	24	16	10	5	0	0	0	0
3. 2013	XXX	107	42	18	9	4	2	2	1	1
4. 2014	XXX	XXX	86	20	10	3	1	1	1	1
5. 2015	XXX	XXX	XXX	73	20	13	10	6	4	2
6. 2016	XXX	XXX	XXX	XXX	56	15	5	2	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	49	19	11	5	3
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	73	29	18	7
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	72	26	13
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56	33
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	69

**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	40	9	2	(4)	(1)	(1)	0	1	0	0
2. 2012	272	304	308	312	310	309	306	306	306	306
3. 2013	XXX	271	299	303	307	309	309	309	308	308
4. 2014	XXX	XXX	216	231	235	235	234	234	234	234
5. 2015	XXX	XXX	XXX	205	223	226	227	226	226	226
6. 2016	XXX	XXX	XXX	XXX	148	170	173	173	173	174
7. 2017	XXX	XXX	XXX	XXX	XXX	130	152	156	154	155
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	163	202	201	201
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	139	156	155
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	121	163
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	162

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	2	2	2	2	0	1	2	0	0	3
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

**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	35	33	31	29	29	28	26	26	26	23
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

**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										
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**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	28	11	5	4	2	2	1	1	0	0
2. 2012	14	17	20	20	20	20	20	20	20	20
3. 2013	XXX	3	5	5	5	5	5	5	5	5
4. 2014	XXX	XXX	0	0	1	1	1	1	1	1
5. 2015	XXX	XXX	XXX	1	1	1	1	1	1	1
6. 2016	XXX	XXX	XXX	XXX	0	0	1	1	1	1
7. 2017	XXX	XXX	XXX	XXX	XXX	0	2	2	3	3
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	1	1	1
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 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	20	14	8	5	5	3	1	0	0	0
2. 2012	2	0	0	0	0	0	0	0	0	0
3. 2013	XXX	2	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	0	1	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	1	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	2	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1	1	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

**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	20	5	(1)	1	0	(1)	(1)	0	0	0
2. 2012	18	20	23	23	23	23	23	23	23	23
3. 2013	XXX	5	5	5	5	5	5	5	5	5
4. 2014	XXX	XXX	0	2	2	2	2	2	2	2
5. 2015	XXX	XXX	XXX	1	1	1	1	1	1	1
6. 2016	XXX	XXX	XXX	XXX	0	1	1	1	1	1
7. 2017	XXX	XXX	XXX	XXX	XXX	2	2	2	3	3
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1	2	2	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

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A

**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B

**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B

**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	248	140	82	92	33	26	13	14	11	3
2. 2012	91	197	233	259	270	277	282	283	287	288
3. 2013	XXX	86	175	205	228	248	256	265	271	275
4. 2014	XXX	XXX	72	144	189	222	247	257	261	264
5. 2015	XXX	XXX	XXX	66	128	151	180	202	218	225
6. 2016	XXX	XXX	XXX	XXX	63	121	143	172	185	195
7. 2017	XXX	XXX	XXX	XXX	XXX	61	115	143	156	168
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	36	81	104	121
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56	104	133
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	47	96
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44

**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	625	431	222	125	103	81	68	52	38	32
2. 2012	154	84	67	49	37	28	15	10	7	9
3. 2013	XXX	157	103	74	60	39	32	19	12	5
4. 2014	XXX	XXX	156	106	92	53	32	19	15	11
5. 2015	XXX	XXX	XXX	115	74	72	47	26	13	13
6. 2016	XXX	XXX	XXX	XXX	80	53	62	36	25	17
7. 2017	XXX	XXX	XXX	XXX	XXX	92	75	46	44	37
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	73	65	52	46
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64	39	35
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51	40
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	32

**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	161	11	4	12	22	12	(3)	(1)	(2)	(3)
2. 2012	321	420	461	474	480	479	471	468	469	472
3. 2013	XXX	306	387	406	416	419	421	417	416	413
4. 2014	XXX	XXX	276	357	409	417	421	419	420	419
5. 2015	XXX	XXX	XXX	210	277	306	313	316	320	327
6. 2016	XXX	XXX	XXX	XXX	186	246	288	292	296	298
7. 2017	XXX	XXX	XXX	XXX	XXX	168	234	243	257	262
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	125	183	203	216
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	128	166	197
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	106	155
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	80

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	22	15	11	7	4	4	3	1	1	0
2. 2012	1	3	5	8	9	12	15	16	17	17
3. 2013	XXX	0	3	7	7	10	10	10	10	10
4. 2014	XXX	XXX	0	0	1	2	2	3	3	3
5. 2015	XXX	XXX	XXX	1	1	3	3	5	6	6
6. 2016	XXX	XXX	XXX	XXX	0	4	6	6	7	7
7. 2017	XXX	XXX	XXX	XXX	XXX	0	3	7	10	11
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1	5	14	18
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	6	16
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	8
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

**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	68	43	31	16	10	8	6	4	3	3
2. 2012	33	14	8	6	4	2	2	1	0	0
3. 2013	XXX	21	10	4	4	1	1	1	1	1
4. 2014	XXX	XXX	25	12	9	7	5	4	4	4
5. 2015	XXX	XXX	XXX	32	12	6	6	4	3	3
6. 2016	XXX	XXX	XXX	XXX	40	15	5	3	2	2
7. 2017	XXX	XXX	XXX	XXX	XXX	30	16	5	2	1
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	44	37	13	18
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51	29	27
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	25
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50

