



ANNUAL STATEMENT  
FOR THE YEAR ENDED DECEMBER 31, 2023  
OF THE CONDITION AND AFFAIRS OF THE  
GRANGE INDEMNITY INSURANCE COMPANY

NAIC Group Code.....0267..... 0267..... NAIC Company Code..... 10322.... Employer's ID Number..... 31-1432675.....  
(Current) (Prior)  
Organized under the Laws of..... OH..... State of Domicile or Port of Entry..... OH.....  
Country of Domicile..... US.....  
Incorporated/Organized..... 03/10/1995..... Commenced Business..... 08/03/1995.....  
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.....  
Columbus, OH, US 43206-1066..... 614-445-2900.....  
(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.....  
..... BETH WILLIAMS MURPHY#, EVP & SECRETARY.....

DIRECTORS OR TRUSTEES

..... JOHN (NMN) AMMENDOLA.....  
..... JAMES MARTIN BENSON.....  
..... TERESA JEAN BROWN.....  
..... ROBERT ENLOW HOYT.....  
..... THOMAS SIMRALL STEWART.....  
..... KATHIE JANE ANDRADE.....  
..... MARK LEWIS BOXER.....  
..... MICHAEL DESMOND FRAIZER.....  
..... MARY MARNETTE PERRY.....  
..... 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 x x   
JOHN (NMN) AMMENDOLA BETH WILLIAMS MURPHY TERESA JEAN BROWN  
PRESIDENT & CEO EVP & SECRETARY EVP & CFO

Subscribed and sworn to before me  
this 20 day of  
February, 2024  
a. Is this an original filing? Yes  
b. If no:  
1. State the amendment number:  
2. Date filed:  
3. Number of pages attached:

x



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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	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
		Direct Premiums Written	Direct Premiums Earned										
1.	Fire	18,437	16,655	—	9,162	—	135	313	—	7	12	2,956	907
2.1.	Allied Lines	29,112	27,519	—	11,803	—	274	515	—	13	20	4,667	1,433
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)	909,213	893,480	—	407,204	1,812,225	1,912,598	121,884	27,893	28,129	6,646	145,729	44,750
5.2.	Commercial Multiple Peril (Liability Portion)	1,522,316	1,367,628	—	663,173	1,280,815	1,122,397	1,334,877	108,387	110,690	666,472	243,813	74,926
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	87,001	82,162	—	51,696	—	56,047	109,847	4,236	(2,189)	21,247	13,947	4,282
17.2.	Other Liability—Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3.	Excess Workers' Compensation												
18.1.	Products Liability — Occurrence	110	196	—	53	—	(107)	81	—	(127)	53	18	5
18.2.	Products Liability — Claims-Made												
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.2.	Other Private Passenger Auto Liability	174,753	187,820	—	58,228	436,278	314,359	99,037	19,018	19,644	14,159	23,341	8,601
19.3.	Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4.	Other Commercial Auto Liability	7,526,436	7,512,563	—	3,356,891	5,600,813	7,683,063	11,008,049	371,035	452,647	1,140,828	984,918	370,441
21.1.	Private Passenger Auto Physical Damage	111,451	120,189	—	39,750	73,212	59,017	(8,314)	70	87	233	15,567	5,485
21.2.	Commercial Auto Physical Damage	2,395,225	2,364,298	—	1,100,189	928,470	903,309	187,644	8,570	14,720	11,646	319,640	117,890
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)	12,774,054	12,572,510	—	5,698,149	10,131,813	12,051,092	12,853,934	539,208	623,622	1,861,317	1,754,595	628,721
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 \$29,260

(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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire .....	7,461	7,226	-	4,744	-	1	141	-	2	5	1,196	90
2.1.	Allied Lines .....	7,418	6,805	-	4,646	-	(52)	132	-	-	5	1,189	89
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 .....	7,014,704	6,049,168	-	3,645,056	7,819,588	8,229,213	851,043	43,056	52,940	44,762	899,640	84,333
5.1.	Commercial Multiple Peril (Non-Liability Portion) .....	361,192	298,526	-	220,096	760,816	742,407	(6,749)	-	402	2,161	59,149	4,342
5.2.	Commercial Multiple Peril (Liability Portion) .....	219,566	183,924	-	118,931	4,354	57,362	156,142	-	18,929	82,388	34,845	2,640
6.	Mortgage Guaranty .....												
8.	Ocean Marine .....												
9.	Inland Marine .....	81,132	70,234	-	41,340	3,808	4,491	2,278	-	111	402	10,947	975
10.	Financial Guaranty .....												
11.1.	Medical Professional Liability — Occurrence .....	-	-	-	-	-	-	-	-	-	-	-	-
11.2.	Medical Professional Liability — Claims-Made .....												
12.	Earthquake .....	6,564	6,387	-	3,101	-	-	-	-	-	-	905	79
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 .....	149,613	129,881	-	73,265	-	112,178	139,071	-	551	5,302	24,444	1,799
17.2.	Other Liability—Claims-Made .....	-	-	-	-	-	-	-	-	-	-	-	-
17.3.	Excess Workers' Compensation .....												
18.1.	Products Liability — Occurrence .....	947	874	-	414	-	210	335	-	99	220	152	11
18.2.	Products Liability — Claims-Made .....												
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection) .....	-	-	-	-	-	-	-	-	-	-	-	-
19.2.	Other Private Passenger Auto Liability .....	98,807	100,068	-	31,010	91,048	138,810	153,722	440	749	7,005	12,897	1,188
19.3.	Commercial Auto No-Fault (Personal Injury Protection) .....	-	-	-	-	-	-	-	-	-	-	-	-
19.4.	Other Commercial Auto Liability .....	2,898,798	2,642,846	-	1,789,235	486,321	1,788,113	3,532,557	65,302	74,565	399,221	370,013	34,850
21.1.	Private Passenger Auto Physical Damage .....	66,160	68,460	-	16,598	92,364	70,735	(16,231)	-	15	147	8,178	795
21.2.	Commercial Auto Physical Damage .....	1,211,695	1,088,946	-	745,176	259,344	338,290	121,890	-	3,562	5,211	157,754	14,567
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) .....	12,124,056	10,653,346	-	6,693,610	9,517,642	11,481,757	4,934,330	108,797	151,926	546,829	1,581,309	145,759
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 \$49,383

(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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	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
		Direct Premiums Written	Direct Premiums Earned										
1.	Fire .....	2,286	1,510	-	1,271	-	(11)	27	-	-	1	366	48
2.1.	Allied Lines .....	5,057	3,178	-	2,988	-	(17)	57	-	-	2	811	107
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) .....	394,948	390,685	-	106,815	41,797	45,009	17,301	-	314	2,869	63,315	8,370
5.2.	Commercial Multiple Peril (Liability Portion) .....	370,319	338,725	-	78,348	77,187	365,224	463,780	38,578	89,179	164,499	59,307	7,848
6.	Mortgage Guaranty .....								-	-			
8.	Ocean Marine .....								-	-			
9.	Inland Marine .....	768	768	-	101	-	(20)	15	-	-	1	123	16
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 .....	8,454	5,375	-	3,842	-	1,490	1,860	-	867	1,222	1,355	179
17.2.	Other Liability—Claims-Made .....	-	-	-	-	-	-	-	-	-	-	-	-
17.3.	Excess Workers' Compensation .....								-	-			
18.1.	Products Liability — Occurrence .....	243	267	-	182	-	42	105	-	8	69	39	5
18.2.	Products Liability — Claims-Made .....								-	-			
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection) .....	-	-	-	-	-	-	-	-	-	-	-	-
19.2.	Other Private Passenger Auto Liability .....	754,558	839,954	-	221,975	800,939	416,050	482,219	48,182	48,518	57,302	107,075	15,990
19.3.	Commercial Auto No-Fault (Personal Injury Protection) .....	-	-	-	-	-	-	-	-	-	-	-	-
19.4.	Other Commercial Auto Liability .....	944,891	816,744	-	547,564	183,970	1,337,123	1,926,912	20,986	(391)	124,282	105,038	20,024
21.1.	Private Passenger Auto Physical Damage .....	583,247	635,057	-	164,858	266,153	243,780	13,397	116	151	1,008	83,656	12,360
21.2.	Commercial Auto Physical Damage .....	375,897	321,449	-	192,561	99,445	164,294	58,259	7,160	7,937	1,452	42,237	7,966
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) .....	3,440,668	3,353,711	-	1,320,504	1,469,490	2,572,965	2,963,933	115,022	146,582	352,706	463,321	72,914
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 \$43,053

