



PROPERTY AND CASUALTY COMPANIES – ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2022

OF THE CONDITION AND AFFAIRS OF THE

TRUSTGARD INSURANCE COMPANY

NAIC Group Code.....0267.....0267..... NAIC Company Code.....40118..... Employer's ID Number.....41-1405571.....
(Current) (Prior)

Organized under the Laws of.....OH..... State of Domicile or Port of Entry.....OH.....
Country of Domicile.....US.....
Incorporated/Organized.....07/01/1981..... Commenced Business.....11/10/1981.....
Statutory Home Office.....671 South High Street..... Columbus, OH, US 43206-1066.....
Main Administrative Office.....671 South High Street.....
Columbus, OH, US 43206-1066..... 614-445-2900.....
(Telephone)
Mail Address.....671 South High Street..... Columbus, OH, US 43206-1066.....
Primary Location of Books and
Records.....671 South High Street..... 614-445-2900.....
Columbus, OH, US 43206-1066..... (Telephone)
Internet Website Address.....www.grangeinsurance.com.....
Statutory Statement Contact.....Jeffrey P Siefker..... 614-445-2900.....
(Telephone)
siefkerj@grangeinsurance.com..... 614-542-3017.....
(E-Mail) (Fax)

OFFICERS

.....JOHN (NMN) AMMENDOLA, PRESIDENT & CEO..... TERESA JEAN BROWN, EVP & CFO.....
.....LAWAWN DEE COLEMAN, EVP & SECRETARY.....

DIRECTORS OR TRUSTEES

.....JOHN (NMN) AMMENDOLA..... KATHIE JANE ANDRADE.....
.....JAMES MARTIN BENSON..... MARK LEWIS BOXER.....
.....TERESA JEAN BROWN..... MICHAEL DESMOND FRAIZER.....
.....ROBERT ENLOW HOYT..... MARY MARNETTE PERRY.....
.....THOMAS SIMRALL STEWART..... CHRISTIANNA (NMN) WOOD.....

State of Ohio.....
County of Franklin..... 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

JOHN (NMN) AMMENDOLA
PRESIDENT & CEO

x

LAWAWN DEE COLEMAN
EVP & SECRETARY

x

TERESA JEAN BROWN
EVP & CFO

Subscribed and sworn to before me

this 21st day of

February, 2023

x

Teresa J Burchwell

a. Is this an original filing? Yes

b. If no:

1. State the amendment number: _____

2. Date filed: _____

3. Number of pages attached: _____



TERESA J BURCHWELL
Notary Public
State of Ohio
My Comm. Expires
April 28, 2027



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

NAIC Group Code: 0267

NAIC Company Code: 40118

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)												
Details of Write-Ins												
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 COLORADO DURING THE YEAR 2022

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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 GEORGIA DURING THE YEAR 2022

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	341,579	347,472	—	177,665	156,964	157,358	24,348	1,511	1,973	2,543	54,679	18,242
2.1.	Allied Lines	211,090	216,894	—	110,790	52,474	87,471	101,159	3,760	4,036	1,590	33,803	11,273
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	2,693,658	2,877,873	—	1,413,004	1,091,895	1,143,520	508,972	10,003	(5,112)	28,772	410,394	143,851
5.1.	Commercial Multiple Peril (Non-Liability Portion)	1,841,970	1,639,169	—	938,572	1,624,978	1,940,642	402,817	15,564	17,347	14,268	308,189	98,368
5.2.	Commercial Multiple Peril (Liability Portion)	2,883,054	2,695,513	—	1,227,771	1,618,633	3,668,577	4,610,192	188,488	520,687	1,216,375	481,129	153,965
6.	Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8.	Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9.	Inland Marine	21,551	23,824	—	12,423	400	598	777	—	98	142	3,355	1,151
10.	Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1	Medical Professional Liability — Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2	Medical Professional Liability — Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12.	Earthquake	3,904	3,669	—	1,830	—	—	—	—	—	—	606	208
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	807,912	964,939	—	320,642	178,588	143,647	529,493	61,526	55,644	115,893	70,462	43,145
17.1.	Other Liability—Occurrence	103,213	106,439	—	69,350	10,000	127,600	141,016	107	(3,566)	21,861	17,030	5,512
17.2.	Other Liability—Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3.	Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1	Products Liability — Occurrence	431	386	—	287	—	50	107	—	(21)	103	72	23
18.2	Products Liability — Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.2.	Other Private Passenger Auto Liability	5,000,702	5,013,815	—	1,298,384	4,874,837	5,277,000	5,259,429	128,953	40,920	264,308	621,984	267,055
19.3.	Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4.	Other Commercial Auto Liability	3,972,309	3,822,637	—	1,708,463	2,430,045	3,660,709	5,198,394	89,946	205,286	505,748	661,090	212,135
21.1.	Private Passenger Auto Physical Damage	2,817,231	2,880,608	—	703,582	1,713,656	1,785,213	66,308	145	561	1,613	351,588	150,450
21.2.	Commercial Auto Physical Damage	1,232,566	1,184,612	—	525,152	792,271	832,387	142,626	1,852	5,362	4,995	205,406	65,823
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)	21,931,170	21,777,851	—	8,507,914	14,544,740	18,824,771	16,985,639	501,854	843,212	2,178,211	3,219,787	1,171,201
Details of Write-Ins													
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 \$98,838

(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: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	234,505	248,533	—	117,176	234,211	196,607	16,155	2,247	2,642	1,811	36,791	4,512
2.1.	Allied Lines	156,349	165,514	—	77,737	14,970	17,545	24,551	3,348	3,594	1,201	24,407	3,008
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	2,181,017	2,348,572	—	1,179,939	1,559,798	890,366	529,885	131,725	118,601	22,355	309,740	41,961
5.1.	Commercial Multiple Peril (Non-Liability Portion)	794,501	760,719	—	305,359	81,373	417,050	354,597	3,506	3,894	6,270	132,603	15,285
5.2.	Commercial Multiple Peril (Liability Portion)	514,050	467,307	—	204,982	387,415	377,960	431,220	11,071	94,428	212,890	85,926	9,890
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.	Inland Marine	27,098	31,057	—	13,962	349	326	1,018	—	134	186	4,035	521
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2	Medical Professional Liability — Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12.	Earthquake	9,279	10,029	—	5,381	—	—	—	—	—	—	1,411	179
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	259,488	208,157	—	151,449	14,626	37,229	70,175	443	11,065	23,820	17,120	2,372
17.1.	Other Liability—Occurrence	40,546	44,793	—	16,947	—	(148)	13,593	—	1,554	3,450	6,516	780
17.2.	Other Liability—Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3.	Excess Workers' Compensation												
18.1	Products Liability — Occurrence	8,926	8,614	—	482	—	2,049	2,338	—	1,621	2,247	1,490	172
18.2	Products Liability — Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.2.	Other Private Passenger Auto Liability	4,130,314	3,777,167	—	1,693,923	2,344,580	3,396,880	3,237,342	34,510	(24,631)	99,727	539,544	79,463
19.3.	Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4.	Other Commercial Auto Liability	569,726	557,141	—	284,192	159,361	565,117	690,722	8,409	22,902	71,737	95,172	10,961
21.1.	Private Passenger Auto Physical Damage	4,138,063	3,638,251	—	1,780,765	2,579,405	2,844,746	233,648	617	1,587	1,965	538,608	79,612
21.2.	Commercial Auto Physical Damage	134,529	141,771	—	70,383	84,004	98,288	4,856	—	428	627	22,478	2,588
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)	13,198,390	12,407,625	—	5,902,679	7,460,093	8,844,014	5,610,100	195,875	237,820	448,287	1,815,841	251,304
Details of Write-Ins													
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 \$116,634

(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

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	695,132	706,614	—	386,705	704,969	650,174	52,607	10,914	12,291	5,131	112,973	10,520
2.1.	Allied Lines	375,270	392,629	—	210,509	17,818	18,827	28,761	—	672	2,861	60,940	5,679
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	3,333,215	3,562,074	—	1,804,609	1,438,695	1,075,842	290,929	7,099	(5,934)	30,897	505,679	50,442
5.1.	Commercial Multiple Peril (Non-Liability Portion)	330,785	425,840	—	211,496	40,828	(10,484)	24,663	—	(116)	3,749	54,915	5,006
5.2.	Commercial Multiple Peril (Liability Portion)	241,403	270,417	—	104,675	291,631	579,607	512,066	15,957	32,889	131,218	40,227	3,653
6.	Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8.	Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9.	Inland Marine	30,566	34,094	—	17,310	16,562	16,572	972	—	143	203	4,825	463
10.	Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1	Medical Professional Liability — Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2	Medical Professional Liability — Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12.	Earthquake	44,470	48,521	—	22,535	—	—	—	—	—	—	6,888	673
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	71,420	57,398	—	41,088	3,038	10,839	19,745	16	2,709	6,552	6,920	272
17.1.	Other Liability—Occurrence	26,769	29,253	—	13,521	—	(2,368)	9,128	—	541	693	4,258	405
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	19,585,548	19,300,830	—	8,419,915	11,897,291	16,378,676	17,101,202	393,511	394,177	1,184,384	2,540,230	296,391
19.3.	Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4.	Other Commercial Auto Liability	207,561	200,551	—	85,807	80,093	180,032	151,305	—	10,484	25,972	34,978	3,141
21.1.	Private Passenger Auto Physical Damage	22,222,711	21,105,850	—	9,896,456	14,020,903	14,740,441	988,178	11,260	18,022	11,952	2,871,751	336,300
21.2.	Commercial Auto Physical Damage	88,818	84,313	—	38,142	57,665	68,110	20,609	—	287	384	14,904	1,344
22.	Aircraft (all perils)	—	—	—	—	—	—	—	—	—	—	—	—
23.	Fidelity	—	—	—	—	—	—	—	—	—	—	—	—
24.	Surety	—	—	—	—	—	—	—	—	—	—	—	—
26.	Burglary and Theft	277	238	—	39	—	10	10	—	—	—	46	4
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)	47,253,943	46,218,623	—	21,252,807	28,569,494	33,706,277	19,200,174	438,755	466,167	1,403,996	6,259,533	714,293
Details of Write-Ins													
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 \$668,624
(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

