



## PROPERTY AND CASUALTY COMPANIES – ASSOCIATION EDITION

**ANNUAL STATEMENT**  
 FOR THE YEAR ENDED DECEMBER 31, 2022  
 OF THE CONDITION AND AFFAIRS OF THE  
**INFINITY ASSURANCE INSURANCE COMPANY**

NAIC Group Code	0215, 0215	NAIC Company Code	39497	Employer's ID Number	75-1227771
(Current)(Prior)					
Organized under the Laws of	OH	State of Domicile or Port of Entry	OH		
Country of Domicile	US				
Incorporated/Organized	06/03/1980	Commenced Business	07/11/1980		
Statutory Home Office	1400 PROVIDENT TOWER, ONE EAST FOURTH STREET				
Main Administrative Office	2201 4TH AVENUE NORTH BIRMINGHAM, AL, US 35203-3863	205-870-4000 (Telephone)			
Mail Address	POST OFFICE BOX 830189				
Primary Location of Books and Records	2201 4TH AVENUE NORTH BIRMINGHAM, AL, US 35203-3863	205-870-4000 (Telephone)			
Internet Website Address	WWW.KEMPER.COM				
Statutory Statement Contact	EUGENE BETZ EFASSTATUTORYREPORTING@KEMPER.COM (E-Mail)	312-661-4600 (Telephone)	205-803-8080 (Fax)		

## OFFICERS

TIMOTHY JOHN TULLER, VICE PRESIDENT &  
TREASURER/CONTROLLER

MATTHEW JOSEPH VARAGONA, PRESIDENT  
PATRICK BOWEN THEILER, SECRETARY

## DIRECTORS OR TRUSTEES

TIMOTHY JOHN TULLER  
PATRICK BOWEN THEILER

BRADLEY THOMAS CAMDEN  
ADITYA NMI MAHAJAN  
MATTHEW JOSEPH VARAGONA

State of ILLINOIS  
County of COOK SS

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.

  
x PATRICK BOWEN THEILER  
SECRETARY

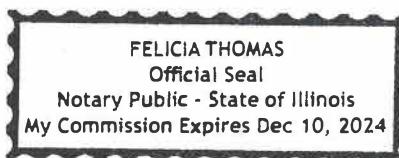
  
x TIMOTHY JOHN TULLER  
VICE PRESIDENT & TREASURER/CONTROLLER

  
x MATTHEW JOSEPH VARAGONA  
PRESIDENT

Subscribed and sworn to before me  
this 10 day of February

  
x FELICIA THOMAS

a. Is this an original filing? Yes  
 b. If no:  
 1. State the amendment number:  
 2. Date filed:  
 3. Number of pages attached:



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 0 1 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												1
19.2. Other Private Passenger Auto Liability.....												19
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												66
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												18
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												105
<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 through 3403 plus 3498) (Line 34 above).....												

(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 .

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ALASKA DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 0 2 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



3 9 4 9 7 2 0 2 2 4 3 0 0 3 0 0 0

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .

**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 0 4 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
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11.1 Medical Professional Liability – Occurrence.....												
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13.1 Comprehensive (hospital and medical) ind (b).....												
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15.3. Disability Income (b).....												
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19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
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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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 0 5 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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.....												
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15.3. Disability Income (b).....												
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15.6. Medicare Title XVIII (b).....												
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15.8. Federal Employees Health Benefits Plan (b).....												
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17.1. Other Liability–Occurrence.....												
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19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
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28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .

**EXHIBIT OF PREMIUMS AND LOSSES**  
 BUSINESS IN THE STATE OF COLORADO DURING THE YEAR 2022


3 9 4 9 7 2 0 2 2 4 3 0 0 6 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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
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2.2. Multiple Peril Crop.....												
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5.2. Commercial Multiple Peril (Liability Portion).....												
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13.2 Comprehensive (hospital and medical) group (b).....												
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17.3. Excess Workers' Compensation.....												
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24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



3 9 4 9 7 2 0 2 2 4 3 0 0 7 1 0 0

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												12
19.2. Other Private Passenger Auto Liability.....												42
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.....												12
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												67
<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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												5
19.2. Other Private Passenger Auto Liability.....												17
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.....												5
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												27
<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 through 3403 plus 3498) (Line 34 above).....												

(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 .

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 0 9 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 1 0 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....	168,360	150,293		91,229		32,024	112,109	6,167	21,591	16,939	626	
17.1. Other Liability–Occurrence.....	35,104	31,132		14,617	1,893	10,080	26,788	6,218	7,795	5,159	3,526	130
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....	533,044	560,370		251,331	1,156,053	429,404	905,463	134,779	281,896	337,654	61,946	1,980
19.2. Other Private Passenger Auto Liability.....	921,133	1,010,297		432,540	1,127,243	532,943	377,452	26,162	(13,107)	51,407	104,294	3,422
19.3. Commercial Auto No-Fault (Personal Injury Protection).....	28,464,506	20,872,475		15,425,815	9,903,977	16,631,184	17,596,955	446,349	2,759,963	3,382,304	2,862,523	105,744
19.4. Other Commercial Auto Liability.....	96,397,051	83,020,599		48,239,008	29,028,232	49,820,199	57,685,629	(743,773)	1,691,628	6,266,775	9,694,406	358,117
21.1. Private Passenger Auto Physical Damage.....	569,580	593,041		269,476	291,865	315,259	35,644	1,513	(1,492)	4,546	61,775	2,116
21.2. Commercial Auto Physical Damage.....	26,338,742	20,875,949		13,684,501	15,544,165	15,555,014	1,685,959	115,376	160,445	201,274	2,648,586	97,848
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....	153,427,520	127,114,155		78,408,517	57,053,429	83,326,107	78,425,998	(13,376)	4,893,295	10,270,710	15,453,995	569,984
<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 through 3403 plus 3498) (Line 34 above).....												

(a) Finance and service charges not included in Lines 1 to 35 \$4,296,031

(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 .



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												1
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												4
19.2. Other Private Passenger Auto Liability.....												7
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												218
19.4. Other Commercial Auto Liability.....												743
21.1. Private Passenger Auto Physical Damage.....												4
21.2. Commercial Auto Physical Damage.....												203
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												1,182
<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 through 3403 plus 3498) (Line 34 above).....												

(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 .

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF HAWAII DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 1 2 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF IDAHO DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 1 3 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												4
17.1. Other Liability–Occurrence.....												1
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1 Products Liability – Occurrence.....												
18.2 Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												12
19.2. Other Private Passenger Auto Liability.....												21
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												649
19.4. Other Commercial Auto Liability.....												2,211
21.1. Private Passenger Auto Physical Damage.....												13
21.2. Commercial Auto Physical Damage.....												604
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....								60	(4)	(95)	(29)	3,515
<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 through 3403 plus 3498) (Line 34 above)												

(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 .

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 1 5 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .

**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF IOWA DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 1 6 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1 Products Liability – Occurrence.....												
18.2 Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF KANSAS DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .

**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 1 9 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MAINE DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 2 0 0 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .

**EXHIBIT OF PREMIUMS AND LOSSES**  
 BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR 2022


3 9 4 9 7 2 0 2 2 4 3 0 2 1 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



3 9 4 9 7 2 0 2 2 4 3 0 2 5 0 0 0

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												2
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												7
19.2. Other Private Passenger Auto Liability.....												12
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												369
19.4. Other Commercial Auto Liability.....												1,258
21.1. Private Passenger Auto Physical Damage.....												7
21.2. Commercial Auto Physical Damage.....												344
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												2,000
<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 through 3403 plus 3498) (Line 34 above).....												

(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 .



3 9 4 9 7 2 0 2 2 4 3 0 2 7 0 0 0

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MONTANA DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .

**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 2 8 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1 Products Liability – Occurrence.....												
18.2 Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEVADA DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 2 9 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												1
19.2. Other Private Passenger Auto Liability.....												4
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.....												1
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												6
<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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												1
19.2. Other Private Passenger Auto Liability.....												2
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												65
19.4. Other Commercial Auto Liability.....												220
21.1. Private Passenger Auto Physical Damage.....												1
21.2. Commercial Auto Physical Damage.....												60
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												350
<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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....							39,062	(29,881)	375,918	3,086	7,733	12,809
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....							39,062	(29,881)	375,918	3,086	7,733	12,809
<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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .

**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR 2022



NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1 Products Liability – Occurrence.....												
18.2 Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .

**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 3 6 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												35
17.1. Other Liability–Occurrence.....												8
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												110
19.2. Other Private Passenger Auto Liability.....												190
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												5,879
19.4. Other Commercial Auto Liability.....												20,019
21.1. Private Passenger Auto Physical Damage.....												118
21.2. Commercial Auto Physical Damage.....												5,467
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												31,826
<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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OREGON DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 3 8 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....			1,397	659		738						
17.1. Other Liability–Occurrence.....			3,272	1,227		2,045						
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1 Products Liability – Occurrence.....												
18.2 Products Liability – Claims-Made.....												
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).....	38,804	16,890		51	70		(313)	95				
19.4. Other Commercial Auto Liability.....	650,117	282,529			367,467	3,265	15,004	15,004				
21.1. Private Passenger Auto Physical Damage.....			165,723	73,334		92,389	127,370	124,105				
21.2. Commercial Auto Physical Damage.....							7	(9)				
22. Aircraft (all perils).....							52,865	55,526	2,660			
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....	859,313	374,690		484,623	56,130	197,624	148,511		14,694	14,973	80,587	10,917
<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 through 3403 plus 3498) (Line 34 above).....												

(a) Finance and service charges not included in Lines 1 to 35 \$29,779

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												2
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												6
19.2. Other Private Passenger Auto Liability.....												10
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												297
19.4. Other Commercial Auto Liability.....												1,011
21.1. Private Passenger Auto Physical Damage.....												6
21.2. Commercial Auto Physical Damage.....												276
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												1,608
<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 through 3403 plus 3498) (Line 34 above).....												

(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 .

**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 4 2 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1 Products Liability – Occurrence.....												
18.2 Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 4 4 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF UTAH DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 4 5 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .

**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF VERMONT DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 4 6 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .

**EXHIBIT OF PREMIUMS AND LOSSES**  
 BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR 2022


3 9 4 9 7 2 0 2 2 4 3 0 4 8 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 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 .



**EXHIBIT OF PREMIUMS AND LOSSES**  
BUSINESS IN THE STATE OF WYOMING DURING THE YEAR 2022

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
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.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (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 through 3403 plus 3498) (Line 34 above).....												

(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 .

