



**ANNUAL STATEMENT**  
 FOR THE YEAR ENDED DECEMBER 31, 2023  
 OF THE CONDITION AND AFFAIRS OF THE  
**INFINITY AUTO INSURANCE COMPANY**

NAIC Group Code ..... 0215, .... 0215 ..... NAIC Company Code ..... 11738 .... Employer's ID Number ..... 34-0927698.....  
*(Current)(Prior)*

Organized under the Laws of ..... OH ..... State of Domicile or Port of Entry ..... OH.....  
 Country of Domicile ..... US.....  
 Incorporated/Organized ..... 03/20/1963 ..... Commenced Business ..... 12/01/1963.....  
 Statutory Home Office ..... 1400 PROVIDENT TOWER, ONE EAST FOURTH  
 STREET ..... CINCINNATI, OH, US 45202.....  
 Main Administrative Office ..... 200 EAST RANDOLPH STREET, STE. 3300.....  
 CHICAGO, IL, US 60601 ..... 312-661-4600.....  
*(Telephone)*  
 Mail Address ..... 200 EAST RANDOLPH STREET, STE. 3300 ..... CHICAGO, IL, US 60601 .....

Primary Location of Books and  
 Records ..... 200 EAST RANDOLPH STREET, STE. 3300.....  
 CHICAGO, IL, US 60601 ..... 312-661-4600.....  
*(Telephone)*

Internet Website Address ..... WWW.KEMPER.COM.....  
 Statutory Statement Contact ..... HANNAH LEE ANDREWS ..... 312-661-4600.....  
*(Telephone)*

EFASSTATUTORYREPORTING@KEMPER.COM ..... 904-245-5601 .....

*(E-Mail)* *(Fax)*

OFFICERS

TIMOTHY JOHN TULLER, VICE PRESIDENT &  
 TREASURER/CONTROLLER.....

..... MATTHEW JOSEPH VARAGONA, PRESIDENT .....

..... PATRICK BOWEN THEILER, SECRETARY .....

DIRECTORS OR TRUSTEES

..... BRADLEY THOMAS CAMDEN ..... TIMOTHY JOHN TULLER .....

..... ADITYA NMI MAHAJAN .....

..... PATRICK BOWEN THEILER .....

..... MATTHEW JOSEPH VARAGONA .....

State of ILLINOIS .....

County of COOK .....

SS

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

X \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_

MATTHEW JOSEPH VARAGONA PATRICK BOWEN THEILER TIMOTHY JOHN TULLER  
 PRESIDENT SECRETARY VICE PRESIDENT &  
 TREASURER/CONTROLLER

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 0 1 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
17.2. Other Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	(1,595)	9,401	—	—	36,719	(23,681)	52,766	(1,876)	(4,435)	8,145	(175)	109
19.2. Other Private Passenger Auto Liability	—	—	—	—	—	—	—	—	—	—	—	16,382
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability	—	—	—	—	—	—	—	—	—	—	—	7
21.1. Private Passenger Auto Physical Damage	(553)	4,510	—	—	684	(1,154)	(1,386)	(642)	379	(60)	2,123	2
21.2. Commercial Auto Physical Damage	—	—	—	—	—	34	(2)	—	—	—	—	—
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)	(2,148)	13,911	—	—	37,403	(24,798)	51,378	(1,876)	(6,853)	8,528	(235)	18,623
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$262

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ALASKA DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 0 2 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines.....	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop.....	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood.....	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop.....	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood.....	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril.....	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril.....	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion).....	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion).....	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty.....	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine.....	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine.....	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty.....	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence.....	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made.....	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake.....	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b).....	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b).....	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual).....	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b).....	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation.....	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability–Occurrence.....	—	—	—	—	—	—	—	—	—	—	—	—
17.2. Other Liability–Claims-Made.....	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation.....	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence.....	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made.....	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....	—	—	—	—	—	—	(807)	(807)	—	—	—	—
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.....	—	—	—	—	—	—	(807)	(807)	—	—	—	—
35. TOTAL (a).....	—	—	—	—	—	—	(807)	(807)	—	—	—	—
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 0 3 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability—Occurrence	100,154	117,019	—	42,767	548	7,586	102,162	15,309	17,701	20,711	9,907	2,368
17.2. Other Liability—Claims-Made	40,563	39,346	—	19,438	—	3,211	34,677	—	618	6,678	4,004	954
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	—	—	—	—	—	—	—	—	—	—	3,503	—
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability	10,635,839	10,922,519	—	4,795,665	4,668,224	5,723,208	7,439,606	111,459	344,908	1,065,707	1,050,535	251,284
21.1. Private Passenger Auto Physical Damage	—	—	—	—	—	—	—	—	—	—	1,629	—
21.2. Commercial Auto Physical Damage	3,634,622	3,527,375	—	1,657,170	1,411,119	1,471,699	167,960	947	(918)	17,619	359,024	85,995
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)	14,411,178	14,606,259	—	6,515,040	6,079,891	7,205,704	7,744,405	127,715	362,309	1,110,715	1,428,602	340,601
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$1,233,388

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 0 4 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 0 5 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
17.2. Other Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	(4,797)	(6,298)	(377)	(1,640)	—	—	(109)
19.2. Other Private Passenger Auto Liability	—	—	—	—	—	(75)	(34,853)	492	(158)	(1,636)	345	31,081
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability	—	—	—	—	—	—	(905)	114	—	(4,469)	1,280	(9)
21.1. Private Passenger Auto Physical Damage	—	—	—	—	—	—	(41,926)	(213)	(65)	(1,073)	18	(39,241)
21.2. Commercial Auto Physical Damage	—	—	—	—	—	—	54	(5)	—	12	2	(3)
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	—	—	—	—	—	(4,872)	(83,928)	388	(600)	(8,806)	1,645	(8,160)
35. TOTAL (a)	—	—	—	—	—	—	—	—	—	—	—	(318)
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$9,904

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF COLORADO DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 0 6 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 0 7 1 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$660

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 0 8 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 1 0 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
17.2. Other Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	145,895,212	159,015,529	56,002,555	103,225,438	120,542,059	158,141,588	3,317,020	24,509,472	49,679,051	16,582,260	1,185,839	
19.2. Other Private Passenger Auto Liability	94,045,253	99,924,069	36,731,601	94,271,868	90,394,758	49,645,441	(1,867,047)	2,503,471	4,440,409	10,680,121	764,049	
19.3. Commercial Auto No-Fault (Personal Injury Protection)	(81)	77,871	—	1,081	407,483	(15,424)	1,496,302	76,777	63,855	316,982	(37)	6
19.4. Other Commercial Auto Liability	(19,798)	551,577	—	12,966	2,110,259	499,371	6,795,830	243,341	(88,257)	873,594	(2,447)	(79)
21.1. Private Passenger Auto Physical Damage	108,370,445	115,057,268	41,918,111	65,466,672	61,275,808	2,834,036	(2,447,405)	193,520	884,411	12,312,529	880,607	
21.2. Commercial Auto Physical Damage	2,163	155,643	—	2,670	82,618	(3,771)	18,070	(4,077)	(7,920)	5,624	41	37
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)	348,293,194	374,781,957	—	134,668,984	265,564,338	272,692,801	218,931,267	(681,391)	27,174,141	56,200,071	39,572,467	2,830,459
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$18,755,771

(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

1 1 7 3 8 2 0 2 3 4 3 0 1 1 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability–Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
17.2. Other Liability–Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	(31,383)	(29,543)	4,628	6,126	17,716	15,154	—
19.2. Other Private Passenger Auto Liability	21,630,490	22,656,524	—	5,971,036	18,566,639	20,202,720	15,021,268	303,637	480,699	1,502,900	1,845,633	1,421,536
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability	—	—	—	—	—	(216)	93	—	(783)	375	—	—
21.1. Private Passenger Auto Physical Damage	6,781,133	6,955,291	—	2,066,942	3,426,803	3,134,254	92,425	573	(2,141)	20,633	589,805	446,972
21.2. Commercial Auto Physical Damage	—	—	—	—	—	2	(1)	—	(2)	1	—	—
22. Aircraft (all perils)	—	—	—	—	—	—	—	—	—	—	—	—
23. Fidelity	—	—	—	—	—	—	—	—	—	—	—	—
24. Surety	—	—	—	—	—	—	—	—	—	—	—	—
26. Burglary and Theft	—	—	—	—	—	—	—	—	—	—	—	—
27. Boiler and Machinery	—	—	—	—	—	—	—	—	—	—	—	—
28. Credit	—	—	—	—	—	—	—	—	—	—	—	—
29. International	—	—	—	—	—	—	—	—	—	—	—	—
30. Warranty	—	—	—	—	—	—	—	—	—	—	—	—
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	—	—	—	—	—	—	—	—	—	—	—	—
35. TOTAL (a)	28,411,623	29,611,815	—	8,037,978	21,962,059	23,307,217	15,118,413	310,336	495,489	1,539,063	2,435,438	1,868,508
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$1,307,282

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF HAWAII DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 1 2 0 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF IDAHO DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 1 3 0 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 1 4 1 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability–Occurrence	—	—	—	—	—	—	—	—	—	—	—	1
17.2. Other Liability–Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	1,486
19.2. Other Private Passenger Auto Liability	—	—	—	—	—	—	10	—	(21)	(1)	70	1
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability	—	—	—	—	—	—	—	6	—	—	(2,222)	1
21.1. Private Passenger Auto Physical Damage	—	—	—	—	—	—	—	(10)	—	20	(4)	(2)
21.2. Commercial Auto Physical Damage	—	—	—	—	—	—	—	—	69	(3)	—	26
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	—	—	—	—	—	—	—	—	74	(8)	—	(2,128)
35. TOTAL (a)	—	—	—	—	—	—	—	—	—	—	3	—
<b>Details of Write-Ins</b>									74	(8)	—	(2,128)
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 1 5 0 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF IOWA DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 1 6 0 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF KANSAS DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 1 7 0 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR 2023



NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 1 9 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MAINE DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 2 0 0 0 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR 2023



1 1 7 3 8 2 0 2 3 4 3 0 2 1 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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



**EXHIBIT OF PREMIUMS AND LOSSES**  
**BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR 2023**

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 2 3 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability–Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
17.2. Other Liability–Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	44,513	—	180,702	—	—	—	88
19.2. Other Private Passenger Auto Liability	—	—	—	—	—	—	—	—	—	—	—	82
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability	—	—	—	—	—	—	—	—	—	—	—	7
21.1. Private Passenger Auto Physical Damage	—	—	—	—	—	—	—	—	—	—	—	71
21.2. Commercial Auto Physical Damage	—	—	—	—	—	—	—	—	—	—	—	2
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	—	—	—	—	—	44,513	—	180,702	—	—	—	250
<b>35. TOTAL (a)</b>	—	—	—	—	—	—	—	—	—	—	—	—
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 2 4 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR 2023



NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 2 6 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines.....	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop.....	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood.....	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop.....	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood.....	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril.....	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril.....	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion).....	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion).....	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty.....	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine.....	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine.....	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty.....	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence.....	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made.....	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake.....	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b).....	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b).....	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual).....	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b).....	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation.....	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability–Occurrence.....	—	—	—	—	—	—	—	—	—	—	—	—
17.2. Other Liability–Claims-Made.....	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation.....	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence.....	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made.....	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....	—	—	—	—	—	—	—	—	—	—	730	—
19.2. Other Private Passenger Auto Liability.....	—	—	—	—	—	—	—	—	—	—	736	—
19.3. Commercial Auto No-Fault (Personal Injury Protection).....	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability.....	—	—	—	—	—	—	—	—	—	—	59	—
21.1. Private Passenger Auto Physical Damage.....	—	—	—	—	—	—	—	—	—	—	601	—
21.2. Commercial Auto Physical Damage.....	—	—	—	—	—	—	—	—	—	—	23	—
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).....	—	—	—	—	—	—	—	—	—	—	2,149	—
<b>Details of Write-Ins</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MONTANA DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 2 7 0 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 2 8 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability – Occurrence												
17.2. Other Liability – Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEVADA DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 2 9 1 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	1
17.2. Other Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	84	(31,353)	14,216	53	(5,708)	568
19.2. Other Private Passenger Auto Liability	—	—	—	—	—	—	—	—	—	—	—	1,569
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability	—	—	—	—	—	—	—	—	—	—	(1)	133
21.1. Private Passenger Auto Physical Damage	—	—	—	—	—	—	—	464	(475)	(207)	40	1,455
21.2. Commercial Auto Physical Damage	—	—	—	—	—	—	—	—	—	—	—	45
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	—	—	—	—	—	—	84	(30,889)	13,741	53	(5,916)	608
35. TOTAL (a)	—	—	—	—	—	—	—	—	—	—	—	4,986
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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



**EXHIBIT OF PREMIUMS AND LOSSES**  
**BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR 2023**

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR 2023



NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR 2023



NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 3 3 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
17.2. Other Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	(42)	1,155	—	—	—	(112,566)	15,758	—	(17,869)	8,061	(2)	604
19.2. Other Private Passenger Auto Liability	(36)	2,742	—	—	—	(3,632)	20,068	—	(580)	1,938	(1)	585
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability	—	—	—	—	—	—	—	—	—	—	—	51
21.1. Private Passenger Auto Physical Damage	—	801	—	—	—	14,236	14,174	(55)	—	(33)	26	573
21.2. Commercial Auto Physical Damage	—	—	—	—	—	—	—	—	—	—	—	16
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)	(78)	4,698	—	—	—	14,236	(102,024)	35,771	—	(18,482)	10,025	(3)
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$50

(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: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	6
17.2. Other Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	3
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)	—	—	—	—	—	—	—	—	—	—	—	10,576
19.2. Other Private Passenger Auto Liability	—	—	—	—	—	—	—	—	—	1	—	9,380
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability	—	—	—	—	—	—	—	—	—	—	—	776
21.1. Private Passenger Auto Physical Damage	—	—	—	—	—	—	—	—	—	—	—	8,772
21.2. Commercial Auto Physical Damage	—	—	—	—	—	—	—	—	—	—	—	259
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	—	—	—	—	—	—	—	—	—	1	—	—
35. TOTAL (a)	—	—	—	—	—	—	—	—	—	—	—	29,772
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR 2023



NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OREGON DURING THE YEAR 2023



1 1 7 3 8 2 0 2 3 4 3 0 3 8 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 3 9 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability–Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
17.2. Other Liability–Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	260,028	1,338,915	1,503,180	74,688	497,382	483,578	—
19.2. Other Private Passenger Auto Liability	16,998,066	18,817,310	—	4,183,046	9,632,096	10,566,370	8,944,754	283,990	347,009	576,965	1,696,610	414,873
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	(130)	—	(2,020)	170	—	22	(187)	—	—
19.4. Other Commercial Auto Liability	—	—	—	130	—	(381)	(3)	—	(15,218)	726	—	—
21.1. Private Passenger Auto Physical Damage	5,002,021	5,590,824	—	1,227,033	4,647,864	4,351,331	5,947	855	3,169	23,770	498,181	123,032
21.2. Commercial Auto Physical Damage	—	—	—	—	—	142	(16)	—	48	2	—	—
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	—	22,000,087	24,408,134	—	5,410,079	14,539,988	16,254,357	10,454,032	359,533	832,412	1,084,854	2,194,791
35. TOTAL (a)	—	—	—	—	—	—	—	—	—	—	—	537,905
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$1,743,729

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 4 0 0 0 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability–Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
17.2. Other Liability–Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	1
19.2. Other Private Passenger Auto Liability	—	—	—	—	—	—	—	—	—	—	—	1
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	—	—	—	—	—	—	—	—	108	(3)	—	(1,221)
35. TOTAL (a)	—	—	—	—	—	—	—	—	—	—	1	—
<b>Details of Write-Ins</b>									108	(3)	—	(1,221)
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 4 3 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines.....	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop.....	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood.....	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop.....	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood.....	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril.....	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril.....	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion).....	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion).....	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty.....	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine.....	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine.....	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty.....	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence.....	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made.....	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake.....	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b).....	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b).....	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual).....	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b).....	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b).....	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation.....	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability–Occurrence.....	—	—	—	—	—	—	—	—	—	—	—	—
17.2. Other Liability–Claims-Made.....	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation.....	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence.....	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made.....	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....	—	—	—	—	—	—	—	—	—	—	—	358
19.2. Other Private Passenger Auto Liability.....	—	—	—	—	—	—	(4,189)	(4,196)	(1)	98	1	321
19.3. Commercial Auto No-Fault (Personal Injury Protection).....	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability.....	—	—	—	—	—	—	—	1	—	(176)	—	29
21.1. Private Passenger Auto Physical Damage.....	—	—	—	—	—	—	—	7	(1)	—	(1)	287
21.2. Commercial Auto Physical Damage.....	—	—	—	—	—	—	—	15	—	—	5	10
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.....	—	—	—	—	—	—	(4,189)	(4,173)	(2)	—	(74)	1
35. TOTAL (a).....	—	—	—	—	—	—	—	—	—	—	—	1,005
<b>Details of Write-Ins</b>												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 4 4 1 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability–Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
17.2. Other Liability–Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
18.1. Products Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
18.2. Products Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	(51)	36
19.2. Other Private Passenger Auto Liability	—	—	—	—	—	—	—	—	—	(2,838)	(2,838)	(23,518)
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability	—	—	—	—	—	—	—	—	—	—	—	9
21.1. Private Passenger Auto Physical Damage	—	—	—	—	—	—	—	—	—	(37)	(37)	(11,670)
21.2. Commercial Auto Physical Damage	—	—	—	—	—	—	—	—	—	—	—	3
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	—	—	—	—	—	—	—	—	—	(2,875)	(2,875)	(35,239)
35. TOTAL (a)	—	—	—	—	—	—	—	—	—	(2,875)	(2,875)	113
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$900

(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: 0215

NAIC Company Code: 11738

1 1 7 3 8 2 0 2 3 4 3 0 4 5 0 0 0

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF VERMONT DURING THE YEAR 2023



1 1 7 3 8 2 0 2 3 4 3 0 4 6 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 4 7 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 4 8 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR 2023

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1. Allied Lines												
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1. Commercial Multiple Peril (Non-Liability Portion)												
5.2. Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence												
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1. Comprehensive (hospital and medical) ind (b)												
13.2. Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1. Vision Only (b)												
15.2. Dental Only (b)												
15.3. Disability Income (b)												
15.4. Medicare Supplement (b)												
15.5. Medicaid Title XIX (b)												
15.6. Medicare Title XVIII (b)												
15.7. Long-Term Care (b)												
15.8. Federal Employees Health Benefits Plan (b)												
15.9. Other Health (b)												
16. Workers' Compensation												
17.1. Other Liability–Occurrence												
17.2. Other Liability–Claims-Made												
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence												
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2. Other Private Passenger Auto Liability												
19.3. Commercial Auto No-Fault (Personal Injury Protection)												
19.4. Other Commercial Auto Liability												
21.1. Private Passenger Auto Physical Damage												
21.2. Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 5 0 0 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF WYOMING DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 5 1 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1. Allied Lines.....												
2.2. Multiple Peril Crop.....												
2.3. Federal Flood.....												
2.4. Private Crop.....												
2.5. Private Flood.....												
3. Farmowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1. Commercial Multiple Peril (Non-Liability Portion).....												
5.2. Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9. Inland Marine.....												
10. Financial Guaranty.....												
11.1. Medical Professional Liability – Occurrence.....												
11.2. Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1. Comprehensive (hospital and medical) ind (b).....												
13.2. Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1. Vision Only (b).....												
15.2. Dental Only (b).....												
15.3. Disability Income (b).....												
15.4. Medicare Supplement (b).....												
15.5. Medicaid Title XIX (b).....												
15.6. Medicare Title XVIII (b).....												
15.7. Long-Term Care (b).....												
15.8. Federal Employees Health Benefits Plan (b).....												
15.9. Other Health (b).....												
16. Workers' Compensation.....												
17.1. Other Liability–Occurrence.....												
17.2. Other Liability–Claims-Made.....												
17.3. Excess Workers' Compensation.....												
18.1. Products Liability – Occurrence.....												
18.2. Products Liability – Claims-Made.....												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2. Other Private Passenger Auto Liability.....												
19.3. Commercial Auto No-Fault (Personal Injury Protection).....												
19.4. Other Commercial Auto Liability.....												
21.1. Private Passenger Auto Physical Damage.....												
21.2. Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												
<b>Details of Write-Ins</b>												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

NONE

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

GRAND TOTAL DURING THE YEAR 2023

1 1 7 3 8 2 0 2 3 4 3 0 5 9 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 11738

