



ANNUAL STATEMENT
 FOR THE YEAR ENDED DECEMBER 31, 2023
 OF THE CONDITION AND AFFAIRS OF THE
INTEGRITY PROPERTY AND CASUALTY INSURANCE COMPANY

NAIC Group Code.....0267.....0267.....NAIC Company Code.....12986....Employer's ID Number.....41-2236417.....
 (Current) (Prior)

Organized under the Laws of.....OH.....State of Domicile or Port of Entry.....OH.....
 County of Domicile.....US.....
 Incorporated/Organized.....04/18/2007.....Commenced Business.....11/01/2007.....
 Statutory Home Office.....671 South High Street.....Columbus, OH, US 43206-1066.....
 Main Administrative Office.....671 South High Street.....Columbus, OH, US 43206-1066.....614-445-2900.....
 (Telephone)
 Mail Address.....671 South High Street.....Columbus, OH, US 43206-1066.....
 Primary Location of Books and
 Records.....671 South High Street.....Columbus, OH, US 43206-1066.....614-445-2900.....
 (Telephone)
 Internet Website Address.....www.integrityinsurance.com.....
 Statutory Statement Contact.....Jeffrey P. Siefker.....614-445-2900.....
 (Telephone)
 siefkerj@grangeinsurance.com.....614-542-3017.....
 (E-Mail) (Fax)

OFFICERS

.....JOHN (NMN) AMMENDOLA, PRESIDENT & CEO.....TERESA JEAN BROWN, EVP & CFO.....
BETH WILLIAMS MURPHY#, EVP & SECRETARY.....

DIRECTORS OR TRUSTEES

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

State of OH.....
 County of Franklin.....

SS

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

x 
 JOHN (NMN) AMMENDOLA
 PRESIDENT & CEO

x 
 BETH WILLIAMS MURPHY
 EVP & SECRETARY

x 
 TERESA JEAN BROWN
 EVP & CFO

Subscribed and sworn to before me
 this 20 day of
February, 2024

x 
 TERESA J BURCHWELL

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



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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF IOWA DURING THE YEAR 2023

NAIC Group Code: 0267

NAIC Company Code: 12986

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	10,269	7,570	—	6,346	—	188	1,162	—	19	80	1,830	102
2.1. Allied Lines	42,154	26,204	—	24,235	—	1,799	3,826	—	136	262	7,511	10
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	791,031	798,413	—	411,965	2,116,894	2,084,207	410,794	25,549	27,231	7,515	106,814	340
5.1. Commercial Multiple Peril (Non-Liability Portion)	868,485	645,037	—	404,404	529,132	732,647	279,178	23,953	25,029	11,273	153,724	209
5.2. Commercial Multiple Peril (Liability Portion)	897,549	575,855	—	423,426	37,877	268,251	419,970	4,660	61,931	246,288	159,847	216
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine	18,718	17,797	—	9,348	14,301	14,565	436	125	460	662	2,834	54
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake	2,423	1,348	—	1,253	—	—	—	—	—	—	427	1
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	361,156	241,976	—	119,180	13,992	84,410	70,419	2,720	19,471	16,751	28,232	87
17.1. Other Liability—Occurrence	28,957	25,415	—	21,074	—	9,708	17,618	—	2,742	9,270	4,983	107
17.2. Other Liability—Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence	—	—	—	—	—	(10,778)	—	—	(10,027)	—	—	—
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.2. Other Private Passenger Auto Liability	1,910,787	1,687,999	—	780,297	716,080	1,213,520	1,191,249	9,588	7,065	54,680	240,214	459
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability	1,609,253	1,670,360	—	814,893	1,523,440	2,199,780	2,757,384	23,514	50,670	173,574	262,990	387
21.1. Private Passenger Auto Physical Damage	3,074,066	2,597,885	—	1,296,907	1,634,428	1,569,471	54,249	1,396	1,119	1,058	385,609	789
21.2. Commercial Auto Physical Damage	1,245,749	986,452	—	548,117	534,610	569,269	79,601	—	3,264	6,120	196,342	349
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)	10,860,596	9,282,311	—	4,861,446	7,120,754	8,737,039	5,285,886	91,505	189,110	527,531	1,551,355	3,110
Details of Write-Ins												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$68,153