## EXHIBIT OF PREMIUMS AND LOSSES

GRAND TOTAL DURING THE YEAR 2022



3 9 4 9 7 2 0 2 2 4 3 0 5 9 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners 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.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....	169,757	150,952	91,967	39,062	(29,881)	375,918	3,086	7,733	12,809			
17.1. Other Liability–Occurrence.....	38,376	32,359	16,662	1,893	32,024	112,109	6,167	21,591	17,026	688		
17.2. Other Liability–Claims-Made.....					10,080	26,788	6,218	7,795	5,159	3,895	182	
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....	533,044	560,370	251,331	1,156,053	429,091	905,558	134,779	281,880	337,814	61,946	2,121	
19.2. Other Private Passenger Auto Liability.....	921,133	1,010,348	432,610	1,125,635	531,343	384,124	26,162	(13,298)	51,382	104,294	3,665	
19.3. Commercial Auto No-Fault (Personal Injury Protection).....	28,503,310	20,889,365	15,447,729	9,903,977	16,646,188	17,611,959	446,349	2,762,769	3,385,110	2,866,073	113,751	
19.4. Other Commercial Auto Liability.....	97,047,168	83,303,128	48,606,475	29,031,497	49,947,569	57,809,734	(743,773)	1,703,315	6,278,462	9,754,377	391,969	
21.1. Private Passenger Auto Physical Damage.....	569,580	593,041	269,476	291,865	315,348	35,614	1,513	(1,497)	4,550	61,775	2,267	
21.2. Commercial Auto Physical Damage.....	26,504,465	20,949,283	13,776,890	15,597,031	15,610,540	1,688,619	115,376	160,749	201,578	2,665,196	106,943	
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....	154,286,833	127,488,845	78,893,141	57,147,014	83,492,302	78,950,423	(10,290)	4,915,613	10,298,453	15,534,582	621,585	
<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 through 3403 plus 3498) (Line 34 above).....												

(a) Finance and service charges not included in Lines 1 to 35 \$4,325,810

(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 .

(20) Schedule F - Part 1

**NONE**

(21) Schedule F - Part 2

**NONE**

Annual Statement for the Year 2022 of the Infinity Assurance Insurance Company

**SCHEDULE F - PART 3**

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute Included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15- [17+18]	20 Funds Held by Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers			
<b>Total Authorized, Affiliates, U.S. Intercompany Pooling</b>																				
31-0943862.....	22268	INFINITY INSURANCE COMPANY.....	IN.....		154,287			31,358	2,654	47,217	13,014	78,893		173,135				173,135		
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling					154,287			31,358	2,654	47,217	13,014	78,893		173,135				173,135		
0899999 - Total Authorized, Affiliates, Total Authorized - Affiliates					154,287			31,358	2,654	47,217	13,014	78,893		173,135				173,135		
<b>Total Authorized, Other U.S. Unaffiliated Insurers</b>																				
75-0784127.....	33014	TRANSPORT INSURANCE COMPANY.....	OH.....					277	47	99					422				422	
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers								277	47	99					422				422	
1499999 - Total Authorized Excluding Protected Cells.....					154,287			31,634	2,700	47,316	13,014	78,893		173,557				173,557		
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells.....					154,287			31,634	2,700	47,316	13,014	78,893		173,557				173,557		
9999999 - Totals.....					154,287			31,634	2,700	47,316	13,014	78,893		173,557				173,557		

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

1	2	Collateral				25	26	27	Ceded Reinsurance Credit Risk										36		
		21	22	23	24				Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch.	F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 - 27)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	30	31	32	33	34	
ID Number From Col. 1	Name of Reinsurer From Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral															Credit Risk on Un- collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	
<b>Total Authorized, Affiliates, U.S. Intercompany Pooling</b>																					
31-0943862	INFINITY INSURANCE COMPANY								173,135			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling				XXX					173,135			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999 - Total Authorized, Affiliates, Total Authorized - Affiliates				XXX					173,135											XXX	
<b>Total Authorized, Other U.S. Unaffiliated Insurers</b>																					
75-0784127	TRANSPORT INSURANCE COMPANY								422			422	507		507		507		507	1	8
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers				XXX					422			422	507		507		507		507	XXX	8
1499999 - Total Authorized Excluding Protected Cells				XXX					173,557			422	507		507		507		507	XXX	8
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells				XXX					173,557			422	507		507		507		507	XXX	8
9999999 - Totals				XXX					173,557			422	507		507		507		507	XXX	8

Annual Statement for the Year 2022 of the Infinity Assurance Insurance Company

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

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

1	2	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44	45	46	47	48	49	50	51	52	53	
		37	38	39	40	41	42	43											
ID Number From Col. 1	Name of Reinsurer From Col. 3	Current	Overdue 1 - 29 Days	Overdue 30 - 90 Days	Overdue 91 - 120 Days	Overdue Over 120 Days	Overdue Total	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43 - 44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 47/[Cols. 46 + 48]]	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
<b>Total Authorized, Affiliates, U.S. Intercompany Pooling</b>																			
31-0943862	INFINITY INSURANCE COMPANY																	YES	
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling																		XXX	
0499999 - Total Authorized, Affiliates, U.S. Non-Pool, Total																		XXX	
<b>Total Authorized, Other U.S. Unaffiliated Insurers</b>																			
75-0784127	TRANSPORT INSURANCE COMPANY																	YES	
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers																		XXX	
1499999 - Total Authorized Excluding Protected Cells																		XXX	
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells																		XXX	
9999999 - Totals																		XXX	

Annual Statement for the Year 2022 of the Infinity Assurance Insurance Company

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

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

1	2	Provision for Certified Reinsurance															69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)		
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0	66	67	68		
ID Number From Col. 1	Name of Reinsurer From Col. 3	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	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	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col.24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67			
<b>Total Authorized, Affiliates, U.S. Intercompany Pooling</b>																			
31-0943862	INFINITY INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling																			
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total																			
<b>Total Authorized, Other U.S. Unaffiliated Insurers</b>																			
75-0784127	TRANSPORT INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers																			
1499999 – Total Authorized Excluding Protected Cells																			
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells																			
9999999 – Totals																			

Annual Statement for the Year 2022 of the Infinity Assurance Insurance Company

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

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

1 ID Number From Col. 1	2 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 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)
<b>Total Authorized, Affiliates, U.S. Intercompany Pooling</b>										
31-0943862	INFINITY INSURANCE COMPANY		XXX	XXX				XXX	XXX	
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling			XXX	XXX				XXX	XXX	
<b>Total Authorized, Other U.S. Unaffiliated Insurers</b>										
75-0784127	TRANSPORT INSURANCE COMPANY		XXX	XXX				XXX	XXX	
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers			XXX	XXX				XXX	XXX	
1499999 - Total Authorized Excluding Protected Cells			XXX	XXX				XXX	XXX	
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells										
9999999 - Totals										

Annual Statement for the Year 2022 of the Infinity Assurance Insurance Company

**SCHEDULE F - PART 4**

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

1	2	3	4	5
Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
9999999 - Totals.....				

**NONE**

**SCHEDULE F - PART 5**

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	1 Name of Reinsurer	2 Commission Rate	3 Ceded Premium
1.			
2.			
3.			
4.			
5.			

**NONE**

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 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated
6.	INFINITY INSURANCE COMPANY	173,135	154,287	Yes
7.				
8.				
9.				
10.				

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

**SCHEDULE F - PART 6**

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12).....	5,141,589		5,141,589
2. Premiums and considerations (Line 15).....			
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....			
4. Funds held by or deposited with reinsured companies (Line 16.2).....			
5. Other assets.....	2,025,153		2,025,153
6. Net amount recoverable from reinsurers.....		110,617,580	110,617,580
7. Protected cell assets (Line 27).....			
8. Totals (Line 28).....	7,166,742	110,617,580	117,784,322
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3).....		94,664,080	94,664,080
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	42,722		42,722
11. Unearned premiums (Line 9).....		15,953,500	15,953,500
12. Advance premiums (Line 10).....			
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....			
15. Funds held by company under reinsurance treaties (Line 13).....			
16. Amounts withheld or retained by company for account of others (Line 14).....			
17. Provision for reinsurance (Line 16).....			
18. Other liabilities.....	1,481,503		1,481,503
19. Total liabilities excluding protected cell business (Line 26).....	1,524,225	110,617,580	112,141,805
20. Protected cell liabilities (Line 27).....			
21. Surplus as regards policyholders (Line 37).....	5,642,518	XXX	5,642,518
22. Totals (Line 38).....	7,166,742	110,617,580	117,784,322

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? YES  
 If yes, give full explanation: SEE NOTE 26. THE COMPANY IS A MEMBER OF AN UNDERWRITING POOL WHICH ULTIMATELY CEDES 100% TO TRINITY  
 UNIVERSAL INSURANCE COMPANY.

(30) Schedule H - Part 1

**NONE**

(30) Write-Ins for Line 11 - Deductions

**NONE**

(31) Schedule H - Part 2 - Reserves and Liabilities

**NONE**

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

**NONE**

(31) Schedule H - Part 4 - Reinsurance

**NONE**

(32) Schedule H - Part 5

**NONE**

**SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)		
				4 Ceded	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX									XXX	
2. 2013													
3. 2014													
4. 2015													
5. 2016													
6. 2017													
7. 2018													
8. 2019													
9. 2020													
10. 2021													
11. 2022													
12. Totals	XXX	XXX	XXX									XXX	

**NONE**

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded								
1. Prior																
2. 2013																
3. 2014																
4. 2015																
5. 2016																
6. 2017																
7. 2018																
8. 2019																
9. 2020																
10. 2021																
11. 2022																
12. Totals																

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	35 Losses Unpaid		36 Loss Expenses Unpaid
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense				
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2013												
3. 2014												
4. 2015												
5. 2016												
6. 2017												
7. 2018												
8. 2019												
9. 2020												
10. 2021												
11. 2022												
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX				XXX		

## SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)		
				4 Ceded	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	1	1							XXX	
2. 2013	834	1	833	548		22	1	94	2	5	661	219	
3. 2014	838	1	837	549	5	19	1	91	1	5	652	214	
4. 2015	829	1	828	568	3	19		90	2	4	672	216	
5. 2016	835	1	834	575	10	17	1	93	3	4	671	213	
6. 2017	808	1	807	536		14	(1)	88	1	4	638	200	
7. 2018	873	88	785	534	35	12	(4)	90	2	3	603	200	
8. 2019	973	973		613	613	12	12	121	121			219	
9. 2020	1,189	1,189		610	610	9	9	114	114			192	
10. 2021	1,269	1,269		731	731	8	8	147	147			267	
11. 2022	1,293	1,293		418	418	3	3	108	108			233	
12. Totals	XXX	XXX	XXX	5,682	2,425	136	31	1,036	501	25	3,897	XXX	