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	333,522	345,301	—	169,477	110,953	109,414	24,284	4,171	4,725	2,499	53,850	(89,480)
2.1.	Allied Lines	153,839	158,441	—	74,554	11,536	11,215	13,545	—	258	1,142	24,845	16,785
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	1,862,898	2,000,068	—	972,073	1,511,275	771,228	485,514	20,363	16,165	22,682	288,525	69,838
5.1.	Commercial Multiple Peril (Non-Liability Portion)	1,297,000	1,054,704	—	740,438	568,249	563,477	43,216	6,746	8,493	8,801	221,884	123,012
5.2.	Commercial Multiple Peril (Liability Portion)	1,091,545	990,959	—	501,411	246,020	738,351	968,599	31,074	258,174	520,127	184,327	31,519
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.	Inland Marine	28,251	30,608	—	13,007	5,130	5,085	955	—	133	182	4,471	3,082
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2	Medical Professional Liability — Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12.	Earthquake	69,105	71,766	—	35,013	—	—	—	—	—	—	10,886	7,540
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	19,879	19,844	—	6,708	—	1,166	5,024	—	787	1,801	1,727	785
17.1.	Other Liability—Occurrence	58,063	53,543	—	38,999	—	(3,583)	14,307	—	(2,872)	2,634	9,412	5,923
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)	103,504	108,055	—	24,338	64,243	37,468	(10,789)	52	(1,444)	1,635	16,496	11,293
19.2.	Other Private Passenger Auto Liability	497,678	516,998	—	117,543	653,365	342,007	321,067	26,275	26,585	50,608	79,313	1,399
19.3.	Commercial Auto No-Fault (Personal Injury Protection)	42,943	38,847	—	22,124	24,120	29,841	2,885	—	(24)	4,061	7,231	4,685
19.4.	Other Commercial Auto Liability	927,070	821,340	—	490,083	108,052	1,269,204	1,540,292	8,786	46,061	109,207	155,886	(8,224)
21.1.	Private Passenger Auto Physical Damage	383,236	397,309	—	92,189	201,397	187,279	(5,657)	—	74	236	61,086	41,813
21.2.	Commercial Auto Physical Damage	456,226	398,909	—	237,996	229,317	243,135	47,641	—	1,384	1,877	76,592	49,777
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)	7,324,757	7,006,692	—	3,535,954	3,733,659	4,305,289	3,450,883	97,468	358,498	727,492	1,196,531	269,745
Details of Write-Ins													
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 \$41,078
(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

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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 DAKOTA DURING THE YEAR 2022

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	331	299	—	238	—	5	14	2	1	—	55	9
2.1.	Allied Lines	1,033	923	—	741	—	16	43	1	(3)	1	172	27
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	5	—	—	—
5.1.	Commercial Multiple Peril (Non-Liability Portion)	3,131,718	2,900,856	—	1,556,111	1,276,173	10,932,393	10,086,040	50,053	51,028	24,245	523,337	80,563
5.2.	Commercial Multiple Peril (Liability Portion)	2,856,128	2,718,743	—	1,184,609	813,140	1,859,952	2,815,105	83,821	418,698	1,262,984	473,822	73,474
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	15	14	—	11	—	—	—	—	—	—	3	—
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	39,615	38,521	—	29,567	—	3,514	10,803	—	(5,388)	10,380	6,611	1,019
17.2.	Other Liability—Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3.	Excess Workers' Compensation												
18.1	Products Liability — Occurrence	2,681	2,681	—	779	—	331	757	—	(195)	727	447	69
18.2	Products Liability — Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.2.	Other Private Passenger Auto Liability	2,330,485	2,417,318	—	603,842	1,620,158	1,225,870	998,794	59,523	41,061	128,250	292,198	59,952
19.3.	Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4.	Other Commercial Auto Liability	2,916,539	2,671,770	—	1,318,839	2,267,799	3,811,291	3,890,447	48,610	148,209	353,358	485,735	75,028
21.1.	Private Passenger Auto Physical Damage	1,521,437	1,561,717	—	391,852	1,240,035	1,279,777	70,213	8,902	9,477	2,583	189,951	39,139
21.2.	Commercial Auto Physical Damage	1,138,363	1,045,809	—	506,440	1,611,348	1,629,414	86,520	1,514	4,708	4,459	189,787	29,284
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)	13,938,346	13,358,652	—	5,593,029	8,828,653	20,742,564	17,958,736	252,432	667,600	1,786,988	2,162,118	358,564
Details of Write-Ins													
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 \$216,669
(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

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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 PENNSYLVANIA DURING THE YEAR 2022

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	206,457	197,484	—	102,642	16,437	20,297	16,784	—	407	1,432	33,694	5,877
2.1.	Allied Lines	112,252	109,162	—	56,866	6,025	5,784	12,944	—	231	793	18,334	3,196
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	2,610,228	2,747,229	—	1,360,991	1,215,343	1,102,440	475,374	48,969	18,381	45,152	384,722	74,307
5.1.	Commercial Multiple Peril (Non-Liability Portion)	631,577	592,608	—	303,791	63,137	63,847	125,735	—	(460)	4,879	105,816	17,979
5.2.	Commercial Multiple Peril (Liability Portion)	782,313	747,299	—	348,890	165,253	321,981	753,848	37,042	46,048	345,104	131,026	22,270
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.	Inland Marine	65,312	65,264	—	32,342	112,930	108,359	1,117	—	298	383	10,367	1,859
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake	1,771	1,849	—	709	—	—	—	—	—	—	273	50
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	503,112	552,792	—	255,027	306,663	268,679	345,032	66,503	78,693	70,721	46,929	2,818
17.1.	Other Liability—Occurrence	111,799	89,679	—	61,949	—	10,010	24,871	—	6,358	16,614	18,630	3,183
17.2.	Other Liability—Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3.	Excess Workers' Compensation												
18.1	Products Liability — Occurrence	28,455	26,354	—	22,429	—	3,971	7,386	—	(291)	7,096	4,867	810
18.2	Products Liability — Claims-Made												
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection)	150,754	160,790	—	36,338	136,075	56,036	258,240	22	(3,282)	2,107	20,245	4,292
19.2.	Other Private Passenger Auto Liability	1,092,665	1,162,670	—	271,540	606,763	613,208	1,053,536	101,828	112,736	317,738	147,643	31,105
19.3.	Commercial Auto No-Fault (Personal Injury Protection)	103,570	103,853	—	43,831	5,000	7,464	(2,658)	—	(2,407)	11,976	17,329	2,948
19.4.	Other Commercial Auto Liability	1,324,920	1,313,355	—	569,607	638,836	857,313	1,108,781	73,519	105,547	182,334	221,590	37,717
21.1.	Private Passenger Auto Physical Damage	1,053,588	1,108,201	—	260,681	563,624	557,561	67,366	—	323	753	142,152	29,993
21.2.	Commercial Auto Physical Damage	620,832	608,501	—	269,371	387,252	432,900	83,023	—	1,741	2,512	103,845	17,674
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)	9,399,606	9,587,089	—	3,997,006	4,223,338	4,429,849	4,331,377	327,882	364,322	1,009,594	1,407,461	256,079
Details of Write-Ins													
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 \$51,182

(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: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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	-	-	-	-	189,616	109,616	85,000	22,822	22,822	-	-	-
19.3.	Commercial Auto No-Fault (Personal Injury Protection)	-	-	-	-	-	-	-	-	-	-	-	-
19.4.	Other Commercial Auto Liability	-	-	-	-	109,250	44,962	515,611	54,392	51,597	134,218	-	-
21.1.	Private Passenger Auto Physical Damage	-	-	-	-	(720)	(720)	-	-	-	-	-	-
21.2.	Commercial Auto Physical Damage	-	-	-	-	(652)	(634)	(51)	360	360	-	-	-
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)	-	-	-	-	297,494	153,225	600,560	77,573	74,778	134,218	-	-
Details of Write-Ins													
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

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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: 0267