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	—	—	—	—	—	—	—	—	—	—	—	—
2.1. Allied Lines	—	—	—	—	—	—	—	—	—	—	—	—
2.2. Multiple Peril Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.3. Federal Flood	—	—	—	—	—	—	—	—	—	—	—	—
2.4. Private Crop	—	—	—	—	—	—	—	—	—	—	—	—
2.5. Private Flood	—	—	—	—	—	—	—	—	—	—	—	—
3. Farmowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
4. Homeowners Multiple Peril	—	—	—	—	—	—	—	—	—	—	—	—
5.1. Commercial Multiple Peril (Non-Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
5.2. Commercial Multiple Peril (Liability Portion)	—	—	—	—	—	—	—	—	—	—	—	—
6. Mortgage Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
8. Ocean Marine	—	—	—	—	—	—	—	—	—	—	—	—
9. Inland Marine	—	—	—	—	—	—	—	—	—	—	—	—
10. Financial Guaranty	—	—	—	—	—	—	—	—	—	—	—	—
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
12. Earthquake	—	—	—	—	—	—	—	—	—	—	—	—
13.1. Comprehensive (hospital and medical) ind (b)	—	—	—	—	—	—	—	—	—	—	—	—
13.2. Comprehensive (hospital and medical) group (b)	—	—	—	—	—	—	—	—	—	—	—	—
14. Credit A&H (Group and Individual)	—	—	—	—	—	—	—	—	—	—	—	—
15.1. Vision Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.2. Dental Only (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.3. Disability Income (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.4. Medicare Supplement (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.5. Medicaid Title XIX (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.6. Medicare Title XVIII (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.7. Long-Term Care (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.8. Federal Employees Health Benefits Plan (b)	—	—	—	—	—	—	—	—	—	—	—	—
15.9. Other Health (b)	—	—	—	—	—	—	—	—	—	—	—	—
16. Workers' Compensation	—	—	—	—	—	—	—	—	—	—	—	—
17.1. Other Liability—Occurrence	100,154	117,019	—	42,767	548	7,586	102,162	15,309	17,701	20,711	9,907	2,376
17.2. Other Liability—Claims-Made	40,563	39,346	—	19,438	—	3,211	34,677	—	618	6,678	4,004	957
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)	145,895,170	159,016,684	—	56,002,555	103,493,799	121,732,567	159,845,856	3,397,457	25,005,061	50,185,844	16,582,207	1,201,501
19.2. Other Private Passenger Auto Liability	132,672,178	141,410,046	—	46,885,693	122,502,335	121,065,302	73,699,003	(1,284,239)	3,316,205	6,531,272	14,233,254	2,630,667
19.3. Commercial Auto No-Fault (Personal Injury Protection)	(81)	77,871	—	951	407,483	(17,444)	1,496,472	76,777	63,877	316,795	(37)	6
19.4. Other Commercial Auto Liability	10,616,041	11,474,096	—	4,808,761	6,778,483	6,221,091	14,235,640	354,800	230,682	1,941,687	1,048,088	252,365
21.1. Private Passenger Auto Physical Damage	120,153,046	127,608,694	—	45,212,076	73,556,259	68,732,980	2,930,274	(2,446,079)	192,553	929,277	13,351,173	1,465,690
21.2. Commercial Auto Physical Damage	3,636,785	3,683,018	—	1,659,840	1,493,737	1,468,349	186,000	(3,130)	(8,700)	23,250	359,065	86,419
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)	413,113,856	443,426,774	—	154,632,081	308,232,644	319,213,642	252,530,084	110,895	28,817,997	59,955,514	45,587,661	5,639,981
<b>Details of Write-Ins</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$23,051,946

(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 .

## Annual Statement for the Year 2023 of the Infinity Auto Insurance Company

**SCHEDULE F - PART 1**

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 + 7							
<b>Affiliates, U.S. Non-Pool, Other</b>														
31-0943862	22268	Infinity Insurance Company	IN	165,884			-	-						
0399999 - Affiliates, U.S. Non-Pool, Other				165,884			-	-						
0499999 - Affiliates, U.S. Non-Pool, Total				165,884			-	-						
0899999 - Total Affiliates				165,884			-	-						
<b>Total Other U.S. Unaffiliated Insurers</b>														
75-0784127	33014	Transport Insurance Company	OH			5,134	5,134							
0999999 - Total Other U.S. Unaffiliated Insurers						5,134	5,134							
9999999 - Totals				165,884		5,134	5,134							

**SCHEDULE F - PART 2**

Premium Portfolio Reinsurance Effectuated or (Canceled) During Current Year

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

**NONE**

## Annual Statement for the Year 2023 of the Infinity Auto Insurance Company

**SCHEDULE F - PART 3**

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute Included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15- [17+18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
<b>Total Authorized, Affiliates, U.S. Intercompany Pooling</b>																			
31-0943862	22268	Infinity Insurance Company	IN		578,997	—	—	104,737	29,949	152,926	69,169	154,632		511,413				511,413	
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling					578,997	—	—	104,737	29,949	152,926	69,169	154,632		511,413				511,413	
0499999 - Total Authorized, Affiliates, U.S. Non-Pool, Total																			
0899999 - Total Authorized, Affiliates, Total Authorized - Affiliates					578,997	—	—	104,737	29,949	152,926	69,169	154,632		511,413				511,413	
1499999 - Total Authorized Excluding Protected Cells					578,997	—	—	104,737	29,949	152,926	69,169	154,632		511,413				511,413	
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells					578,997	—	—	104,737	29,949	152,926	69,169	154,632		511,413				511,413	
9999999 - Totals					578,997	—	—	104,737	29,949	152,926	69,169	154,632		511,413				511,413	

**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				Net Recoverable Total Funds Held, Payables & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 – 27)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 28*120%)	30	31	32	33	34
ID Number From Col. 1	Name of Reinsurer From Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral													
<b>Total Authorized, Affiliates, U.S. Intercompany Pooling</b>																		
31-0943862	Infinity Insurance Company								511,413		—	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling				XXX					511,413		—	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
0899999 - Total Authorized, Affiliates, Total Authorized - Affiliates				XXX					511,413		—							XXX
1499999 - Total Authorized Excluding Protected Cells				XXX					511,413		—							XXX
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells				XXX					511,413		—							XXX
9999999 - Totals				XXX					511,413		—							XXX

## Annual Statement for the Year 2023 of the Infinity Auto Insurance Company

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

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

1	2	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses								44	45	46	47	48	49	50	51	52	53
		37	38	39	40	41	42	43	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)										
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 Cols. 37 + 42 (In total should equal Cols. 7 + 8)	Overdue Cols. 38 + 39 + 40 + 41	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	44	45	46	47	48	49	50	51	52	53
<b>Total Authorized, Affiliates, U.S. Intercompany Pooling</b>																			
31-0943862	Infinity Insurance Company																	YES	
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling																		XXX	
0499999 - Total Authorized, Affiliates, U.S. Non-Pool, Total																		XXX	
1499999 - Total Authorized Excluding Protected Cells																		XXX	
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells																		XXX	
9999999 - Totals																		XXX	

Annual Statement for the Year 2023 of the Infinity Auto Insurance Company

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

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

1	2	Provision for Certified Reinsurance															69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)			
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0	66	67	68			
ID Number From Col. 1	Name of Reinsurer From Col. 3	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements (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	Amount of Credit Allowed for Net Recoverables (Col. 57 +[Col. 45 * 20%])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days	Amount of Credit Allowed for Net Recoverables (Col. 58 * Col. 61])	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col.24; not to exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 -Col. 66)	20% of Amount in Col. 67			
<b>Total Authorized, Affiliates, U.S. Intercompany Pooling</b>																				
31-0943862	Infinity Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling		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			
1499999 – Total Authorized Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		XXX	XXX	XXX				XXX	XXX											
9999999 – Totals		XXX	XXX	XXX				XXX	XXX											

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

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

1 ID Number From Col. 1	2 Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0  20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0  Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col 26 * 20% or [Cols. 40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
<b>Total Authorized, Affiliates, U.S. Intercompany Pooling</b>										
31-0943862	Infinity Insurance Company	—	XXX	XXX	—	—	—	XXX	XXX	—
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling		—	XXX	XXX	—	—	—	XXX	XXX	—
1499999 - Total Authorized Excluding Protected Cells		—	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
9999999 - Totals.....				

**NONE**

**SCHEDULE F - PART 5**

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

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

**NONE**

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

	1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated
6.	Infinity Insurance Company.....	511,413	578,527	Yes.....
7.				
8.				
9.				
10.				

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

**SCHEDULE F - PART 6**

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12).....	11,297,143		11,297,143
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.....	5,460,384		5,460,384
6. Net amount recoverable from reinsurers.....		508,974,027	508,974,027
7. Protected cell assets (Line 27).....			
8. Totals (Line 28).....	16,757,527	508,974,027	525,731,554
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	—	355,421,213	355,421,213
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	128,955	(1,102,896)	(973,941)
11. Unearned premiums (Line 9).....		154,632,082	154,632,082
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.....	8,811,840		8,811,840
19. Total liabilities excluding protected cell business (Line 26).....	8,940,795	508,950,399	517,891,194
20. Protected cell liabilities (Line 27).....			
21. Surplus as regards policyholders (Line 37).....	7,816,732	XXX	7,816,732
22. Totals (Line 38).....	16,757,527	508,950,399	525,707,926

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

(30) Schedule H - Part 1

**NONE**

(30) Write-Ins for Line 11 - Deductions

**NONE**

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

**NONE**

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

**NONE**

(31) Schedule H - Part 4 - Reinsurance

**NONE**

(32) Schedule H - Part 5

**NONE**

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)		
				4 Ceded	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX	
2. 2014	—	—	—	—	—	—	—	—	—	—	—	—	
3. 2015	—	—	—	—	—	—	—	—	—	—	—	—	
4. 2016	—	—	—	—	—	—	—	—	—	—	—	—	
5. 2017	—	—	—	—	—	—	—	—	—	—	—	—	
6. 2018	—	—	—	—	—	—	—	—	—	—	—	—	
7. 2019	—	—	—	—	—	—	—	—	—	—	—	—	
8. 2020	—	—	—	—	—	—	—	—	—	—	—	—	
9. 2021	—	—	—	—	—	—	—	—	—	—	—	—	
10. 2022	—	—	—	—	—	—	—	—	—	—	—	—	
11. 2023	—	—	—	—	—	—	—	—	—	—	—	—	
12. Totals	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX	

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	—	—			
1. Prior	—	—	—	—	—	—	—	—	—	—	—	—	—
2. 2014	—	—	—	—	—	—	—	—	—	—	—	—	—
3. 2015	—	—	—	—	—	—	—	—	—	—	—	—	—
4. 2016	—	—	—	—	—	—	—	—	—	—	—	—	—
5. 2017	—	—	—	—	—	—	—	—	—	—	—	—	—
6. 2018	—	—	—	—	—	—	—	—	—	—	—	—	—
7. 2019	—	—	—	—	—	—	—	—	—	—	—	—	—
8. 2020	—	—	—	—	—	—	—	—	—	—	—	—	—
9. 2021	—	—	—	—	—	—	—	—	—	—	—	—	—
10. 2022	—	—	—	—	—	—	—	—	—	—	—	—	—
11. 2023	—	—	—	—	—	—	—	—	—	—	—	—	—
12. Totals	—	—	—	—	—	—	—	—	—	—	—	—	—

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	—	—	—	—	—	—	—	—		—	—
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—
2. 2014	—	—	—	—	—	—	—	—	—	—	—
3. 2015	—	—	—	—	—	—	—	—	—	—	—
4. 2016	—	—	—	—	—	—	—	—	—	—	—
5. 2017	—	—	—	—	—	—	—	—	—	—	—
6. 2018	—	—	—	—	—	—	—	—	—	—	—
7. 2019	—	—	—	—	—	—	—	—	—	—	—
8. 2020	—	—	—	—	—	—	—	—	—	—	—
9. 2021	—	—	—	—	—	—	—	—	—	—	—
10. 2022	—	—	—	—	—	—	—	—	—	—	—
11. 2023	—	—	—	—	—	—	—	—	—	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)		
				4 Ceded	5 Direct and Assumed	6 Ceded	7 Direct and Assumed	8 Ceded	9 Direct and Assumed				
1. Prior	XXX	XXX	XXX	1	1	—	—	—	—	—	—	XXX	
2. 2014	838	1	837	549	5	20	2	91	1	5	652	214	
3. 2015	829	1	828	569	4	19	—	90	2	4	672	216	
4. 2016	835	1	834	578	13	18	2	94	4	4	671	212	
5. 2017	808	1	807	540	4	15	—	90	3	4	638	202	
6. 2018	873	88	795	535	36	15	(1)	92	4	3	603	202	
7. 2019	973	973	—	615	615	17	17	126	126	—	—	221	
8. 2020	1,189	1,189	—	623	623	17	17	121	121	—	—	198	
9. 2021	1,269	1,269	—	816	816	19	19	162	162	—	—	286	
10. 2022	1,293	1,293	—	714	714	12	12	155	155	—	—	305	
11. 2023	1,607	1,607	—	989	989	2	2	118	118	—	—	231	
12. Totals	XXX	XXX	XXX	6,531	3,822	154	70	1,139	696	20	3,236	XXX	