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Outstanding	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	(1)	(1)														
2. 2013																
3. 2014	1	1														
4. 2015	9	9														
5. 2016	3	3	1	1	1	1	2	2	1	1			1			
6. 2017	5	5	2	2	2	2	1	1	1	1			1			
7. 2018	7	7	2	2	2	2	3	3	2	2			1			
8. 2019	14	14	7	7	3	3	4	4	3	3			3			
9. 2020	30	30	22	22	4	4	9	9	6	6			5			
10. 2021	111	111	71	71	7	7	19	19	18	18			15			
11. 2022	218	218	282	282	9	9	26	26	54	54			43			
12. Totals	396	396	388	388	27	27	65	65	85	85			69			

Years in Which Premiums Were Earned and Losses Were Incurred	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. 2013	664	3	661	79,647	300,000	79,352			0.100		
3. 2014	660	8	652	78,711	800,000	77,897			0.100		
4. 2015	687	15	672	82,901	1,500,000	81,159			0.100		
5. 2016	693	22	671	82,937	2,152,656	80,456			0.100		
6. 2017	649	11	638	80,270	1,057,877	79,058			0.100		
7. 2018	652	49	603	74,658	55,412	76,815			0.100		
8. 2019	778	778		79,931	79,931				0.100		
9. 2020	804	804		67,631	67,631				0.100		
10. 2021	1,111	1,111		87,578	87,578				0.100		
11. 2022	1,118	1,118		86,423	86,423				0.100		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

**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								12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)			
				4 Ceded	5 Direct and Assumed	6 Ceded	7 Direct and Assumed	8 Ceded	9 Direct and Assumed					
1. Prior	XXX	XXX	XXX									XXX		
2. 2013	67	6	61	41	2	2		6	1	1	46	9		
3. 2014	80	8	72	58	7	3		6			60	11		
4. 2015	96	10	86	77	7	4		6		1	81	14		
5. 2016	111	7	104	88	8	4		7		1	93	14		
6. 2017	123	5	118	80	(5)	4	(1)	7		1	99	14		
7. 2018	141	20	121	78	(5)	3	(2)	7		1	99	14		
8. 2019	179	179		90	90	2		10	10			17		
9. 2020	283	283		103	103	2		13	13			17		
10. 2021	333	333		125	125	2		17	17			23		
11. 2022	428	428		72	72			14	14			29		
12. Totals	XXX	XXX	XXX	811	403	27	4	94	47	4	478	XXX		
Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25	
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Outstanding Direct and Assumed	Number of Claims Outstanding Direct and Assumed	
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded				
1. Prior														
2. 2013	4	4												
3. 2014														
4. 2015														
5. 2016	1	1												
6. 2017	2	2												
7. 2018	4	4	1	1			1	1						
8. 2019	9	9	1	1			2	2						
9. 2020	25	25	9	9	1	1	6	6	1	1		1		
10. 2021	57	57	32	32	1	1	10	10	3	3		2		
11. 2022	78	78	134	134	1	1	17	17	12	12		7		
12. Totals	180	180	178	178	4	4	37	37	18	18		10		
Years in Which Premiums Were Earned and Losses Were Incurred	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		35 Losses Unpaid	36 Loss Expenses Unpaid
	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		
	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
1. Prior										XXX				
2. 2013	54	8	46	80,206	128,967	75,410				0.100				
3. 2014	67	7	60	84,049	90,489	83,333				0.100				
4. 2015	87	6	81	90,804	61,715	94,186				0.100				
5. 2016	100	7	93	90,258	102,658	89,423				0.100				
6. 2017	94	(5)	99	76,374	(101,211)	83,898				0.100				
7. 2018	95	(4)	99	67,058	(22,239)	81,818				0.100				
8. 2019	116	116		64,620	64,620					0.100				
9. 2020	161	161		56,725	56,725					0.100				
10. 2021	247	247		74,246	74,246					0.100				
11. 2022	329	329		76,848	76,848					0.100				
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX				XXX				

(38) Schedule P - Part 1D - Columns 1 to 12

**NONE**

(38) Schedule P - Part 1D - Columns 13 to 25

**NONE**

(38) Schedule P - Part 1D - Columns 26 to 36

**NONE**

(39) Schedule P - Part 1E - Columns 1 to 12

**NONE**

(39) Schedule P - Part 1E - Columns 13 to 25

**NONE**

(39) Schedule P - Part 1E - Columns 26 to 36

**NONE**

(40) Schedule P - Part 1F - Section 1 - Columns 1 to 12

**NONE**

(40) Schedule P - Part 1F - Section 1 - Columns 13 to 25

**NONE**

(40) Schedule P - Part 1F - Section 1 - Columns 26 to 36

**NONE**

(41) Schedule P - Part 1F - Section 2 - Columns 1 to 12

**NONE**

(41) Schedule P - Part 1F - Section 2 - Columns 13 to 25

**NONE**

(41) Schedule P - Part 1F - Section 2 - Columns 26 to 36

**NONE**

(42) Schedule P - Part 1G - Columns 1 to 12

**NONE**

(42) Schedule P - Part 1G - Columns 13 to 25

**NONE**

(42) Schedule P - Part 1G - Columns 26 to 36

**NONE**

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)		
				4 Ceded	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX									XXX	
2. 2013													
3. 2014													
4. 2015													
5. 2016													
6. 2017													
7. 2018													
8. 2019													
9. 2020													
10. 2021	1	1											
11. 2022	1	1											
12. Totals	XXX	XXX	XXX									XXX	

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded								
1. Prior																
2. 2013																
3. 2014																
4. 2015																
5. 2016																
6. 2017																
7. 2018																
8. 2019																
9. 2020																
10. 2021																
11. 2022			1	1												
12. Totals			1	1												

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	35 Losses Unpaid		36 Loss Expenses Unpaid
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense				
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX			
2. 2013									0.100			
3. 2014									0.100			
4. 2015									0.100			
5. 2016									0.100			
6. 2017									0.100			
7. 2018									0.100			
8. 2019									0.100			
9. 2020									0.100			
10. 2021									0.100			
11. 2022	1	1		100.000	100.000				0.100			
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX			

**SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**  
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Total Net Paid (Cols. 4-5+6-7+8-9)	11 Salvage and Subrogation Received		
				4 Ceded	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX									XXX	
2. 2013													
3. 2014													
4. 2015													
5. 2016													
6. 2017													
7. 2018													
8. 2019													
9. 2020													
10. 2021													
11. 2022													
12. Totals	XXX	XXX	XXX									XXX	

# NONE

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded								
1. Prior																
2. 2013																
3. 2014																
4. 2015																
5. 2016																
6. 2017																
7. 2018																
8. 2019																
9. 2020																
10. 2021																
11. 2022																
12. Totals																

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	35 Losses Unpaid		36 Loss Expenses Unpaid
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense				
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX			
2. 2013									0.100			
3. 2014									0.100			
4. 2015									0.100			
5. 2016									0.100			
6. 2017									0.100			
7. 2018									0.100			
8. 2019									0.100			
9. 2020									0.100			
10. 2021									0.100			
11. 2022					300.000				0.100			
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX			

**SCHEDULE P - PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			
				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. 2021											XXX
3. 2022											XXX
4. Totals	XXX	XXX	XXX								XXX

**NONE**

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Total Net Losses and Expenses Unpaid	24 Number of Claims Outstanding Direct and Assumed	25			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded								
1. Prior																
2. 2021																
3. 2022																
4. Totals																

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	35 Losses Unpaid		36 Loss Expenses Unpaid
	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	
	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. 2021												
3. 2022												
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX				XXX		

**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 (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)			
				4 Ceded	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded					
1. Prior	XXX	XXX	XXX	(2)	(2)	1	1	7	7			XXX		
2. 2021	660	660		555	555	1	1	74	74			219		
3. 2022	729	729		562	562			70	70			211		
4. Totals	XXX	XXX	XXX	1,115	1,115	2	2	152	152			XXX		
Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25	
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed	
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded				
1. Prior			(1)	(1)			1	1						
2. 2021	2	2	(7)	(7)			1	1					1	
3. 2022	34	34	15	15	(1)	(1)	3	3	9	9			12	
4. Totals	36	36	8	8			5	5	9	9			13	
Years in Which Premiums Were Earned and Losses Were Incurred	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		35 Losses Unpaid	36 Loss Expenses Unpaid
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	Loss	Loss Expense	32	33	34			
	XXX	XXX	XXX	XXX	XXX	XXX			XXX					
1. Prior														
2. 2021	626	626		94.910	94.910						0.100			
3. 2022	693	693		94.964	94.964						0.100			
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX					