NAIC Company Code: 40118



Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	1,148,631	1,117,455	—	603,208	595,455	610,756	81,853	9,774	12,027	8,040	186,619	30,382
2.1.	Allied Lines	803,155	787,818	—	420,718	131,649	489,332	458,730	13,733	15,260	5,636	130,641	21,244
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	2,772,179	2,932,492	—	1,497,313	1,295,845	1,178,050	325,021	10,653	17,348	47,979	434,284	73,327
5.1.	Commercial Multiple Peril (Non-Liability Portion)	1,309,941	1,302,682	—	658,020	393,465	386,892	127,809	1,585	2,687	10,594	222,750	34,649
5.2.	Commercial Multiple Peril (Liability Portion)	1,289,474	1,223,367	—	635,405	772,206	1,324,464	2,041,230	46,948	124,942	556,957	218,598	34,108
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.	Inland Marine	35,342	38,576	—	14,913	8,539	8,417	1,191	—	166	230	5,617	935
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake	10,079	10,721	—	5,058	—	—	—	—	—	—	1,607	267
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	284,485	262,642	—	104,650	170,321	236,996	452,049	2,627	7,372	29,861	27,778	7,525
17.1.	Other Liability—Occurrence	62,047	77,076	—	31,282	—	(2,993)	24,020	—	(1,164)	5,185	9,922	1,641
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	12,452,528	11,645,733	—	5,598,070	7,094,957	9,601,375	7,670,695	226,084	138,332	706,138	1,645,316	329,381
19.3.	Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4.	Other Commercial Auto Liability	1,432,253	1,322,583	—	686,925	1,354,524	1,638,212	1,284,562	19,481	50,903	176,859	239,778	37,884
21.1.	Private Passenger Auto Physical Damage	14,701,303	13,932,316	—	6,530,786	8,894,729	9,459,717	865,549	7,047	10,813	7,346	1,935,094	388,863
21.2.	Commercial Auto Physical Damage	506,449	475,758	—	242,784	746,169	689,873	23,949	1,960	3,411	2,133	85,032	13,396
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)	36,807,867	35,129,219	—	17,029,130	21,457,858	25,621,091	13,356,658	339,891	382,096	1,556,958	5,143,035	973,603
Details of Write-Ins													
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 \$370,497

(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

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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

NAIC Group Code: 0267

NAIC Company Code: 40118

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)												
Details of Write-Ins												
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: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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	16,521,227	14,784,883	-	9,035,493	12,193,784	17,003,164	6,173,202	125,697	181,758	165,842	2,147,724	462,542
5.1.	Commercial Multiple Peril (Non-Liability Portion)	261,406	255,819	-	137,591	52,770	52,736	13,062	-	229	2,125	43,821	7,319
5.2.	Commercial Multiple Peril (Liability Portion)	483,985	461,952	-	189,313	71,255	274,596	364,476	1,607	89,353	209,264	81,627	13,550
6.	Mortgage Guaranty	-	-	-	-	-	-	-	-	-	-	-	-
8.	Ocean Marine	-	-	-	-	-	-	-	-	-	-	-	-
9.	Inland Marine	116,738	117,796	-	56,731	33,217	34,307	3,492	-	559	689	16,377	3,268
10.	Financial Guaranty	-	-	-	-	-	-	-	-	-	-	-	-
11.1	Medical Professional Liability – Occurrence	-	-	-	-	-	-	-	-	-	-	-	-
11.2	Medical Professional Liability – Claims-Made	-	-	-	-	-	-	-	-	-	-	-	-
12.	Earthquake	37,551	36,700	-	19,191	-	-	-	-	-	-	5,151	1,051
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	198,674	230,492	-	100,237	362,957	224,594	129,019	2,267	(5,371)	28,357	207,264	5,562
17.1.	Other Liability—Occurrence	294,572	296,828	-	140,276	-	15,909	90,262	-	6,546	8,214	48,776	8,247
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	15,778,242	15,537,437	-	7,578,932	11,976,566	18,909,488	18,334,258	319,105	610,883	1,034,972	1,999,085	441,741
19.3.	Commercial Auto No-Fault (Personal Injury Protection)	-	-	-	-	-	-	-	-	-	-	-	-
19.4.	Other Commercial Auto Liability	167,231	155,681	-	79,580	154,782	227,708	468,478	26,455	31,604	20,300	27,903	4,682
21.1.	Private Passenger Auto Physical Damage	15,173,465	14,468,454	-	7,294,782	11,176,297	11,804,013	1,084,809	4,378	9,210	8,292	1,932,617	424,809
21.2.	Commercial Auto Physical Damage	52,577	50,542	-	24,208	52,494	35,031	540	1,787	1,947	212	8,768	1,472
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)	49,085,669	46,396,584	-	24,656,334	36,074,122	48,581,546	26,661,597	481,296	926,718	1,478,268	6,519,112	1,374,244
Details of Write-Ins													
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 \$487,789
(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

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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)	-	-	-	-	-	-	-	-	-	-	-	-
Details of Write-Ins													
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

NAIC Group Code: 0267

NAIC Company Code: 40118

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	2,960,157	2,963,159	—	1,557,111	1,818,990	1,744,610	216,044	28,619	34,066	21,457	478,662	(19,940)
2.1.	Allied Lines	1,812,988	1,831,381	—	951,915	234,474	630,189	639,733	20,842	24,048	13,224	293,142	61,211
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	31,974,421	31,253,191	—	17,263,423	20,306,635	23,164,611	8,788,897	354,515	341,211	363,679	4,481,067	916,267
5.1.	Commercial Multiple Peril (Non-Liability Portion)	9,598,898	8,932,397	—	4,851,378	4,100,974	14,346,553	11,177,939	77,455	83,102	74,933	1,613,315	382,182
5.2.	Commercial Multiple Peril (Liability Portion)	10,141,951	9,575,557	—	4,397,055	4,365,553	9,145,489	12,496,736	416,006	1,585,219	4,454,919	1,696,683	342,429
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.	Inland Marine	324,858	341,219	—	160,689	177,126	173,663	9,522	—	1,530	2,015	49,047	11,280
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2	Medical Professional Liability — Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12.	Earthquake	176,175	183,270	—	89,728	—	—	—	—	—	—	26,824	9,968
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	2,144,970	2,296,264	—	979,802	1,036,192	923,150	1,550,537	133,381	150,898	277,005	378,199	62,480
17.1.	Other Liability—Occurrence	736,624	736,134	—	401,890	10,000	147,942	327,999	107	2,009	69,032	121,155	26,710
17.2.	Other Liability—Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3.	Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1	Products Liability — Occurrence	40,493	38,036	—	23,977	—	6,400	10,589	—	1,113	10,174	6,876	1,074
18.2	Products Liability — Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection)	254,258	268,845	—	60,676	200,319	93,505	247,451	74	(4,726)	3,742	36,741	15,584
19.2.	Other Private Passenger Auto Liability	60,868,162	59,371,967	—	25,582,149	41,258,133	55,854,119	54,061,322	1,312,610	1,362,885	3,786,125	7,865,313	1,506,487
19.3.	Commercial Auto No-Fault (Personal Injury Protection)	146,513	142,700	—	65,956	29,120	37,304	227	—	(2,432)	16,037	24,560	7,634
19.4.	Other Commercial Auto Liability	11,517,610	10,865,057	—	5,223,497	7,302,742	12,254,549	14,848,591	329,598	672,594	1,579,733	1,922,132	373,323
21.1.	Private Passenger Auto Physical Damage	62,011,035	59,092,707	—	26,951,094	40,389,324	42,658,027	3,370,413	32,349	50,066	34,740	8,022,845	1,490,980
21.2.	Commercial Auto Physical Damage	4,230,361	3,990,215	—	1,914,475	3,959,868	4,028,504	409,712	7,472	19,629	17,199	706,812	181,359
22.	Aircraft (all perils)	—	—	—	—	—	—	—	—	—	—	—	—
23.	Fidelity	—	—	—	—	—	—	—	—	—	—	—	—
24.	Surety	—	—	—	—	—	—	—	—	—	—	—	—
26.	Burglary and Theft	277	238	—	39	—	10	10	—	—	—	46	4
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)	198,939,750	191,882,336	—	90,474,853	125,189,450	165,208,625	108,155,723	2,713,027	4,321,212	10,724,012	27,723,419	5,369,032
Details of Write-Ins													
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 \$2,051,311

(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

SCHEDULE F - PART 1

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 + 7							
Pools and Associations, Mandatory Pools, Associations or Other Similar Facilities														
AA-9991205	00000	GEORGIA FAIR PLAN	GA	7		4	4			9				
AA-9991206	00000	ILLINOIS FAIR PLAN	IL	3		1	1			1				
AA-9991222	00000	OHIO FAIR PLAN	OH	6		1	1			3				
AA-9991224	00000	PENNSYLVANIA FAIR PLAN	PA	4		1	1			2				
AA-9991443	00000	TENNESSEE WORKERS COMP	TN	—		6	6			—				
AA-9991141	00000	OHIO COMMERCIAL AUTO INS PROCEDURE	OH	12		48	48			22				
1099999 – Pools and Associations, Mandatory Pools, Associations or Other Similar Facilities				31		60	60			36				
1299999 – Total Pools and Associations				31		60	60			36				
9999999 – Totals				31		60	60			36				

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effectuated or (Canceled) During Current Year

1	2	3	4	5	6
ID Number	NAIC Company Code	Name of Company	Date of Contract	Original Premium	Reinsurance Premium
0199999 – Total Reinsurance Ceded by Portfolio					
0299999 – Total Reinsurance Assumed by Portfolio					