(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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	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
		Direct Premiums Written	Direct Premiums Earned										
1.	Fire .....	27,760	17,233	-	18,537	-	(75)	310	-	2	12	4,450	(25,119)
2.1.	Allied Lines .....	52,447	25,034	-	34,791	51,573	51,626	422	-	6	16	8,385	4,979
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) .....	291,349	291,017	-	108,165	35,485	45,183	20,862	-	274	2,135	49,132	21,917
5.2.	Commercial Multiple Peril (Liability Portion) .....	331,299	349,283	-	68,675	15,000	109,673	287,530	26,788	104,639	165,485	56,620	6,843
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 .....	37,091	26,829	-	18,766	-	7,406	9,977	-	4,084	6,553	5,946	979
17.2.	Other Liability—Claims-Made .....	-	-	-	-	-	-	-	-	-	-	-	-
17.3.	Excess Workers' Compensation .....								-	-			
18.1.	Products Liability — Occurrence .....	90	47	-	43	-	1	18	-	(5)	12	14	9
18.2.	Products Liability — Claims-Made .....								-	-			
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection) .....	19,256	19,133	-	8,381	20,000	11,073	(1,459)	-	(21)	21	2,794	1,828
19.2.	Other Private Passenger Auto Liability .....	87,779	90,639	-	36,477	15,326	81,348	86,677	-	317	7,651	12,804	(4,242)
19.3.	Commercial Auto No-Fault (Personal Injury Protection) .....	76,535	69,480	-	39,085	24,674	47,232	44,523	1,050	(5,755)	5,102	8,460	7,266
19.4.	Other Commercial Auto Liability .....	1,393,593	1,198,100	-	719,723	1,042,907	310,457	1,343,623	40,750	30,695	181,609	170,389	(14,484)
21.1.	Private Passenger Auto Physical Damage .....	64,902	66,240	-	28,678	43,637	34,920	(5,197)	-	(1)	115	9,761	6,162
21.2.	Commercial Auto Physical Damage .....	592,397	488,251	-	307,611	179,141	217,875	46,606	-	1,260	2,311	74,828	56,243
22.	Aircraft (all perils) .....	-	-	-	-	-	-	-	-	-	-	-	-
23.	Fidelity .....								-	-			
24.	Surety .....	-	-	-	-	-	-	-	-	-	-	-	-
26.	Burglary and Theft .....	-	-	-	-	-	-	-	-	-	-	-	-
27.	Boiler and Machinery .....	-	-	-	-	-	-	-	-	-	-	-	-
28.	Credit .....								-	-			
29.	International .....								-	-			
30.	Warranty .....								-	-			
31.	Reins nonproportional assumed property .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business .....								-	-			
35.	TOTAL (a) .....	2,974,497	2,641,288	-	1,388,933	1,427,744	916,718	1,833,891	68,588	135,495	371,021	403,584	62,382
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 \$15,099

(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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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 MISSISSIPPI DURING THE YEAR 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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) .....												

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire .....	57,409	30,106	—	36,310	—	61	519	—	8	20	9,121	901
2.1.	Allied Lines .....	48,679	48,863	—	24,866	21,042	20,840	949	—	5	36	7,597	764
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 .....	129,256,235	117,183,285	—	68,833,512	112,080,155	119,017,896	31,547,459	712,302	764,168	974,422	18,098,614	2,028,389
5.1.	Commercial Multiple Peril (Non-Liability Portion) .....	971,422	913,049	—	419,747	581,393	(1,429,811)	287,951	35,470	35,474	6,427	155,723	15,244
5.2.	Commercial Multiple Peril (Liability Portion) .....	520,453	428,993	—	213,296	146,969	195,872	459,622	7,846	42,406	196,985	83,295	8,167
6.	Mortgage Guaranty .....								—	—			
8.	Ocean Marine .....								—	—			
9.	Inland Marine .....	1,934,114	1,913,410	—	984,720	537,198	624,770	189,849	4,564	5,015	11,270	284,936	30,352
10.	Financial Guaranty .....								—	—			
11.1.	Medical Professional Liability — Occurrence .....	—	—	—	—	—	—	—	—	—	—	—	—
11.2.	Medical Professional Liability — Claims-Made .....								—	—			
12.	Earthquake .....	408,786	396,602	—	210,086	—	—	—	797	797	—	60,443	6,415
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 .....	2,675,136	2,630,572	—	1,358,071	1,935,197	3,893,067	3,843,990	—	(11,399)	51,810	428,108	41,980
17.2.	Other Liability—Claims-Made .....	—	—	—	—	—	—	—	—	—	—	—	—
17.3.	Excess Workers' Compensation .....								—	—			
18.1.	Products Liability — Occurrence .....	13	9	—	4	—	3	3	—	2	2	2	—
18.2.	Products Liability — Claims-Made .....								—	—			
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection) .....	—	—	—	—	—	—	—	—	—	—	—	—
19.2.	Other Private Passenger Auto Liability .....	111,378,435	107,665,371	—	45,588,985	69,849,291	74,959,410	72,896,245	1,803,748	2,783,564	5,131,106	14,654,573	1,747,837
19.3.	Commercial Auto No-Fault (Personal Injury Protection) .....	—	—	—	—	—	—	—	—	—	—	—	—
19.4.	Other Commercial Auto Liability .....	6,274,631	5,543,962	—	3,524,320	3,183,605	2,696,963	6,227,508	114,156	71,036	837,740	691,229	98,466
21.1.	Private Passenger Auto Physical Damage .....	138,044,939	129,986,214	—	57,055,351	90,540,421	87,565,057	931,721	59,423	86,078	86,829	18,182,478	2,166,308
21.2.	Commercial Auto Physical Damage .....	2,381,852	2,234,148	—	1,313,442	1,349,977	1,354,198	162,278	2,401	7,478	9,947	260,099	37,378
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) .....	393,952,104	368,974,585	—	179,562,710	280,225,247	288,898,323	116,548,094	2,740,707	3,784,632	7,306,595	52,916,216	6,182,202
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 \$4,673,188

(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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	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
		Direct Premiums Written	Direct Premiums Earned										
1.	Fire .....	50,339	41,983	-	11,967	-	118	756	-	12	29	7,705	2,099
2.1.	Allied Lines .....	40,197	34,534	-	11,649	-	(125)	633	-	4	24	5,692	1,676
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) .....	441,424	439,326	-	155,510	71,276	66,280	19,089	-	(38)	3,239	70,765	18,410
5.2.	Commercial Multiple Peril (Liability Portion) .....	587,913	559,980	-	172,577	75,359	279,937	667,084	97,590	136,797	256,606	94,210	24,519
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 .....	91,909	41,810	-	59,673	-	120,506	154,220	3,556	4,525	9,340	14,734	3,833
17.2.	Other Liability—Claims-Made .....	-	-	-	-	-	-	-	-	-	-	-	-
17.3.	Excess Workers' Compensation .....								-	-			
18.1.	Products Liability — Occurrence .....	12	(73)	-	236	-	(5,759)	(34)	-	(5,522)	(23)	2	1
18.2.	Products Liability — Claims-Made .....								-	-			
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection) .....	11,071	14,359	-	2,768	10,574	(1,532)	(1,725)	-	(24)	18	1,274	462
19.2.	Other Private Passenger Auto Liability .....	77,217	97,319	-	20,348	148,415	25,626	65,500	43,116	41,912	4,536	8,848	3,220
19.3.	Commercial Auto No-Fault (Personal Injury Protection) .....	158,387	144,362	-	78,153	5,306	9,052	58,612	-	(18,377)	10,092	15,978	6,606
19.4.	Other Commercial Auto Liability .....	2,255,555	2,171,739	-	1,112,350	1,158,519	2,422,006	4,117,251	231,469	191,632	337,755	249,953	94,070
21.1.	Private Passenger Auto Physical Damage .....	55,960	72,757	-	12,520	70,280	56,806	(2,969)	-	(3)	180	6,372	2,334
21.2.	Commercial Auto Physical Damage .....	1,211,976	1,078,251	-	612,601	364,795	369,283	91,363	1,318	4,044	4,880	141,068	50,546
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) .....	4,981,960	4,696,346	-	2,250,352	1,904,525	3,342,197	5,169,780	377,049	354,961	626,677	616,600	207,776
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 \$35,216