(47) Schedule P - Part 1K - Columns 1 to 12

**NONE**

(47) Schedule P - Part 1K - Columns 13 to 25

**NONE**

(47) Schedule P - Part 1K - Columns 26 to 36

**NONE**

(48) Schedule P - Part 1L - Columns 1 to 12

**NONE**

(48) Schedule P - Part 1L - Columns 13 to 25

**NONE**

(48) Schedule P - Part 1L - Columns 26 to 36

**NONE**

(49) Schedule P - Part 1M - Columns 1 to 12

**NONE**

(49) Schedule P - Part 1M - Columns 13 to 25

**NONE**

(49) Schedule P - Part 1M - Columns 26 to 36

**NONE**

(50) Schedule P - Part 1N - Columns 1 to 12

**NONE**

(50) Schedule P - Part 1N - Columns 13 to 25

**NONE**

(50) Schedule P - Part 1N - Columns 26 to 36

**NONE**

(51) Schedule P - Part 10 - Columns 1 to 12

**NONE**

(51) Schedule P - Part 10 - Columns 13 to 25

**NONE**

(51) Schedule P - Part 10 - Columns 26 to 36

**NONE**

(52) Schedule P - Part 1P - Columns 1 to 12

**NONE**

(52) Schedule P - Part 1P - Columns 13 to 25

**NONE**

(52) Schedule P - Part 1P - Columns 26 to 36

**NONE**

(53) Schedule P - Part 1R - Section 1 - Columns 1 to 12

**NONE**

(53) Schedule P - Part 1R - Section 1 - Columns 13 to 25

**NONE**

(53) Schedule P - Part 1R - Section 1 - Columns 26 to 36

**NONE**

(54) Schedule P - Part 1R - Section 2 - Columns 1 to 12

**NONE**

(54) Schedule P - Part 1R - Section 2 - Columns 13 to 25

**NONE**

(54) Schedule P - Part 1R - Section 2 - Columns 26 to 36

**NONE**

(55) Schedule P - Part 1S - Columns 1 to 12

**NONE**

(55) Schedule P - Part 1S - Columns 13 to 25

**NONE**

(55) Schedule P - Part 1S - Columns 26 to 36

**NONE**

(56) Schedule P - Part 1T - Columns 1 to 12

**NONE**

(56) Schedule P - Part 1T - Columns 13 to 25

**NONE**

(56) Schedule P - Part 1T - Columns 26 to 36

**NONE**

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	11 One Year	12 Two Year
1. Prior	1	3	3	4	4	4	4	4	4	4		
2. 2013												
3. 2014	XXX											
4. 2015	XXX	XXX										
5. 2016	XXX	XXX	XXX									
6. 2017	XXX	XXX	XXX	XXX								
7. 2018	XXX	XXX	XXX	XXX	XXX							
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	11 One Year	12 Two Year
1. Prior	164	155	156	149	148	149	149	149	149	149		
2. 2013	589	591	577	570	570	569	569	569	569	569		
3. 2014	XXX	573	575	564	565	562	562	562	562	562		
4. 2015	XXX	XXX	586	585	584	584	584	584	584	584		
5. 2016	XXX	XXX	XXX	598	585	581	581	581	581	581		
6. 2017	XXX	XXX	XXX	XXX	553	551	551	551	551	551		
7. 2018	XXX	XXX	XXX	XXX	XXX	515	515	515	515	515		
8. 2019	XXX	XXX	XXX	XXX	XXX							
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	11 One Year	12 Two Year
1. Prior	18	15	15	15	14	14	14	14	14	14		
2. 2013	53	42	43	42	41	41	41	41	41	41		
3. 2014	XXX	54	52	54	55	54	54	54	54	54		
4. 2015	XXX	XXX	68	70	74	74	74	74	74	74		
5. 2016	XXX	XXX	XXX	79	80	84	84	84	84	84		
6. 2017	XXX	XXX	XXX	XXX	89	90	90	90	90	90		
7. 2018	XXX	XXX	XXX	XXX	XXX	88	88	88	88	88		
8. 2019	XXX	XXX	XXX	XXX	XXX							
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

**SCHEDULE P - PART 2D - WORKERS' COMPENSATION**

(EXCLUDING EXCESS WORKERS' COMPENSATION)

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	11 One Year	12 Two Year
1. Prior												
2. 2013												
3. 2014	XXX											
4. 2015	XXX	XXX										
5. 2016	XXX	XXX	XXX									
6. 2017	XXX	XXX	XXX	XXX								
7. 2018	XXX	XXX	XXX	XXX	XXX							
8. 2019	XXX	XXX	XXX	XXX	XXX							
9. 2020	XXX	XXX	XXX	XXX	XXX							
10. 2021	XXX	XXX	XXX	XXX	XXX							XXX
11. 2022	XXX	XXX	XXX	XXX	XXX						XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	11 One Year	12 Two Year
1. Prior												
2. 2013												
3. 2014	XXX											
4. 2015	XXX	XXX										
5. 2016	XXX	XXX	XXX									
6. 2017	XXX	XXX	XXX	XXX								
7. 2018	XXX	XXX	XXX	XXX	XXX							
8. 2019	XXX	XXX	XXX	XXX	XXX							
9. 2020	XXX	XXX	XXX	XXX	XXX							
10. 2021	XXX	XXX	XXX	XXX	XXX							XXX
11. 2022	XXX	XXX	XXX	XXX	XXX						XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

**NONE**

(58) Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence

**NONE**

(58) Schedule P - Part 2F - Section 2 - Medical Professional Liability - Claims-Made

**NONE**

(58) Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)

**NONE**

(58) Schedule P - Part 2H - Section 1 - Other Liability - Occurrence

**NONE**

(58) Schedule P - Part 2H - Section 2 - Other Liability - Claims-Made

**NONE**

(59) Schedule P - Part 2I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)

**NONE**

(59) Schedule P - Part 2J - Auto Physical Damage

**NONE**

(59) Schedule P - Part 2K - Fidelity, Surety

**NONE**

(59) Schedule P - Part 2L - Other (Including Credit, Accident and Health)

**NONE**

(59) Schedule P - Part 2M - International

**NONE**

(60) Schedule P - Part 2N - Reinsurance - Non Proportional Assumed Property

**NONE**

(60) Schedule P - Part 2O - Reinsurance - Non Proportional Assumed Liability

**NONE**

(60) Schedule P - Part 2P - Reinsurance - Non Proportional Assumed Financial Lines

**NONE**

(61) Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

**NONE**

(61) Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made

**NONE**

(61) Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty

**NONE**

(61) Schedule P - Part 2T - Warranty

**NONE**

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior.	XXX		1	1	1	2	4	4	4	4		
2. 2013												
3. 2014	XXX											
4. 2015	XXX	XXX										
5. 2016	XXX	XXX	XXX									
6. 2017	XXX	XXX	XXX	XXX								
7. 2018	XXX	XXX	XXX	XXX	XXX							
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior.	XXX		84	119	135	142	149	149	149	149		
2. 2013	272	478	531	550	558	569	569	569	569	569	123	96
3. 2014	XXX	272	472	523	542	562	562	562	562	562	122	92
4. 2015	XXX	XXX	283	490	540	584	584	584	584	584	124	92
5. 2016	XXX	XXX	XXX	291	485	581	581	581	581	581	121	91
6. 2017	XXX	XXX	XXX	XXX	266	551	551	551	551	551	113	86
7. 2018	XXX	XXX	XXX	XXX	XXX	515	515	515	515	515	111	88
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX					118	98
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				98	89
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			119	133
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	91	99

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

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior.	XXX		8	11	13	14	14	14	14	14		
2. 2013	15	31	36	38	39	41	41	41	41	41	6	3
3. 2014	XXX	19	36	44	49	54	54	54	54	54	7	4
4. 2015	XXX	XXX	25	50	61	74	74	74	74	74	9	5
5. 2016	XXX	XXX	XXX	28	53	84	84	84	84	84	9	5
6. 2017	XXX	XXX	XXX	XXX	29	90	90	90	90	90	9	5
7. 2018	XXX	XXX	XXX	XXX	XXX	88	88	88	88	88	9	5
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX					10	7
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				9	7
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			12	9
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	10

**SCHEDULE P - PART 3D - WORKERS' COMPENSATION**

(EXCLUDING EXCESS WORKERS' COMPENSATION)

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior.	XXX		8	11	13	14	14	14	14	14		
2. 2013	15	31	36	38	39	41	41	41	41	41	6	3
3. 2014	XXX	19	36	44	49	54	54	54	54	54	7	4
4. 2015	XXX	XXX	25	50	61	74	74	74	74	74	9	5
5. 2016	XXX	XXX	XXX	28	53	84	84	84	84	84	9	5
6. 2017	XXX	XXX	XXX	XXX	29	90	90	90	90	90	9	5
7. 2018	XXX	XXX	XXX	XXX	XXX	88	88	88	88	88	9	5
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX					10	7
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				9	7
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX				12	9
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				12	10

**NONE****SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL**

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior.	XXX											
2. 2013												
3. 2014	XXX											
4. 2015	XXX	XXX										
5. 2016	XXX	XXX	XXX									
6. 2017	XXX	XXX	XXX	XXX								
7. 2018	XXX	XXX	XXX	XXX	XXX							
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

**SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior	XXX											
2. 2013												
3. 2014	XXX											
4. 2015	XXX	XXX										
5. 2016	XXX	XXX	XXX									
6. 2017	XXX	XXX	XXX	XXX								
7. 2018	XXX	XXX	XXX	XXX	XXX							
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

**NONE****SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior	XXX											
2. 2013												
3. 2014	XXX											
4. 2015	XXX	XXX										
5. 2016	XXX	XXX	XXX									
6. 2017	XXX	XXX	XXX	XXX								
7. 2018	XXX	XXX	XXX	XXX	XXX							
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

**NONE****SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior	XXX											
2. 2013												
3. 2014	XXX											
4. 2015	XXX	XXX										
5. 2016	XXX	XXX	XXX									
6. 2017	XXX	XXX	XXX	XXX								
7. 2018	XXX	XXX	XXX	XXX	XXX							
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

**NONE****SCHEDULE P - PART 3H - SECTION 1 - OTHER 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior	XXX											
2. 2013												
3. 2014	XXX											
4. 2015	XXX	XXX										
5. 2016	XXX	XXX	XXX									
6. 2017	XXX	XXX	XXX	XXX								
7. 2018	XXX	XXX	XXX	XXX	XXX							
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

**NONE****SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior	XXX											
2. 2013												
3. 2014	XXX											
4. 2015	XXX	XXX										
5. 2016	XXX	XXX	XXX									
6. 2017	XXX	XXX	XXX	XXX								
7. 2018	XXX	XXX	XXX	XXX	XXX							
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

**NONE**

**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
2. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE****SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE**

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
2. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			141	77
3. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		134	65

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

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
2. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE****SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
2. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE****SCHEDULE P - PART 3M - INTERNATIONAL**

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior	XXX										XXX	XXX
2. 2013											XXX	XXX
3. 2014	XXX										XXX	XXX
4. 2015	XXX	XXX									XXX	XXX
5. 2016	XXX	XXX	XXX								XXX	XXX
6. 2017	XXX	XXX	XXX	XXX							XXX	XXX
7. 2018	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE**

(65) Schedule P - Part 3N - Reinsurance - Non Proportional Assumed Property

**NONE**

(65) Schedule P - Part 3O - Reinsurance - Non Proportional Assumed Liability

**NONE**

(65) Schedule P - Part 3P - Reinsurance - Non Proportional Assumed Financial Lines

**NONE**

(66) Schedule P - Part 3R - Section 1 - Products Liability - Occurrence

**NONE**

(66) Schedule P - Part 3R - Section 2 - Products Liability - Claims-Made

**NONE**

(66) Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty

**NONE**

(66) Schedule P - Part 3T - Warranty

**NONE**

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior			1	2	2					
2. 2013										
3. 2014	XXX									
4. 2015	XXX	XXX								
5. 2016	XXX	XXX	XXX							
6. 2017	XXX	XXX	XXX	XXX						
7. 2018	XXX	XXX	XXX	XXX	XXX					
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior	66	25	16	7	2					
2. 2013	178	54	23	12	5					
3. 2014	XXX	165	49	21	15					
4. 2015	XXX	XXX	168	40	25					
5. 2016	XXX	XXX		175	46					
6. 2017	XXX	XXX	XXX		160					
7. 2018	XXX	XXX	XXX	XXX						
8. 2019	XXX	XXX	XXX	XXX	XXX					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior	4	1	2	1						
2. 2013	22	2	2	1						
3. 2014	XXX	18	3	2	2					
4. 2015	XXX	XXX	22	3	2					
5. 2016	XXX	XXX		28	7					
6. 2017	XXX	XXX	XXX		33					
7. 2018	XXX	XXX	XXX	XXX						
8. 2019	XXX	XXX	XXX	XXX	XXX					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4D - WORKERS' COMPENSATION**

(EXCLUDING EXCESS WORKERS' COMPENSATION)