NONE

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable On									16	Reinsurance Payable		19	20
						7	8	9	10	11	12	13	14	15		17	18		
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Special Code	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commissions	Cols. 7 through 14 Totals	Amount in Dispute Included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable From Reinsurers Cols. 15- [17+18]	Funds Held by Company Under Reinsurance Treaties
Total Authorized, Affiliates, U.S. Intercompany Pooling																			
31-4192970	14060	GRANGE INS CO	OH		192,997			54,907		52,842		89,632		197,382				197,382	
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling					192,997			54,907		52,842		89,632		197,382				197,382	
0899999 – Total Authorized, Affiliates, Total Authorized - Affiliates					192,997			54,907		52,842		89,632		197,382				197,382	
Total Authorized, Other U.S. Unaffiliated Insurers																			
06-0384680	11452	HARTFORD STEAM BOIL INSPEC & INS CO	CT		2,602	–		225		–		709		934				934	
51-0434766	20370	AXIS REINS CO	NY		89	–		–		2		–		3				3	
47-0574325	32603	BERKLEY INS CO	DE		77	–		–		–		37		37				37	
42-0234980	21415	EMPLOYERS MUT CAS CO	IA		38	–		–		1		–		1				1	
13-2673100	22039	GENERAL REINS CORP	DE		267	–		17	–	–		128		145				145	
13-4924125	10227	MUNICH REINS AMER INC	DE		243	–		–		–		–		–				–	
52-1952955	10357	RENAISSANCE REINS US INC	MD		159	–		–		–		–		–				–	
75-1444207	30058	SCOR REINS CO	NY		12	–		–		–		–		–				–	
13-1675535	25364	SWISS REINS AMER CORP	NY		559	–		54		25		–		79				79	
42-0644327	13021	UNITED FIRE & CAS CO	IA		93	–		–		–		–		–				–	
22-2005057	26921	EVEREST REINS CO	DE		48	–		1		1		–		2				2	
74-2195939	42374	HOUSTON CAS CO	TX		3	–		–		–		–		–				–	
13-4924125	10227	MUNICH REINS AMER INC	DE		86	–		11		7		–		18				18	
13-3138390	42307	NAVIGATORS INS CO	NY		55	–		1		4		–		4				4	
23-1641984	10219	QBE REINS CORP	PA		48	–		–		–		–		–				–	
13-5616275	19453	TRANSATLANTIC REINS CO	NY		79	–		2		4		–		7				7	
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers					4,456	–		311	–	44		874		1,229				1,229	
Total Authorized, Pools, Mandatory Pools																			
AA-9991500	00000	ILLINOIS MINE SUBSIDENCE FUND	IL		4							2		2				2	
AA-9991501	00000	INDIANA MINE SUBSIDENCE FUND	IN		2							1		1				1	
AA-9991502	00000	KENTUCKY MINE SUBSIDENCE FUND	KY		2							1		1				1	
1099999 – Total Authorized, Pools, Mandatory Pools					8							4		4				4	
Total Authorized, Other Non-U.S. Insurers																			
AA-1120198	00000	Lloyd's Syndicate Number 1618	GBR		2	–		–		–		–		–				–	
AA-1128987	00000	Lloyd's Syndicate Number 2987	GBR		37	–		–		1		–		1				1	
AA-1126033	00000	Lloyd's Syndicate Number 33	GBR		18	–		4		2		–		6				6	
AA-1126435	00000	Lloyd's Syndicate Number 435	GBR		5	–		2		–		–		2				2	
AA-1126510	00000	Lloyd's Syndicate Number 510	GBR		–	–		1		–		–		1				1	
AA-1126623	00000	Lloyd's Syndicate Number 623	GBR		5	–		–		–		–		–				–	
AA-1127084	00000	Lloyd's Syndicate Number 1084	GBR		110	–		1		–		–		1				1	
AA-1120156	00000	Lloyd's Syndicate Number 1686	GBR		24	–		–		–		–		–				–	
AA-1120157	00000	Lloyd's Syndicate Number 1729	GBR		6	–		–		–		–		–				–	
AA-1120171	00000	Lloyd's Syndicate Number 1856	GBR		15	–		–		1		–		1				1	
AA-1128001	00000	Lloyd's Syndicate Number 2001	GBR		25	–		5		–		–		5				5	
AA-1128003	00000	Lloyd's Syndicate Number 2003	GBR		16	–		1		1		–		1				1	
AA-1128010	00000	Lloyd's Syndicate Number 2010	GBR		36	–		–		–		–		–				–	
AA-1128623	00000	Lloyd's Syndicate Number 2623	GBR		6	–		–		–		–		–				–	
AA-1128623	00000	Lloyd's Syndicate Number 2623	GBR		24	–		–		–		–		–				–	
AA-1128791	00000	Lloyd's Syndicate Number 2791	GBR		22	–		–		–		–		–				–	
AA-1126004	00000	Lloyd's Syndicate Number 4444	GBR		50	–		–		–		–		–				–	
AA-3194130	00000	Endurance Specialty Ins Ltd	BMU		61	–		–		3		–		3				3	
AA-1840000	00000	Mapfre Re Compania de Reaseguros SA	ESP		117	–		–		1		–		1				1	
AA-3190686	00000	Partner Reins Co Ltd	BMU		31	–		1		1		–		2				2	
AA-3190870	00000	Validus Reins Ltd	BMU		59	–		1		–		–		1				1	
AA-1340125	00000	Hannover Rueck SE	DEU		303	–		26		18		–		44				44	
1299999 – Total Authorized, Other Non-U.S. Insurers					971	–		42		27		–		69				69	
1499999 – Total Authorized Excluding Protected Cells					198,433	–		55,261	–	52,913		90,511		198,684				198,684	
Total Unauthorized, Other Non-U.S. Insurers																			

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable On									16	Reinsurance Payable		19	20
						7	8	9	10	11	12	13	14	15		17	18		
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Special Code	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commissions	Cols. 7 through 14 Totals	Amount in Dispute Included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable From Reinsurers Cols. 15- [17+18]	Funds Held by Company Under Reinsurance Treaties
AA-3191190	00000	Hamilton Re Ltd	BMU		19	-	-	1	-	-	-	-	-	1	-	-	-	1	-
AA-1460080	00000	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	CHE		44	-	-	-	-	-	-	-	-	-	-	-	-	-	-
AA-5420022	00000	Samsung Fire & Marine Ins	KOR		1	-	-	-	-	-	-	-	-	-	-	-	-	-	-
AA-1780116	00000	Chaucer Ins Co Designated Activity Co	IRL		17	-	-	-	-	-	-	-	-	-	-	-	-	-	-
AA-1340028	00000	Devk Ruckversicherungs und Beteiligungs	DEU		21	-	-	1	-	5	-	-	-	5	-	-	-	5	-
AA-3191437	00000	Group Ark Ins Ltd	BMU		1	-	-	-	-	3	-	-	-	3	-	-	-	3	-
AA-5420050	00000	KOREAN REINS CO	KOR		37	-	-	1	-	-	-	-	-	1	-	-	-	1	-
AA-1440060	00000	LANSFORSKRINGS BOLAG ENS AB	SWE		2	-	-	-	-	-	-	-	-	-	-	-	-	-	-
AA-1460019	00000	MS Amlin AG	CHE		30	-	-	3	-	-	-	-	-	4	-	-	-	4	-
AA-1440076	00000	SiriusPoint Intl Ins Corp (publ)	SWE		17	-	-	1	-	1	-	-	-	2	-	-	-	2	-
AA-5324100	00000	Taiping Reins Co Ltd	HKG		25	-	-	1	-	1	-	-	-	1	-	-	-	1	-
AA-3191432	00000	Vantage Risk Ltd	BMU		40	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2699999 - Total Unauthorized, Other Non-U.S. Insurers					255	-	-	7	-	10	-	-	-	17	-	-	-	17	-
2899999 - Total Unauthorized Excluding Protected Cells					255	-	-	7	-	10	-	-	-	17	-	-	-	17	-
Total Certified, Other Non-U.S. Insurers																			
CR-3194126	00000	Arch Reins Ltd	BMU		124	-	-	2	-	10	-	-	-	12	-	-	-	12	-
CR-3190770	00000	Chubb Tempest Reins Ltd	BMU		6	-	-	13	-	5	-	-	-	18	-	-	-	18	-
CR-3191289	00000	Fidelis Ins Bermuda Ltd	BMU		52	-	-	1	-	1	-	-	-	2	-	-	-	2	-
CR-1120175	00000	Fidelis Underwriting Ltd	GBR		79	-	-	-	-	2	-	-	-	2	-	-	-	2	-
CR-3190875	00000	Hiscox Ins Co (Bermuda) Ltd	BMU		22	-	-	7	-	2	-	-	-	9	-	-	-	9	-
CR-3191315	00000	XL Bermuda Ltd	BMU		-	-	-	1	-	-	-	-	-	1	-	-	-	1	-
4099999 - Total Certified, Other Non-U.S. Insurers					283	-	-	24	-	19	-	-	-	43	-	-	-	43	-
4299999 - Total Certified Excluding Protected Cells					283	-	-	24	-	19	-	-	-	43	-	-	-	43	-
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells					198,971	-	-	55,292	-	52,942	-	90,511	-	198,745	-	-	-	198,745	-
9999999 - Totals					198,971	-	-	55,292	-	52,942	-	90,511	-	198,745	-	-	-	198,745	-