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Outstanding	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded								
1. Prior	1	1	—	—	—	—	—	—	—	—	—	—	—			
2. 2014	—	—	3	3	—	—	—	—	1	1	—	—	—			
3. 2015	9	9	(3)	(3)	—	—	—	—	(1)	(1)	—	—	—			
4. 2016	2	2	—	—	—	—	—	—	—	—	—	—	—			
5. 2017	5	5	(1)	(1)	1	1	1	1	1	1	—	—	1			
6. 2018	8	8	1	1	1	1	2	2	3	3	—	—	1			
7. 2019	15	15	5	5	2	2	7	7	6	6	—	—	2			
8. 2020	24	24	11	11	3	3	14	14	4	4	—	—	4			
9. 2021	53	53	33	33	5	5	31	31	10	10	—	—	8			
10. 2022	141	141	88	88	5	5	44	44	21	21	—	—	20			
11. 2023	224	224	375	375	1	1	46	46	69	69	—	—	44			
12. Totals	482	482	512	512	18	18	146	146	115	115	—	—	80			

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—
2. 2014	664	12	652	79,185	1,156,787	77,897	—	—	—	—	—
3. 2015	684	12	672	82,480	1,175,576	81,159	—	—	—	—	—
4. 2016	693	22	671	83,005	2,208,760	80,456	—	—	—	—	—
5. 2017	652	14	638	80,734	1,432,842	79,058	—	—	—	—	—
6. 2018	658	55	603	75,371	62,491	76,815	—	—	—	—	—
7. 2019	792	792	—	81,374	81,374	—	—	—	—	—	—
8. 2020	817	817	—	68,751	68,751	—	—	—	—	—	—
9. 2021	1,128	1,128	—	88,916	88,916	—	—	—	—	—	—
10. 2022	1,180	1,180	—	91,252	91,252	—	—	—	—	—	—
11. 2023	1,825	1,825	—	113,550	113,550	—	—	—	—	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—

**SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**  
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)		
				4 Ceded	5 Direct and Assumed	6 Ceded	7 Direct and Assumed	8 Ceded	9 Direct and Assumed				
1. Prior	XXX	XXX	XXX	1	1	—	—	—	—	—	—	XXX	
2. 2014	80	8	72	58	7	3	—	6	—	—	60	11	
3. 2015	96	10	86	77	7	5	1	6	(1)	1	81	14	
4. 2016	111	7	104	88	8	4	—	7	(2)	1	93	14	
5. 2017	123	5	118	82	(3)	4	(1)	7	(2)	1	99	14	
6. 2018	141	20	121	81	(2)	4	(1)	8	(3)	—	99	14	
7. 2019	179	179	—	97	97	4	4	10	10	—	—	17	
8. 2020	283	283	—	119	119	4	4	14	14	—	—	16	
9. 2021	333	333	—	163	163	6	6	19	19	—	—	23	
10. 2022	428	428	—	161	161	2	2	19	19	—	—	33	
11. 2023	567	567	—	78	78	—	—	17	17	—	—	26	
12. Totals	XXX	XXX	XXX	1,006	637	37	16	114	72	3	432	XXX	

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Outstanding	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	—	—			
1. Prior	—	—	—	—	—	—	—	—	—	—	—	—	—
2. 2014	—	—	—	—	—	—	—	—	—	—	—	—	—
3. 2015	—	—	—	—	—	—	—	—	—	—	—	—	—
4. 2016	1	1	—	—	—	—	—	—	—	—	—	—	—
5. 2017	5	5	—	—	—	—	—	—	—	—	—	—	—
6. 2018	2	2	—	—	—	—	1	1	1	1	1	—	—
7. 2019	5	5	1	1	—	—	1	1	1	1	1	—	—
8. 2020	16	16	3	3	—	—	3	3	1	1	1	—	—
9. 2021	40	40	12	12	1	1	8	8	2	2	2	—	1
10. 2022	70	70	40	40	1	1	15	15	5	5	5	—	2
11. 2023	67	67	141	141	—	—	22	22	10	10	10	—	5
12. Totals	205	205	198	198	3	3	50	50	21	21	—	—	8

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	—	—	—	—	—	—	—	—		—	—
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—
2. 2014	67	7	60	83,917	89,167	83,333	—	—	—	—	—
3. 2015	88	7	81	91,181	65,337	94,186	—	—	—	—	—
4. 2016	101	8	93	90,628	108,523	89,423	—	—	—	—	—
5. 2017	100	1	99	81,453	23,734	83,898	—	—	—	—	—
6. 2018	97	(2)	99	68,763	(10,217)	81,818	—	—	—	—	—
7. 2019	120	120	—	66,978	66,978	—	—	—	—	—	—
8. 2020	160	160	—	56,603	56,603	—	—	—	—	—	—
9. 2021	251	251	—	75,461	75,461	—	—	—	—	—	—
10. 2022	314	314	—	73,445	73,445	—	—	—	—	—	—
11. 2023	335	335	—	58,959	58,959	—	—	—	—	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—

**SCHEDULE P - PART 1D - WORKERS' COMPENSATION**

(EXCLUDING EXCESS WORKERS' COMPENSATION)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX
2. 2014	—	—	—	—	—	—	—	—	—	—	—	—
3. 2015	—	—	—	—	—	—	—	—	—	—	—	—
4. 2016	—	—	—	—	—	—	—	—	—	—	—	—
5. 2017	—	—	—	—	—	—	—	—	—	—	—	—
6. 2018	—	—	—	—	—	—	—	—	—	—	—	—
7. 2019	—	—	—	—	—	—	—	—	—	—	—	—
8. 2020	—	—	—	—	—	—	—	—	—	—	—	—
9. 2021	—	—	—	—	—	—	—	—	—	—	—	—
10. 2022	—	—	—	—	—	—	—	—	—	—	—	—
11. 2023	—	—	—	—	—	—	—	—	—	—	—	—
12. Totals	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX

**NONE**

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior	—	—	—	—	—	—	—	—	—	—	—	—	—
2. 2014	—	—	—	—	—	—	—	—	—	—	—	—	—
3. 2015	—	—	—	—	—	—	—	—	—	—	—	—	—
4. 2016	—	—	—	—	—	—	—	—	—	—	—	—	—
5. 2017	—	—	—	—	—	—	—	—	—	—	—	—	—
6. 2018	—	—	—	—	—	—	—	—	—	—	—	—	—
7. 2019	—	—	—	—	—	—	—	—	—	—	—	—	—
8. 2020	—	—	—	—	—	—	—	—	—	—	—	—	—
9. 2021	—	—	—	—	—	—	—	—	—	—	—	—	—
10. 2022	—	—	—	—	—	—	—	—	—	—	—	—	—
11. 2023	—	—	—	—	—	—	—	—	—	—	—	—	—
12. Totals	—	—	—	—	—	—	—	—	—	—	—	—	—

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—
2. 2014	—	—	—	—	—	—	—	—	—	—	—
3. 2015	—	—	—	—	—	—	—	—	—	—	—
4. 2016	—	—	—	—	—	—	—	—	—	—	—
5. 2017	—	—	—	—	—	—	—	—	—	—	—
6. 2018	—	—	—	—	—	—	—	—	—	—	—
7. 2019	—	—	—	—	—	—	—	—	—	—	—
8. 2020	—	—	—	—	—	—	—	—	—	—	—
9. 2021	—	—	—	—	—	—	—	—	—	—	—
10. 2022	—	—	—	—	—	—	—	—	—	—	—
11. 2023	—	—	—	—	—	—	—	—	—	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)		
				4 Ceded	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX	
2. 2014	—	—	—	—	—	—	—	—	—	—	—	—	
3. 2015	—	—	—	—	—	—	—	—	—	—	—	—	
4. 2016	—	—	—	—	—	—	—	—	—	—	—	—	
5. 2017	—	—	—	—	—	—	—	—	—	—	—	—	
6. 2018	—	—	—	—	—	—	—	—	—	—	—	—	
7. 2019	—	—	—	—	—	—	—	—	—	—	—	—	
8. 2020	—	—	—	—	—	—	—	—	—	—	—	—	
9. 2021	1	1	—	—	—	—	—	—	—	—	—	—	
10. 2022	1	1	—	—	—	—	—	—	—	—	—	—	
11. 2023	1	1	—	—	—	—	—	—	—	—	—	—	
12. Totals	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX	

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	—	—			
1. Prior	1	1	—	—	—	—	—	—	—	—	—	—	—
2. 2014	—	—	—	—	—	—	—	—	—	—	—	—	—
3. 2015	—	—	—	—	—	—	—	—	—	—	—	—	—
4. 2016	—	—	—	—	—	—	—	—	—	—	—	—	—
5. 2017	—	—	—	—	—	—	—	—	—	—	—	—	—
6. 2018	—	—	—	—	—	—	—	—	—	—	—	—	—
7. 2019	—	—	—	—	—	—	—	—	—	—	—	—	—
8. 2020	—	—	—	—	—	—	—	—	—	—	—	—	—
9. 2021	—	—	—	—	—	—	—	—	—	—	—	—	—
10. 2022	—	—	—	—	—	—	—	—	—	—	—	—	—
11. 2023	—	—	1	1	—	—	—	—	—	—	—	—	—
12. Totals	1	1	1	1	—	—	—	—	—	—	—	—	—

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	—	—	—	—	—	—	—	—		—	—
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—
2. 2014	—	—	—	—	—	—	—	—	—	—	—
3. 2015	—	—	—	—	—	—	—	—	—	—	—
4. 2016	—	—	—	—	—	—	—	—	—	—	—
5. 2017	—	—	—	—	—	—	—	—	—	—	—
6. 2018	—	—	—	—	—	—	—	—	—	—	—
7. 2019	—	—	—	—	—	—	—	—	—	—	—
8. 2020	—	—	—	—	—	—	—	—	—	—	—
9. 2021	—	—	—	0.610	—	—	—	—	—	—	—
10. 2022	—	—	—	23.845	—	—	—	—	—	—	—
11. 2023	1	1	—	87.475	—	87.475	—	—	—	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—

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

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Total Net Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)		
				4 Ceded	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX	
2. 2014	—	—	—	—	—	—	—	—	—	—	—	—	
3. 2015	—	—	—	—	—	—	—	—	—	—	—	—	
4. 2016	—	—	—	—	—	—	—	—	—	—	—	—	
5. 2017	—	—	—	—	—	—	—	—	—	—	—	—	
6. 2018	—	—	—	—	—	—	—	—	—	—	—	—	
7. 2019	—	—	—	—	—	—	—	—	—	—	—	—	
8. 2020	—	—	—	—	—	—	—	—	—	—	—	—	
9. 2021	—	—	—	—	—	—	—	—	—	—	—	—	
10. 2022	—	—	—	—	—	—	—	—	—	—	—	—	
11. 2023	—	—	—	—	—	—	—	—	—	—	—	—	
12. Totals	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX	