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior	4	1	2	1						
2. 2013	22	2	2	1						
3. 2014	XXX		3	2	2					
4. 2015	XXX	XXX		3	2					
5. 2016	XXX	XXX	XXX		7					
6. 2017	XXX	XXX	XXX	XXX						
7. 2018	XXX	XXX	XXX	XXX						
8. 2019	XXX	XXX	XXX	XXX	XXX					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior										
2. 2013										
3. 2014	XXX									
4. 2015	XXX	XXX								
5. 2016	XXX	XXX	XXX							
6. 2017	XXX	XXX	XXX	XXX						
7. 2018	XXX	XXX	XXX	XXX	XXX					
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**None**

(68) Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence

**NONE**

(68) Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made

**NONE**

(68) Schedule P - Part 4G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)

**NONE**

(68) Schedule P - Part 4H - Section 1 - Other Liability - Occurrence

**NONE**

(68) Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made

**NONE**

(69) Schedule P - Part 4I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)

**NONE**

(69) Schedule P - Part 4J - Auto Physical Damage

**NONE**

(69) Schedule P - Part 4K - Fidelity/Surety

**NONE**

(69) Schedule P - Part 4L - Other (Including Credit, Accident and Health)

**NONE**

(69) Schedule P - Part 4M - International

**NONE**

(70) Schedule P - Part 4N - Reinsurance - Non Proportional Assumed Property

**NONE**

(70) Schedule P - Part 4O - Reinsurance - Non Proportional Assumed Liability

**NONE**

(70) Schedule P - Part 4P - Reinsurance - Non Proportional Assumed Financial Lines

**NONE**

(71) Schedule P - Part 4R - Section 1 - Products Liability - Occurrence

**NONE**

(71) Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made

**NONE**

(71) Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty

**NONE**

(71) Schedule P - Part 4T - Warranty

**NONE**

(72) Schedule P - Part 5A - Section 1

**NONE**

(72) Schedule P - Part 5A - Section 2

**NONE**

(72) Schedule P - Part 5A - Section 3

**NONE**

**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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	36	7	2	3						
2. 2013.....	85	115	121	123	123	123	123	123	123	123
3. 2014.....	XXX	83	114	119	121	121	121	122	122	122
4. 2015.....	XXX	XXX	85	117	122	123	123	123	123	124
5. 2016.....	XXX	XXX	XXX	86	115	119	120	120	119	121
6. 2017.....	XXX	XXX	XXX	XXX	79	107	111	112	112	113
7. 2018.....	XXX	XXX	XXX	XXX	XXX	78	105	110	110	111
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	79	111	116	118
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	63	91	98
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	72	119
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	91

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR-END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	9	4	3							
2. 2013.....	28	6	3	1	1	1				
3. 2014.....	XXX	28	6	2	1	1	1			
4. 2015.....	XXX	XXX	29	6	3	2	1	1	1	
5. 2016.....	XXX	XXX	XXX	27	6	3	2	2	3	1
6. 2017.....	XXX	XXX	XXX	XXX	26	5	2	2	2	1
7. 2018.....	XXX	XXX	XXX	XXX	XXX	26	6	3	2	1
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	35	8	4	3
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	37	10	5
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56	15
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR-END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	16	1	1							
2. 2013.....	204	218	219	219	220	220	219	219	219	219
3. 2014.....	XXX	196	212	213	214	214	214	214	214	214
4. 2015.....	XXX	XXX	201	216	217	217	216	216	216	216
5. 2016.....	XXX	XXX	XXX	200	212	213	213	213	213	213
6. 2017.....	XXX	XXX	XXX	XXX	186	198	199	200	200	200
7. 2018.....	XXX	XXX	XXX	XXX	XXX	189	200	201	200	200
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	204	217	218	219
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	174	189	192
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	239	267
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	233

**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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	2	1	1							
2. 2013.....	4	6	6	6	6	6	6	6	6	6
3. 2014.....	XXX	5	7	7	7	7	7	7	7	7
4. 2015.....	XXX	XXX	6	8	9	9	9	9	9	9
5. 2016.....	XXX	XXX	XXX	7	9	9	9	9	9	9
6. 2017.....	XXX	XXX	XXX	XXX	7	9	9	9	9	9
7. 2018.....	XXX	XXX	XXX	XXX	XXX	7	9	9	9	9
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	7	9	10	10
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	8	9
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	12
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR-END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....										
2. 2013.....	1									
3. 2014.....	XXX	2	1							
4. 2015.....	XXX	XXX	2	1						
5. 2016.....	XXX	XXX	XXX	2	1					
6. 2017.....	XXX	XXX	XXX	XXX	2	1				
7. 2018.....	XXX	XXX	XXX	XXX	XXX	2	1			
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	3	1		
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	1	1
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	2
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR-END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	1						1			
2. 2013.....	9	10	10	10	10	10	9	9	9	9
3. 2014.....	XXX	10	11	11	11	11	11	11	11	11
4. 2015.....	XXX	XXX	13	14	14	14	14	14	14	14
5. 2016.....	XXX	XXX	XXX	14	15	15	14	14	14	14
6. 2017.....	XXX	XXX	XXX	XXX	14	15	14	14	14	14
7. 2018.....	XXX	XXX	XXX	XXX	XXX	15	15	14	14	14
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	16	17	17	17
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	16	17
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19	23
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29

(75) Schedule P - Part 5D - Section 1

**NONE**

(75) Schedule P - Part 5D - Section 2

**NONE**

(75) Schedule P - Part 5D - Section 3

**NONE**

(76) Schedule P - Part 5E - Section 1

**NONE**

(76) Schedule P - Part 5E - Section 2

**NONE**

(76) Schedule P - Part 5E - Section 3

**NONE**

(77) Schedule P - Part 5F - Section 1A

**NONE**

(77) Schedule P - Part 5F - Section 2A

**NONE**

(77) Schedule P - Part 5F - Section 3A

**NONE**

(78) Schedule P - Part 5F - Section 1B

**NONE**

(78) Schedule P - Part 5F - Section 2B

**NONE**

(78) Schedule P - Part 5F - Section 3B

**NONE**

(79) Schedule P - Part 5H - Section 1A

**NONE**

(79) Schedule P - Part 5H - Section 2A

**NONE**

(79) Schedule P - Part 5H - Section 3A

**NONE**

(80) Schedule P - Part 5H - Section 1B

**NONE**

(80) Schedule P - Part 5H - Section 2B

**NONE**

(80) Schedule P - Part 5H - Section 3B

**NONE**

(81) Schedule P - Part 5R - Section 1A

**NONE**

(81) Schedule P - Part 5R - Section 2A

**NONE**

(81) Schedule P - Part 5R - Section 3A

**NONE**

(82) Schedule P - Part 5R - Section 1B

**NONE**

(82) Schedule P - Part 5R - Section 2B

**NONE**

(82) Schedule P - Part 5R - Section 3B

**NONE**

(83) Schedule P - Part 5T - Section 1

**NONE**

(83) Schedule P - Part 5T - Section 2

**NONE**

(83) Schedule P - Part 5T - Section 3

**NONE**

**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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior											
2. 2013	67	67	67	67	67	67	67	67	67	67	67
3. 2014	XXX	80	80	80	80	80	80	80	80	80	80
4. 2015	XXX	XXX	96	96	96	96	96	96	96	96	96
5. 2016	XXX	XXX	XXX	111	111	111	111	111	111	111	111
6. 2017	XXX	XXX	XXX	123	123	123	123	123	123	123	123
7. 2018	XXX	XXX	XXX	141	141	141	141	141	141	141	141
8. 2019	XXX	XXX	XXX	XXX	XXX	179	179	179	179	179	179
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	283	283	283	283	283
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	333	333	333	333
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	428	428
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	428
13. Earned Premiums (Sc P-Pt 1)	67	80	96	111	123	141	179	283	333	428	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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior											
2. 2013	6	6	6	6	6	6	6	6	6	6	6
3. 2014	XXX	8	8	8	8	8	8	8	8	8	8
4. 2015	XXX	XXX	10	10	10	10	10	10	10	10	10
5. 2016	XXX	XXX	XXX	7	7	7	7	7	7	7	7
6. 2017	XXX	XXX	XXX	XXX	5	5	5	5	5	5	5
7. 2018	XXX	XXX	XXX	XXX	XXX	20	20	20	20	20	20
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX	179	179	179	179	179
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	283	283	283	283
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	333	333	333
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	428	428
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	428
13. Earned Premiums (Sc P-Pt 1)	6	8	10	7	5	20	179	283	333	428	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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior											
2. 2013											
3. 2014	XXX										
4. 2015	XXX	XXX									
5. 2016	XXX	XXX	XXX								
6. 2017	XXX	XXX	XXX	X							
7. 2018	XXX	XXX	XXX	X	X						
8. 2019	XXX	XXX	XXX	X	X	X					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

**NONE****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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior											
2. 2013											
3. 2014	XXX										
4. 2015	XXX	XXX									
5. 2016	XXX	XXX	XXX								
6. 2017	XXX	XXX	XXX	X							
7. 2018	XXX	XXX	XXX	X	X						
8. 2019	XXX	XXX	XXX	X	X	X					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

**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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior											
2. 2013											
3. 2014	XXX										
4. 2015	XXX	XXX									
5. 2016	XXX	XXX	XXX								
6. 2017	XXX	XXX	XXX	XXX							
7. 2018	XXX	XXX	XXX	XXX	XXX						
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

**NONE****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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior											
2. 2013											
3. 2014	XXX										
4. 2015	XXX	XXX									
5. 2016	XXX	XXX	XXX								
6. 2017	XXX	XXX	XXX	XXX							
7. 2018	XXX	XXX	XXX	XXX	XXX						
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

**SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE****SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR-END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior											
2. 2013											
3. 2014	XXX										
4. 2015	XXX	XXX									
5. 2016	XXX	XXX	XXX								
6. 2017	XXX	XXX	XXX	XXX							
7. 2018	XXX	XXX	XXX	XXX	XXX						
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1
13. Earned Premiums (Sc P-Pt 1)											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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior											
2. 2013											
3. 2014	XXX										
4. 2015	XXX	XXX									
5. 2016	XXX	XXX	XXX								
6. 2017	XXX	XXX	XXX	XXX							
7. 2018	XXX	XXX	XXX	XXX	XXX						
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1		
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