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								
		21	22	23	24				28	29	30	31	32	33	34	35	36
ID Number From Col. 1	Name of Reinsurer From Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 – 27)	Stressed Recoverable (Col. 28*120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29 – 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 – 32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
Total Authorized, Affiliates, U.S. Intercompany Pooling																	
31-4192970	GRANGE INS CO						197,382	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling				XXX			197,382	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999 – Total Authorized, Affiliates, Total Authorized - Affiliates				XXX			197,382	–							XXX		
Total Authorized, Other U.S. Unaffiliated Insurers																	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO						934	–	934	1,121		1,121		1,121	1		18
51-0434766	AXIS REINS CO						3	–	3	3		3		3	2		–
47-0574325	BERKLEY INS CO						37	–	37	44		44		44	2		1
42-0234980	EMPLOYERS MUT CAS CO						1	–	1	1		1		1	3		–
13-2673100	GENERAL REINS CORP						145	–	145	174		174		174	1		3
13-4924125	MUNICH REINS AMER INC					–	–	–	–	–		–		–	2		–
52-1952955	RENAISSANCE REINS US INC					–	–	–	–	–		–		–	2		–
75-1444207	SCOR REINS CO					–	–	–	–	–		–		–	2		–
13-1675535	SWISS REINS AMER CORP						79	–	79	95		95		95	2		2
42-0644327	UNITED FIRE & CAS CO					–	–	–	–	–		–		–	3		–
22-2005057	EVEREST REINS CO						2	–	2	2		2		2	2		–
74-2195939	HOUSTON CAS CO					–	–	–	–	–		–		–	1		–
13-4924125	MUNICH REINS AMER INC						18	–	18	22		22		22	2		–
13-3138390	NAVIGATORS INS CO						4	–	4	5		5		5	2		–
23-1641984	QBE REINS CORP					–	–	–	–	–		–		–	3		–
13-5616275	TRANSATLANTIC REINS CO						7	–	7	8		8		8	1		–
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers				XXX		–	1,229	–	1,229	1,475		1,475		1,475	XXX		24
Total Authorized, Pools, Mandatory Pools																	
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND						2	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991501	INDIANA MINE SUBSIDENCE FUND						1	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND						1	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999 – Total Authorized, Pools, Mandatory Pools				XXX			4	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Total Authorized, Other Non-U.S. Insurers																	
AA-1120198	Lloyd's Syndicate Number 1618					–	–	–	–	–		–		–	3		–
AA-1128987	Lloyd's Syndicate Number 2987					1	–	–	1	2		2		2	3		–
AA-1126033	Lloyd's Syndicate Number 33					6	–	–	6	7		7		7	3		–
AA-1126435	Lloyd's Syndicate Number 435					2	–	–	2	2		2		2	3		–
AA-1126510	Lloyd's Syndicate Number 510					1	–	–	1	1		1		1	3		–
AA-1126623	Lloyd's Syndicate Number 623					–	–	–	–	–		–		–	3		–
AA-1127084	Lloyd's Syndicate Number 1084					1	–	–	1	1		1		1	3		–
AA-1120156	Lloyd's Syndicate Number 1686					–	–	–	–	–		–		–	3		–
AA-1120157	Lloyd's Syndicate Number 1729					–	–	–	–	–		–		–	3		–
AA-1120171	Lloyd's Syndicate Number 1856					1	–	–	1	1		1		1	3		–
AA-1128001	Lloyd's Syndicate Number 2001					5	–	–	5	7		7		7	3		–
AA-1128003	Lloyd's Syndicate Number 2003					1	–	–	1	2		2		2	3		–
AA-1128010	Lloyd's Syndicate Number 2010					–	–	–	–	–		–		–	3		–
AA-1128623	Lloyd's Syndicate Number 2623					–	–	–	–	–		–		–	3		–
AA-1128623	Lloyd's Syndicate Number 2623					–	–	–	–	–		–		–	3		–
AA-1128791	Lloyd's Syndicate Number 2791					–	–	–	–	–		–		–	3		–
AA-1126004	Lloyd's Syndicate Number 4444					–	–	–	–	–		–		–	3		–
AA-3194130	Endurance Specialty Ins Ltd					3	–	–	3	3		3		3	3		–
AA-1840000	Mapfre Re Compania de Reaseguros SA					1	–	–	1	1		1		1	3		–

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								
		21	22	23	24				28	29	30	31	32	33	34	35	36
ID Number From Col. 1	Name of Reinsurer From Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 – 27)	Stressed Recoverable (Col. 28*120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29 – 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 – 32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-3190686	Partner Reins Co Ltd						2	–	2	2		2		2	3		–
AA-3190870	Validus Reins Ltd						1	–	1	1		1		1	2		–
AA-1340125	Hannover Rueck SE						44	–	44	53		53		53	3		1
1299999 – Total Authorized, Other Non-U.S. Insurers				XXX		–	69	–	69	83		83		83	XXX		2
1499999 – Total Authorized Excluding Protected Cells				XXX		–	198,684	–	1,298	1,558		1,558		1,558	XXX		27
Total Unauthorized, Other Non-U.S. Insurers																	
AA-3191190	Hamilton Re Ltd		1	0001		1	–	–	1	2		2	1	–	4	–	–
	HELVETIA SCHWEIZERISCHE					–	–	–	–	–		–		–	3		–
AA-1460080	VERSICHERUNGS					–	–	–	–	–		–		–	4		–
AA-5420022	Samsung Fire & Marine Ins					–	–	–	–	–		–		–	3		–
AA-1780116	Chaucer Ins Co Designated Activity Co					–	–	–	–	–		–		–	3		–
AA-1340028	Devk Ruckversicherungs und Beteiligungs				5	5	–	–	5	6		6	5	1	2	–	–
AA-3191437	Group Ark Ins Ltd						3	3	–	–		–		–	3		–
AA-5420050	KOREAN REINS CO				2	1	–	–	1	1		1	1	–	3	–	–
AA-1440060	LANSFORSAKRINGS BOLAG ENS AB					–	–	–	–	–		–		–	3		–
AA-1460019	MS Amlin AG		4	0003		4	–	–	4	4		4	4	1	3	–	–
AA-1440076	SiriusPoint Intl Ins Corp (publ)				2	2	–	–	2	2		2	2	–	3	–	–
AA-5324100	Taiping Reins Co Ltd				1	1	–	–	1	2		2	1	–	3	–	–
AA-3191432	Vantage Risk Ltd					–	–	–	–	–		–		–	4		–
2699999 – Total Unauthorized, Other Non-U.S. Insurers			5	XXX	10	14	3	3	14	17		17	14	3	XXX	–	–
2899999 – Total Unauthorized Excluding Protected Cells			5	XXX	10	14	3	3	14	17		17	14	3	XXX	–	–
Total Certified, Other Non-U.S. Insurers																	
CR-3194126	Arch Reins Ltd				12	12	–	–	12	15		15	12	2	3	–	–
CR-3190770	Chubb Tempest Reins Ltd				18	18	–	–	18	21		21	18	4	1	–	–
CR-3191289	Fidelis Ins Bermuda Ltd		2	0003		2	–	–	2	2		2	2	–	4	–	–
CR-1120175	Fidelis Underwriting Ltd				2	2	–	–	2	3		3	2	–	4	–	–
CR-3190875	Hiscox Ins Co (Bermuda) Ltd				9	9	–	–	9	10		10	9	2	3	–	–
CR-3191315	XL Bermuda Ltd				1	1	–	–	1	1		1	1	–	3	–	–
4099999 – Total Certified, Other Non-U.S. Insurers			2	XXX	42	43	–	–	43	52		52	43	9	XXX	1	–
4299999 – Total Certified Excluding Protected Cells			2	XXX	42	43	–	–	43	52		52	43	9	XXX	1	–
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells			7	XXX	52	57	198,688	3	1,356	1,627		1,627	58	1,569	XXX	1	27
9999999 – Totals			7	XXX	52	57	198,688	3	1,356	1,627		1,627	58	1,569	XXX	1	27

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 Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43 – 44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[(Cols. 46 + 48)])	Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
Total Authorized, Affiliates, U.S. Intercompany Pooling																		
31-4192970	GRANGE INS CO											–				–	YES	–
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling												–		–	–	–	XXX	–
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total														–	–	–	XXX	
Total Authorized, Other U.S. Unaffiliated Insurers																		
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO											–				–	YES	–
51-0434766	AXIS REINS CO											–				–	YES	–
47-0574325	BERKLEY INS CO											–				–	YES	–
42-0234980	EMPLOYERS MUT CAS CO											–				–	YES	–
13-2673100	GENERAL REINS CORP											–				–	YES	–
13-4924125	MUNICH REINS AMER INC											–				–	YES	–
52-1952955	RENAISSANCE REINS US INC											–				–	YES	–
75-1444207	SCOR REINS CO											–				–	YES	–
13-1675535	SWISS REINS AMER CORP											–				–	YES	–
42-0644327	UNITED FIRE & CAS CO											–				–	YES	–
22-2005057	EVEREST REINS CO											–				–	YES	–
74-2195939	HOUSTON CAS CO											–				–	YES	–
13-4924125	MUNICH REINS AMER INC											–				–	YES	–
13-3138390	NAVIGATORS INS CO											–				–	YES	–
23-1641984	QBE REINS CORP											–				–	YES	–
13-5616275	TRANSATLANTIC REINS CO											–				–	YES	–
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers												–		–	–	–	XXX	–
Total Authorized, Pools, Mandatory Pools																		
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND											–				–	YES	–
AA-9991501	INDIANA MINE SUBSIDENCE FUND											–				–	YES	–
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND											–				–	YES	–
1099999 – Total Authorized, Pools, Mandatory Pools												–		–	–	–	XXX	–
Total Authorized, Other Non-U.S. Insurers																		
AA-1120198	Lloyd's Syndicate Number 1618											–				–	YES	–
AA-1128987	Lloyd's Syndicate Number 2987											–				–	YES	–
AA-1126033	Lloyd's Syndicate Number 33											–				–	YES	–
AA-1126435	Lloyd's Syndicate Number 435											–				–	YES	–
AA-1126510	Lloyd's Syndicate Number 510											–				–	YES	–
AA-1126623	Lloyd's Syndicate Number 623											–				–	YES	–
AA-1127084	Lloyd's Syndicate Number 1084											–				–	YES	–
AA-1120156	Lloyd's Syndicate Number 1686											–				–	YES	–
AA-1120157	Lloyd's Syndicate Number 1729											–				–	YES	–
AA-1120171	Lloyd's Syndicate Number 1856											–				–	YES	–
AA-1128001	Lloyd's Syndicate Number 2001											–				–	YES	–
AA-1128003	Lloyd's Syndicate Number 2003											–				–	YES	–
AA-1128010	Lloyd's Syndicate Number 2010											–				–	YES	–
AA-1128623	Lloyd's Syndicate Number 2623											–				–	YES	–
AA-1128623	Lloyd's Syndicate Number 2623											–				–	YES	–
AA-1128791	Lloyd's Syndicate Number 2791											–				–	YES	–
AA-1126004	Lloyd's Syndicate Number 4444											–				–	YES	–
AA-3194130	Endurance Specialty Ins Ltd											–				–	YES	–
AA-1840000	Mapfre Re Compania de Reaseguros SA											–				–	YES	–
AA-3190686	Partner Reins Co Ltd											–				–	YES	–
AA-3190870	Validus Reins Ltd											–				–	YES	–
AA-1340125	Hannover Rueck SE											–				–	YES	–