(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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	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
		Direct Premiums Written	Direct Premiums Earned										
1.	Fire .....	8,240	7,514	-	5,118	-	(220)	146	-	(4)	6	1,321	234
2.1.	Allied Lines .....	16,877	14,758	-	8,961	-	(519)	284	-	(11)	11	2,706	480
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 .....	18,828,443	16,922,790	-	9,983,054	16,138,845	15,180,019	3,222,331	84,954	159,355	287,212	2,462,668	535,036
5.1.	Commercial Multiple Peril (Non-Liability Portion) .....	563,186	494,908	-	242,036	345,269	307,080	10,798	972	414	3,561	88,224	16,004
5.2.	Commercial Multiple Peril (Liability Portion) .....	238,410	254,126	-	92,119	24,823	126,774	353,238	3,352	(17,586)	105,285	38,147	6,775
6.	Mortgage Guaranty .....								-	-			
8.	Ocean Marine .....								-	-			
9.	Inland Marine .....	177,705	162,590	-	92,529	141,657	141,547	4,241	2,183	2,276	949	25,486	5,050
10.	Financial Guaranty .....								-	-			
11.1.	Medical Professional Liability — Occurrence .....	-	-	-	-	-	-	-	-	-	-	-	-
11.2.	Medical Professional Liability — Claims-Made .....								-	-			
12.	Earthquake .....	49,852	46,648	-	26,156	-	-	-	-	-	-	7,160	1,417
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 .....	353,621	324,632	-	192,010	-	280,520	370,935	-	(1,670)	8,552	57,309	10,049
17.2.	Other Liability—Claims-Made .....	-	-	-	-	-	-	-	-	-	-	-	-
17.3.	Excess Workers' Compensation .....								-	-			
18.1.	Products Liability — Occurrence .....	(33,082)	40,227	-	-	-	(2,578)	18,450	-	(8,085)	12,120	(5,303)	(940)
18.2.	Products Liability — Claims-Made .....								-	-			
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection) .....	-	-	-	-	-	-	-	-	-	-	-	-
19.2.	Other Private Passenger Auto Liability .....	424,167	469,494	-	129,848	271,569	263,145	164,491	11,616	12,010	33,893	56,989	12,053
19.3.	Commercial Auto No-Fault (Personal Injury Protection) .....	-	-	-	-	-	-	-	-	-	-	-	-
19.4.	Other Commercial Auto Liability .....	3,153,735	2,751,508	-	1,650,682	1,587,760	2,173,361	4,032,678	59,805	11,094	425,138	363,412	89,618
21.1.	Private Passenger Auto Physical Damage .....	276,755	295,459	-	90,523	192,589	143,097	(9,196)	-	51	607	36,750	7,864
21.2.	Commercial Auto Physical Damage .....	1,105,965	943,705	-	569,507	567,150	587,949	104,216	2,205	4,171	4,227	127,568	31,427
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) .....	25,163,873	22,728,360	-	13,082,543	19,269,663	19,200,175	8,272,614	165,087	162,015	881,559	3,262,437	715,065
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 \$116,026

(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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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 VIRGINIA DURING THE YEAR 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	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
		Direct Premiums Written	Direct Premiums Earned										
1.	Fire .....	5,718	5,045	-	4,368	-	(122)	98	-	(2)	4	917	158
2.1.	Allied Lines .....	6,694	5,943	-	4,202	-	(130)	115	-	(2)	4	1,073	185
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) .....	149,072	210,549	-	71,438	29,215	27,143	9,425	-	(373)	1,562	23,898	4,127
5.2.	Commercial Multiple Peril (Liability Portion) .....	256,807	258,678	-	87,921	209,020	207,304	443,167	29,441	37,065	120,168	41,173	7,109
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 .....	54,241	50,403	-	13,954	-	13,381	19,046	-	7,068	12,511	9,580	1,502
17.2.	Other Liability—Claims-Made .....			-		-							
17.3.	Excess Workers' Compensation .....												
18.1.	Products Liability — Occurrence .....	524	499	-	375	-	(600)	293		(665)	192	86	15
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 .....	3,181,126	2,649,668	-	1,628,423	1,003,737	1,547,722	2,549,322	113,489	241,817	365,803	430,715	88,064
21.1.	Private Passenger Auto Physical Damage .....			-		-							
21.2.	Commercial Auto Physical Damage .....	620,171	520,556	-	308,231	566,431	514,586	43,101		1,162	2,863	89,082	17,168
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) .....	4,274,353	3,701,341	-	2,118,913	1,808,403	2,309,284	3,064,567	142,931	286,068	503,107	596,523	118,329
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 \$191

(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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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 2023

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	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
		Direct Premiums Written	Direct Premiums Earned										
1.	Fire .....	177,650	127,270	-	91,477	-	(114)	2,310	-	23	88	28,032	(20,680)
2.1.	Allied Lines .....	206,481	166,635	-	103,905	72,616	71,897	3,108	-	16	119	32,119	9,714
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 .....	155,099,381	140,155,244	-	82,461,622	136,038,588	142,427,128	35,620,832	840,311	976,464	1,306,396	21,460,922	2,647,758
5.1.	Commercial Multiple Peril (Non-Liability Portion) .....	4,081,805	3,931,539	-	1,731,011	3,677,477	1,715,887	480,561	64,334	64,596	28,599	655,934	133,164
5.2.	Commercial Multiple Peril (Liability Portion) .....	4,047,082	3,741,337	-	1,495,039	1,833,526	2,464,543	4,165,440	311,982	522,118	1,757,887	651,408	138,828
6.	Mortgage Guaranty .....								-	-			
8.	Ocean Marine .....								-	-			
9.	Inland Marine .....	2,193,720	2,147,003	-	1,118,690	682,663	770,788	196,383	6,747	7,402	12,622	321,492	36,393
10.	Financial Guaranty .....								-	-			
11.1.	Medical Professional Liability — Occurrence .....	-	-	-	-	-	-	-	-	-	-	-	-
11.2.	Medical Professional Liability — Claims-Made .....								-	-			
12.	Earthquake .....	465,202	449,636	-	239,343	-	-	-	797	797	-	68,507	7,911
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 .....	3,457,065	3,291,665	-	1,771,278	1,935,197	4,484,594	4,648,946	7,792	1,836	116,537	555,424	64,602
17.2.	Other Liability—Claims-Made .....	-	-	-	-	-	-	-	-	-	-	-	-
17.3.	Excess Workers' Compensation .....								-	-			
18.1.	Products Liability — Occurrence .....	(31,143)	42,045	-	1,307	-	(8,789)	19,251	-	(14,295)	12,645	(4,991)	(894)
18.2.	Products Liability — Claims-Made .....								-	-			
19.1.	Private Passenger Auto No-Fault (Personal Injury Protection) .....	30,327	33,492	-	11,149	30,574	9,540	(3,184)	-	(45)	39	4,068	2,290
19.2.	Other Private Passenger Auto Liability .....	112,995,716	109,450,664	-	46,086,870	71,612,865	76,198,749	73,947,891	1,926,119	2,906,714	5,255,652	14,876,527	1,784,648
19.3.	Commercial Auto No-Fault (Personal Injury Protection) .....	234,922	213,842	-	117,238	29,981	56,283	103,135	1,050	(24,133)	15,194	24,438	13,872
19.4.	Other Commercial Auto Liability .....	27,628,765	25,287,131	-	14,329,187	14,247,633	19,958,807	34,737,901	1,016,991	1,073,095	3,812,375	3,365,666	781,048
21.1.	Private Passenger Auto Physical Damage .....	139,203,415	131,244,376	-	57,408,278	91,278,656	88,173,412	903,213	59,609	86,377	89,121	18,342,762	2,201,309
21.2.	Commercial Auto Physical Damage .....	9,895,178	9,039,605	-	5,149,319	4,314,753	4,449,785	815,357	21,654	44,334	42,536	1,212,276	333,186
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) .....	459,685,565	429,321,485	-	212,115,714	325,754,527	340,772,511	155,641,143	4,257,387	5,645,300	12,449,811	61,594,584	8,133,148
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 \$4,961,416