**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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior											
2. 2013											
3. 2014	XXX										
4. 2015	XXX	XXX									
5. 2016	XXX	XXX	XXX								
6. 2017	XXX	XXX	XXX	XXX							
7. 2018	XXX	XXX	XXX	XXX	XXX						
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior											
2. 2013											
3. 2014	XXX										
4. 2015	XXX	XXX									
5. 2016	XXX	XXX	XXX								
6. 2017	XXX	XXX	XXX	XXX							
7. 2018	XXX	XXX	XXX	XXX	XXX						
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P–Pt 1)											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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior											
2. 2013											
3. 2014	XXX										
4. 2015	XXX	XXX									
5. 2016	XXX	XXX	XXX								
6. 2017	XXX	XXX	XXX	XXX							
7. 2018	XXX	XXX	XXX	XXX	XXX						
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior											
2. 2013											
3. 2014	XXX										
4. 2015	XXX	XXX									
5. 2016	XXX	XXX	XXX								
6. 2017	XXX	XXX	XXX	XXX							
7. 2018	XXX	XXX	XXX	XXX	XXX						
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P–Pt 1)											XXX

(87) Schedule P - Part 6N - Reinsurance Nonproportional Assumed Property - Section 1

**NONE**

(87) Schedule P - Part 6N - Reinsurance Nonproportional Assumed Property - Section 2

**NONE**

(87) Schedule P - Part 6O - Reinsurance Nonproportional Assumed Liability - Section 1

**NONE**

(87) Schedule P - Part 6O - Reinsurance Nonproportional Assumed Liability - Section 2

**NONE**

(88) Schedule P - Part 6R - Products Liability - Occurrence - Section 1A

**NONE**

(88) Schedule P - Part 6R - Products Liability - Occurrence - Section 2A

**NONE**

(88) Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B

**NONE**

(88) Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B

**NONE**

(89) Schedule P - Part 7A - Primary Loss Sensitive Contracts - Section 1

**NONE**

(89) Schedule P - Part 7A - Primary Loss Sensitive Contracts - Section 2

**NONE**

(89) Schedule P - Part 7A - Primary Loss Sensitive Contracts - Section 3

**NONE**

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

**NONE**

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

**NONE**

(91) Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Section 1

**NONE**

(91) Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Section 2

**NONE**

(91) Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Section 3

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

(92) Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Section 7

**NONE**

**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? 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:..... NO.....

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

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

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

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?

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	2
Years in Which Premiums Were Earned and Losses Were Incurred	Section 1: Occurrence	
1.601. Prior.....	.....	.....
1.602. 2013.....	.....	.....
1.603. 2014.....	.....	.....
1.604. 2015.....	.....	.....
1.605. 2016.....	.....	.....
1.606. 2017.....	.....	.....
1.607. 2018.....	.....	.....
1.608. 2019.....	.....	.....
1.609. 2020.....	.....	.....
1.610. 2021.....	.....	.....
1.611. 2022.....	.....	.....
1.612. Totals.....	.....	.....

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.....

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.....

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?..... NO.....

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 thousands of dollars) in force at the end of the year for:  
5.1. Fidelity..... \$.....  
5.2. Surety..... \$.....

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

7.1. The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses?..... YES.....

7.2. An extended statement may be attached.....  
EFFECTIVE 12/1/18, THE COMPANY'S PARENT, INFINITY INSURANCE COMPANY, ENTERED INTO A 100% QUOTA SHARE AGREEMENT WITH TRINITY UNIVERSAL INSURANCE COMPANY, AN AFFILIATE. THE RESULT IS THAT MEMBERS OF THE INFINITY INSURANCE POOL WILL HAVE NO NET RESERVES. FOR POOLING INFORMATION SEE NOTE 26 IN THE NOTES TO THE FINANCIAL STATEMENTS.

**SCHEDULE T – PART 2**  
 INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN  
 Allocated By States And Territories

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

NONE

## Annual Statement for the Year 2022 of the Infinity Assurance Insurance Company

## SCHEDULE Y

## PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership, Provide Percentage	14 Ultimate Controlling Entity(ies) / Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
	KEMPER CORPORATION		95-4255452		0000860748	NEW YORK STOCK EXCHANGE	KEMPER CORPORATION	DE	UIP						NO
	KEMPER CORPORATION		37-1656986			ACCELERATE INSURANCE NETWORK, LLC		IL	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION		20-8809010			ACCESS INSURANCE AGENCY OF ARIZONA, LLC		AZ	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION		20-8115603			ACCESS INSURANCE AGENCY OF INDIANA, LLC		IN	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION		20-8115668			ACCESS INSURANCE AGENCY OF NEVADA, LLC		NV	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION		26-2621251			ACCESS INSURANCE AGENCY OF SOUTH CAROLINA, LLC		SC	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION		26-4133974			AEGON OPPORTUNITY ZONE FUND JOINT VENTURE 1, LP			NIA	UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION		26-4133974			AGENCIA DE SEGUROS DE ACCESO, LLC		TX	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION		1
0215	KEMPER CORPORATION	10920	77-0475915			ALLIANCE UNITED INSURANCE COMPANY		CA	IA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION		77-0472398			ALLIANCE UNITED INSURANCE SERVICES, LLC		CA	NIA	ALLIANCE UNITED INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION		NO
0215	KEMPER CORPORATION	38156	39-1344101			ALPHA PROPERTY & CASUALTY INSURANCE COMPANY		WI	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION		NO
0215	KEMPER CORPORATION	10730	36-4335932			AMERICAN ACCESS CASUALTY COMPANY		IL	IA	AMERICAN ACCESS HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION		84-4192397			AMERICAN ACCESS HOLDINGS, LLC		DE	NIA	CRANBERRY HOLDINGS, INC.	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION					APEX LINEN TOPCO, LLC			NIA	UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	17.500	KEMPER CORPORATION		2
0215	KEMPER CORPORATION	29211	75-0774903			CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY		TX	IA	THE RELIABLE LIFE INSURANCE COMPANY	MANAGEMENT		KEMPER CORPORATION		3
	KEMPER CORPORATION		58-0642684			CASUALTY UNDERWRITERS, INC.		GA	NIA	INFINITY PROPERTY AND CASUALTY SERVICES, INC.	OWNERSHIP	100.000	KEMPER CORPORATION		NO
0215	KEMPER CORPORATION	37524	75-1636168			CHARTER INDEMNITY COMPANY		TX	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION		92-1599608			CORONADO MEDICAL CENTER, LLC		DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION		85-4330188			CRANBERRY HOLDINGS, INC.		DE	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION		04-3294619			DIRECT RESPONSE CORPORATION		DE	NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION		YES
	KEMPER CORPORATION		43-1511864			FAMILY SECURITY FUNERALS COMPANY		TX	NIA	THE RELIABLE LIFE INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION		YES
0215	KEMPER CORPORATION	19852	95-1466743			FINANCIAL INDEMNITY COMPANY		IL	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION		NO
	KEMPER CORPORATION		92-1612977			FOOTHILLS CORPORATE, LLC		DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION		NO

## Annual Statement for the Year 2022 of the Infinity Assurance Insurance Company

## SCHEDULE Y

## PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership, Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No)	*
97.1	KEMPER CORPORATION	36-4448107				ILLINOIS VEHICLE INSURANCE AGENCY, LLC		IL	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	74-2641866				INFINITY AGENCY OF TEXAS		TX	NIA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION	39497	75-1227771			INFINITY INSURANCE COMPANY		OH	RE	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	11738	34-0927698			INFINITY AUTO INSURANCE COMPANY		OH	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	21792	58-1132392			INFINITY CASUALTY INSURANCE COMPANY		OH	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	13820	43-6030348			INFINITY COUNTY MUTUAL INSURANCE COMPANY		TX	IA	INFINITY INSURANCE COMPANY	MANAGEMENT		KEMPER CORPORATION	NO	4
	KEMPER CORPORATION		20-4363792			INFINITY FINANCIAL CENTERS, LLC		DE	NIA	INFINITY PROPERTY AND CASUALTY CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	5
	KEMPER CORPORATION	10061	34-1767787			INFINITY INDEMNITY INSURANCE COMPANY		IN	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		58-1293110			INFINITY INSURANCE AGENCY, INC.		AL	NIA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION	22268	31-0943862			INFINITY INSURANCE COMPANY		IN	UDP	INFINITY PROPERTY AND CASUALTY CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	10195	34-1785809			INFINITY PREFERRED INSURANCE COMPANY		OH	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		03-0483872			INFINITY PROPERTY AND CASUALTY CORPORATION		OH	UIP	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		58-1080659			INFINITY PROPERTY AND CASUALTY SERVICES, INC.		GA	NIA	INFINITY STANDARD INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION	16802	73-0772113			INFINITY SAFEGUARD INSURANCE COMPANY		OH	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	20260	31-1333017			INFINITY SELECT INSURANCE COMPANY		IN	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	12599	58-1806189			INFINITY STANDARD INSURANCE COMPANY		IN	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		27-3557296			KAHG LLC		IL	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	5
	KEMPER CORPORATION		98-1683863			KEMPER BERMUDA LTD		BMU	IA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		92-1599353			KEMPER CENTER, LLC		DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		36-4105161			KEMPER CORPORATE SERVICES, INC.		IL	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	39004	91-1119010			KEMPER FINANCIAL INDEMNITY COMPANY		IL	IA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		75-1865314			KEMPER GENERAL AGENCY, INC.		TX	NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION	10914	36-4230019			KEMPER INDEPENDENCE INSURANCE COMPANY		IL	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		75-2874538			KEMPER MANAGEMENT, LLC		IL	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION					KEMPER PERSONAL INSURANCE GENERAL AGENCY, INC.		TX	NIA	UNITRIN DIRECT PROPERTY & CASUALTY COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	