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 Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43 – 44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[(Cols. 46 + 48)])	Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
1299999 – Total Authorized, Other Non-U.S. Insurers												–		–	–	–	XXX	–
1499999 – Total Authorized Excluding Protected Cells												–		–	–	–	XXX	–
Total Unauthorized, Other Non-U.S. Insurers																		
AA-3191190	Hamilton Re Ltd											–				–	YES	–
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS											–				–	YES	–
AA-5420022	Samsung Fire & Marine Ins											–				–	YES	–
AA-1780116	Chaucer Ins Co Designated Activity Co											–				–	YES	–
AA-1340028	Devk Ruckversicherungs und Beteiligungs											–				–	YES	–
AA-3191437	Group Ark Ins Ltd											–				–	YES	–
AA-5420050	KOREAN REINS CO											–				–	YES	–
AA-1440060	LANSFORSAKRINGS BOLAG ENS AB											–				–	YES	–
AA-1460019	MS Amlin AG											–				–	YES	–
AA-1440076	SiriusPoint Intl Ins Corp (publ)											–				–	YES	–
AA-5324100	Taiping Reins Co Ltd											–				–	YES	–
AA-3191432	Vantage Risk Ltd											–				–	YES	–
2699999 – Total Unauthorized, Other Non-U.S. Insurers												–		–	–	–	XXX	–
2899999 – Total Unauthorized Excluding Protected Cells												–		–	–	–	XXX	–
Total Certified, Other Non-U.S. Insurers																		
CR-3194126	Arch Reins Ltd											–				–	YES	–
CR-3190770	Chubb Tempest Reins Ltd											–				–	YES	–
CR-3191289	Fidelis Ins Bermuda Ltd											–				–	YES	–
CR-1120175	Fidelis Underwriting Ltd											–				–	YES	–
CR-3190875	Hiscox Ins Co (Bermuda) Ltd											–				–	YES	–
CR-3191315	XL Bermuda Ltd											–				–	YES	–
4099999 – Total Certified, Other Non-U.S. Insurers												–		–	–	–	XXX	–
4299999 – Total Certified Excluding Protected Cells												–		–	–	–	XXX	–
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells												–		–	–	–	XXX	–
9999999 – Totals												–		–	–	–	XXX	–

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															
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0			69
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col.24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 +[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col.24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 -Col. 66)	20% of Amount in Col. 67	Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
ID Number From Col. 1	Name of Reinsurer From Col. 3																
Total Authorized, Affiliates, U.S. Intercompany Pooling																	
31-4192970	GRANGE INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling																	
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total																	
Total Authorized, Other U.S. Unaffiliated Insurers																	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
51-0434766	AXIS REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47-0574325	BERKLEY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
42-0234980	EMPLOYERS MUT CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-2673100	GENERAL REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-4924125	MUNICH REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
52-1952955	RENAISSANCE REINS US INC.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
75-1444207	SCOR REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-1675535	SWISS REINS AMER CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
42-0644327	UNITED FIRE & CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
22-2005057	EVEREST REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
74-2195939	HOUSTON CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-4924125	MUNICH REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-3138390	NAVIGATORS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
23-1641984	QBE REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-5616275	TRANSATLANTIC REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers																	
Total Authorized, Pools, Mandatory Pools																	
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991501	INDIANA MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999 – Total Authorized, Pools, Mandatory Pools																	
Total Authorized, Other Non-U.S. Insurers																	
AA-1120198	Lloyd's Syndicate Number 1618	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128987	Lloyd's Syndicate Number 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126033	Lloyd's Syndicate Number 33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126435	Lloyd's Syndicate Number 435	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126510	Lloyd's Syndicate Number 510	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126623	Lloyd's Syndicate Number 623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1127084	Lloyd's Syndicate Number 1084	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120156	Lloyd's Syndicate Number 1686	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120157	Lloyd's Syndicate Number 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120171	Lloyd's Syndicate Number 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128001	Lloyd's Syndicate Number 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128003	Lloyd's Syndicate Number 2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128010	Lloyd's Syndicate Number 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128623	Lloyd's Syndicate Number 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128623	Lloyd's Syndicate Number 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128791	Lloyd's Syndicate Number 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126004	Lloyd's Syndicate Number 4444	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194130	Endurance Specialty Ins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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															
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0			69
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ((Col. 20 + Col. 21 + Col. 22 + Col.24) / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 +[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col.24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 -Col. 66)	20% of Amount in Col. 67	Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
ID Number From Col. 1	Name of Reinsurer From Col. 3																
AA-1840000	Mapfre Re Compania de Reaseguros SA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190686	Partner Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190870	Validus Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1340125	Hannover Rueck SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1299999 – Total Authorized, Other Non-U.S. Insurers																	
1499999 – Total Authorized Excluding Protected Cells																	
Total Unauthorized, Other Non-U.S. Insurers																	
AA-3191190	Hamilton Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-5420022	Samsung Fire & Marine Ins.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1780116	Chaucer Ins Co Designated Activity Co	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1340028	Devk Ruckversicherungs und Beteiligungs	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191437	Group Ark Ins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-5420050	KOREAN REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1440060	LANSFORSAKRINGS BOLAG ENS AB	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1460019	MS Amlin AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1440076	SiriusPoint Intl Ins Corp (publ)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-5324100	Taiping Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191432	Vantage Risk Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2699999 – Total Unauthorized, Other Non-U.S. Insurers																	
2899999 – Total Unauthorized Excluding Protected Cells																	
Total Certified, Other Non-U.S. Insurers																	
CR-3194126	Arch Reins Ltd	3	07/01/2015	20.000		12	2	100.000	100.000		12	–	–	–	–	–	–
CR-3190770	Chubb Tempest Reins Ltd	2	11/19/2020	10.000		18	2	100.000	100.000		18	–	–	–	–	–	–
CR-3191289	Fidelis Ins Bermuda Ltd	4	12/07/2021	50.000		2	1	100.000	100.000		2	–	–	–	–	–	–
CR-1120175	Fidelis Underwriting Ltd	4	01/10/2022	50.000		2	1	100.000	100.000		2	–	–	–	–	–	–
CR-3190875	Hiscox Ins Co (Bermuda) Ltd	3	08/04/2021	20.000		9	2	100.000	100.000		9	–	–	–	–	–	–
CR-3191315	XL Bermuda Ltd	2	11/24/2020	10.000		1	–	100.000	100.000		1	–	–	–	–	–	–
4099999 – Total Certified, Other Non-U.S. Insurers																	
4299999 – Total Certified Excluding Protected Cells																	
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells																	
9999999 – Totals																	

SCHEDULE F - PART 3 (CONTINUED)
Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Total Provision for Reinsurance)