(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	2	3	4	5	Reinsurance On			9	10	11	12	13	14	15
					6	7	8							
ID Number	NAIC Company Code	Name of Reinsured	Domiciliary Jurisdiction	Assumed Premium	Paid Losses and Loss Adjustment Expenses	Known Case Losses and LAE	Cols. 6 + 7	Contingent Commissions Payable	Assumed Premiums Receivable	Unearned Premium	Funds Held By or Deposited With Reinsured Companies	Letters of Credit Posted	Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	Amount of Assets Pledged or Collateral Held in Trust
Pools and Associations, Mandatory Pools, Associations or Other Similar Facilities														
AA-9991141.....	00000	OHIO COMMERCIAL AUTO INS PROCEDURE.....	OH.....	214		526	526			102				
AA-9991206.....	00000	ILLINOIS FAIR PLAN.....	IL.....	1		—	—			—				
AA-9991222.....	00000	OHIO FAIR PLAN.....	OH.....	219		—	—			—				
1099999 – Pools and Associations, Mandatory Pools, Associations or Other Similar Facilities				433		526	526			102				
1299999 – Total Pools and Associations				433		526	526			102				
9999999 – Totals				433		526	526			102				

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected 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		
Total Authorized, Affiliates, U.S. Intercompany Pooling																			
31-4192970	14060	GRANGE INS CO	OH		450,384			85,834		69,012		210,824		365,670				365,670	
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling					450,384			85,834		69,012		210,824		365,670				365,670	
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total																			
0899999 – Total Authorized, Affiliates, Total Authorized - Affiliates					450,384			85,834		69,012		210,824		365,670				365,670	
Total Authorized, Other U.S. Unaffiliated Insurers																			
06-0384680	11452	HARTFORD STEAM BOIL INSPEC & INS CO	CT		2,608	–		–		–		1,339		1,339		–		1,339	
51-0434766	20370	AXIS REINS CO	NY		222	–		40		13		–		53		–		53	
47-0574325	32603	BERKLEY INS CO	DE		21	–		2		–		9		12		–		12	
42-0234980	21415	EMPLOYERS MUT CAS CO	IA		90	–		16		5		–		21		–		21	
13-2673100	22039	GENERAL REINS CORP	DE		100	–		–	–	–		25		25		–		25	
52-1952955	10357	RENAISSANCE REINS US INC	MD		93	–		–		–		–		–		–		–	
47-0698507	23680	ODYSSEY REINS CO	CT		58	–		–		–		–		–		–		–	
13-1675535	25364	SWISS REINS AMER CORP	NY		1,116	–		189		26		–		214		–		214	
42-0644327	13021	UNITED FIRE & CAS CO	IA		95	–		–		–		–		–		–		–	
22-2005057	26921	EVEREST REINS CO	DE		163	–		16		5		–		21		–		21	
87-2252307	22225	TRISURA INS CO	OK		132	–		–		–		–		–		–		–	
13-4924125	10227	MUNICH REINS AMER INC	DE		230	–		84		20		–		104		–		104	
13-3138390	42307	NAVIGATORS INS CO	NY		186	–		61		20		–		81		–		81	
23-1641984	10219	QBE REINS CORP	PA		105	–		–		–		–		–		–		–	
13-5616275	19453	TRANSATLANTIC REINS CO	NY		266	–		79		25		–		104		–		104	
04-1543470	23043	LIBERTY MUT INS CO	MA		60	–		–		–		–		–		–		–	
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers					5,547	–		487	–	113		1,373		1,974		–		1,974	
Total Authorized, Pools, Mandatory Pools																			
AA-9991500	00000	ILLINOIS MINE SUBSIDENCE FUND	IL		15							8		8				8	
AA-9991502	00000	KENTUCKY MINE SUBSIDENCE FUND	KY		1							–		–				–	
AA-9991503	00000	OHIO MINE SUBSIDENCE FUND	OH		22							12		12				12	
1099999 – Total Authorized, Pools, Mandatory Pools					38							20		20				20	
Total Authorized, Other Non-U.S. Insurers																			
AA-1128987	00000	Lloyd's Syndicate Number 2987	GBR		89	–		24		8		–		32		–		32	
AA-1126033	00000	Lloyd's Syndicate Number 33	GBR		114	–		31		9		–		40		–		40	
AA-1126435	00000	Lloyd's Syndicate Number 435	GBR		14	–		6		1		–		7		–		7	
AA-1126510	00000	Lloyd's Syndicate Number 510	GBR		–	–		1		–		–		1		–		1	
AA-1126623	00000	Lloyd's Syndicate Number 623	GBR		25	–		–		–		–		–		–		–	
AA-1127084	00000	Lloyd's Syndicate Number 1084	GBR		263	–		6		2		–		7		–		7	
AA-1120156	00000	Lloyd's Syndicate Number 1686	GBR		53	–		–		–		–		–		–		–	
AA-1120157	00000	Lloyd's Syndicate Number 1729	GBR		14	–		–		–		–		–		–		–	
AA-1120171	00000	Lloyd's Syndicate Number 1856	GBR		41	–		9		3		–		12		–		12	
AA-1128001	00000	Lloyd's Syndicate Number 2001	GBR		59	–		11		2		–		12		–		12	
AA-1128003	00000	Lloyd's Syndicate Number 2003	GBR		43	–		11		4		–		15		–		15	
AA-1128010	00000	Lloyd's Syndicate Number 2010	GBR		79	–		–		–		–		–		–		–	
AA-1128623	00000	Lloyd's Syndicate Number 2623	GBR		12	–		–		–		–		–		–		–	
AA-1128623	00000	Lloyd's Syndicate Number 2623	GBR		112	–		–		–		–		–		–		–	
AA-1128791	00000	Lloyd's Syndicate Number 2791	GBR		48	–		–		–		–		–		–		–	
AA-1126004	00000	Lloyd's Syndicate Number 4444	GBR		111	–		–		–		–		–		–		–	
AA-3194130	00000	Endurance Specialty Ins Ltd	BMU		202	–		48		15		–		63		–		63	
AA-1840000	00000	Mapfre Re Compania de Reaseguros SA	ESP		304	–		16		5		–		21		–		21	
AA-3190686	00000	Partner Reins Co Ltd	BMU		87	–		3		–		–		3		–		3	
AA-3190870	00000	Validus Reins Ltd	BMU		131	–		1		–		–		1		–		1	
AA-1340125	00000	Hannover Rueck SE	DEU		194	–		80		3		–		83		–		83	



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		
1299999 – Total Authorized, Other Non-U.S. Insurers					1,995	–	–	246	–	50	–	–	–	296	–	–	–	296	–
1499999 – Total Authorized Excluding Protected Cells					457,964	–	–	86,566	–	69,176	–	212,217	–	367,960	–	–	–	367,960	–
Total Unauthorized, Other Non-U.S. Insurers																			
AA-1120191	00000	Convex Ins UK Ltd	GBR		13	–	–	74	–	23	–	–	–	97	–	–	–	97	–
AA-3191190	00000	Hamilton Re Ltd	BMU		70	–	–	2	–	–	–	–	–	2	–	–	–	2	–
AA-1460080	00000	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	CHE		33	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1780116	00000	Chaucer Ins Co Designated Activity Co	IRL		25	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1340028	00000	Devk Ruckversicherungs und Beteiligungs AG	DEU		50	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-3191437	00000	Group Ark Ins Ltd	BMU		69	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-5420050	00000	KOREAN REINS CO	KOR		206	–	–	17	–	5	–	–	–	22	–	–	–	22	–
AA-1440060	00000	LANSFORSAKRINGS BOLAG ENS AB	SWE		53	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-3194122	00000	DaVinci Reins Ltd	BMU		16	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1460019	00000	MS Amlin AG	CHE		71	–	–	8	–	2	–	–	–	10	–	–	–	10	–
AA-1440076	00000	SiriusPoint Intl Ins Corp (publ)	SWE		57	–	–	10	–	3	–	–	–	13	–	–	–	13	–
AA-5324100	00000	Taiping Reins Co Ltd	HKG		103	–	–	15	–	4	–	–	–	19	–	–	–	19	–
AA-3191432	00000	Vantage Risk Ltd	BMU		88	–	–	–	–	–	–	–	–	–	–	–	–	–	–
2699999 – Total Unauthorized, Other Non-U.S. Insurers					853	–	–	126	–	37	–	–	–	162	–	–	–	162	–
2899999 – Total Unauthorized Excluding Protected Cells					853	–	–	126	–	37	–	–	–	162	–	–	–	162	–
Total Certified, Other Non-U.S. Insurers																			
CR-3194126	00000	Arch Reins Ltd	BMU		495	–	–	176	–	56	–	–	–	232	–	–	–	232	–
CR-3190770	00000	Chubb Tempest Reins Ltd	BMU		–	–	–	26	–	–	–	–	–	26	–	–	–	26	–
CR-3191289	00000	Fidelis Ins Bermuda Ltd	BMU		304	–	–	17	–	5	–	–	–	22	–	–	–	22	–
CR-1120175	00000	Fidelis Underwriting Ltd	GBR		375	–	–	32	–	10	–	–	–	42	–	–	–	42	–
CR-3190875	00000	Hiscox Ins Co (Bermuda) Ltd	BMU		128	–	–	38	–	10	–	–	–	48	–	–	–	48	–
4099999 – Total Certified, Other Non-U.S. Insurers					1,302	–	–	289	–	82	–	–	–	371	–	–	–	371	–
4299999 – Total Certified Excluding Protected Cells					1,302	–	–	289	–	82	–	–	–	371	–	–	–	371	–
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells					460,118	–	–	86,981	–	69,295	–	212,217	–	368,493	–	–	–	368,493	–
9999999 – Totals					460,118	–	–	86,981	–	69,295	–	212,217	–	368,493	–	–	–	368,493	–