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR 2023

NAIC Group Code: 0267

NAIC Company Code: 12986

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	2,465	10,166	—	—	—	1,030	1,824	—	75	125	443	(17)
2.1. Allied Lines	3,417	14,140	—	(3)	—	1,432	2,537	—	105	174	614	20
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	2,052,898	2,051,616	—	—	1,108,628	2,130,239	1,958,094	893,684	20,334	22,314	18,943	292,556
5.1. Commercial Multiple Peril (Non-Liability Portion)	762,118	772,223	—	—	403,226	679,862	1,405,956	1,351,338	24,588	26,397	13,940	1,025
5.2. Commercial Multiple Peril (Liability Portion)	224,271	201,696	—	96,986	229,884	(247,498)	223,038	33,507	48,415	97,765	39,520	1,310
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine	53,769	54,244	—	27,128	35,489	35,724	1,407	—	866	2,043	8,175	314
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake	(84)	18	—	8	—	—	—	—	—	—	—	(14)
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			—	—	—	—	—	—	—	—	—	625
17.1. Other Liability–Occurrence	47,631	46,636	—	28,168	600	18,726	21,825	4,063	9,706	5,600	7,659	278
17.2. Other Liability–Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence	3,306	2,509	—	2,854	—	1,822	2,393	—	891	1,423	594	19
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	1,386,876	1,329,183	—	542,101	704,780	492,912	107,977	2,845	(28,055)	20,846	174,549	8,101
19.2. Other Private Passenger Auto Liability	4,027,442	3,586,383	—	1,642,557	2,851,502	2,514,338	3,509,723	134,062	52,868	690,900	507,919	13,591
19.3. Commercial Auto No-Fault (Personal Injury Protection)	182,222	164,950	—	89,933	127,374	224,007	92,021	193	(17,891)	4,408	23,210	1,064
19.4. Other Commercial Auto Liability	2,024,823	1,797,700	—	939,186	965,901	945,225	2,238,051	140,710	176,907	233,612	263,113	11,827
21.1. Private Passenger Auto Physical Damage	5,825,085	5,114,619	—	2,444,070	3,445,769	3,255,155	136,189	3,693	3,694	1,427	736,294	34,648
21.2. Commercial Auto Physical Damage	1,182,136	984,047	—	436,076	606,962	633,526	84,859	—	3,659	5,276	147,201	6,621
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)	17,778,374	16,130,131	—	7,760,917	11,778,360	11,240,451	8,666,866	363,995	299,951	1,096,482	2,337,451	78,876
Details of Write-Ins												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$127,694

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR 2023

NAIC Group Code: 0267

NAIC Company Code: 12986

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2023

NAIC Group Code: 0267

NAIC Company Code: 12986

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

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 2 9 8 6 2 0 2 3 4 3 0 5 0 1 0 0