## Annual Statement for the Year 2022 of the Infinity Assurance Insurance Company

## SCHEDULE Y

## PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership, Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No)	*
97.2	KEMPER CORPORATION		30-1329283			KEMPER PROPERTIES, LLC	DE	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION		34-1852743			LEADER GROUP, INC.	OH	NIA	INFINITY AUTO INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES		
	KEMPER CORPORATION		75-2280915			LEADER MANAGING GENERAL AGENCY, INC.	TX	NIA	INFINITY AUTO INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES		
	KEMPER CORPORATION		98-0426067			MERASTAR INDUSTRIES LLC	DE	NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	5	
	0215 KEMPER CORPORATION	31968	62-0928337			MERASTAR INSURANCE COMPANY	IL	IA	MERASTAR INDUSTRIES LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	0215 KEMPER CORPORATION	31178	63-0599704			MUTUAL SAVINGS FIRE INSURANCE COMPANY	AL	IA	MUTUAL SAVINGS LIFE INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	0215 KEMPER CORPORATION	66397	63-0148960			MUTUAL SAVINGS LIFE INSURANCE COMPANY	AL	IA	UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION		75-2538407			NCM MANAGEMENT CORPORATION	DE	NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES		
	KEMPER CORPORATION		36-4442975			NEWINS INSURANCE AGENCY HOLDINGS, LLC	IL	NIA	CRANBERRY HOLDINGS, INC.	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION		36-4442975			NEWINS REAL ESTATE HOLDINGS, LLC	IL	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION		92-1622384			NORTH SCOTTSDALE GATEWAY, LLC	DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	0215 KEMPER CORPORATION	36625	43-1156323			OLD RELIABLE CASUALTY COMPANY	MO	IA	CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	6	
	KEMPER CORPORATION					PENNANTPARK SENIOR SECURED LOAN FUND I, LLC		NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	50.000	KEMPER CORPORATION	NO	7	
	0215 KEMPER CORPORATION	43044	04-2794993			RESPONSE INSURANCE COMPANY	IL	IA	DIRECT RESPONSE CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	0215 KEMPER CORPORATION	20133	61-6027355			RESPONSE WORLDWIDE DIRECT AUTO INSURANCE COMPANY	IL	IA	WARNER INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	0215 KEMPER CORPORATION	26050	39-1341441			RESPONSE WORLDWIDE INSURANCE COMPANY	IL	IA	RESPONSE INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION		20-3046396			SECURITY ONE AGENCY LLC	IL	NIA	MERASTAR INDUSTRIES LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	5	
	KEMPER CORPORATION					SENIOR LOAN FUND JV, I LLC		NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	50.000	KEMPER CORPORATION	NO	8	
	KEMPER CORPORATION		92-1605543			SKYLINE ESPLANADE 6, LLC	DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION		92-1588929			SKYLINE ESPLANADE 7, LLC	DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION		92-1600556			SKYLINE ESPLANADE 9, LLC	DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION		92-1597819			SUMMERGATE CORPORATE CENTER, LLC	DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION					SUNRUN KRONOS OWNER 2000, LLC		NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	22.500	KEMPER CORPORATION	NO	9	
	KEMPER CORPORATION					SUNRUN KRONOS OWNER 2000, LLC		NIA	UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	7.600	KEMPER CORPORATION	NO		
	KEMPER CORPORATION		31-1357130			THE INFINITY GROUP, INC.	IN	NIA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES		
	KEMPER CORPORATION		36-6007812			THE KEMPER FOUNDATION	IL	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO		

## SCHEDULE Y

## PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership, Provide Percentage	14 Ultimate Controlling Entity(ies) / Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
97.3	0215 KEMPER CORPORATION	68357	43-0476110			THE RELIABLE LIFE INSURANCE COMPANY	MO IA	UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	19887	75-0620550			TRINITY UNIVERSAL INSURANCE COMPANY	TX IA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	12998	72-6019774			UNION NATIONAL FIRE INSURANCE COMPANY	LA IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	69779	72-0340280			UNION NATIONAL LIFE INSURANCE COMPANY	LA IA	UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	11142	23-1614367			UNITED CASUALTY INSURANCE COMPANY OF AMERICA	IL IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	69930	36-1896670			UNITED INSURANCE COMPANY OF AMERICA	IL IA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	10881	13-3974181			UNITRIN ADVANTAGE INSURANCE COMPANY	NY IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	16063	52-1752227			UNITRIN AUTO AND HOME INSURANCE COMPANY	NY IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	29351	74-1084315			UNITRIN COUNTY MUTUAL INSURANCE COMPANY	TX IA	NCM MANAGEMENT CORPORATION	MANAGEMENT		KEMPER CORPORATION	NO	10		
	0215 KEMPER CORPORATION	10226	36-4013825			UNITRIN DIRECT INSURANCE COMPANY	IL IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	10915	36-4230008			UNITRIN DIRECT PROPERTY & CASUALTY COMPANY	IL IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	25909	13-5460208			UNITRIN PREFERRED INSURANCE COMPANY	NY IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	40703	39-1401314			UNITRIN SAFEGUARD INSURANCE COMPANY	WI IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	10698	93-1217821			VALLEY PROPERTY & CASUALTY INSURANCE COMPANY	OR IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO			
	0215 KEMPER CORPORATION	26085	36-3423817			WARNER INSURANCE COMPANY	IL IA	DIRECT RESPONSE CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO			

Asterisk	Explanation
1	AEGON OPPORTUNITY FUND JOINT VENTURE 1, LLC, (AEGON) IS AN AFFILIATE BY VIRTUE OF UNITED INSURANCE COMPANY OF AMERICA (UNITED) HAVING A MAJORITY PARTNERSHIP INTEREST IN AEGON.
2	APEX LINEN TOPCO, LLC (APEX) IS AN AFFILIATE BY VIRTUE OF UNITED HAVING A 17.5% PARTNERSHIP INTEREST IN APEX.
3	CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY (NAIC# 29211, DOMICILED IN THE STATE OF TEXAS) IS AFFILIATED WITH THE RELIABLE LIFE INSURANCE COMPANY BY VIRTUE OF A MANAGEMENT AGREEMENT.
4	INFINITY COUNTY MUTUAL INSURANCE COMPANY (NAIC# 13820, DOMICILED IN THE STATE OF TEXAS) IS AFFILIATED WITH INFINITY INSURANCE COMPANY BY VIRTUE OF A MANAGEMENT AGREEMENT.
5	THESE ENTITIES ARE LIMITED LIABILITY COMPANIES. PERCENTAGES RELATE TO THE OWNER'S MEMBERSHIP INTEREST IN THE LLC.
6	OLD RELIABLE CASUALTY COMPANY (NAIC# 36625, DOMICILED IN THE STATE OF MISSOURI) IS AFFILIATED BY VIRTUE OF ITS OWNERSHIP BY CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY.
7	PENNANTPARK SENIOR SECURED LOAN FUND I, LLC (PSLL), IS AN AFFILIATE BY VIRTUE OF TRINITY HAVING 50% CONTROL OF THE BOARD OF PSSL, WITH THE OTHER 50% VESTED IN PENNANTPARK FLOATING RATE CAPITAL, LTD.
8	SENIOR LOAN FUND JV, I LLC (SLFJV) IS AN AFFILIATE BY VIRTUE OF TRINITY HAVING 50% CONTROL OF THE BOARD OF SLFJV, WITH THE OTHER 50% VESTED IN OAKTREE SPECIALTY LENDING CORP.
9	SUNRUN KRONOS OWNER 2020, LLC (SUNRUN) IS AN AFFILIATE BY VIRTUE OF TRINITY HAVING A 22.9% PARTNERSHIP INTEREST IN SUNRUN.
10	UNITRIN COUNTY MUTUAL INSURANCE COMPANY (NAIC# 29351, DOMICILED IN THE STATE OF TEXAS) IS AFFILIATED WITH NCM MANAGEMENT CORP. BY VIRTUE OF A MANAGEMENT AGREEMENT.

**SCHEDULE Y**

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
		ACCELERATE INSURANCE NETWORK, LLC.....										
	37-1656986	ACCESS INSURANCE AGENCY OF ARIZONA, LLC.....										
	20-8809010	ACCESS INSURANCE AGENCY OF INDIANA, LLC.....										
	20-8115603	ACCESS INSURANCE AGENCY OF NEVADA, LLC.....										
	20-8115668	ACCESS INSURANCE AGENCY OF SOUTH CAROLINA, LLC.....										
	26-2621251	AEGON OPPORTUNITY ZONE FUND JOINT VENTURE 1, LP.....										
	26-4133974	AGENCIA DE SEGUROS DE ACCESO, LLC.....										
10920	77-0475915	ALLIANCE UNITED INSURANCE COMPANY.....	32,800,000				154,869,290				187,669,290	
	77-0472398	ALLIANCE UNITED INSURANCE SERVICES, LLC.....	(32,800,000)								(32,800,000)	
38156	39-1344101	ALPHA PROPERTY & CASUALTY INSURANCE COMPANY.....					20,459,238	(18,054,663)			2,404,575	5,138,874
10730	36-4335932	AMERICAN ACCESS CASUALTY COMPANY.....		55,000,000			31,463,557				86,463,557	
	84-4192397	AMERICAN ACCESS HOLDINGS, LLC.....		(55,000,000)							(55,000,000)	
		APEX LINEN TOPCO, LLC.....										
29211	75-0774903	CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY.....					7,106,478	(1,458,590)			5,647,888	3,739,924
	58-0642684	CASUALTY UNDERWRITERS, INC.....										
37524	75-1636168	CHARTER INDEMNITY COMPANY CORONADO MEDICAL CENTER, LLC.....	(700,000)				3,132,498	(1,752,036)			680,463	(2,668,649)
	92-1599608											
	85-4330188	CRANBERRY HOLDINGS, INC.....	14,800,000								14,800,000	
	04-3294619	DIRECT RESPONSE CORPORATION FAMILY SECURITY FUNERALS COMPANY.....	(340,000)								(340,000)	
	43-1511864											
19852	95-1466743	FINANCIAL INDEMNITY COMPANY.....					66,809,146	(32,163,350)			34,645,796	(5,735,555)
	92-1612977	FOOTHILLS CORPORATE, LLC.....										

## SCHEDULE Y

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

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		ILLINOIS VEHICLE INSURANCE AGENCY, LLC.....										
	36-4448107	INFINITY AGENCY OF TEXAS.....										
	74-2641866	INFINITY ASSURANCE INSURANCE COMPANY.....										
39497	75-1227771	INFINITY AUTO INSURANCE COMPANY.....					23,438,994	(517,487)	*		22,921,507	77,554,253
11738	34-0927698	INFINITY CASUALTY INSURANCE COMPANY.....	(800,000)				141,571,613	(69,613,412)	*		71,158,202	271,353,025
21792	58-1132392	INFINITY COUNTY MUTUAL INSURANCE COMPANY.....					11,424,902	(8,389,030)	*		3,035,872	32,710,150
13820	43-6030348	INFINITY FINANCIAL CENTERS, LLC					43,428,865	(13,118,483)	*		30,310,381	201,516,993
	20-4363792	INFINITY INDEMNITY INSURANCE COMPANY.....					60,528,868	(39,905,038)	*		20,623,830	108,465,869
10061	34-1767787	INFINITY INSURANCE AGENCY, INC.					238,176,794	(142,474,596)	*		84,727,198	(370,095,808)
22268	58-1293110	INFINITY INSURANCE COMPANY.....	(10,975,000)				(34,584)	(3,088)	*		(37,672)	
10195	31-0943862	INFINITY PREFERRED INSURANCE COMPANY.....					5,830,478	(8,470,719)	*		300,000	
	34-1785809	INFINITY PROPERTY AND CASUALTY CORPORATION.....		300,000			43,062,506	(5,466)	*		42,907,039	185,180,668
	03-0483872	INFINITY PROPERTY AND CASUALTY SERVICES, INC.....					1,904,873	(3,066,996)	*		(1,237,123)	7,693,853
	58-1080659	INFINITY SAFEGUARD INSURANCE COMPANY.....					18,744,105				18,744,105	(3,044,938,243)
16802	73-0772113	INFINITY SELECT INSURANCE COMPANY.....					20,056,540				331,756,540	
20260	31-1333017	INFINITY STANDARD INSURANCE COMPANY.....	(150,000)				100,000	(32,676)			67,324	(70,409)
12599	27-3557296	KAHG LLC.....	(75,000)									
	98-1683863	KEMPER BERMUDA LTD.....										
	92-1599353	KEMPER CENTER, LLC.....										
	36-4105161	KEMPER CORPORATE SERVICES, INC.....										
	95-4255452	KEMPER CORPORATION.....	311,700,000									
39004	91-1119010	KEMPER FINANCIAL INDEMNITY COMPANY.....										
	75-1865314	KEMPER GENERAL AGENCY, INC.....										