1	2	70	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73	74	75	76	77	78
ID Number From Col. 1	Name of Reinsurer From Col. 3	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0	Complete if Col. 52 = "No"; Otherwise Enter 0	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
					20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	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%])				
Total Authorized, Affiliates, U.S. Intercompany Pooling										
31-4192970	GRANGE INS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling		-	XXX	XXX	-	-	-	XXX	XXX	-
Total Authorized, Other U.S. Unaffiliated Insurers										
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
51-0434766	AXIS REINS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
47-0574325	BERKLEY INS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
42-0234980	EMPLOYERS MUT CAS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
13-2673100	GENERAL REINS CORP	-	XXX	XXX	-	-	-	XXX	XXX	-
13-4924125	MUNICH REINS AMER INC	-	XXX	XXX	-	-	-	XXX	XXX	-
52-1952955	RENAISSANCE REINS US INC	-	XXX	XXX	-	-	-	XXX	XXX	-
75-1444207	SCOR REINS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
13-1675535	SWISS REINS AMER CORP	-	XXX	XXX	-	-	-	XXX	XXX	-
42-0644327	UNITED FIRE & CAS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
22-2005057	EVEREST REINS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
74-2195939	HOUSTON CAS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
13-4924125	MUNICH REINS AMER INC	-	XXX	XXX	-	-	-	XXX	XXX	-
13-3138390	NAVIGATORS INS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
23-1641984	QBE REINS CORP	-	XXX	XXX	-	-	-	XXX	XXX	-
13-5616275	TRANSATLANTIC REINS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers		-	XXX	XXX	-	-	-	XXX	XXX	-
Total Authorized, Pools, Mandatory Pools										
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-9991501	INDIANA MINE SUBSIDENCE FUND	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND	-	XXX	XXX	-	-	-	XXX	XXX	-
1099999 – Total Authorized, Pools, Mandatory Pools		-	XXX	XXX	-	-	-	XXX	XXX	-
Total Authorized, Other Non-U.S. Insurers										
AA-1120198	Lloyd's Syndicate Number 1618	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1128987	Lloyd's Syndicate Number 2987	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1126033	Lloyd's Syndicate Number 33	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1126435	Lloyd's Syndicate Number 435	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1126510	Lloyd's Syndicate Number 510	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1126623	Lloyd's Syndicate Number 623	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1127084	Lloyd's Syndicate Number 1084	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1120156	Lloyd's Syndicate Number 1686	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1120157	Lloyd's Syndicate Number 1729	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1120171	Lloyd's Syndicate Number 1856	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1128001	Lloyd's Syndicate Number 2001	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1128003	Lloyd's Syndicate Number 2003	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1128010	Lloyd's Syndicate Number 2010	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1128623	Lloyd's Syndicate Number 2623	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1128623	Lloyd's Syndicate Number 2623	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1128791	Lloyd's Syndicate Number 2791	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1126004	Lloyd's Syndicate Number 4444	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-3194130	Endurance Specialty Ins Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1840000	Mapfre Re Compania de Reaseguros SA	-	XXX	XXX	-	-	-	XXX	XXX	-

SCHEDULE F - PART 3 (CONTINUED)
Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Total Provision for Reinsurance)

1	2	70	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73	74	75	76	77	78
ID Number From Col. 1	Name of Reinsurer From Col. 3	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	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%])	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%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
AA-3190686	Partner Reins Co Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-3190870	Validus Reins Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1340125	Hannover Rueck SE	-	XXX	XXX	-	-	-	XXX	XXX	-
1299999 – Total Authorized, Other Non-U.S. Insurers		-	XXX	XXX	-	-	-	XXX	XXX	-
1499999 – Total Authorized Excluding Protected Cells		-	XXX	XXX	-	-	-	XXX	XXX	-
Total Unauthorized, Other Non-U.S. Insurers										
AA-3191190	Hamilton Re Ltd	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-5420022	Samsung Fire & Marine Ins	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1780116	Chaucer Ins Co Designated Activity Co	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1340028	Devk Ruckversicherungs und Beteiligungs	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-3191437	Group Ark Ins Ltd	-	3	-	XXX	XXX	XXX	3	XXX	3
AA-5420050	KOREAN REINS CO	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1440060	LANSFORSAKRINGS BOLAG ENS AB	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1460019	MS Amlin AG	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1440076	SiriusPoint Intl Ins Corp (publ)	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-5324100	Taiping Reins Co Ltd	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-3191432	Vantage Risk Ltd	-	-	-	XXX	XXX	XXX	-	XXX	-
2699999 – Total Unauthorized, Other Non-U.S. Insurers		-	3	-	XXX	XXX	XXX	3	XXX	3
2899999 – Total Unauthorized Excluding Protected Cells		-	3	-	XXX	XXX	XXX	3	XXX	3
Total Certified, Other Non-U.S. Insurers										
CR-3194126	Arch Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-
CR-3190770	Chubb Tempest Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-
CR-3191289	Fidelis Ins Bermuda Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-
CR-1120175	Fidelis Underwriting Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-
CR-3190875	Hiscox Ins Co (Bermuda) Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-
CR-3191315	XL Bermuda Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-
4099999 – Total Certified, Other Non-U.S. Insurers									-	-
4299999 – Total Certified Excluding Protected Cells									-	-
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		-	3	-	-	-	-	3	-	3
9999999 – Totals		-	3	-	-	-	-	3	-	3

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
0001.....	1.....	073000228.....	Wells Fargo.....	1.....
0003.....	1.....	026002574.....	Barclays.....	4.....
0004.....	1.....	021000089.....	Citibank London.....	2.....
9999999 – Totals.....				7.....

SCHEDULE F - PART 5
Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	1	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1.	GRANGE INS CO.....		192,997
2.	HARTFORD STEAM BOIL INSPEC & INS CO.....		2,602
3.	SWISS REINS AMER CORP.....		559
4.	Hannover Rueck SE.....		303
5.	GENERAL REINS CORP.....		267

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

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
6.	GRANGE INS CO.....	197,382	192,997	YES
7.	HARTFORD STEAM BOIL INSPEC & INS CO.....	934	2,602	NO
8.	GENERAL REINS CORP.....	145	267	NO
9.	SWISS REINS AMER CORP.....	79	559	NO
10.....	Hannover Rueck SE.....	44	303	NO

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1	2	3
	As Reported (Net of Ceded)	Restatement Adjustments	Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	82,072,442		82,072,442
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	725,820		725,820
6. Net amount recoverable from reinsurers			
7. Protected cell assets (Line 27)		217,482,388	217,482,388
8. Totals (Line 28)	82,798,262	217,482,388	300,280,650
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	–	126,975,745	126,975,745
10. Taxes, expenses, and other obligations (Lines 4 through 8)	222,017		222,017
11. Unearned premiums (Line 9)		90,506,643	90,506,643
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	1,376,135		1,376,135
19. Total liabilities excluding protected cell business (Line 26)	1,598,152	217,482,388	219,080,540
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	81,200,110	XXX	81,200,110
22. Totals (Line 38)	82,798,262	217,482,388	300,280,650

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

(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

(35) Schedule P - Part 1A - Columns 1 to 12
NONE

(35) Schedule P - Part 1A - Columns 13 to 25
NONE

(35) Schedule P - Part 1A - Columns 26 to 36
NONE

(36) Schedule P - Part 1B - Columns 1 to 12
NONE

(36) Schedule P - Part 1B - Columns 13 to 25
NONE

(36) Schedule P - Part 1B - Columns 26 to 36
NONE

(37) Schedule P - Part 1C - Columns 1 to 12
NONE

(37) Schedule P - Part 1C - Columns 13 to 25
NONE

(37) Schedule P - Part 1C - Columns 26 to 36
NONE

(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

(43) Schedule P - Part 1H - Section 1 - Columns 1 to 12
NONE

(43) Schedule P - Part 1H - Section 1 - Columns 13 to 25
NONE

(43) Schedule P - Part 1H - Section 1 - Columns 26 to 36
NONE

(44) Schedule P - Part 1H - Section 2 - Columns 1 to 12
NONE

(44) Schedule P - Part 1H - Section 2 - Columns 13 to 25
NONE

(44) Schedule P - Part 1H - Section 2 - Columns 26 to 36
NONE

(45) Schedule P - Part 1I - Columns 1 to 12
NONE

(45) Schedule P - Part 1I - Columns 13 to 25
NONE

(45) Schedule P - Part 1I - Columns 26 to 36
NONE

(46) Schedule P - Part 1J - Columns 1 to 12
NONE

(46) Schedule P - Part 1J - Columns 13 to 25
NONE

(46) Schedule P - Part 1J - Columns 26 to 36
NONE

(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 1O - Columns 1 to 12

NONE

(51) Schedule P - Part 1O - Columns 13 to 25

NONE

(51) Schedule P - Part 1O - 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

(57) Schedule P - Part 2A - Homeowners/Farmowners

NONE

(57) Schedule P - Part 2B - Private Passenger Auto Liability/Medical

NONE

(57) Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical

NONE

(57) Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation)

NONE

(57) Schedule P - Part 2E - Commercial Multiple Peril

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

(62) Schedule P - Part 3A - Homeowners/Farmowners
NONE

(62) Schedule P - Part 3B - Private Passenger Auto Liability/Medical
NONE

(62) Schedule P - Part 3C - Commercial Auto/Truck Liability/Medical
NONE

(62) Schedule P - Part 3D - Workers' Compensation (Excluding Excess Workers' Compensation)
NONE

(62) Schedule P - Part 3E - Commercial Multiple Peril
NONE

(63) Schedule P - Part 3F - Section 1 - Medical Professional Liability - Occurrence
NONE

(63) Schedule P - Part 3F - Section 2 - Medical Professional Liability - Claims-Made
NONE

(63) Schedule P - Part 3G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)
NONE

(63) Schedule P - Part 3H - Section 1 - Other Liability - Occurrence
NONE

(63) Schedule P - Part 3H - Section 2 - Other Liability - Claims-Made
NONE

(64) Schedule P - Part 3I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)
NONE

(64) Schedule P - Part 3J - Auto Physical Damage
NONE

(64) Schedule P - Part 3K - Fidelity/Surety
NONE

(64) Schedule P - Part 3L - Other (Including Credit, Accident and Health)
NONE

(64) Schedule P - Part 3M - International
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

(67) Schedule P - Part 4A - Homeowners/Farmowners
NONE

(67) Schedule P - Part 4B - Private Passenger Auto Liability/Medical
NONE

(67) Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical
NONE

(67) Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)
NONE

(67) Schedule P - Part 4E - Commercial Multiple Peril
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

(73) Schedule P - Part 5B - Section 1

NONE

(73) Schedule P - Part 5B - Section 2

NONE

(73) Schedule P - Part 5B - Section 3

NONE

(74) Schedule P - Part 5C - Section 1

NONE

(74) Schedule P - Part 5C - Section 2

NONE

(74) Schedule P - Part 5C - Section 3

NONE

(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

(84) Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1
NONE

(84) Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2
NONE

(84) Schedule P - Part 6D - Workers' Compensation (Excluding Excess Workers' Compensation) - Section 1
NONE

(84) Schedule P - Part 6D - Workers' Compensation (Excluding Excess Workers' Compensation) - Section 2
NONE

(85) Schedule P - Part 6E - Commercial Multiple Peril - Section 1
NONE

(85) Schedule P - Part 6E - Commercial Multiple Peril - Section 2
NONE

(85) Schedule P - Part 6H - Other Liability - Occurrence - Section 1A
NONE

(85) Schedule P - Part 6H - Other Liability - Occurrence - Section 2A
NONE

(86) Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B
NONE

(86) Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B
NONE

(86) Schedule P - Part 6M - International - Section 1
NONE

(86) Schedule P - Part 6M - International - Section 2
NONE

(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 Section 1: Occurrence	2 Section 2: Claims-Made
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).....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.....
As of 1/1/2017, the intercompany pooling agreement was amended. The intercompany pooling agreement now cedes underwriting results back only to the two parent companies, Grange Insurance Company and Integrity Insurance Company, with their respective stock subsidiary companies receiving 0% from the pool. Grange Insurance Company remains the lead company.