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						365,670	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling				XXX			365,670	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total				XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999 – Total Authorized, Affiliates, Total Authorized - Affiliates				XXX			365,670	–							XXX		
Total Authorized, Other U.S. Unaffiliated Insurers																	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO					–	1,339	–	1,339	1,606	–	1,606		1,606	1		26
51-0434766	AXIS REINS CO					–	53	–	53	63	–	63		63	3		2
47-0574325	BERKLEY INS CO					–	12	–	12	14	–	14		14	2		–
42-0234980	EMPLOYERS MUT CAS CO					–	21	–	21	25	–	25		25	4		1
13-2673100	GENERAL REINS CORP					–	25	–	25	30	–	30		30	1		–
52-1952955	RENAISSANCE REINS US INC					–	–	–	–	–	–	–		–	2		–
47-0698507	ODYSSEY REINS CO					–	–	–	–	–	–	–		–	2		–
13-1675535	SWISS REINS AMER CORP					–	214	–	214	257	–	257		257	2		5
42-0644327	UNITED FIRE & CAS CO					–	–	–	–	–	–	–		–	4		–
22-2005057	EVEREST REINS CO					–	21	–	21	25	–	25		25	2		1
87-2252307	TRISURA INS CO					–	–	–	–	–	–	–		–	4		–
13-4924125	MUNICH REINS AMER INC					–	104	–	104	125	–	125		125	2		3
13-3138390	NAVIGATORS INS CO					–	81	–	81	97	–	97		97	3		3
23-1641984	QBE REINS CORP					–	–	–	–	–	–	–		–	2		–
13-5616275	TRANSATLANTIC REINS CO					–	104	–	104	124	–	124		124	2		3
04-1543470	LIBERTY MUT INS CO					–	–	–	–	–	–	–		–	3		–
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers				XXX		–	1,974	–	1,974	2,368	–	2,368		2,368	XXX		43
Total Authorized, Pools, Mandatory Pools																	
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND						8	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND						–	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991503	OHIO MINE SUBSIDENCE FUND						12	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999 – Total Authorized, Pools, Mandatory Pools				XXX			20	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Total Authorized, Other Non-U.S. Insurers																	
AA-1128987	Lloyd's Syndicate Number 2987					–	32	–	32	38	–	38		38	3		1
AA-1126033	Lloyd's Syndicate Number 33					–	40	–	40	48	–	48		48	3		1
AA-1126435	Lloyd's Syndicate Number 435					–	7	–	7	8	–	8		8	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					–	7	–	7	9	–	9		9	3		–
AA-1120156	Lloyd's Syndicate Number 1686					–	–	–	–	–	–	–		–	3		–
AA-1120157	Lloyd's Syndicate Number 1729					–	–	–	–	–	–	–		–	3		–
AA-1120171	Lloyd's Syndicate Number 1856					–	12	–	12	14	–	14		14	3		–
AA-1128001	Lloyd's Syndicate Number 2001					–	12	–	12	15	–	15		15	3		–
AA-1128003	Lloyd's Syndicate Number 2003					–	15	–	15	18	–	18		18	3		–
AA-1128010	Lloyd's Syndicate Number 2010					–	–	–	–	–	–	–		–	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-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					–	63	–	63	76	–	76	76	76	2	–	2
AA-1840000	Mapfre Re Compania de Reaseguros SA					–	21	–	21	25	–	25	25	25	2	–	1
AA-3190686	Partner Reins Co Ltd					–	3	–	3	3	–	3	3	3	2	–	–
AA-3190870	Validus Reins Ltd					–	1	–	1	1	–	1	1	1	3	–	–
AA-1340125	Hannover Rueck SE					–	83	–	83	100	–	100	100	100	3	–	3
1299999 – Total Authorized, Other Non-U.S. Insurers				XXX		–	296	–	296	355	–	355	–	355	XXX	–	9
1499999 – Total Authorized Excluding Protected Cells				XXX		–	367,960	–	2,270	2,724	–	2,724	–	2,724	XXX	–	52
Total Unauthorized, Other Non-U.S. Insurers																	
AA-1120191	Convex Ins UK Ltd		97	0001		97	–	–	97	116	–	116	97	19	3	3	1
AA-3191190	Hamilton Re Ltd		2	0002		2	–	–	2	2	–	2	2	–	4	–	–
AA-1460080				HELVETIA SCHWEIZERISCHE		–	–	–	–	–	–	–	–	–	2	–	–
AA-1780116				VERSICHERUNGS		–	–	–	–	–	–	–	–	–	3	–	–
AA-1340028				Chaucer Ins Co Designated Activity Co		–	–	–	–	–	–	–	–	–	2	–	–
AA-3191437				Devk Ruckversicherungs und Beteiligungs AG		–	–	–	–	–	–	–	–	–	3	–	–
AA-5420050				Group Ark Ins Ltd		–	–	–	–	–	–	–	–	–	3	–	–
AA-1440060			22	KOREAN REINS CO	0003	22	–	–	22	27	–	27	22	4	3	1	–
AA-1440060				LANSFORSKRINGS BOLAG ENS AB		–	–	–	–	–	–	–	–	–	3	–	–
AA-3194122				DaVinci Reins Ltd		–	–	–	–	–	–	–	–	–	2	–	–
AA-1460019			10	MS Amlin AG		10	–	–	10	12	–	12	10	2	3	–	–
AA-1440076				SiriusPoint Intl Ins Corp (publ)	13	13	–	–	13	15	–	15	13	3	4	–	–
AA-5324100			19	Taiping Reins Co Ltd		19	–	–	19	23	–	23	19	4	3	1	–
AA-3191432				Vantage Risk Ltd		–	–	–	–	–	–	–	–	–	4	–	–
2699999 – Total Unauthorized, Other Non-U.S. Insurers			150	XXX	13	162	–	–	162	195	–	195	162	32	XXX	5	1
2899999 – Total Unauthorized Excluding Protected Cells			150	XXX	13	162	–	–	162	195	–	195	162	32	XXX	5	1
Total Certified, Other Non-U.S. Insurers																	
CR-3194126	Arch Reins Ltd				232	232	–	–	232	279	–	279	232	46	2	5	1
CR-3190770	Chubb Tempest Reins Ltd		26	0006		26	–	–	26	31	–	31	26	5	2	1	–
CR-3191289	Fidelis Ins Bermuda Ltd		22	0007		22	–	–	22	26	–	26	22	4	3	1	–
CR-1120175	Fidelis Underwriting Ltd		42	0008		42	–	–	42	51	–	51	42	8	3	1	–
CR-3190875	Hiscox Ins Co (Bermuda) Ltd		48	0009		48	–	–	48	58	–	58	48	10	2	1	–
4099999 – Total Certified, Other Non-U.S. Insurers			139	XXX	232	371	–	–	371	445	–	445	371	74	XXX	8	2
4299999 – Total Certified Excluding Protected Cells			139	XXX	232	371	–	–	371	445	–	445	371	74	XXX	8	2
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells			288	XXX	245	533	367,960	–	2,803	3,364	–	3,364	533	2,830	XXX	13	55
9999999 – Totals			288	XXX	245	533	367,960	–	2,803	3,364	–	3,364	533	2,830	XXX	13	55