**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	7	(4)	(1)	(6)	(2)	1	0	10	0	0
2. 2012	42	37	34	35	34	35	38	38	38	38
3. 2013	XXX	27	24	22	22	22	22	22	22	22
4. 2014	XXX	XXX	29	26	25	24	22	22	22	22
5. 2015	XXX	XXX	XXX	37	28	26	26	26	26	26
6. 2016	XXX	XXX	XXX	XXX	44	25	17	15	15	15
7. 2017	XXX	XXX	XXX	XXX	XXX	37	33	26	26	26
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	49	54	39	49
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	60	54	64
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	37	38
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	185	292	164	148	134	116	226	162	229	207
2. 2012	16	47	54	74	94	109	125	134	148	159
3. 2013	XXX	17	48	68	95	112	122	167	309	348
4. 2014	XXX	XXX	17	39	68	102	161	233	326	576
5. 2015	XXX	XXX	XXX	12	32	54	129	199	326	492
6. 2016	XXX	XXX	XXX	XXX	14	29	42	62	75	89
7. 2017	XXX	XXX	XXX	XXX	XXX	19	43	74	95	111
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	16	36	62	69
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	70	86
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21	50
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24

**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	952	733	550	509	556	577	622	696	543	377
2. 2012	73	65	87	66	56	41	33	35	39	37
3. 2013	XXX	70	82	73	58	67	91	144	45	46
4. 2014	XXX	XXX	99	112	134	129	161	224	277	172
5. 2015	XXX	XXX	XXX	55	88	91	157	187	197	175
6. 2016	XXX	XXX	XXX	XXX	35	54	41	36	27	20
7. 2017	XXX	XXX	XXX	XXX	XXX	45	52	48	43	26
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	26	41	31	37
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56	52	68
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41	46
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38

**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	420	319	178	260	288	195	265	272	111	71
2. 2012	125	215	264	286	303	311	320	332	351	360
3. 2013	XXX	126	215	253	278	308	343	446	495	535
4. 2014	XXX	XXX	140	226	298	348	447	592	750	898
5. 2015	XXX	XXX	XXX	81	150	194	341	448	592	742
6. 2016	XXX	XXX	XXX	XXX	56	103	113	129	133	141
7. 2017	XXX	XXX	XXX	XXX	XXX	79	122	153	170	170
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	44	89	107	120
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	85	132	168
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64	99
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B

**N O N E**

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B

**N O N E**

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B

**N O N E**

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 MID-CONTINENT CASUALTY 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.....	345	614	(6)	0	0	0	0	0	0	0	0
2. 2012.....	12,200	12,543	12,538	12,538	12,538	12,538	12,538	12,538	12,538	12,538	0
3. 2013.....	XXX	11,947	12,261	12,260	12,258	12,258	12,258	12,258	12,258	12,258	0
4. 2014.....	XXX	XXX	13,037	13,056	13,050	13,050	13,050	13,050	13,050	13,050	0
5. 2015.....	XXX	XXX	XXX	11,849	11,822	11,822	11,821	11,821	11,821	11,821	0
6. 2016.....	XXX	XXX	XXX	XXX	10,269	10,418	10,416	10,416	10,416	10,416	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	9,751	10,294	10,292	10,292	10,292	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	10,156	10,325	10,324	10,324	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,421	10,782	10,566	(216)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,909	13,643	734
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,469	15,469
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,987
13. Earned Premiums (Sch P-Pt. 1)	12,546	12,910	13,340	11,867	10,234	9,900	10,696	10,588	13,269	15,987	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.....	3	0	0	0	0	0	0	0	0	0	0
2. 2012.....	117	119	119	119	119	119	119	119	119	119	0
3. 2013.....	XXX	120	123	123	123	123	123	123	123	123	0
4. 2014.....	XXX	XXX	122	122	122	122	122	122	122	122	0
5. 2015.....	XXX	XXX	XXX	106	106	106	106	106	106	106	0
6. 2016.....	XXX	XXX	XXX	XXX	79	80	80	80	80	80	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	75	79	79	79	79	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	75	76	76	76	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	76	79	77	(2)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	94	99	5
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	113	113
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	117
13. Earned Premiums (Sch P-Pt. 1)	120	122	125	106	79	76	79	77	97	117	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.....											
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									
11. 2021.....	XXX	XXX									
12. Totals.....	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									
11. 2021.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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.....	21	0	0	0	0	0	0	0	0	0	0
2. 2012.....	475	474	474	474	474	474	474	474	474	474	0
3. 2013.....	XXX	331	331	331	331	331	331	331	331	331	0
4. 2014.....	XXX	XXX	290	279	279	279	279	279	279	279	0
5. 2015.....	XXX	XXX	XXX	130	166	166	166	166	166	166	0
6. 2016.....	XXX	XXX	XXX	XXX	23	24	24	24	24	24	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	166	160	160	160	160	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	80	80	80	80	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4	4	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	496	308	290	119	59	167	74	4	0	0	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.....	13	14	14	14	14	14	14	14	14	14	0
3. 2013.....	XXX	9	12	12	12	12	12	12	12	12	0
4. 2014.....	XXX	XXX	7	7	7	7	7	7	7	7	0
5. 2015.....	XXX	XXX	XXX	5	24	24	24	24	24	24	0
6. 2016.....	XXX	XXX	XXX	XXX	7	7	7	7	7	7	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	85	79	79	79	79	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	41	43	43	43	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	14	10	10	5	26	85	35	4	0	0	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.....	6,892	451	(30)	(2)	(1)	(42)	0	0	0	0	0
2. 2012.....	72,124	78,432	78,988	78,988	78,983	79,071	79,071	79,071	79,071	79,071	0
3. 2013.....	XXX	76,067	82,380	82,843	82,841	85,737	85,735	85,735	85,735	85,735	0
4. 2014.....	XXX	XXX	79,055	82,906	83,032	83,001	82,977	82,987	82,987	83,007	20
5. 2015.....	XXX	XXX	XXX	75,107	76,650	76,767	76,734	76,740	76,740	76,740	0
6. 2016.....	XXX	XXX	XXX	XXX	66,354	68,296	68,390	68,294	68,292	68,290	(2)
7. 2017.....	XXX	XXX	XXX	XXX	XXX	60,197	63,832	62,949	62,892	62,879	(13)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	61,926	64,967	65,011	65,010	(1)
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61,923	62,505	62,121	(384)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	60,571	61,917	1,346
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61,659	61,659
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62,625
13. Earned Premiums (Sch P-Pt. 1)	79,017	82,842	85,894	79,419	68,015	65,167	65,596	64,001	61,138	62,625	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.....	162	12	0	0	0	0	0	0	0	0	0
2. 2012.....	10,027	10,104	10,109	10,109	10,109	10,109	10,109	10,109	10,109	10,109	0
3. 2013.....	XXX	11,060	11,421	11,427	11,427	11,427	11,427	11,427	11,427	11,427	0
4. 2014.....	XXX	XXX	11,627	11,730	11,723	12,535	12,534	12,534	12,534	12,534	0
5. 2015.....	XXX	XXX	XXX	11,146	11,221	11,212	11,212	11,212	11,212	11,212	0
6. 2016.....	XXX	XXX	XXX	XXX	9,996	10,077	10,070	10,057	10,057	10,057	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	9,658	9,857	9,844	9,844	9,844	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	9,303	9,443	9,448	9,448	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,281	9,149	9,146	(3)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,453	9,569	116
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,703	9,703
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,816
13. Earned Premiums (Sch P-Pt. 1)	10,189	11,149	11,993	11,255	10,064	10,542	9,494	9,395	9,326	9,816	XXX