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

			Direct Business Only					
			1	2	3	4	5	6
States, Etc.			Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	Totals
1.	Alabama	AL	NONE					
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

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)	*
0267	GRANGE INSURANCE POOL	14060	31-4192970				GRANGE INSURANCE COMPANY	OH	UDP	GRANGE HOLDINGS, INC.	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	10322	31-1432675				GRANGE INDEMNITY INSURANCE COMPANY	OH	IA	GRANGE INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	40118	41-1405571				TRUSTGARD INSURANCE COMPANY	OH	RE	GRANGE INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	11136	31-1769414				GRANGE INSURANCE COMPANY OF MICHIGAN	OH	IA	GRANGE INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	11982	42-1610213				GRANGE PROPERTY & CASUALTY INSURANCE COMPANY	OH	IA	GRANGE INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	14303	39-0367560				INTEGRITY INSURANCE COMPANY	OH	IA	GRANGE HOLDINGS, INC.	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	10288	81-3455935				INTEGRITY SELECT INSURANCE COMPANY	OH	IA	INTEGRITY INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	12986	41-2236417				INTEGRITY PROPERTY & CASUALTY INSURANCE COMPANY	OH	IA	INTEGRITY INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
			31-1145043				GRANGEAMERICA	OH	NIA	GRANGE HOLDINGS, INC.	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
			31-1193707				NORTHVIEW INSURANCE AGENCY	OH	NIA	GRANGE HOLDINGS, INC.	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
			83-2982350				GRANGE MUTUAL HOLDING COMPANY	OH	UIP	GRANGE MUTUAL HOLDING COMPANY	Board of Directors		GRANGE MUTUAL HOLDING COMPANY	NO	
			83-2949300				GRANGE HOLDINGS, INC.	OH	UIP	GRANGE MUTUAL HOLDING COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
Asterisk	Explanation														

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
14060.....	31-4192970.....	GRANGE INSURANCE COMPANY.....	(78,000,000).....				59,690,396.....		*		(18,309,604).....	(933,684,483).....
10322.....	31-1432675.....	GRANGE INDEMNITY INSURANCE COMPANY.....							*			320,088,496.....
40118.....	41-1405571.....	TRUSTGARD INSURANCE COMPANY.....							*			197,382,070.....
11136.....	31-1769414.....	GRANGE INSURANCE COMPANY OF MICHIGAN.....							*			31,754,876.....
11982.....	42-1610213.....	GRANGE PROPERTY & CASUALTY INSURANCE CO.....							*			128,470,159.....
14303.....	39-0367560.....	INTEGRITY INSURANCE COMPANY.....					(56,194,311).....		*		(56,194,311).....	142,741,395.....
12986.....	41-2236417.....	INTEGRITY PROPERTY & CASUALTY INS. CO.....							*			79,797,088.....
10288.....	81-3455935.....	INTEGRITY SELECT INSURANCE COMPANY.....							*			33,450,399.....
00000.....	31-1145043.....	GRANGEAMERICA.....					249,612.....				249,612.....	
00000.....	31-1193707.....	NORTHVIEW INSURANCE AGENCY.....					109,408.....				109,408.....	
00000.....	83-2982350.....	GRANGE MUTUAL HOLDING COMPANY.....										
00000.....	83-2949300.....	GRANGE HOLDINGS, INC.....	78,000,000.....				(3,855,105).....				74,144,895.....	
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	2	3	4	5	6	7	8
Insurers in Holding Company	Owners with Greater than 10% Ownership	Ownership Percentage Column 2 of Column 1	Granted Disclaimer of Control / Affiliation of Column 2 Over Column 1 (Yes/No)	Ultimate Controlling Party	U.S. Insurance Groups or Entities Controlled by Column 5	Ownership Percentage (Column 5 of Column 6)	Granted Disclaimer of Control / Affiliation of Column 5 Over Column 6 (Yes/No)
GRANGE INSURANCE COMPANY	GRANGE HOLDINGS, INC.....	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL.....	100.000 %	NO
GRANGE INDEMNITY INSURANCE COMPANY	GRANGE INSURANCE COMPANY	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL.....	100.000 %	NO
TRUSTGARD INSURANCE COMPANY	GRANGE INSURANCE COMPANY	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL.....	100.000 %	NO
GRANGE INSURANCE COMPANY OF MICHIGAN	GRANGE INSURANCE COMPANY	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL.....	100.000 %	NO
GRANGE PROPERTY & CASUALTY INSURANCE COMPANY	GRANGE INSURANCE COMPANY	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL.....	100.000 %	NO
INTEGRITY INSURANCE COMPANY	GRANGE HOLDINGS, INC.....	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL.....	100.000 %	NO
INTEGRITY SELECT INSURANCE COMPANY	INTEGRITY INSURANCE COMPANY	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL.....	100.000 %	NO
INTEGRITY PROPERTY & CASUALTY INSURANCE COMPANY	INTEGRITY INSURANCE COMPANY	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL.....	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
June Filing		
9.	Will an audited financial report be filed by June 1?.....	YES
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?.....	YES

SUPPLEMENTAL FILINGS

The following supplemental reports are required to be filed as part of your statement filing **if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a “NONE” report and a bar code will be printed below.** If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

		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?.....	YES
21.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?.....	YES
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?.....	YES
34.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit – Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?.....	NO
35.	Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?.....	NO
36.	Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?.....	NO
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.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.	No business written.	 4 0 1 1 8 2 0 2 2 4 2 0 0 0 0 0 0
12.	No business written.	 4 0 1 1 8 2 0 2 2 2 4 0 0 0 0 0 0
13.	No business written.	 4 0 1 1 8 2 0 2 2 3 6 0 0 0 0 0 0
14.	No business written.	 4 0 1 1 8 2 0 2 2 4 5 5 0 0 0 0 0
15.	No business written.	 4 0 1 1 8 2 0 2 2 4 9 0 0 0 0 0 0
16.	No business written.	 4 0 1 1 8 2 0 2 2 3 8 5 0 0 0 0 0
17.	No business written.	 4 0 1 1 8 2 0 2 2 4 0 1 0 0 0 0 0
18.	No business written.	 4 0 1 1 8 2 0 2 2 3 6 5 0 0 0 0 0
19.		
20.		
21.		
22.	No business written.	 4 0 1 1 8 2 0 2 2 5 0 0 0 0 0 0 0
23.	No business written.	 4 0 1 1 8 2 0 2 2 5 0 5 0 0 0 0 0
24.	No business written.	 4 0 1 1 8 2 0 2 2 2 2 4 0 0 0 0 0
25.	No business written.	 4 0 1 1 8 2 0 2 2 2 2 5 0 0 0 0 0
26.	No business written.	 4 0 1 1 8 2 0 2 2 2 2 6 0 0 0 0 0
27.	No business written.	 4 0 1 1 8 2 0 2 2 5 5 5 0 0 0 0 0
28.	No business written.	 4 0 1 1 8 2 0 2 2 2 3 0 0 0 0 0 0
29.	No business written.	 4 0 1 1 8 2 0 2 2 3 0 6 0 0 0 0 0
30.	No business written.	 4 0 1 1 8 2 0 2 2 2 1 0 0 0 0 0 0
31.	No business written.	 4 0 1 1 8 2 0 2 2 2 1 6 0 0 0 0 0
32.	No business written.	 4 0 1 1 8 2 0 2 2 2 1 7 0 0 0 0 0
33.		
34.	No business written.	 4 0 1 1 8 2 0 2 2 2 9 0 0 0 0 0 0
35.	No business written.	 4 0 1 1 8 2 0 2 2 5 6 0 0 0 0 0 0
36.	No business written.	 4 0 1 1 8 2 0 2 2 5 6 5 0 0 0 0 0
37.		

OVERFLOW PAGE FOR WRITE-INS

UNDERWRITING AND INVESTMENT EXHIBIT – PART 3 – EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
2404. Deferred Compensation.....			982	982
2405. Investment Banking Fees.....			85,504	85,504
2497. Summary of remaining write-ins for Line 24 from overflow page.....			86,486	86,486

OVERFLOW PAGE FOR WRITE-INS