NONE

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	—	—			
1. Prior	—	—	—	—	—	—	—	—	—	—	—	—	—
2. 2014	—	—	—	—	—	—	—	—	—	—	—	—	—
3. 2015	—	—	—	—	—	—	—	—	—	—	—	—	—
4. 2016	—	—	—	—	—	—	—	—	—	—	—	—	—
5. 2017	—	—	—	—	—	—	—	—	—	—	—	—	—
6. 2018	—	—	—	—	—	—	—	—	—	—	—	—	—
7. 2019	—	—	—	—	—	—	—	—	—	—	—	—	—
8. 2020	—	—	—	—	—	—	—	—	—	—	—	—	—
9. 2021	—	—	—	—	—	—	—	—	—	—	—	—	—
10. 2022	—	—	—	—	—	—	—	—	—	—	—	—	—
11. 2023	—	—	—	—	—	—	—	—	—	—	—	—	—
12. Totals	—	—	—	—	—	—	—	—	—	—	—	—	—

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	35 Losses Unpaid		36 Loss Expenses Unpaid	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		—	—	—	—
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		—	—	—	—
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	—	—
2. 2014	—	—	—	—	—	—	—	—	—	—	—	—	—
3. 2015	—	—	—	—	—	—	—	—	—	—	—	—	—
4. 2016	—	—	—	—	—	—	—	—	—	—	—	—	—
5. 2017	—	—	—	—	—	—	—	—	—	—	—	—	—
6. 2018	—	—	—	—	—	—	—	—	—	—	—	—	—
7. 2019	—	—	—	—	—	—	—	—	—	—	—	—	—
8. 2020	—	—	—	—	—	—	—	—	—	—	—	—	—
9. 2021	—	—	—	—	—	—	—	—	—	—	—	—	—
10. 2022	—	—	—	104.768	104.768	—	—	—	—	—	—	—	—
11. 2023	—	—	—	87.321	87.321	—	—	—	—	—	—	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	—	—

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX	
2. 2022				—	—	—	—	—	—	—	—	XXX	
3. 2023	1	1	—	—	—	—	—	—	—	—	—	XXX	
4. Totals	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX	

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior	—	—	—	—	—	—	—	—	—	—	—	—	—
2. 2022	—	—	—	—	—	—	—	—	—	—	—	—	—
3. 2023	—	—	—	—	—	—	—	—	—	—	—	—	—
4. Totals	—	—	—	—	—	—	—	—	—	—	—	—	—

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—
2. 2022	—	—	—	—	—	—	—	—	—	—	—
3. 2023	—	—	—	—	—	—	—	—	—	—	—
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—

**SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)			
				4 Ceded	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded					
1. Prior	XXX	XXX	XXX	(11)	(11)	—	—	2	2	—	—	XXX		
2. 2022	729	729	—	617	617	—	—	78	78	—	—	233		
3. 2023	1,052	1,052	—	707	707	—	—	76	76	—	—	214		
4. Totals	XXX	XXX	XXX	1,314	1,314	1	1	157	157	—	—	XXX		
Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Outstanding Direct and Assumed	
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded				
1. Prior	8	8	(2)	(2)	—	—	1	1	4	4	(1)	—	—	
2. 2022	1	1	(9)	(9)	—	—	1	1	—	—	—	—	—	
3. 2023	22	22	(10)	(10)	—	—	3	3	5	5	1	—	7	
4. Totals	30	30	(21)	(21)	—	—	5	5	9	9	—	—	7	
Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)				Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount		35 Losses Unpaid	36 Loss Expenses Unpaid
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	Loss	32 Loss Expense	33		35 Losses Unpaid	36 Loss Expenses Unpaid		
	XXX	XXX	XXX	XXX	XXX	XXX	—	XXX	XXX		—	—	—	—
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	—	XXX	XXX		—	—	—	—
2. 2022	690	690	—	94.557	94.557	—	—	—	—		—	—	—	—
3. 2023	802	802	—	76.253	76.253	—	—	—	—		—	—	—	—
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	—	XXX	XXX		—	—	—	—

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior	2	2	3	3	3	3	3	3	3	3	-	-
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			-	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior	184	171	157	156	156	156	156	156	156	156	-	-
2. 2014	573	575	564	565	562	562	562	562	562	562	-	-
3. 2015	XXX	586	585	584	584	584	584	584	584	584	-	-
4. 2016	XXX	XXX	598	585	581	581	581	581	581	581	-	-
5. 2017	XXX	XXX	XXX	553	551	551	551	551	551	551	-	-
6. 2018	XXX	XXX	XXX	XXX	515	515	515	515	515	515	-	-
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			-	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior	18	19	18	16	16	16	16	16	16	16	-	-
2. 2014	54	52	54	55	54	54	54	54	54	54	-	-
3. 2015	XXX	68	70	74	74	74	74	74	74	74	-	-
4. 2016	XXX	XXX	79	80	84	84	84	84	84	84	-	-
5. 2017	XXX	XXX	XXX	89	90	90	90	90	90	90	-	-
6. 2018	XXX	XXX	XXX	XXX	88	88	88	88	88	88	-	-
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			-	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

(EXCLUDING EXCESS WORKERS' COMPENSATION)

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior	18	19	18	16	16	16	16	16	16	16	-	-
2. 2014	54	52	54	55	54	54	54	54	54	54	-	-
3. 2015	XXX	68	70	74	74	74	74	74	74	74	-	-
4. 2016	XXX	XXX	79	80	84	84	84	84	84	84	-	-
5. 2017	XXX	XXX	XXX	89	90	90	90	90	90	90	-	-
6. 2018	XXX	XXX	XXX	XXX	88	88	88	88	88	88	-	-
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			-	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
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			-	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

(59) Schedule P - Part 2M - International

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

(61) Schedule P - Part 2T - Warranty

**NONE**

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.	XXX	-	-	1	3	3	3	3	3	3	3	
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	XXX		

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.	XXX	88	123	138	156	156	156	156	156	156	156	
2. 2014.	272	472	523	542	562	562	562	562	562	562	562	122
3. 2015.	XXX	283	490	540	584	584	584	584	584	584	584	92
4. 2016.	XXX	XXX	291	485	581	581	581	581	581	581	581	124
5. 2017.	XXX	XXX	XXX	266	551	551	551	551	551	551	551	91
6. 2018.	XXX	XXX	XXX	XXX	515	515	515	515	515	515	515	87
7. 2019.	XXX	XXX	XXX	XXX	XXX	-	-	-	-	-	-	89
8. 2020.	XXX	XXX	XXX	XXX	XXX	-	-	-	-	-	-	99
9. 2021.	XXX	XXX	XXX	XXX	XXX	-	-	-	-	-	-	103
10. 2022.	XXX	XXX	XXX	XXX	XXX	-	-	-	-	-	-	124
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	99

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.	XXX	8	12	14	16	16	16	16	16	16	16	
2. 2014.	19	36	44	49	54	54	54	54	54	54	54	7
3. 2015.	XXX	25	50	61	74	74	74	74	74	74	74	5
4. 2016.	XXX	XXX	28	53	84	84	84	84	84	84	84	9
5. 2017.	XXX	XXX	XXX	29	90	90	90	90	90	90	90	5
6. 2018.	XXX	XXX	XXX	XXX	88	88	88	88	88	88	88	9
7. 2019.	XXX	XXX	XXX	XXX	XXX	-	-	-	-	-	-	7
8. 2020.	XXX	XXX	XXX	XXX	XXX	-	-	-	-	-	-	7
9. 2021.	XXX	XXX	XXX	XXX	XXX	-	-	-	-	-	-	9
10. 2022.	XXX	XXX	XXX	XXX	XXX	-	-	-	-	-	-	13
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10

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

(EXCLUDING EXCESS WORKERS' COMPENSATION)

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.	XXX	8	12	14	16	16	16	16	16	16	16	
2. 2014.	19	36	44	49	54	54	54	54	54	54	54	4
3. 2015.	XXX	25	50	61	74	74	74	74	74	74	74	5
4. 2016.	XXX	XXX	28	53	84	84	84	84	84	84	84	9
5. 2017.	XXX	XXX	XXX	29	90	90	90	90	90	90	90	5
6. 2018.	XXX	XXX	XXX	XXX	88	88	88	88	88	88	88	9
7. 2019.	XXX	XXX	XXX	XXX	XXX	-	-	-	-	-	-	10
8. 2020.	XXX	XXX	XXX	XXX	XXX	-	-	-	-	-	-	9
9. 2021.	XXX	XXX	XXX	XXX	XXX	-	-	-	-	-	-	13
10. 2022.	XXX	XXX	XXX	XXX	XXX	-	-	-	-	-	-	13
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.	XXX											
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 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior	XXX											
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			

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior	XXX										XXX	XXX
2. 2014											XXX	XXX
3. 2015	XXX										XXX	XXX
4. 2016	XXX	XXX									XXX	XXX
5. 2017	XXX	XXX	XXX								XXX	XXX
6. 2018	XXX	XXX	XXX	XXX							XXX	XXX
7. 2019	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior	XXX										XXX	XXX
2. 2014											XXX	XXX
3. 2015	XXX										XXX	XXX
4. 2016	XXX	XXX									XXX	XXX
5. 2017	XXX	XXX	XXX								XXX	XXX
6. 2018	XXX	XXX	XXX	XXX							XXX	XXX
7. 2019	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE****SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior	XXX										XXX	XXX
2. 2014											XXX	XXX
3. 2015	XXX										XXX	XXX
4. 2016	XXX	XXX									XXX	XXX
5. 2017	XXX	XXX	XXX								XXX	XXX
6. 2018	XXX	XXX	XXX	XXX							XXX	XXX
7. 2019	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior	XXX										XXX	XXX
2. 2014											XXX	XXX
3. 2015	XXX										XXX	XXX
4. 2016	XXX	XXX									XXX	XXX
5. 2017	XXX	XXX	XXX								XXX	XXX
6. 2018	XXX	XXX	XXX	XXX							XXX	XXX
7. 2019	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE**

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	XXX	XXX
2. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	XXX	XXX
3. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	XXX	XXX

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	2	—
2. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	159	74
3. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	147	60

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	XXX
2. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	XXX
3. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	XXX

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	XXX
2. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	XXX
3. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	XXX

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior	XXX										XXX	XXX
2. 2014											XXX	XXX
3. 2015	XXX										XXX	XXX
4. 2016	XXX	XXX									XXX	XXX
5. 2017	XXX	XXX	XXX								XXX	XXX
6. 2018	XXX	XXX	XXX	XXX							XXX	XXX
7. 2019	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

(66) Schedule P - Part 3T - Warranty

**NONE**

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	1	2	2	2	2					
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 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	79	39	19	7						
2. 2014	165	49	21	15						
3. 2015	XXX	168	40	25						
4. 2016	XXX	XXX	175	46						
5. 2017	XXX	XXX		160						
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 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	3	4	2							
2. 2014	18	3	2	2						
3. 2015	XXX	22	3	2						
4. 2016	XXX	XXX	28	7						
5. 2017	XXX	XXX		33						
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 4D - WORKERS' COMPENSATION**

(EXCLUDING EXCESS WORKERS' COMPENSATION)

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	3	4	2							
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 4E - COMMERCIAL MULTIPLE PERIL**