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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.....	.81	.0	.0	.0	.0	.0	.0	.0	.0	.0	0
2. 2012.....	6,486	6,375	6,374	6,374	6,374	6,374	6,374	6,374	6,374	6,374	0
3. 2013.....	XXX	6,680	6,618	6,618	6,612	6,612	6,612	6,612	6,612	6,612	0
4. 2014.....	XXX	XXX	6,836	6,804	6,797	6,797	6,797	6,797	6,797	6,797	0
5. 2015.....	XXX	XXX	XXX	7,457	7,381	7,381	7,381	7,381	7,381	7,381	0
6. 2016.....	XXX	XXX	XXX	XXX	8,040	7,980	7,980	7,980	7,980	7,980	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	8,670	8,600	8,606	8,606	8,606	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	14,445	15,215	15,214	15,214	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,999	18,784	18,784	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,564	21,389	(175)
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,620	23,620
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,445
13. Earned Premiums (Sch P-Pt. 1)	6,567	6,569	6,773	7,425	7,951	8,610	14,375	19,775	21,348	23,445	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.....	.1	.0	.0	.0	.0	.0	.0	.0	.0	.0	0
2. 2012.....	230	229	229	229	229	229	229	229	229	229	0
3. 2013.....	XXX	228	232	232	232	232	232	232	232	232	0
4. 2014.....	XXX	XXX	220	224	224	224	224	224	224	224	0
5. 2015.....	XXX	XXX	XXX	218	218	218	218	218	218	218	0
6. 2016.....	XXX	XXX	XXX	XXX	211	211	211	211	211	211	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	217	217	217	217	217	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	268	275	275	275	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	304	305	305	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	329	328	(1)
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	342	342
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	341
13. Earned Premiums (Sch P-Pt. 1)	231	227	224	222	211	217	268	311	330	341	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		
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		
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 MID-CONTINENT CASUALTY 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.....	3,328	205	0	0	0	0	0	0	0	0	0
2. 2012.....	22,258	26,033	26,596	26,596	26,596	26,596	26,596	26,596	26,596	26,596	0
3. 2013.....	XXX	24,706	28,456	28,870	28,863	28,863	28,863	28,863	28,863	28,863	0
4. 2014.....	XXX	XXX	27,175	29,763	29,710	29,696	29,693	29,693	29,693	29,696	3
5. 2015.....	XXX	XXX	XXX	25,761	26,469	26,414	26,410	26,409	26,409	26,409	0
6. 2016.....	XXX	XXX	XXX	XXX	23,372	24,298	24,484	24,477	24,477	24,477	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	23,087	24,671	24,650	24,629	24,622	(7)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	23,931	24,702	24,667	24,668	1
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,644	24,552	24,477	(75)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,116	24,767	1,651
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,997	23,997
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25,570
13. Earned Premiums (Sch P-Pt. 1)	25,586	28,690	31,488	28,763	24,020	23,944	25,694	24,386	23,967	25,570	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.....	32	2	0	0	0	0	0	0	0	0	0
2. 2012.....	213	248	253	253	253	253	253	253	253	253	0
3. 2013.....	XXX	233	268	272	272	272	272	272	272	272	0
4. 2014.....	XXX	XXX	256	233	233	233	233	233	233	233	0
5. 2015.....	XXX	XXX	XXX	232	237	236	236	236	236	236	0
6. 2016.....	XXX	XXX	XXX	XXX	181	188	189	189	189	189	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	177	189	189	189	189	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	178	184	184	184	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	174	181	180	(1)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	170	182	12
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	176	176
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	187
13. Earned Premiums (Sch P-Pt. 1)	245	270	296	213	186	183	191	180	177	187	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.....											
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									
11. 2021.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											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.....											
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									
11. 2021.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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	6	0	0.0	0	0	0.0
3. Commercial Auto/Truck Liability/ Medical	15,467	0	0.0	17,902	0	0.0
4. Workers' Compensation	(74)	0	0.0	0	0	0.0
5. Commercial Multiple Peril	0	0	0.0	0	0	0.0
6. Medical Professional Liability - Occurrence	0	0	0.0	0	0	0.0
7. Medical Professional Liability - Claims - Made	0	0	0.0	0	0	0.0
8. Special Liability	0	0	0.0	0	0	0.0
9. Other Liability - Occurrence	89,035	0	0.0	54,587	0	0.0
10. Other Liability - Claims-Made	20,227	0	0.0	23,935	0	0.0
11. Special Property	1,293	0	0.0	12,865	0	0.0
12. Auto Physical Damage	591	0	0.0	5,115	0	0.0
13. Fidelity/Surety	1,962	0	0.0	7,916	0	0.0
14. Other	0	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	180,059	0	0.0	26,578	0	0.0
20. Products Liability - Claims-Made	0	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	308,565	0	0.0	148,898	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 MID-CONTINENT CASUALTY 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	6	0	0.0	0	0	0.0
3. Commercial Auto/Truck Liability/Medical	15,467	0	0.0	17,902	0	0.0
4. Workers' Compensation	(74)	0	0.0	0	0	0.0
5. Commercial Multiple Peril	0	0	0.0	0	0	0.0
6. Medical Professional Liability - Occurrence	0	0	0.0	0	0	0.0
7. Medical Professional Liability - Claims - Made	0	0	0.0	0	0	0.0
8. Special Liability	0	0	0.0	0	0	0.0
9. Other Liability - Occurrence	89,035	0	0.0	54,587	0	0.0
10. Other Liability - Claims-Made	20,227	0	0.0	23,935	0	0.0
11. Special Property	1,293	0	0.0	12,865	0	0.0
12. Auto Physical Damage	591	0	0.0	5,115	0	0.0
13. Fidelity/Surety	1,962	0	0.0	7,916	0	0.0
14. Other	0	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	180,059	0	0.0	26,578	0	0.0
20. Products Liability - Claims-Made	0	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	308,565	0	0.0	148,898	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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 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 MID-CONTINENT CASUALTY 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 .....   | 8,180 |