## Annual Statement for the Year 2022 of the Infinity Assurance Insurance Company

## SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
10914	36-4230019	KEMPER INDEPENDENCE INSURANCE COMPANY.....	(380,000)				52,466,669	8,184,487			60,271,156	1,812,862
		KEMPER MANAGEMENT LLC										
	75-2874538	KEMPER PERSONAL INSURANCE GENERAL AGENCY, INC.....										
	30-1329283	KEMPER PROPERTIES, LLC										
	34-1852743	LEADER GROUP, INC.....										
	75-2280915	LEADER MANAGING GENERAL AGENCY, INC.....										
	98-0426067	MERASTAR INDUSTRIES LLC	(60,000)								(60,000)	
31968	62-0928337	MERASTAR INSURANCE COMPANY					(1,192,400,229)	(926,860)			(1,193,327,089)	(979,542)
	31178	MUTUAL SAVINGS FIRE INSURANCE COMPANY.....	(150,000)				2,322,774	(724,448)			1,448,326	1,378,218
	66397	MUTUAL SAVINGS LIFE INSURANCE COMPANY.....	(11,850,000)				11,281,142	(14,913,552)			(15,482,411)	396,357,726
	75-2538407	NCM MANAGEMENT CORPORATION.....	(400,000)								(400,000)	
	36-4442975	NEWINS INSURANCE AGENCY HOLDINGS, LLC.....	(14,800,000)								(14,800,000)	
		NEWINS REAL ESTATE HOLDINGS, LLC										
	92-1622384	NORTH SCOTTSDALE GATEWAY, LLC										
36625	43-1156323	OLD RELIABLE CASUALTY COMPANY.....					1,995,940	513,429			2,509,369	1,197,243
		PENNANTPARK SENIOR SECURED LOAN FUND I, LLC										
	68462	RESERVE NATIONAL INSURANCE COMPANY.....					8,263,542	(2,900,466)			5,363,076	
43044	04-2794993	RESPONSE INSURANCE COMPANY					515,580	121,816			637,396	(287,631)
		RESPONSE WORLDWIDE DIRECT										
	20133	AUTO INSURANCE COMPANY.....						(71,498)			(71,498)	(19,294)
	26050	RESPONSE WORLDWIDE INSURANCE COMPANY.....					2,640	(128,472)			(125,832)	(184,845)
	20-3046396	SECURITY ONE AGENCY LLC	(200,000)								(200,000)	
	92-1605543	SENIOR LOAN FUND JV, I LLC										
	92-1588929	SKYLINE ESPLANADE 6, LLC										
		SKYLINE ESPLANADE 7, LLC										

## SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
98.3	92-1600556	SKYLINE ESPLANADE 9, LLC										
	92-1597819	SUMMERTIME CORPORATE CENTER, LLC										
		SUNRUN KRONOS OWNER 2000, LLC										
	31-1357130	THE INFINITY GROUP, INC.										
	36-6007812	THE KEMPER FOUNDATION										
	68357	THE RELIABLE LIFE INSURANCE COMPANY					42,533,866	(26,497,527)			16,036,339	69,220,000
	43-0476110	TRINITY UNIVERSAL INSURANCE COMPANY					12,477,749	393,981,991			409,599,740	(570,712,452)
	19887	UNION NATIONAL FIRE INSURANCE COMPANY	3,140,000				7,821,589	(1,271,610)			6,489,979	5,044,541
	12998	UNION NATIONAL LIFE INSURANCE COMPANY	(60,000)				28,704,024	(13,362,200)			15,341,824	50,287,502
	69779	UNITED CASUALTY INSURANCE COMPANY OF AMERICA					8,771,886	(4,482,377)			4,139,509	2,979,165
	11142	UNITED INSURANCE COMPANY OF AMERICA	(150,000)				45,148,398	38,929,640			(203,921,962)	2,529,073,015
	69930	UNITRIN ADVANTAGE INSURANCE COMPANY	(288,000,000)				52,691	(15,616)			37,074	(1,198,614)
	10881	UNITRIN AUTO AND HOME INSURANCE COMPANY					17,841,196	(2,577,210)			15,263,986	(10,829,100)
	16063	UNITRIN COUNTY MUTUAL INSURANCE COMPANY					13,539,768	2,620,598			16,160,367	(14,130,370)
	29351	UNITRIN DIRECT INSURANCE COMPANY					2,500,806	522,915			3,023,722	(1,423,259)
	10226	UNITRIN DIRECT PROPERTY & CASUALTY COMPANY	(350,000)				1,565,381	1,548,323			2,763,704	(1,793,055)
	10915	UNITRIN PREFERRED INSURANCE COMPANY	(340,000)				3,974,865	1,834,064			5,468,930	(4,904,464)
	25909	UNITRIN SAFEGUARD INSURANCE COMPANY					56,394,214	(61,759,626)			(5,365,412)	70,582,316
	40703	VALLEY PROPERTY & CASUALTY INSURANCE COMPANY	(160,000)				893,086	2,488,059			3,221,146	(872,309)
	10698	WARNER INSURANCE COMPANY					2,365	(832,335)			(829,970)	(251,271)
	26085	9999999 - Control Totals							XXX			

**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 Over Column 6)	8 Granted Disclaimer of Control / Affiliation of Column 5 Over Column 6 (Yes/No)
ALLIANCE UNITED INSURANCE COMPANY	KEMPER CORPORATION	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
ALPHA PROPERTY & CASUALTY INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
AMERICAN ACCESS CASUALTY COMPANY	AMERICAN ACCESS HOLDINGS, LLC	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY		%	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
CHARTER INDEMNITY COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
FINANCIAL INDEMNITY COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY ASSURANCE INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY AUTO INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY CASUALTY INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY COUNTY MUTUAL INSURANCE COMPANY		%	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY INDEMNITY INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY INSURANCE COMPANY	INFINITY PROPERTY AND CASUALTY CORPORATION	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY PREFERRED INSURANCE COMPANY	INFININTY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY SAFEGUARD INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY SELECT INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY STANDARD INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
KEMPER FINANCIAL INDEMNITY COMPANY	RESPONSE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
KEMPER INDEPENDENCE INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
MERASTAR INSURANCE COMPANY	MERASTAR INDUSTRIES, LLC	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
MUTUAL SAVINGS FIRE INSURANCE COMPANY	MUTUAL SAVINGS LIFE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
MUTUAL SAVINGS LIFE INSURANCE COMPANY	UNITED INSURANCE COMPANY OF AMERICA	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
OLD RELIABLE CASUALTY COMPANY	CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
RESPONSE INSURANCE COMPANY	DIRECT RESPONSE CORPORATION	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
RESPONSE WORLDWIDE DIRECT AUTO INSURANCE COMPANY	RESPONSE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
RESPONSE WORLDWIDE INSURANCE COMPANY	RESPONSE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO

**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)
THE RELIABLE LIFE INSURANCE COMPANY	UNITED INSURANCE COMPANY OF AMERICA.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
TRINITY UNIVERSAL INSURANCE COMPANY	KEMPER CORPORATION.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNION NATIONAL FIRE INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNION NATIONAL LIFE INSURANCE COMPANY.....	UNITED INSURANCE COMPANY OF AMERICA.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITED CASUALTY INSURANCE COMPANY OF AMERICA.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITED INSURANCE COMPANY OF AMERICA.....	KEMPER CORPORATION.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN ADVANTAGE INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN AUTO AND HOME INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN COUNTY MUTUAL INSURANCE COMPANY.....	.....	%	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN DIRECT INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN DIRECT PROPERTY & CASUALTY COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN PREFERRED INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN SAFEGUARD INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
VALLEY PROPERTY & CASUALTY INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
WARNER INSURANCE COMPANY.....	RESPONSE INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....

**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.

**REQUIRED FILINGS**

Response

**March Filing**

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

**April Filing**

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

**May Filing**

8. Will this company be included in a combined annual statement that is filed with the NAIC by May 1? ..... YES .....  
 9. Will an audited financial report be filed by June 1? ..... YES .....  
 10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? ..... YES .....

**SUPPLEMENTAL FILINGS**

Response

**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? ..... NO .....  
 24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? ..... NO .....  
 25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? ..... NO .....  
 26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? ..... NO .....  
 27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution contracts be filed with the state of domicile and the NAIC by March 1? ..... NO .....

**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 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 .....

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

	Explanation	Barcode
1.		
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14.		 3 9 4 9 7 2 0 2 2 2 4 5 5 0 0 0 0 0 0
15.		 3 9 4 9 7 2 0 2 2 2 4 9 0 0 0 0 0 0 0
16.		 3 9 4 9 7 2 0 2 2 2 3 8 5 0 0 0 0 0 0 0
17.		 3 9 4 9 7 2 0 2 2 2 4 0 1 0 0 0 0 0 0 0
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20.		 3 9 4 9 7 2 0 2 2 2 3 9 9 0 0 0 0 0 0 0
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26.		 3 9 4 9 7 2 0 2 2 2 2 5 0 0 0 0 0 0 0 0
27.		 3 9 4 9 7 2 0 2 2 2 2 6 0 0 0 0 0 0 0 0
28.		 3 9 4 9 7 2 0 2 2 2 2 5 5 0 0 0 0 0 0 0
29.		 3 9 4 9 7 2 0 2 2 2 3 0 0 0 0 0 0 0 0 0
30.		 3 9 4 9 7 2 0 2 2 2 3 0 6 0 0 0 0 0 0 0
31.		 3 9 4 9 7 2 0 2 2 2 2 1 0 0 0 0 0 0 0 0
32.		 3 9 4 9 7 2 0 2 2 2 2 1 7 0 0 0 0 0 0 0
33.		 3 9 4 9 7 2 0 2 2 2 5 5 0 0 0 0 0 0 0 0
34.		 3 9 4 9 7 2 0 2 2 2 2 9 0 0 0 0 0 0 0 0
35.		 3 9 4 9 7 2 0 2 2 2 5 6 0 0 0 0 0 0 0 0
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