NAIC Group Code: 0267

NAIC Company Code: 12986

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	23,599	22,116	—	6,110	—	43	3,515	—	25	241	4,293	(10)
2.1. Allied Lines	44,610	41,572	—	11,464	—	289	6,589	—	59	451	8,128	(19)
2.2. Multiple Peril Crop												
2.3. Federal Flood												
2.4. Private Crop												
2.5. Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	3,963,947	3,981,159	—	—	2,081,990	3,556,263	1,785,514	1,390,081	67,337	77,443	50,869	561,641
5.1. Commercial Multiple Peril (Non-Liability Portion)	503,069	621,339	—	—	241,219	222,504	505,772	325,438	9,445	14,538	11,783	89,494
5.2. Commercial Multiple Peril (Liability Portion)	174,824	160,197	—	72,460	3,464	120,856	173,010	7,060	45,201	80,634	31,355	(73)
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine	170,440	179,119	—	79,646	40,192	47,726	11,256	1,471	3,916	6,822	26,196	(71)
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake	280	278	—	42	—	—	—	—	—	—	—	37
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	119,476	127,698	—	58,613	125,000	(7,490)	32,070	—	357	823	18,820	(50)
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	24,829,281	23,975,443	—	10,199,352	18,950,283	15,648,851	21,131,478	572,699	320,528	2,169,254	3,255,977	(10,320)
19.3. Commercial Auto No-Fault (Personal Injury Protection)	—	—	—	—	—	—	—	—	—	—	—	—
19.4. Other Commercial Auto Liability	2,626,091	2,702,005	—	1,124,698	1,881,103	3,404,712	3,939,211	115,057	135,227	370,286	355,089	(1,091)
21.1. Private Passenger Auto Physical Damage	30,747,029	30,525,774	—	12,684,901	21,287,717	20,068,678	458,951	7,455	3,571	8,913	4,017,635	(12,780)
21.2. Commercial Auto Physical Damage	1,278,436	1,217,038	—	519,740	661,306	747,879	219,505	3,951	7,441	6,641	178,185	(531)
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)	64,481,082	63,553,738	—	27,080,233	46,727,833	42,322,830	27,691,105	784,475	608,307	2,706,715	8,546,849	(26,801)
Details of Write-Ins												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$704,398

(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 2 9 8 6 2 0 2 3 4 3 0 5 9 1 0 0

NAIC Group Code: 0267

NAIC Company Code: 12986

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	36,333	39,851	—	12,456	—	1,262	6,501	—	119	445	6,566	75
2.1. Allied Lines	90,181	81,917	—	35,696	—	3,520	12,952	—	300	886	16,253	12
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	6,807,877	6,831,188	—	3,602,583	7,803,396	5,827,815	2,694,559	113,220	126,989	77,327	961,011	(1,856)
5.1. Commercial Multiple Peril (Non-Liability Portion)	2,133,671	2,038,599	—	1,048,849	1,431,498	2,644,375	1,955,954	57,986	65,963	36,996	378,837	1,024
5.2. Commercial Multiple Peril (Liability Portion)	1,296,643	937,748	—	592,873	271,225	141,610	816,018	45,227	155,547	424,687	230,722	1,453
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine	242,927	251,160	—	116,122	89,983	98,016	13,100	1,596	5,242	9,527	37,205	298
10. Financial Guaranty												
11.1. Medical Professional Liability – Occurrence	—	—	—	—	—	—	—	—	—	—	—	—
11.2. Medical Professional Liability – Claims-Made												
12. Earthquake	2,619	1,644	—	1,304	—	—	—	—	—	—	450	—
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	361,156	241,976	—	119,180	13,992	84,410	70,419	2,720	19,471	16,751	28,232	712
17.1. Other Liability—Occurrence	196,064	199,749	—	107,854	125,600	20,944	71,513	4,063	12,805	15,693	31,462	336
17.2. Other Liability—Claims-Made	—	—	—	—	—	—	—	—	—	—	—	—
17.3. Excess Workers' Compensation												
18.1. Products Liability – Occurrence	3,306	2,509	—	2,854	—	(8,956)	2,393	—	(9,136)	1,423	594	19
18.2. Products Liability – Claims-Made												
19.1. Private Passenger Auto No-Fault (Personal Injury Protection)	1,386,876	1,329,183	—	542,101	704,780	492,912	107,977	2,845	(28,055)	20,846	174,549	8,101
19.2. Other Private Passenger Auto Liability	30,767,510	29,249,824	—	12,622,206	22,517,865	19,376,709	25,832,450	716,349	380,461	2,914,834	4,004,109	3,730
19.3. Commercial Auto No-Fault (Personal Injury Protection)	182,222	164,950	—	89,933	127,374	22,007	92,021	193	(17,891)	4,408	23,210	1,064
19.4. Other Commercial Auto Liability	6,260,167	6,170,066	—	2,878,777	4,370,443	6,549,717	8,934,646	279,281	362,804	777,472	881,192	11,122
21.1. Private Passenger Auto Physical Damage	39,646,180	38,238,279	—	16,425,877	26,367,914	24,893,304	649,390	12,544	8,384	11,398	5139,538	22,657
21.2. Commercial Auto Physical Damage	3,706,321	3,187,537	—	1,503,932	1,802,878	1,950,675	383,965	3,951	14,364	18,037	521,728	6,439
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)	93,120,052	88,966,179	—	39,702,597	65,626,947	62,300,320	41,643,857	1,239,974	1,097,368	4,330,728	12,435,655	55,185
Details of Write-Ins												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$900,245