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 [ ] No [ X ]
- 7.2 (An extended statement may be attached.)  
 .....

Schedule T - Part 2 - Interstate Compact

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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)	*
.0000		.00000	31-1544320	0	0001042046	NYSE	American Financial Group, Inc.	OH	UIP		Ownership	0.000		NO	0
.0000		.00000	86-3438529	0	0		AFG Real Estate Holding Company, LLC	OH	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	84-4395026	0	0		Bay Bridge Holding Company, LLC	MD	NIA	AFG Real Estate Holding Company, LLC	Ownership	65.000	American Financial Group, Inc.	NO	1
.0000		.00000	84-4395026	0	0		Bay Bridge Holding Company, LLC	MD	NIA	Great American Insurance Company	Ownership	35.000	American Financial Group, Inc.	NO	1
.0000		.00000	27-4078277	0	0		Bay Bridge Marina Hemingway's Restaurant, LLC	MD	NIA	Bay Bridge Holding Company, LLC	Ownership	85.000	American Financial Group, Inc.	NO	0
.0000		.00000	27-0513333	0	0		Bay Bridge Marina Management, LLC	MD	NIA	Bay Bridge Holding Company, LLC	Ownership	85.000	American Financial Group, Inc.	NO	0
.0000		.00000	20-4604276	0	0		GALIC - Bay Bridge Marina, LLC	MD	NIA	Bay Bridge Marina Management, LLC	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	84-3355051	0	0		Charleston Harbor Holding Company, LLC	SC	NIA	AFG Real Estate Holding Company, LLC	Ownership	50.000	American Financial Group, Inc.	NO	1
.0000		.00000	84-3355051	0	0		Charleston Harbor Holding Company, LLC	SC	NIA	Great American Insurance Company	Ownership	50.000	American Financial Group, Inc.	NO	1
.0000		.00000	81-3737639	0	0		Charleston Harbor Fishing, LLC	SC	NIA	Charleston Harbor Holding Company, LLC	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	84-4574243	0	0		Mountain View Grand Holding Company, LLC	NH	NIA	AFG Real Estate Holding Company, LLC	Ownership	65.000	American Financial Group, Inc.	NO	1
.0000		.00000	84-4574243	0	0		Mountain View Grand Holding Company, LLC	NH	NIA	Great American Insurance Company	Ownership	35.000	American Financial Group, Inc.	NO	1
.0000		.00000	86-3225970	0	0		Sailfish Holding Company, LLC	FL	NIA	AFG Real Estate Holding Company, LLC	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	84-2654660	0	0		Skipjack Holding Company, LLC	MD	NIA	AFG Real Estate Holding Company, LLC	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	52-2179330	0	0		Skipjack Marina Corp.	MD	NIA	Skipjack Holding Company, LLC	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-0996797	0	0		American Financial Enterprises, Inc.	CT	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-0828578	0	0		American Money Management Corporation	OH	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	27-1577326	0	0		American Real Estate Capital Company, LLC	OH	NIA	American Money Management Corporation	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	27-2829629	0	0		Mid-Market Capital Partners, LLC	DE	NIA	American Money Management Corporation	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	41-2112001	0	0		APU Holding Company	OH	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	23-6000765	0	0		American Premier Underwriters, Inc.	PA	NIA	APU Holding Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	13-6400464	0	0		Lehigh Valley Railroad Company	PA	NIA	American Premier Underwriters, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	46-1665396	0	0		Pennsylvania Lehigh Oil & Gas Holdings LLC	PA	NIA	Lehigh Valley Railroad Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	20-1548213	0	0		Magnolia Alabama Holdings, Inc.	DE	NIA	American Premier Underwriters, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	20-1574094	0	0		Magnolia Alabama Holdings LLC	AL	NIA	Magnolia Alabama Holdings, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	46-1852532	0	0		Michigan Oil & Gas Holdings, LLC	MI	NIA	American Premier Underwriters, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	46-1480078	0	0		Ohio Oil & Gas Holdings, LLC	OH	NIA	American Premier Underwriters, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	13-6021353	0	0		The Owasco River Railway, Inc.	NY	NIA	American Premier Underwriters, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	76-0080537	0	0		PCC Technical Industries, Inc.	DE	NIA	American Premier Underwriters, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	46-3246684	0	0		Pennsylvania Oil & Gas Holdings, LLC	PA	NIA	American Premier Underwriters, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	23-6000766	0	0		Pennsylvania-Reading Seashore Lines	NJ	NIA	American Premier Underwriters, Inc.	Ownership	66.670	American Financial Group, Inc.	NO	0
.0000		.00000	98-1073776	0	0		GAI Insurance Company, Ltd.	BMU	IA	APU Holding Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-1446308	0	0		Hangar Acquisition Corp.	OH	NIA	APU Holding Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	91-1242743	0	0		Premier Lease & Loan Services Insurance Agency, Inc.	WA	NIA	APU Holding Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	91-1508644	0	0		Premier Lease & Loan Services of Canada, Inc.	WA	NIA	APU Holding Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-0823725	0	0		Dixie Terminal Corporation	OH	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	06-1356481	0	0		Great American Financial Resources, Inc.	DE	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	34-1017531	0	0		Ceres Group, Inc.	DE	NIA	Great American Financial Resources, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	47-0717079	0	0		Continental General Corporation	NE	NIA	Ceres Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	34-1947042	0	0		QOAgency of Texas, Inc.	TX	NIA	Ceres Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	20-1246122	0	0		Brothers Management, LLC	FL	NIA	Great American Financial Resources, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-1391777	0	0		GALIC Brothers, Inc.	OH	NIA	Great American Financial Resources, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000		0	0		Helium Holdings Limited	BMU	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000		0	0		GAI Australia Pty Ltd	AUS	NIA	Helium Holdings Limited	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-0686194	0	0		One East Fourth, Inc.	OH	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-1119320	0	0		TEJ Holdings, Inc.	OH	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-0728327	0	0		Three East Fourth, Inc.	OH	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	81-4361220	0	0		Verikai Inc.	DE	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	42-1575938	0	0		Great American Holding, Inc.	OH	UIP	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	80-0333563	0	0		ABA Insurance Services, Inc.	OH	NIA	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	27-3062314	0	0		Agricultural Services, LLC	OH	NIA	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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)	*