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	–
52-1952955	RENAISSANCE REINS US INC	–						–			–	–				–	YES	–
47-0698507	ODYSSEY REINS CO	–						–			–	–				–	YES	–
13-1675535	SWISS REINS AMER CORP	–						–			–	–				–	YES	–
42-0644327	UNITED FIRE & CAS CO	–						–			–	–				–	YES	–
22-2005057	EVEREST REINS CO	–						–			–	–				–	YES	–
87-2252307	TRISURA INS 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	–
04-1543470	LIBERTY MUT INS CO	–						–			–	–				–	YES	–
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers		–						–			–	–		–	–	–	XXX	–
Total Authorized, Pools, Mandatory Pools																		
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND											–				–	YES	–
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND											–				–	YES	–
AA-9991503	OHIO MINE SUBSIDENCE FUND											–				–	YES	–
1099999 – Total Authorized, Pools, Mandatory Pools												–		–	–	–	XXX	–
Total Authorized, Other Non-U.S. Insurers																		
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	–

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
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	–
1299999 – Total Authorized, Other Non-U.S. Insurers.....		–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	XXX	–
1499999 – Total Authorized Excluding Protected Cells.....		–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	XXX	–
Total Unauthorized, Other Non-U.S. Insurers																		
AA-1120191.....	Convex Ins UK Ltd.....	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	YES	–
AA-3191190.....	Hamilton Re Ltd.....	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	YES	–
AA-1460080.....	HELVETIA SCHWEIZERISCHE VERSICHERUNGS.....	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	YES	–
AA-1780116.....	Chaucer Ins Co Designated Activity Co.....	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	YES	–
AA-1340028.....	Devk Ruckversicherungs und Beteiligungs AG.....	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	YES	–
AA-3191437.....	Group Ark Ins Ltd.....	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	YES	–
AA-5420050.....	KOREAN REINS CO.....	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	YES	–
AA-1440060.....	LANSFORSKRINGS BOLAG ENS AB.....	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	YES	–
AA-3194122.....	DaVinci Reins Ltd.....	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	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	–
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 (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		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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
52-1952955	RENAISSANCE REINS US INC.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47-0698507	ODYSSEY REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-1675535	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
87-2252307	TRISURA INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-4924125	MUNICH REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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
04-1543470	LIBERTY MUT INS 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		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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-9991502	KENTUCKY MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991503	OHIO 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		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Total Authorized, Other Non-U.S. Insurers																	
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

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-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
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		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1499999 – Total Authorized Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Total Unauthorized, Other Non-U.S. Insurers																	
AA-1120191	Convex Ins UK Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191190	Hamilton Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	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 AG	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-3194122	DaVinci Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1460019	MS Amlin AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-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		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2899999 – Total Unauthorized Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Total Certified, Other Non-U.S. Insurers																	
CR-3194126	Arch Reins Ltd	3	07/01/2015	20.000		232	46	100.000	100.000		232	–	–	–	–	–	–
CR-3190770	Chubb Tempest Reins Ltd	2	11/19/2020	10.000		26	3	100.001	100.000		26	–	–	–	–	–	–
CR-3191289	Fidelis Ins Bermuda Ltd.	4	12/07/2021	50.000		22	11	100.001	100.000		22	–	–	–	–	–	–
CR-1120175	Fidelis Underwriting Ltd	4	01/10/2022	50.000		42	21	100.000	100.000		42	–	–	–	–	–	–
CR-3190875	Hiscox Ins Co (Bermuda) Ltd	3	08/04/2021	20.000		48	10	100.000	100.000		48	–	–	–	–	–	–
4099999 – Total Certified, Other Non-U.S. Insurers		XXX	XXX	XXX		371	91	XXX	XXX		371	–	–	–	–	–	–
4299999 – Total Certified Excluding Protected Cells		XXX	XXX	XXX		371	91	XXX	XXX		371	–	–	–	–	–	–
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		XXX	XXX	XXX		371	91	XXX	XXX		371	–	–	–	–	–	–
9999999 – Totals		XXX	XXX	XXX		371	91	XXX	XXX		371	–	–	–	–	–	–

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%] + [Col. 45 * 20%])	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%)				
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	-
52-1952955	RENAISSANCE REINS US INC	-	XXX	XXX	-	-	-	XXX	XXX	-
47-0698507	ODYSSEY 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	-
87-2252307	TRISURA INS 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	-
04-1543470	LIBERTY MUT INS 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-9991502	KENTUCKY MINE SUBSIDENCE FUND	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-9991503	OHIO 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-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	-



**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-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	-
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	-
<b>Total Unauthorized, Other Non-U.S. Insurers</b>										
AA-1120191	Convex Ins UK Ltd	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-3191190	Hamilton Re Ltd	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1780116	Chaucer Ins Co Designated Activity Co	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1340028	Devk Ruckversicherungs und Beteiligungs AG	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-3191437	Group Ark Ins Ltd	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-5420050	KOREAN REINS CO	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1440060	LANSFORSAKRINGS BOLAG ENS AB	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-3194122	DaVinci Reins Ltd	-	-	-	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		-	-	-	XXX	XXX	XXX	-	XXX	-
<b>Total Certified, Other Non-U.S. Insurers</b>										
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	-	-
4099999 – Total Certified, Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-
4299999 – Total Certified Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		-	-	-	-	-	-	-	-	-
9999999 – Totals		-	-	-	-	-	-	-	-	-

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.....	021000089.....	Citibank Europe.....	97.....
0002.....	1.....	073000228.....	Wells Fargo.....	2.....
0003.....	1.....	026004226.....	Societe Generale.....	22.....
0004.....	1.....	026002574.....	Barclays.....	10.....
0005.....	1.....	021000089.....	Citibank Europe.....	19.....
0006.....	1.....	021000089.....	Citibank Europe.....	26.....
0007.....	1.....	021000089.....	Citibank London.....	22.....
0008.....	1.....	981390502.....	Lloyds Corporate Markets.....	42.....
0009.....	1.....	026008044.....	Commerzbank.....	48.....
9999999 – Totals.....				288.....

**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.....		450,384
2. ....	HARTFORD STEAM BOIL INSPEC & INS CO.....		2,608
3. ....	SWISS REINS AMER CORP.....		1,116
4. ....	Arch Reins Ltd.....		495
5. ....	Fidelis Underwriting Ltd.....		375

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.....	365,670	450,384	YES
7. ....	HARTFORD STEAM BOIL INSPEC & INS CO.....	1,339	2,608	NO
8. ....	Arch Reins Ltd.....	232	495	NO
9. ....	SWISS REINS AMER CORP.....	214	1,116	NO
10.....	MUNICH REINS AMER INC.....	104	230	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) .....	66,011,364		66,011,364
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 .....	602,974		602,974
6. Net amount recoverable from reinsurers .....			
7. Protected cell assets (Line 27) .....		382,294,598	382,294,598
8. Totals (Line 28) .....	66,614,338	382,294,598	448,908,936
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	—	170,097,085	170,097,085
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	327,735		327,735
11. Unearned premiums (Line 9) .....	—	212,197,513	212,197,513
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 .....	199,954		199,954
19. Total liabilities excluding protected cell business (Line 26) .....	527,689	382,294,598	382,822,287
20. Protected cell liabilities (Line 27) .....			
21. Surplus as regards policyholders (Line 37) .....	66,086,649	XXX	66,086,649
22. Totals (Line 38) .....	66,614,338	382,294,598	448,908,936

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 Non Proportional Assumed Property - Section 1

**NONE**

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

**NONE**

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

**NONE**

(87) Schedule P - Part 6O - Reinsurance Non Proportional 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**



SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 OMITTED)

SECTION 1

		1	2	3	4	5	6
		Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P – Part 1							
1.	Homeowners/Farmowners.....				—		
2.	Private Passenger Auto Liability/Medical.....				—		
3.	Commercial Auto/Truck Liability/Medical.....				—		
4.	Workers' Compensation.....				—		
5.	Commercial Multiple Peril.....				—		
6.	Medical Professional Liability—Occurrence.....				—		
7.	Medical Professional Liability—Claims-made.....				—		
8.	Special Liability.....				—		
9.	Other Liability—Occurrence.....				—		
10.	Other Liabilities—Claims-made.....				—		
11.	Special Property.....				—		
12.	Auto Physical Damage.....				—		
13.	Fidelity/ Surety.....				—		
14.	Other.....				—		
15.	International.....				—		
16.	Reinsurance-Nonproportional Assumed Property.....	XXX	XXX	XXX	XXX	XXX	XXX
17.	Reinsurance-Nonproportional Assumed Liability.....	XXX	XXX	XXX	XXX	XXX	XXX
18.	Reinsurance-Nonproportional Assumed Financial Lines.....	XXX	XXX	XXX	XXX	XXX	XXX
19.	Products Liability—Occurrence.....				—		
20.	Products Liability—Claims-made.....				—		
21.	Financial Guaranty/Mortgage Guaranty.....				—		
22.	Warranty.....				—		
23.	Totals.....				—		