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

**None**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

(69) Schedule P - Part 4M - International

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

(71) Schedule P - Part 4T - Warranty

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

**SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL****SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR-END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	37	8	5	—	—	—	—	—	—	—
2. 2014.....	83	114	119	121	121	121	122	122	122	122
3. 2015.....	XXX	85	117	122	123	123	123	123	124	124
4. 2016.....	XXX	XXX	86	115	119	120	120	119	121	121
5. 2017.....	XXX	XXX	XXX	79	107	111	112	112	113	114
6. 2018.....	XXX	XXX	XXX	XXX	78	105	110	110	111	112
7. 2019.....	XXX	XXX	XXX	XXX	XXX	79	111	116	118	120
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	63	91	98	103
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	72	119	140
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	91	161
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	99

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR-END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	10	6	1	1	1					
2. 2014.....	28	6	2	1	1	1				
3. 2015.....	XXX	29	6	3	2	1	1	1		
4. 2016.....	XXX	XXX	27	6	3	2	2	3	1	
5. 2017.....	XXX	XXX	XXX	26	5	2	2	2	1	1
6. 2018.....	XXX	XXX	XXX	XXX	26	6	3	2	1	1
7. 2019.....	XXX	XXX	XXX	XXX	XXX	35	8	4	3	2
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	37	10	5	4
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56	15	8
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43	20
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR-END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	15	2	—	1	—	(1)	—	—	—	—
2. 2014.....	196	212	213	214	214	214	214	214	214	214
3. 2015.....	XXX	201	216	217	217	216	216	216	216	216
4. 2016.....	XXX	XXX	200	212	213	213	213	213	213	212
5. 2017.....	XXX	XXX	XXX	186	198	199	200	200	200	202
6. 2018.....	XXX	XXX	XXX	XXX	189	200	201	200	200	202
7. 2019.....	XXX	XXX	XXX	XXX	XXX	204	217	218	219	221
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	174	189	192	198
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	239	267	286
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	233	305
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	231

**SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL****SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR-END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	3	1	—	—	—	—	—	—	—	—
2. 2014.....	5	7	7	7	7	7	7	7	7	7
3. 2015.....	XXX	6	8	9	9	9	9	9	9	9
4. 2016.....	XXX	XXX	7	9	9	9	9	9	9	9
5. 2017.....	XXX	XXX	XXX	7	9	9	9	9	9	9
6. 2018.....	XXX	XXX	XXX	XXX	7	9	9	9	9	9
7. 2019.....	XXX	XXX	XXX	XXX	XXX	7	9	10	10	10
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	5	8	9	9
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	12	13
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	18
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR-END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....	2	1								
3. 2015.....	XXX	2	1							
4. 2016.....	XXX	XXX	2	1						
5. 2017.....	XXX	XXX	XXX	2	1					
6. 2018.....	XXX	XXX	XXX	XXX	2	1				
7. 2019.....	XXX	XXX	XXX	XXX	XXX	3	1			
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	3	1	1	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	2	1
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	2
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR-END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	1	—	—	—	—	—	—	—	—	—
2. 2014.....	10	11	11	11	11	11	11	11	11	11
3. 2015.....	XXX	13	14	14	14	14	14	14	14	14
4. 2016.....	XXX	XXX	14	15	15	14	14	14	14	14
5. 2017.....	XXX	XXX	XXX	14	15	14	14	14	14	14
6. 2018.....	XXX	XXX	XXX	XXX	15	15	14	14	14	14
7. 2019.....	XXX	XXX	XXX	XXX	XXX	16	17	17	17	17
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	13	16	17	16
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19	23	23
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29	33
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

**SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL****SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR-END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior	—	—	—	—	—	—	—	—	—	—	—
2. 2014	80	80	80	80	80	80	80	80	80	80	80
3. 2015	XXX	96	96	96	96	96	96	96	96	96	96
4. 2016	XXX	XXX	111	111	111	111	111	111	111	111	111
5. 2017	XXX	XXX	XXX	123	123	123	123	123	123	123	123
6. 2018	XXX	XXX	XXX	XXX	141	141	141	141	141	141	141
7. 2019	XXX	XXX	XXX	XXX	179	179	179	179	179	179	179
8. 2020	XXX	XXX	XXX	XXX	XXX	283	283	283	283	283	283
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	333	333	333	333
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	428	428	428	428
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned Premiums (Sc P-Pt 1)	80	96	111	123	141	179	283	333	428	567	XXX

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR-END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior	—	—	—	—	—	—	—	—	—	—	—
2. 2014	8	8	8	8	8	8	8	8	8	8	8
3. 2015	XXX	10	10	10	10	10	10	10	10	10	10
4. 2016	XXX	XXX	7	7	7	7	7	7	7	7	7
5. 2017	XXX	XXX	XXX	5	5	5	5	5	5	5	5
6. 2018	XXX	XXX	XXX	XXX	20	20	20	20	20	20	20
7. 2019	XXX	XXX	XXX	XXX	XXX	179	179	179	179	179	179
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	283	283	283	283	283
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	333	333	333	333
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	428	428	428
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned Premiums (Sc P-Pt 1)	8	10	7	5	20	179	283	333	428	567	XXX

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION**

(EXCLUDING EXCESS WORKERS' COMPENSATION)

**SECTION 1**

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

**NONE****SECTION 2**

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

**SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL****SECTION 1**

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

**NONE****SECTION 2**

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

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

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR-END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 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	1	1	1	
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)								1	1	1	XXX

**SECTION 2A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR-END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 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	1	1	1	
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)								1	1	1	XXX

**SCHEDULE P – PART 6H – OTHER LIABILITY – CLAIMS-MADE****SECTION 1B**

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

**SECTION 2B**

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

**SCHEDULE P - PART 6M - INTERNATIONAL****SECTION 1**

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

**SECTION 2**

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

(87) Schedule P - Part 6N - Reinsurance 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**

Schedule P – Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners.....	–					
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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
6. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
7. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. 2023.....	XXX	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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
6. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
7. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

**SCHEDULE P – PART 7A – PRIMARY LOSS SENSITIVE CONTRACTS (CONTINUED)****SECTION 4**

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

**NONE****NONE**

**SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS**

(\$000 OMITTED)

**SECTION 1**

Schedule P – Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners.....	–					
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**

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

**NONE**

**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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 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?..... NO.....

1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve?..... NO.....

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?..... N/A.....

1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1	2
Years in Which Premiums Were Earned and Losses Were Incurred	Section 1: Occurrence	
1.601. Prior.....	.....	.....
1.602. 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)..... PER CLAIMANT.....

If not the same in all years, explain in Interrogatory 7.

7.1. The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses?..... NO.....

7.2. An extended statement may be attached.....

DURING THE PERIODS PRESENTED IN SCHEDULE P, THE COMPANY HAS EXPERIENCED CHANGES IN ITS BUSINESS MIX DUE IN PART TO THE INITIAL AND SUBSEQUENT IMPACTS OF QUOTA SHARE REINSURANCE AGREEMENTS WITH AFFILIATES, IN WHICH THE COMPANY ASSUMES EXISTING AND FUTURE BUSINESS, ACQUISITIONS OF BUSINESSES AND THE REUNDERWRITING OF CERTAIN BOOKS OF BUSINESS.

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

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

NONE

## Annual Statement for the Year 2023 of the Infinity Auto Insurance Company

## SCHEDULE Y

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

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

## SCHEDULE Y

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

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

## SCHEDULE Y

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

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership, Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No)	*
97.2	KEMPER CORPORATION	30-1329283				KEMPER PROPERTIES, LLC	DE	NIA		KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	17513	92-2801349			KEMPER RECIPROCAL	IL	IA		KEMPER MANAGEMENT, LLC	Attorney In-Fact		KEMPER CORPORATION	NO	11
	KEMPER CORPORATION	34-1852743				LEADER GROUP, INC.	OH	DS		INFINITY AUTO INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION	75-2280915				LEADER MANAGING GENERAL AGENCY, INC.	TX	NIA		NCM MANAGEMENT CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION	98-0426067				MERASTAR INDUSTRIES LLC	DE	NIA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	5
	KEMPER CORPORATION	31968	62-0928337			MERASTAR INSURANCE COMPANY	IL	IA		MERASTAR INDUSTRIES LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	31178	63-0599704			MUTUAL SAVINGS FIRE INSURANCE COMPANY	AL	IA		MUTUAL SAVINGS LIFE INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	66397	63-0148960			MUTUAL SAVINGS LIFE INSURANCE COMPANY	AL	IA		UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	75-2538407				NCM MANAGEMENT CORPORATION	DE	NIA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION	36-4442975				NEWINS INSURANCE AGENCY HOLDINGS, LLC	IL	NIA		CRANBERRY HOLDINGS, INC.	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	36-4442975				NEWINS REAL ESTATE HOLDINGS, LLC	IL	NIA		NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	92-1622384				NORTH SCOTTSDALE GATEWAY, LLC	DE	NIA		KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	36625	43-1156323			OLD RELIABLE CASUALTY COMPANY	MO	IA		CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	6
	KEMPER CORPORATION	43044	04-2794993			PENNANTPARK SENIOR SECURED LOAN FUND I, LLC		NIA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	50.000	KEMPER CORPORATION	NO	7
	KEMPER CORPORATION	20133	61-6027355			RESPONSE INSURANCE COMPANY	IL	IA		DIRECT RESPONSE CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	26050	39-1341441			RESPONSE WORLDWIDE DIRECT AUTO INSURANCE COMPANY	IL	IA		WARNER INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION	20-3046396				RESPONSE WORLDWIDE INSURANCE COMPANY	IL	IA		RESPONSE INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	5
	KEMPER CORPORATION					SECURITY ONE AGENCY LLC	IL	NIA		MERASTAR INDUSTRIES LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION					SENIOR LOAN FUND JV, I LLC		NIA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	50.000	KEMPER CORPORATION	NO	8
	KEMPER CORPORATION		92-1605543			SKYLINE ESPLANADE 6, LLC	DE	NIA		KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		92-1588929			SKYLINE ESPLANADE 7, LLC	DE	NIA		KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		92-1600556			SKYLINE ESPLANADE 9, LLC	DE	NIA		KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		92-1597819			SUMMERGATE CORPORATE CENTER, LLC	DE	NIA		KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION					SUNRUN KRONOS OWNER 2000, LLC		NIA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	22.500	KEMPER CORPORATION	NO	9
	KEMPER CORPORATION					SUNRUN KRONOS OWNER 2000, LLC		NIA		UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	7.600	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		31-1357130			THE INFINITY GROUP, INC.	IN	NIA		INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	