.0084	American Financial Group, Inc.	10646	36-4079497	0	0		Great American Contemporary Insurance Company	OH	IA	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	10701	59-1835212	0	0		Bridgefield Employers Insurance Company	FL	IA	Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	10335	59-3269531	0	0		Bridgefield Casualty Insurance Company	FL	IA	Bridgefield Employers Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	22179	95-2801326	0	0		Republic Indemnity Company of America	CA	IA	Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	43753	31-1054123	0	0		Republic Indemnity Company of America	CA	IA	Republic Indemnity Company of America	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000		0	0		Great American Holding (Europe) Limited	GBR	NIA	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000		0	0		Great American Europe Limited	GBR	NIA	Great American Holding (Europe) Limited	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	AA-1784136	0	0		Great American International Insurance (EU) Designated Activity Company	JRL	IA	Great American Europe Limited	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	AA-1120817	0	0		Great American International Insurance (UK) Limited	GBR	IA	Great American Europe Limited	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	23418	73-0556513	0	0		Mid-Continent Casualty Company	OH	RE	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	15380	73-1406844	0	0		Mid-Continent Assurance Company	OH	IA	Mid-Continent Casualty Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	13794	38-3803661	0	0		Mid-Continent Excess and Surplus Insurance Company	OH	IA	Mid-Continent Casualty Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	30-0571535	0	0		Mid-Continent Specialty Insurance Services, Inc.	OK	NIA	Mid-Continent Casualty Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	23426	73-0773259	0	0		Oklahoma Surety Company	OH	IA	Mid-Continent Casualty Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	34-1607394	0	0		National Interstate Corporation	OH	NIA	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	34-1899058	0	0		American Highways Insurance Agency, Inc.	OH	NIA	National Interstate Corporation	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-1548235	0	0		Explorer RV Insurance Agency, Inc.	OH	NIA	National Interstate Corporation	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	98-0191335	0	0		Hudson Indemnity, Ltd.	CYM	IA	National Interstate Corporation	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	34-1607396	0	0		National Interstate Insurance Agency, Inc.	OH	NIA	National Interstate Corporation	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	36-4670968	0	0		Commercial For Hire Transportation Purchasing Group	SC	NIA	National Interstate Insurance Agency, Inc.	Management	0.000	American Financial Group, Inc.	NO	2
.0084	American Financial Group, Inc.	32620	34-1607395	0	0		National Interstate Insurance Company	OH	IA	National Interstate Corporation	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	11051	99-0345306	0	0		National Interstate Insurance Company of Hawaii, Inc.	OH	IA	National Interstate Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	43-1254631	0	0		TransProtection Service Company	MO	NIA	National Interstate Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	41106	95-3623282	0	0		Triumpher Casualty Company	OH	IA	National Interstate Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	21172	86-0114294	0	0		Vanliner Insurance Company	OH	IA	National Interstate Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	20-5546054	0	0		Safety Claims & Litigation Services, LLC	MT	NIA	National Interstate Corporation	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	46-4570914	0	0		Safety, Claims and Litigation Services, LLC	OH	NIA	National Interstate Corporation	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	87-1038842	0	0		Radion Insurance Holdings, LLC	DE	NIA	Great American Holding, Inc.	Ownership	32.000	American Financial Group, Inc.	NO	0
.0000		.00000	87-1053786	0	0		Radion Health, Inc.	DE	NIA	Radion Insurance Holdings, LLC	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000		0	0		Radion Re, Inc.	CYM	NIA	Radion Insurance Holdings, LLC	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	59-1683711	0	0		Summit Consulting, LLC	FL	NIA	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	59-3385208	0	0		Heritage Summit Healthcare, LLC	FL	NIA	Summit Consulting, LLC	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	16691	31-0501234	0	0		Great American Insurance Company	OH	UIP	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	37990	31-0973761	0	0		American Empire Insurance Company	OH	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	35351	31-0912199	0	0		American Empire Surplus Lines Insurance Company	OH	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-1463075	0	0		American Signature Underwriters, Inc.	OH	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	59-2840291	0	0		Brothers Property Corporation	OH	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	25-1754638	0	0		Brothers Pennsylvania Corporation	PA	NIA	Brothers Property Corporation	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	59-2840294	0	0		Brothers Property Management Corporation	OH	NIA	Brothers Property Corporation	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-1277904	0	0		Crop Managers Insurance Agency, Inc.	KS	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	83-1767590	0	0		CropSurance Agency, LLC	OH	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-0589001	0	0		Dempsey & Siders Agency, Inc.	OH	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	84-2358400	0	0		Human and Social Services Risk Purchasing Group, LLC	OH	NIA	Dempsey & Siders Agency, Inc.	Ownership	100.000	American Financial Group, Inc.	NO	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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)	*
.0000		.00000	31-1341668	0	0		Eden Park Insurance Brokers, Inc.	CA	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
							El Aguila, Compañia de Seguros, S.A. de C.V.								
.0000		.00000		0	0			MEX	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	YES	0
.0000		.00000	39-1404033	0	0		Farmers Crop Insurance Alliance, Inc.	KS	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000		0	0		Foreign Credit Insurance Association	NY	OTH	Great American Insurance Company	Management	0.000	American Financial Group, Inc.	NO	2
.0000		.00000	81-0814136	0	0		GAI Mexico Holdings, LLC	DE	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-1753938	0	0		GAI Warranty Company	OH	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	YES	0
.0000		.00000	31-1765544	0	0		GAI Warranty Company of Florida	FL	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	61-1329718	0	0		Global Premier Finance Company	OH	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	26832	95-1542353	0	0		Great American Alliance Insurance Company	OH	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	26344	15-6020948	0	0		Great American Assurance Company	OH	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	39896	61-0983091	0	0		Great American Casualty Insurance Company	OH	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	37532	31-0954439	0	0		Great American E & S Insurance Company	OH	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	41858	31-1036473	0	0		Great American Fidelity Insurance Company	OH	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-1652643	0	0		Great American Insurance Agency, Inc.	OH	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
							Great American Insurance Company of New York								
.0084	American Financial Group, Inc.	22136	13-5539046	0	0			NY	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-0856644	0	0		Great American Management Services, Inc.	OH	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	38580	31-1288778	0	0		Great American Protection Insurance Company	OH	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-0918893	0	0		Great American Re Inc.	DE	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	31135	31-1209419	0	0		Great American Security Insurance Company	OH	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0084	American Financial Group, Inc.	33723	31-1237970	0	0		Great American Spirit Insurance Company	OH	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
							Great American Underwriters Insurance Company								
.0084	American Financial Group, Inc.	16618	83-1694393	0	0			OH	IA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	87-1850814	0	0		PLS Canada Insurance Brokers Inc.	CAN	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000	31-1293064	0	0		Professional Risk Brokers, Inc.	IL	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000		0	0		Shelter Rock Holdings, LLC	OH	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0
.0000		.00000		0	0		Westline Industrial, LLC	OH	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	NO	0