SECTION 2

	Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
		2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1.	Prior.....										
2.	2014.....										
3.	2015.....	XXX									
4.	2016.....	XXX	XXX								
5.	2017.....	XXX	XXX	XXX							
6.	2018.....	XXX	XXX	XXX	XXX						
7.	2019.....	XXX	XXX	XXX	XXX	XXX					
8.	2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

	Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
		2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1.	Prior.....										
2.	2014.....										
3.	2015.....	XXX									
4.	2016.....	XXX	XXX								
5.	2017.....	XXX	XXX	XXX							
6.	2018.....	XXX	XXX	XXX	XXX						
7.	2019.....	XXX	XXX	XXX	XXX	XXX					
8.	2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P – PART 7A – PRIMARY LOSS SENSITIVE CONTRACTS (CONTINUED)

SECTION 4											
		NET EARNED PREMIUMS REPORTED AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
Years in Which Policies Were Issued		2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1.	Prior.....										
2.	2014.....										
3.	2015.....	XXX									
4.	2016.....	XXX	XXX								
5.	2017.....	XXX	XXX	XXX							
6.	2018.....	XXX	XXX	XXX	XXX						
7.	2019.....	XXX	XXX	XXX	XXX	XXX					
8.	2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5

		NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
Years in Which Policies Were Issued		2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1.	Prior.....										
2.	2014.....										
3.	2015.....	XXX									
4.	2016.....	XXX	XXX								
5.	2017.....	XXX	XXX	XXX							
6.	2018.....	XXX	XXX	XXX	XXX						
7.	2019.....	XXX	XXX	XXX	XXX	XXX					
8.	2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS

(\$000 OMITTED)

SECTION 1

		1	2	3	4	5	6
		Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P – Part 1							
1.	Homeowners/Farmowners.....				–		
2.	Private Passenger Auto Liability/Medical.....				–		
3.	Commercial Auto/Truck Liability/Medical.....				–		
4.	Workers' Compensation.....				–		
5.	Commercial Multiple Peril.....				–		
6.	Medical Professional Liability—Occurrence.....				–		
7.	Medical Professional Liability—Claims-made.....				–		
8.	Special Liability.....				–		
9.	Other Liability—Occurrence.....				–		
10.	Other Liabilities—Claims-made.....				–		
11.	Special Property.....				–		
12.	Auto Physical Damage.....				–		
13.	Fidelity/ Surety.....				–		
14.	Other.....				–		
15.	International.....				–		
16.	Reinsurance-Nonproportional Assumed Property.....				–		
17.	Reinsurance-Nonproportional Assumed Liability.....				–		
18.	Reinsurance-Nonproportional Assumed Financial Lines.....				–		
19.	Products Liability—Occurrence.....				–		
20.	Products Liability—Claims-made.....				–		
21.	Financial Guaranty/Mortgage Guaranty.....				–		
22.	Warranty.....				–		
23.	Totals.....				–		

SECTION 2

		INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
Years in Which Policies Were Issued		2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1.	Prior.....										
2.	2014.....										
3.	2015.....	XXX									
4.	2016.....	XXX	XXX								
5.	2017.....	XXX	XXX	XXX							
6.	2018.....	XXX	XXX	XXX	XXX						
7.	2019.....	XXX	XXX	XXX	XXX	XXX					
8.	2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

		BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
Years in Which Policies Were Issued		2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1.	Prior.....										
2.	2014.....										
3.	2015.....	XXX									
4.	2016.....	XXX	XXX								
5.	2017.....	XXX	XXX	XXX							
6.	2018.....	XXX	XXX	XXX	XXX						
7.	2019.....	XXX	XXX	XXX	XXX	XXX					
8.	2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P – PART 7B – REINSURANCE LOSS SENSITIVE CONTRACTS (CONTINUED)

SECTION 4										
Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR-END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior										
2. 2014										
3. 2015	XXX									
4. 2016	XXX	XXX								
5. 2017	XXX	XXX	XXX							
6. 2018	XXX	XXX	XXX	XXX						
7. 2019	XXX	XXX	XXX	XXX	XXX					
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5										
Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR-END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior										
2. 2014										
3. 2015	XXX									
4. 2016	XXX	XXX								
5. 2017	XXX	XXX	XXX							
6. 2018	XXX	XXX	XXX	XXX						
7. 2019	XXX	XXX	XXX	XXX	XXX					
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 6										
Years in Which Policies Were Issued	INCURRED ADJUSTABLE COMMISSIONS REPORTED AT YEAR-END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior										
2. 2014										
3. 2015	XXX									
4. 2016	XXX	XXX								
5. 2017	XXX	XXX	XXX							
6. 2018	XXX	XXX	XXX	XXX						
7. 2019	XXX	XXX	XXX	XXX	XXX					
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 7										
Years in Which Policies Were Issued	RESERVES FOR COMMISSION ADJUSTMENTS AT YEAR-END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior										
2. 2014										
3. 2015	XXX									
4. 2016	XXX	XXX								
5. 2017	XXX	XXX	XXX							
6. 2018	XXX	XXX	XXX	XXX						
7. 2019	XXX	XXX	XXX	XXX	XXX					
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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. 2014.....		
1.603. 2015.....		
1.604. 2016.....		
1.605. 2017.....		
1.606. 2018.....		
1.607. 2019.....		
1.608. 2020.....		
1.609. 2021.....		
1.610. 2022.....		
1.611. 2023.....		
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.	U.S. 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	RE	GRANGE INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	40118	41-1405571				TRUSTGARD INSURANCE COMPANY	OH	IA	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.....		150,000,000.....			55,531,521.....		*		205,531,521.....	(987,927,000).....
10322.....	31-1432675.....	GRANGE INDEMNITY INSURANCE COMPANY.....							*			365,670,000.....
40118.....	41-1405571.....	TRUSTGARD INSURANCE COMPANY.....							*			201,596,000.....
11136.....	31-1769414.....	GRANGE INSURANCE COMPANY OF MICHIGAN.....							*			32,807,000.....
11982.....	42-1610213.....	GRANGE PROPERTY & CASUALTY INSURANCE CO.....							*			135,047,000.....
14303.....	39-0367560.....	INTEGRITY INSURANCE COMPANY.....					(51,307,892).....		*		(51,307,892).....	137,657,000.....
		INTEGRITY PROPERTY & CASUALTY INS. CO.....							*			80,975,000.....
12986.....	41-2236417.....	INTEGRITY SELECT INSURANCE COMPANY.....							*			34,175,000.....
10288.....	81-3455935.....											
00000.....	31-1145043.....	GRANGEAMERICA.....					-.....				-.....	
00000.....	31-1193707.....	NORTHVIEW INSURANCE AGENCY.....					-.....				-.....	
		GRANGE MUTUAL HOLDING COMPANY.....										
00000.....	83-2982350.....											
00000.....	83-2949300.....	GRANGE HOLDINGS, INC.....		(150,000,000).....			(4,223,629).....				(154,223,629).....	
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  
REQUIRED FILINGS

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.






















		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
28.	Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?	YES
29.	Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?	YES
April Filing		
30.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
31.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
32.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
33.	Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?	NO
34.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	YES
35.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit – Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	NO
36.	Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO
37.	Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
August Filing		
38.	Will Management’s Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

	Explanation	Barcode
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.	No business written.	 1 0 3 2 2 2 0 2 3 4 2 0 0 0 0 0 0
12.	No business written.	 1 0 3 2 2 2 0 2 3 2 4 0 0 0 0 0 0
13.	No business written.	 1 0 3 2 2 2 0 2 3 3 6 0 0 0 0 0 0
14.	No business written.	 1 0 3 2 2 2 0 2 3 4 5 5 0 0 0 0 0
15.	No business written.	 1 0 3 2 2 2 0 2 3 4 9 0 0 0 0 0 0
16.	No business written.	 1 0 3 2 2 2 0 2 3 3 8 5 0 0 0 0 0
17.	No business written.	 1 0 3 2 2 2 0 2 3 4 0 1 0 0 0 0 0
18.	No business written.	 1 0 3 2 2 2 0 2 3 3 6 5 0 0 0 0 0
19.		
20.		
21.		
22.	No business written.	 1 0 3 2 2 2 0 2 3 5 0 0 0 0 0 0 0
23.	No business written.	 1 0 3 2 2 2 0 2 3 5 0 5 0 0 0 0 0
24.	No business written.	 1 0 3 2 2 2 0 2 3 2 2 4 0 0 0 0 0
25.	No business written.	 1 0 3 2 2 2 0 2 3 2 2 5 0 0 0 0 0
26.	No business written.	 1 0 3 2 2 2 0 2 3 2 2 6 0 0 0 0 0
27.	No business written.	 1 0 3 2 2 2 0 2 3 5 5 5 0 0 0 0 0
28.		
29.		
30.	No business written.	 1 0 3 2 2 2 0 2 3 2 3 0 0 0 0 0 0
31.	No business written.	 1 0 3 2 2 2 0 2 3 3 0 6 0 0 0 0 0
32.	No business written.	 1 0 3 2 2 2 0 2 3 2 1 0 0 0 0 0 0
33.	No business written.	 1 0 3 2 2 2 0 2 3 2 1 6 0 0 0 0 0
34.		
35.	No business written	 1 0 3 2 2 2 0 2 3 2 9 0 0 0 0 0 0
36.	No business written.	 1 0 3 2 2 2 0 2 3 5 6 0 0 0 0 0 0
37.	No business written	 1 0 3 2 2 2 0 2 3 5 6 5 0 0 0 0 0
38.		