## SCHEDULE Y

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

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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)	*
	KEMPER CORPORATION	36-6007812				THE KEMPER FOUNDATION	.IL	NIA		KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	68357	43-0476110			THE RELIABLE LIFE INSURANCE COMPANY	.MO	IA		UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	19887	75-0620550			TRINITY UNIVERSAL INSURANCE COMPANY	.TX	IA		KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	12998	72-6019774			UNION NATIONAL FIRE INSURANCE COMPANY	.LA	IA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	69779	72-0340280			UNION NATIONAL LIFE INSURANCE COMPANY	.LA	IA		UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	11142	23-1614367			UNITED CASUALTY INSURANCE COMPANY OF AMERICA	.IL	IA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	69930	36-1896670			UNITED INSURANCE COMPANY OF AMERICA	.IL	IA		KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	10881	13-3974181			UNITRIN ADVANTAGE INSURANCE COMPANY	.NY	IA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	16063	52-1752227			UNITRIN AUTO AND HOME INSURANCE COMPANY	.NY	IA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	29351	74-1084315			UNITRIN COUNTY MUTUAL INSURANCE COMPANY	.TX	IA		NCM MANAGEMENT CORPORATION	MANAGEMENT		KEMPER CORPORATION	NO	10
0215	KEMPER CORPORATION	10226	36-4013825			UNITRIN DIRECT INSURANCE COMPANY	.IL	IA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	10915	36-4230008			UNITRIN DIRECT PROPERTY & CASUALTY COMPANY	.IL	IA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	25909	13-5460208			UNITRIN PREFERRED INSURANCE COMPANY	.NY	IA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	40703	39-1401314			UNITRIN SAFEGUARD INSURANCE COMPANY	.WI	IA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	10698	93-1217821			VALLEY PROPERTY & CASUALTY INSURANCE COMPANY	.OR	IA		TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	26085	36-3423817			WARNER INSURANCE COMPANY	.IL	IA		DIRECT RESPONSE CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	

Asterisk	Explanation
1	AEGON OPPORTUNITY FUND JOINT VENTURE 1, LLC, (AEGON) IS AN AFFILIATE BY VIRTUE OF UNITED INSURANCE COMPANY OF AMERICA (UNITED) HAVING A MAJORITY PARTNERSHIP INTEREST IN AEGON.
2	APEX LINEN TOPCO, LLC (APEX) IS AN AFFILIATE BY VIRTUE OF UNITED HAVING A 17.5% PARTNERSHIP INTEREST IN APEX.
3	CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY (NAIC# 29211, DOMICILED IN THE STATE OF TEXAS) IS AFFILIATED WITH THE RELIABLE LIFE INSURANCE COMPANY BY VIRTUE OF A MANAGEMENT AGREEMENT.
4	INFINITY COUNTY MUTUAL INSURANCE COMPANY (NAIC# 13820, DOMICILED IN THE STATE OF TEXAS) IS AFFILIATED WITH NCM MANAGEMENT CORPORATION BY VIRTUE OF A MANAGEMENT AGREEMENT.
5	THESE ENTITIES ARE LIMITED LIABILITY COMPANIES. PERCENTAGES RELATE TO THE OWNER'S MEMBERSHIP INTEREST IN THE LLC.
6	OLD RELIABLE CASUALTY COMPANY (NAIC# 36625, DOMICILED IN THE STATE OF MISSOURI) IS AFFILIATED BY VIRTUE OF ITS OWNERSHIP BY CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY.
7	PENNANTPARK SENIOR SECURED LOAN FUND I, LLC (PSLL), IS AN AFFILIATE BY VIRTUE OF TRINITY HAVING 50% CONTROL OF THE BOARD OF PSSL, WITH THE OTHER 50% VESTED IN PENNANTPARK FLOATING RATE CAPITAL, LTD.
8	SENIOR LOAN FUND JV, I LLC (SLFJV) IS AN AFFILIATE BY VIRTUE OF TRINITY HAVING 50% CONTROL OF THE BOARD OF SLFJV, WITH THE OTHER 50% VESTED IN OAKTREE SPECIALTY LENDING CORP.
9	SUNRUN KRONOS OWNER 2020, LLC (SUNRUN) IS AN AFFILIATE BY VIRTUE OF TRINITY HAVING A 22.9% PARTNERSHIP INTEREST IN SUNRUN.
10	UNITRIN COUNTY MUTUAL INSURANCE COMPANY (NAIC# 29351, DOMICILED IN THE STATE OF TEXAS) IS AFFILIATED WITH NCM MANAGEMENT CORP. BY VIRTUE OF A MANAGEMENT AGREEMENT.
11	KEMPER RECIPROCAL (NAIC #17513, DOMICILED IN THE STATE OF ILLINOIS) IS AFFILIATED WITH KEMPER MANAGEMENT, LLC BY VIRTUE OF THEIR FUNCTION AS ATTORNEY IN-FACT.

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
		ACCELERATE INSURANCE NETWORK, LLC.....		—	—				—		—	—
	37-1656986	ACCESS INSURANCE AGENCY OF ARIZONA, LLC.....		—	—				—		—	—
	20-8809010	ACCESS INSURANCE AGENCY OF INDIANA, LLC.....		—	—				—		—	—
	20-8115603	ACCESS INSURANCE AGENCY OF NEVADA, LLC.....		—	—				—		—	—
	20-8115668	ACCESS INSURANCE AGENCY OF SOUTH CAROLINA, LLC.....		—	—				—		—	—
	26-2621251	AEGON OPPORTUNITY ZONE FUND JOINT VENTURE 1, LP.....		—	—				—		—	—
	26-4133974	AGENCIA DE SEGUROS DE ACCESO, LLC.....		—	—				—		—	—
10920	77-0475915	ALLIANCE UNITED INSURANCE COMPANY.....	(209,309,842)	(4,550,000)			(2,443,757)				(216,303,599)	—
	77-0472398	ALLIANCE UNITED INSURANCE SERVICES, LLC.....	(13,900,000)	6,150,000							(7,750,000)	—
38156	39-1344101	ALPHA PROPERTY & CASUALTY INSURANCE COMPANY.....	(650,000)	—			8,968,525	(18,054,663)			(9,736,138)	(13,760,310)
10730	36-4335932	AMERICAN ACCESS CASUALTY COMPANY.....		30,069,340			21,469,964				51,539,305	—
	84-4192397	AMERICAN ACCESS HOLDINGS, LLC.....		—	—						—	—
		APEX LINEN TOPCO, LLC.....		—	—						—	—
29211	75-0774903	CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY.....		—			5,593,908				5,593,908	—
	58-0642684	CASUALTY UNDERWRITERS, INC.....		—	—						—	—
37524	75-1636168	CHARTER INDEMNITY COMPANY CORONADO MEDICAL CENTER, LLC.....	(650,000)	—			524,448	(1,752,036)			(1,877,588)	(5,456,957)
	92-1599608	CRANBERRY HOLDINGS, INC.....	(6,450,000)	—							(6,450,000)	—
	85-4330188	DIRECT RESPONSE CORPORATION FAMILY SECURITY FUNERALS COMPANY.....	(590,000)	—			635,752	(100,000)			45,752	—
	04-3294619	FOOTILLS CORPORATE, LLC.....	—	—							(100,000)	—
19852	95-1466743	FINANCIAL INDEMNITY COMPANY.....	—	—			12,979,898	(32,163,350)			(19,183,452)	(111,112,430)
	92-1612977	FOOTILLS CORPORATE, LLC.....	—	—							—	—

## SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
		ILLINOIS VEHICLE INSURANCE AGENCY, LLC.....		—	—			—			—	—
	36-4448107	INFINITY AGENCY OF TEXAS.....		—	—			—			—	—
	74-2641866	INFINITY ASSURANCE INSURANCE COMPANY.....		(175,000)	—		28,904,025	(517,487)			28,211,538	110,533,832
39497	75-1227771	INFINITY AUTO INSURANCE COMPANY.....		(250,000)	—		118,865,364	(69,613,412)			49,001,952	282,054,950
11738	34-0927698	INFINITY CASUALTY INSURANCE COMPANY.....		—	—		11,277,739	(8,389,030)			2,888,709	38,447,551
	21792	INFINITY COUNTY MUTUAL INSURANCE COMPANY.....		—	—		46,350,843	(13,118,483)			33,232,360	202,316,559
	43-6030348	INFINITY FINANCIAL CENTERS, LLC		—	—			—			—	—
	20-4363792	INFINITY INDEMNITY INSURANCE COMPANY.....		(300,000)	—		54,461,739	(39,905,038)			14,256,701	122,478,202
10061	34-1767787	INFINITY INSURANCE AGENCY, INC.		250,000	—			—			250,000	(68,440,769)
22268	58-1293110	INFINITY INSURANCE COMPANY.....		(102,250,000)	—		391,420,496	(142,474,596)			146,695,900	—
	31-0943862	INFINITY PREFERRED INSURANCE COMPANY.....		—	—			—			—	—
10195	34-1785809	INFINITY PROPERTY AND CASUALTY CORPORATION.....		—	—		12,603	(3,088)			9,515	—
	03-0483872	INFINITY PROPERTY AND CASUALTY SERVICES, INC.....		—	—			—			—	—
	58-1080659	INFINITY SAFEGUARD INSURANCE COMPANY.....		—	—			—			—	—
16802	73-0772113	INFINITY SELECT INSURANCE COMPANY.....		—	—		4,201,539	(8,470,719)			(4,269,180)	7,262,020
20260	31-1333017	INFINITY STANDARD INSURANCE COMPANY.....		(175,000)	—		48,043,298	(5,466)			47,862,832	247,998,595
12599	58-1806189	KAHG LLC.....		(100,000)	—		2,335,237	(3,066,996)			(831,759)	7,934,141
	27-3557296	KEMPER BERMUDA LTD.....		—	—			—			—	—
	98-1683863	KEMPER CENTER, LLC.....		—	35,000,000		6,478,000	—			41,478,000	—
	92-1599353	KEMPER CORPORATE SERVICES, INC.....		(24,947,212)	—			—			(24,947,212)	—
	36-4105161	KEMPER CORPORATION.....		—	—		(51,349)	—			(51,349)	—
	95-4255452	KEMPER FINANCIAL INDEMNITY COMPANY.....		723,747,054	(514,085,075)		41,915,627	—			251,577,606	—
39004	91-1119010	KEMPER GENERAL AGENCY, INC.		—	—		546,849	(32,676)			514,172	(69,259)
	75-1865314			—	—			—			—	—

## SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
10914	36-4230019	KEMPER INDEPENDENCE INSURANCE COMPANY	—	—			49,261,327	8,184,487			57,445,814	(13,610,212)
		KEMPER MANAGEMENT LLC	—	—							—	—
	75-2874538	KEMPER PERSONAL INSURANCE GENERAL AGENCY, INC.	—	—							—	—
	30-1329283	KEMPER PROPERTIES, LLC	—	—							—	—
	34-1852743	LEADER GROUP, INC.	—	—							—	—
	75-2280915	LEADER MANAGING GENERAL AGENCY, INC.	—	—							—	—
	98-0426067	MERASTAR INDUSTRIES LLC	—	—							—	—
31968	62-0928337	MERASTAR INSURANCE COMPANY	—	—		(1,048,724,277)	(926,860)				(1,049,651,137)	(1,516,795)
	31178	MUTUAL SAVINGS FIRE INSURANCE COMPANY	(100,000)	—			1,515,741				1,415,741	—
66397	63-0148960	MUTUAL SAVINGS LIFE INSURANCE COMPANY	(1,750,000)	—			12,747,403				10,997,403	—
	75-2538407	NCM MANAGEMENT CORPORATION	—	3,600,000			66,633				3,666,633	—
	36-4442975	NEWINS INSURANCE AGENCY HOLDINGS, LLC	(13,000,000)	23,400,000							10,400,000	—
		NEWINS REAL ESTATE HOLDINGS, LLC	—	—							—	—
	92-1622384	NORTH SCOTTSDALE GATEWAY, LLC	(10,950,000)	—							(10,950,000)	—
36625	43-1156323	OLD RELIABLE CASUALTY COMPANY	—	—			1,511,175	167,259			1,678,434	—
		PENNANTPARK SENIOR SECURED LOAN FUND I, LLC	—	—							—	—
43044	04-2794993	RESPONSE INSURANCE COMPANY	—	—			132,171	121,816			253,987	(813,459)
		RESPONSE WORLDWIDE DIRECT	—	—							—	—
20133	61-6027355	AUTO INSURANCE COMPANY	—	—			780	(71,498)			(70,718)	(3,453)
		RESPONSE WORLDWIDE	—	—							—	—
26050	39-1341441	INSURANCE COMPANY	—	—			4,326	(128,472)			(124,146)	(172,682)
	20-3046396	SECURITY ONE AGENCY LLC	(195,800)	—							(195,800)	—
		SENIOR LOAN FUND JV, I LLC	—	—							—	—
	92-1605543	SKYLINE ESPLANADE 6, LLC	—	—							—	—
	92-1588929	SKYLINE ESPLANADE 7, LLC	—	—							—	—
	92-1600556	SKYLINE ESPLANADE 9, LLC	—	—							—	—

## SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
98.3	92-1597819	SUMMERGATE CORPORATE CENTER, LLC.....	(9,600,000)	—					—		(9,600,000)	—
		SUNRUN KRONOS OWNER 2000, LLC.....	—	—					—		—	—
	31-1357130	THE INFINITY GROUP, INC.....	—	—					—		—	—
	36-6007812	THE KEMPER FOUNDATION.....	—	—					—		—	—
	68357	THE RELIABLE LIFE INSURANCE COMPANY.....	—	—			42,345,668		—		42,345,668	—
	19887	TRINITY UNIVERSAL INSURANCE COMPANY.....	3,945,800	420,415,735			(100,662,703)	386,391,135			710,089,966	(798,500,654)
	12998	UNION NATIONAL FIRE INSURANCE COMPANY.....	(200,000)	—			4,996,064		—		4,796,064	—
	69779	UNION NATIONAL LIFE INSURANCE COMPANY.....	—	—			28,727,519		—		28,727,519	—
	11142	UNITED CASUALTY INSURANCE COMPANY OF AMERICA.....	(575,000)	—			8,260,607		—		7,685,607	—
	69930	UNITED INSURANCE COMPANY OF AMERICA.....	(330,150,000)	—			125,258,947		—		(204,891,053)	—
	10881	UNITRIN ADVANTAGE INSURANCE COMPANY.....	—	—			2,495,349	(15,616)			2,479,733	(1,277,498)
	16063	UNITRIN AUTO AND HOME INSURANCE COMPANY.....	—	—			14,916,305	(2,577,210)			12,339,095	(17,880,388)
	29351	UNITRIN COUNTY MUTUAL INSURANCE COMPANY.....	—	—			7,843,364	2,620,598			10,463,963	(20,235,204)
	10226	UNITRIN DIRECT INSURANCE COMPANY.....	(475,000)	—			2,344,994	522,915			2,392,909	(3,267,707)
	10915	UNITRIN DIRECT PROPERTY & CASUALTY COMPANY.....	(750,000)	—			619,337	1,548,323			1,417,660	(2,686,991)
	25909	UNITRIN PREFERRED INSURANCE COMPANY.....	(325,000)	—			2,993,244	1,834,064			4,502,308	(5,615,754)
	40703	UNITRIN SAFEGUARD INSURANCE COMPANY.....	—	—			40,456,857	(61,759,626)			(21,302,768)	49,690,070
	10698	VALLEY PROPERTY & CASUALTY INSURANCE COMPANY.....	(125,000)	—			496,471	2,488,059			2,859,530	(3,553,270)
	26085	WARNER INSURANCE COMPANY.....	—	—			1,949	(832,335)			(830,386)	(742,127)
9999999 - Control Totals			—	—			—	—	XXX		—	—

**SCHEDULE Y**

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

1 Insurers in Holding Company	2 Owners with Greater than 10% Ownership	3 Ownership Percentage Column 2 of Column 1	4 Granted Disclaimer of Control / Affiliation of Column 2 Over Column 1 (Yes/No)	5 Ultimate Controlling Party	6 U.S. Insurance Groups or Entities Controlled by Column 5	7 Ownership Percentage (Column 5 of Column 6) Controlled by Column 5	8 Granted Disclaimer of Control / Affiliation of Column 5 Over Column 6 (Yes/No)
ALPHA PROPERTY & CASUALTY INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
AMERICAN ACCESS CASUALTY COMPANY	AMERICAN ACCESS HOLDINGS, LLC	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY		%	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
CHARTER INDEMNITY COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
FINANCIAL INDEMNITY COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY ASSURANCE INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY AUTO INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY CASUALTY INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY COUNTY MUTUAL INSURANCE COMPANY		%	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY INDEMNITY INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY PROPERTY AND CASUALTY CORPORATION		100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY INSURANCE COMPANY	INFININTY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY PREFERRED INSURANCE COMPANY		100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY SAFEGUARD INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY SELECT INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY STANDARD INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
KEMPER FINANCIAL INDEMNITY COMPANY	RESPONSE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
KEMPER INDEPENDENCE INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
KEMPER RECIPROCAL		%	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
MERASTAR INSURANCE COMPANY	MERASTAR INDUSTRIES, LLC	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
MUTUAL SAVINGS FIRE INSURANCE COMPANY	MUTUAL SAVINGS LIFE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
MUTUAL SAVINGS LIFE INSURANCE COMPANY	UNITED INSURANCE COMPANY OF AMERICA	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
OLD RELIABLE CASUALTY COMPANY	CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
RESPONSE INSURANCE COMPANY	DIRECT RESPONSE CORPORATION	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
RESPONSE WORLDWIDE DIRECT AUTO INSURANCE COMPANY	RESPONSE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
RESPONSE WORLDWIDE INSURANCE COMPANY	RESPONSE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO

**SCHEDULE Y**

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

1 Insurers in Holding Company	2 Owners with Greater than 10% Ownership	3 Ownership Percentage Column 2 of Column 1	4 Granted Disclaimer of Control / Affiliation of Column 2 Over Column 1 (Yes/No)	5 Ultimate Controlling Party	6 U.S. Insurance Groups or Entities Controlled by Column 5	7 Ownership Percentage (Column 5 of Column 6)	8 Granted Disclaimer of Control / Affiliation of Column 5 Over Column 6 (Yes/No)
THE RELIABLE LIFE INSURANCE COMPANY	UNITED INSURANCE COMPANY OF AMERICA.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
TRINITY UNIVERSAL INSURANCE COMPANY	KEMPER CORPORATION.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNION NATIONAL FIRE INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNION NATIONAL LIFE INSURANCE COMPANY.....	UNITED INSURANCE COMPANY OF AMERICA.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITED CASUALTY INSURANCE COMPANY OF AMERICA.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITED INSURANCE COMPANY OF AMERICA.....	KEMPER CORPORATION.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN ADVANTAGE INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN AUTO AND HOME INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN COUNTY MUTUAL INSURANCE COMPANY.....	.....	%	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN DIRECT INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN DIRECT PROPERTY & CASUALTY COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN PREFERRED INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
UNITRIN SAFEGUARD INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
VALLEY PROPERTY & CASUALTY INSURANCE COMPANY.....	TRINITY UNIVERSAL INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....
WARNER INSURANCE COMPANY.....	RESPONSE INSURANCE COMPANY.....	100.000 %	NO.....	KEMPER CORPORATION.....	KEMPER CORPORATION.....	100.000 %	NO.....

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

### 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.

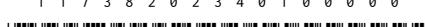
	March Filing	Response
1. Will an actuarial opinion be filed by March 1?	YES	
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES	
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES	
4. Will the confidential Risk-based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

	March Filing	Response
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 Trusted Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO	
16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO	
17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO	
18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO	
19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES	
20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES	
21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO	
22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO	
23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO	
24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO	
25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO	
26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO	
27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution contracts be filed with the state of domicile and the NAIC by March 1?	NO	
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	
	<b>April Filing</b>	
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?	NO	
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	
	<b>August Filing</b>	
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.	
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11.	 1 1 7 3 8 2 0 2 3 4 2 0 0 0 0 0 0
12.	 1 1 7 3 8 2 0 2 3 2 4 0 0 0 0 0 0
13.	 1 1 7 3 8 2 0 2 3 3 6 0 0 0 0 0 0
14.	 1 1 7 3 8 2 0 2 3 4 5 5 0 0 0 0 0
15.	 1 1 7 3 8 2 0 2 3 4 9 0 0 0 0 0 0
16.	 1 1 7 3 8 2 0 2 3 3 8 5 0 0 0 0 0
17.	 1 1 7 3 8 2 0 2 3 4 0 1 0 0 0 0 0
18.	 1 1 7 3 8 2 0 2 3 3 6 5 0 0 0 0 0
19.	
20.	
21.	 1 1 7 3 8 2 0 2 3 4 0 0 0 0 0 0 0
22.	 1 1 7 3 8 2 0 2 3 5 0 0 0 0 0 0 0
23.	 1 1 7 3 8 2 0 2 3 5 0 5 0 0 0 0 0
24.	 1 1 7 3 8 2 0 2 3 2 2 4 0 0 0 0 0
25.	 1 1 7 3 8 2 0 2 3 2 2 5 0 0 0 0 0
26.	 1 1 7 3 8 2 0 2 3 2 2 6 0 0 0 0 0
27.	 1 1 7 3 8 2 0 2 3 2 3 0 0 0 0 0 0
28.	
29.	
30.	 1 1 7 3 8 2 0 2 3 2 3 0 0 0 0 0 0
31.	 1 1 7 3 8 2 0 2 3 3 0 6 0 0 0 0 0
32.	 1 1 7 3 8 2 0 2 3 2 1 0 0 0 0 0 0
33.	 1 1 7 3 8 2 0 2 3 2 1 6 0 0 0 0 0
34.	 1 1 7 3 8 2 0 2 3 2 1 6 0 0 0 0 0
35.	 1 1 7 3 8 2 0 2 3 2 9 0 0 0 0 0 0
36.	 1 1 7 3 8 2 0 2 3 5 6 0 0 0 0 0 0
37.	 1 1 7 3 8 2 0 2 3 5 6 5 0 0 0 0 0 0
38	

**OVERFLOW PAGE FOR WRITE-INS**

**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: 0215

NAIC Company Code: 11738

	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.....				
7. Personal umbrella.....				
8. Employment liability.....				
9. Aggregate write-ins for facilities and premises (CGL).....	160,784	140,717	548	1
10. Internet & cyber liability.....				
11. Aggregate write-ins for other.....				
12. Total ASL 17 - other liability (sum of lines 1 through 11).....	160,784	140,717	548	1
<b>Details of Write-Ins</b>				
0901. Commercial General Liability.....	160,784	140,717	548	1
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.....	160,784	140,717	548	1
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.....				





1 1 7 3 8 2 0 2 3 6 0 0 1 0 1 0 0

**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 Florida

NAIC Group Code: 0215

NAIC Company Code: 11738

	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 Georgia

NAIC Group Code: 0215

NAIC Company Code: 11738

	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 Pennsylvania

NAIC Group Code: 0215

NAIC Company Code: 11738

	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.....