Asterisk	Explanation
1	The entity is owned by more than one company within the AFG Group.
2	Entity is affiliated but not owned.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY 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)
00000	31-1544320	American Financial Group, Inc.	830,000,000	.0	.0	.0	300,699,108	.0		.0	1,130,699,108	.0
00000	86-3438529	AFG Real Estate Holding Company, LLC	.0	.0	(99,260,453)	.0	.0	.0		.0	(99,260,453)	.0
00000	84-3355051	Charleston Harbor Holding Company, LLC	.0	26,664,293	.0	.0	.0	.0		.0	26,664,293	.0
00000	98-1073776	GAI Insurance Company, Ltd.	.0	.0	.0	.0	.0	.0		.0	.0	(3,004,000)
00000	06-1356481	Great American Financial Resources, Inc.	10,000,000	.0	1,267,433	.0	.0	.0		.0	11,267,433	.0
63312	13-1935920	Great American Life Insurance Company	(300,000,000)	(5,000,000)	559,636,765	.0	(119,662,927)	.0		.0	134,973,838	.0
67083	45-0252531	Manhattan National Life Insurance Company	.0	5,000,000	.0	.0	.0	.0		.0	5,000,000	.0
00000	42-1575938	Great American Holding, Inc.	(150,000,000)	150,000,000	.0	.0	.0	.0		.0	.0	.0
00000		Great American International Insurance (EU) Designated Activity Company	.0	.0	.0	.0	.0	.0		.0	.0	48,871,000
00000		Great American International Insurance (UK) Limited	.0	.0	.0	.0	.0	.0		.0	.0	8,943,000
23418	73-0556513	Mid-Continent Casualty Company	.0	.0	.0	.0	.0	.0	*	.0	.0	(9,879,000)
00000	34-1607394	National Interstate Corporation	.0	.0	.0	.0	.0	.0		.0	.0	.0
00000	98-0191335	Hudson Indemnity, Ltd.	.0	.0	.0	.0	.0	.0		.0	.0	(403,337,000)
32620	34-1607395	National Interstate Insurance Company	(30,000,000)	.0	.0	.0	.0	.0	*	.0	(30,000,000)	269,564,000
11051	99-0345306	National Interstate Insurance Company of Hawaii, Inc.	.0	.0	.0	.0	.0	.0	*	.0	.0	13,110,000
41106	95-3623282	Triumphe Casualty Company	.0	.0	.0	.0	.0	.0	*	.0	.0	19,328,000
21172	86-0114294	Vanliner Insurance Company	.0	.0	.0	.0	.0	.0	*	.0	.0	122,244,000
10646	36-4079497	Great American Contemporary Insurance Company	200,000,000	45,000,000	.0	.0	.0	.0	*	.0	245,000,000	.0
22179	95-2801326	Republic Indemnity Company of America	(200,000,000)	(195,000,000)	.0	.0	.0	.0	*	.0	(395,000,000)	(40,424,000)
10335	59-3269531	Bridgfield Casualty Insurance Company	.0	.0	.0	.0	.0	.0	*	.0	.0	(3,070,000)
16691	31-0501234	Great American Insurance Company	(337,522,111)	(61,664,293)	(461,643,745)	.0	(181,036,181)	.0	*	.0	(1,041,866,330)	(26,092,000)
00000	31-1765544	GAI Warranty Company of Florida	.0	.0	.0	.0	.0	.0		.0	.0	19,000
00000	61-1329718	Global Premier Finance Company	(2,000,000)	.0	.0	.0	.0	.0		.0	(2,000,000)	.0
22136	13-5539046	Great American Insurance Company of New York	.0	35,000,000	.0	.0	.0	.0	*	.0	35,000,000	.0
38580	87-1850814	PLLS Canada Insurance Brokers, Inc.	(477,889)	.0	.0	.0	.0	.0		.0	(477,889)	.0
00000	31-1293064	Professional Risk Brokers, Inc.	(20,000,000)	.0	.0	.0	.0	.0		.0	(20,000,000)	.0
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	(3,727,000)