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.....			1,322	1,322
2405. Investment Banking Fees.....			55,585	55,585
2497. Summary of remaining write-ins for Line 24 from overflow page.....			56,907	56,907

**OVERFLOW PAGE FOR WRITE-INS**



EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS

AS REPORTED ON LINE 17 OF THE EXHIBIT OF PREMIUMS AND LOSSES  
To Be Filed by March 1

NAIC Group Code: 0267

NAIC Company Code: 10322

	Direct Business Only			
	Prior Year	Current Year		
	1	2	3	4
	Written Premium	Written Premium	Losses Paid (deducting salvage)	Losses Unpaid (Case Base)
1. Completed operations.....				
2. Errors & omissions (E&O).....				
3. Directors & officers (D&O).....				
4. Environmental liability.....				
5. Excess workers' compensation.....	—			—
6. Commercial excess & umbrella.....	78,729	299,878		
7. Personal umbrella.....	2,971,578	3,149,876	1,932,500	750,000
8. Employment liability.....	5,969	7,311		
9. Aggregate write-ins for facilities and premises (CGL) .....			2,697	217,501
10. Internet & cyber liability.....				
11. Aggregate write-ins for other.....				
12. Total ASL 17 - other liability (sum of lines 1 through 11).....	3,056,276	3,457,065	1,935,197	967,501
Details of Write-Ins				
0901. Commercial General Liability.....			2,697	217,501
0902.....				
0903.....				
0998. Summary of remaining write-ins for Line 09 from overflow page.....				
0999. Summary of remaining write-ins for Line 09 from overflow page.....			2,697	217,501
1101.....				
1102.....				
1103.....				
1198. Summary of remaining write-ins for Line 11 from overflow page.....				
1199. Summary of remaining write-ins for Line 11 from overflow page.....				





MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023  
(To Be Filed By March 1)  
FOR THE STATE OF Georgia

NAIC Group Code: 0267

NAIC Company Code: 10322

	1 MCAS Reportable Premium / Considerations (YES/NO)
MCAS Line of Business	
1. Disability income .....	NO .....
2. Health .....	NO .....
3. Homeowners .....	NO .....
4. Individual annuity .....	NO .....
5. Individual life .....	NO .....
6. Lender-placed home and auto .....	NO .....
7. Long-term care .....	NO .....
8. Other health .....	NO .....
9. Private flood .....	NO .....
10. Private passenger auto .....	YES .....
11. Short-term limited duration health plans .....	NO .....
12. Travel .....	NO .....





MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023  
(To Be Filed By March 1)  
FOR THE STATE OF Illinois

NAIC Group Code: 0267

NAIC Company Code: 10322

	1 MCAS Reportable Premium / Considerations (YES/NO)
MCAS Line of Business	
1. Disability income .....	NO
2. Health .....	NO
3. Homeowners .....	YES
4. Individual annuity .....	NO
5. Individual life .....	NO
6. Lender-placed home and auto .....	NO
7. Long-term care .....	NO
8. Other health .....	NO
9. Private flood .....	NO
10. Private passenger auto .....	YES
11. Short-term limited duration health plans .....	NO
12. Travel .....	NO



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023  
(To Be Filed By March 1)  
FOR THE STATE OF Indiana

NAIC Group Code: 0267

NAIC Company Code: 10322

	1 MCAS Reportable Premium / Considerations (YES/NO)
MCAS Line of Business	
1. Disability income .....	NO .....
2. Health .....	NO .....
3. Homeowners .....	NO .....
4. Individual annuity .....	NO .....
5. Individual life .....	NO .....
6. Lender-placed home and auto .....	NO .....
7. Long-term care .....	NO .....
8. Other health .....	NO .....
9. Private flood .....	NO .....
10. Private passenger auto .....	YES .....
11. Short-term limited duration health plans .....	NO .....
12. Travel .....	NO .....



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023  
(To Be Filed By March 1)  
FOR THE STATE OF Kentucky

NAIC Group Code: 0267

NAIC Company Code: 10322

	1 MCAS Reportable Premium / Considerations (YES/NO)
MCAS Line of Business	
1. Disability income .....	NO .....
2. Health .....	NO .....
3. Homeowners .....	NO .....
4. Individual annuity .....	NO .....
5. Individual life .....	NO .....
6. Lender-placed home and auto .....	NO .....
7. Long-term care .....	NO .....
8. Other health .....	NO .....
9. Private flood .....	NO .....
10. Private passenger auto .....	YES .....
11. Short-term limited duration health plans .....	NO .....
12. Travel .....	NO .....



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023  
(To Be Filed By March 1)  
FOR THE STATE OF Ohio

NAIC Group Code: 0267

NAIC Company Code: 10322

	1 MCAS Reportable Premium / Considerations (YES/NO)
MCAS Line of Business	
1. Disability income .....	NO .....
2. Health .....	NO .....
3. Homeowners .....	YES .....
4. Individual annuity .....	NO .....
5. Individual life .....	NO .....
6. Lender-placed home and auto .....	NO .....
7. Long-term care .....	NO .....
8. Other health .....	NO .....
9. Private flood .....	NO .....
10. Private passenger auto .....	YES .....
11. Short-term limited duration health plans .....	NO .....
12. Travel .....	NO .....



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023  
(To Be Filed By March 1)  
FOR THE STATE OF Pennsylvania

NAIC Group Code: 0267

NAIC Company Code: 10322

	1 MCAS Reportable Premium / Considerations (YES/NO)
MCAS Line of Business	
1. Disability income .....	NO .....
2. Health .....	NO .....
3. Homeowners .....	NO .....
4. Individual annuity .....	NO .....
5. Individual life .....	NO .....
6. Lender-placed home and auto .....	NO .....
7. Long-term care .....	NO .....
8. Other health .....	NO .....
9. Private flood .....	NO .....
10. Private passenger auto .....	YES .....
11. Short-term limited duration health plans .....	NO .....
12. Travel .....	NO .....



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023  
(To Be Filed By March 1)  
FOR THE STATE OF Tennessee

NAIC Group Code: 0267

NAIC Company Code: 10322

	1 MCAS Reportable Premium / Considerations (YES/NO)
MCAS Line of Business	
1. Disability income .....	NO
2. Health .....	NO
3. Homeowners .....	YES
4. Individual annuity .....	NO
5. Individual life .....	NO
6. Lender-placed home and auto .....	NO
7. Long-term care .....	NO
8. Other health .....	NO
9. Private flood .....	NO
10. Private passenger auto .....	YES
11. Short-term limited duration health plans .....	NO
12. Travel .....	NO



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023  
(To Be Filed By March 1)  
FOR THE STATE OF Virginia

NAIC Group Code: 0267

NAIC Company Code: 10322

	1 MCAS Reportable Premium / Considerations (YES/NO)
MCAS Line of Business	
1. Disability income .....	NO .....
2. Health .....	NO .....
3. Homeowners .....	NO .....
4. Individual annuity .....	NO .....
5. Individual life .....	NO .....
6. Lender-placed home and auto .....	NO .....
7. Long-term care .....	NO .....
8. Other health .....	NO .....
9. Private flood .....	NO .....
10. Private passenger auto .....	NO .....
11. Short-term limited duration health plans .....	NO .....
12. Travel .....	NO .....