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

**SCHEDULE Y**

**PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL**

1 Insurers in Holding Company	2 Owners with Greater Than 10% Ownership	3 Ownership Percentage Column 2 of Column 1	4 Granted Disclaimer of Control/ Affiliation of Column 2 Over Column 1 (Yes/No)	5 Ultimate Controlling Party	6 U.S. Insurance Groups or Entities Controlled by Column 5	7 Ownership Percentage (Column 5 of Column 6)	8 Granted Disclaimer of Control/ Affiliation of Column 5 Over Column 6 (Yes/No)
American Empire Insurance Company	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
American Empire Surplus Lines Insurance Company	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Bridgfield Casualty Insurance Company	Bridgfield Employers Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Bridgfield Employers Insurance Company	Great American Contemporary Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Great American Alliance Insurance Company	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Great American Assurance Company	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Great American Casualty Insurance Company	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Great American Contemporary Insurance Company	Great American Holding, Inc.	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Great American E&S Insurance Company	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Great American Fidelity Insurance Company	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Great American Insurance Company	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Great American Insurance Company of New York	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Great American Protection Insurance Company	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Great American Security Insurance Company	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Great American Spirit Insurance Company	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Great American Underwriters Insurance Company	Great American Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Mid-Continent Assurance Company	Mid-Continent Casualty Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Mid-Continent Casualty Company	Great American Holding, Inc.	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Mid-Continent Excess and Surplus Insurance Company	Mid-Continent Casualty Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
National Interstate Insurance Company	National Interstate Corporation	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
National Interstate Insurance Company of Hawaii, Inc.	National Interstate Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Oklahoma Surety Company	Mid-Continent Casualty Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Republic Indemnity Company of America	Great American Contemporary Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Republic Indemnity Company of California	Republic Indemnity Company of America	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Triumpher Casualty Company	National Interstate Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO
Vanliner Insurance Company	National Interstate Insurance Company	100.000	NO	American Financial Group, Inc.	N/A	0.000	NO

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY  
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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

**MARCH FILING**

- |                                                                                                                       | Responses |
|-----------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Will an actuarial opinion be filed by March 1? .....                                                               | YES       |
| 2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....                   | YES       |
| 3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? .....                           | YES       |
| 4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1? ..... | YES       |

**APRIL FILING**

- |                                                                                                          |     |
|----------------------------------------------------------------------------------------------------------|-----|
| 5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1? ..... | YES |
| 6. Will Management's Discussion and Analysis be filed by April 1? .....                                  | YES |
| 7. Will the Supplemental Investment Risk Interrogatories be filed by April 1? .....                      | YES |

**MAY FILING**

- |                                                                                                              |     |
|--------------------------------------------------------------------------------------------------------------|-----|
| 8. Will this company be included in a combined annual statement which is filed with the NAIC by May 1? ..... | YES |
|--------------------------------------------------------------------------------------------------------------|-----|

**JUNE FILING**

- |                                                                                                                                      |     |
|--------------------------------------------------------------------------------------------------------------------------------------|-----|
| 9. Will an audited financial report be filed by June 1? .....                                                                        | YES |
| 10. Will 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.

**MARCH FILING**

- |                                                                                                                                                                                                            |     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 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? .....                                                                                                 | NO  |
| 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? .....                                                                                         | NO  |
| 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? .....                                                                         | YES |
| 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  |

**APRIL FILING**

- |                                                                                                                                                                          |    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 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? .....                           | NO |
| 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 |



**AUGUST FILING**

- |                                                                                                                                  |     |
|----------------------------------------------------------------------------------------------------------------------------------|-----|
| 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.
14. 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.
20. 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.
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.
33. 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] |  |
| 14. Supplement A to Schedule T [Document Identifier 455]                       |  |
| 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]          |  |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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



20. Reinsurance Attestation Supplement [Document Identifier 399]



21. Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]



22. Bail Bond Supplement [Document Identifier 500]



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]



33. Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]



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 MID-CONTINENT CASUALTY COMPANY

**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Liabilities Line 25

	1 Current Year	2 Prior Year
2504.	0	0
2597. Summary of remaining write-ins for Line 25 from overflow page	0	0

Additional Write-ins for Schedule T Line 58

States, Etc.	1 Active Status	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
58004.	XXX	0	0	0	0	0	0	0	0
58005.	XXX	0	0	0	0	0	0	0	0
58006.	XXX	0	0	0	0	0	0	0	0
58007.	XXX	0	0	0	0	0	0	0	0
58008.	XXX	0	0	0	0	0	0	0	0
58009.	XXX	0	0	0	0	0	0	0	0
58010.	XXX	0	0	0	0	0	0	0	0
58011.	XXX	0	0	0	0	0	0	0	0
58012.	XXX	0	0	0	0	0	0	0	0
58013.	XXX	0	0	0	0	0	0	0	0
58014.	XXX	0	0	0	0	0	0	0	0
58015.	XXX	0	0	0	0	0	0	0	0
58016.	XXX	0	0	0	0	0	0	0	0
58017.	XXX	0	0	0	0	0	0	0	0
58018.	XXX	0	0	0	0	0	0	0	0
58019.	XXX	0	0	0	0	0	0	0	0
58020.	XXX	0	0	0	0	0	0	0	0
58021.	XXX	0	0	0	0	0	0	0	0
58022.	XXX	0	0	0	0	0	0	0	0
58023.	XXX	0	0	0	0	0	0	0	0
58024.	XXX	0	0	0	0	0	0	0	0
58025.	XXX	0	0	0	0	0	0	0	0
58026.	XXX	0	0	0	0	0	0	0	0
58027.	XXX	0	0	0	0	0	0	0	0
58028.	XXX	0	0	0	0	0	0	0	0
58029.	XXX	0	0	0	0	0	0	0	0
58030.	XXX	0	0	0	0	0	0	0	0
58031.	XXX	0	0	0	0	0	0	0	0
58032.	XXX	0	0	0	0	0	0	0	0
58033.	XXX	0	0	0	0	0	0	0	0
58034.	XXX	0	0	0	0	0	0	0	0
58035.	XXX	0	0	0	0	0	0	0	0
58036.	XXX	0	0	0	0	0	0	0	0
58037.	XXX	0	0	0	0	0	0	0	0
58038.	XXX	0	0	0	0	0	0	0	0
58039.	XXX	0	0	0	0	0	0	0	0
58040.	XXX	0	0	0	0	0	0	0	0
58041.	XXX	0	0	0	0	0	0	0	0
58042.	XXX	0	0	0	0	0	0	0	0
58043.	XXX	0	0	0	0	0	0	0	0
58044.	XXX	0	0	0	0	0	0	0	0
58045.	XXX	0	0	0	0	0	0	0	0
58046.	XXX	0	0	0	0	0	0	0	0
58047.	XXX	0	0	0	0	0	0	0	0
58048.	XXX	0	0	0	0	0	0	0	0
58049.	XXX	0	0	0	0	0	0	0	0
58050.	XXX	0	0	0	0	0	0	0	0
58051.	XXX	0	0	0	0	0	0	0	0
58052.	XXX	0	0	0	0	0	0	0	0
58053.	XXX	0	0	0	0	0	0	0	0
58054.	XXX	0	0	0	0	0	0	0	0
58055.	XXX	0	0	0	0	0	0	0	0
58056.	XXX	0	0	0	0	0	0	0	0
58997. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0

**NONE**



SUPPLEMENT FOR THE YEAR 2021 OF THE MID-CONTINENT CASUALTY COMPANY

# DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

For The Year Ended December 31, 2021  
(To Be Filed by March 1)

NAIC Group Code 0084

NAIC Company Code 23418

Company Name MID-CONTINENT CASUALTY COMPANY

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

1. Monoline Policies

Direct Premiums		Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Written	2 Earned	3 Paid	4 Incurred	5 Paid	6 Incurred	7 Claims Made	8 Occurrence
\$ 1,186,697	\$ 1,133,666	\$ 4,290	\$ 0	\$ 212,688	\$ 405,000	100.0 %	0.0 %

2. Commercial Multiple Peril (CMP) Packaged Policies

- 2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy? Yes [ ] No [ X ]
- 2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated? Yes [ ] No [ X ]
- 2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&O liability coverage in CMP packaged policies

2.31 Amount quantified: \$ 0

2.32 Amount estimated using reasonable assumptions: \$ 0

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

Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Paid	2 Paid + Change in Case Reserves	3 Paid	4 Paid + Change in Case Reserves	5 Claims Made	6 Occurrence
\$ 0	\$ 0	\$ 0	\$ 0	0.0 %	0.0 %