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

(20) Schedule F - Part 1

NONE

(21) Schedule F - Part 2

NONE

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				
Total Authorized, Affiliates, U.S. Intercompany Pooling																					
31-4192970	14060	GRANGE INS CO	OH		92,720			22,393		18,935		39,647		80,975						80,975	
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling						92,720		22,393		18,935		39,647		80,975						80,975	
0499999 - Total Authorized, Affiliates, U.S. Non-Pool, Total																					
0899999 - Total Authorized, Affiliates, Total Authorized - Affiliates						92,720		22,393		18,935		39,647		80,975						80,975	
Total Authorized, Other U.S. Unaffiliated Insurers																					
06-0384680	11452	HARTFORD STEAM BOIL INSPEC & INS CO	CT		111	-	-	3	-	-	-	51	-	54	-	-	-	-	-	54	
51-0434766	20370	AXIS REINS CO	NY		-	-	-	11	-	-	-	-	-	11	-	-	-	-	-	11	
47-0574325	32603	BERKLEY INS CO	DE		22	-	-	-	-	-	-	1	-	1	-	-	-	-	-	1	
42-0234980	21415	EMPLOYERS MUT CAS CO	IA		(1)	-	-	4	-	-	-	-	-	4	-	-	-	-	-	4	
35-2293075	11551	ENDURANCE ASSUR CORP	DE		1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
13-2673100	22039	GENERAL REINS CORP	DE		24	-	-	4	-	-	-	3	-	7	-	-	-	-	-	7	
52-1952955	10357	RENAISSANCE REINS US INC	MD		52	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
47-0698507	23680	ODYSSEY REINS CO	CT		29	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
13-1675535	25364	SWISS REINS AMER CORP	NY		23	-	-	51	-	-	-	-	-	51	-	-	-	-	-	51	
42-0644327	13021	UNITED FIRE & CAS CO	IA		21	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
22-2005057	26921	EVEREST REINS CO	DE		-	-	-	4	-	-	-	-	-	4	-	-	-	-	-	4	
87-2252307	22225	TRISURA INS CO	OK		14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
13-4924125	10227	MUNICH REINS AMER INC	DE		(1)	-	-	22	-	-	-	-	-	23	-	-	-	-	-	23	
13-3138390	42307	NAVIGATORS INS CO	NY		-	-	-	17	-	-	-	-	-	17	-	-	-	-	-	17	
23-1641984	10219	QBE REINS CORP	PA		(3)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
13-5616275	19453	TRANSATLANTIC REINS CO	NY		3	-	-	21	-	-	-	-	-	21	-	-	-	-	-	21	
04-1543470	23043	LIBERTY MUT INS CO	MA		(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers						295	-	136	-	1	-	56	-	193	-	-	-	-	-	193	
Total Authorized, Other Non-U.S. Insurers																					
AA-1120198	00000	Lloyd's Syndicate Number 1618	GBR		1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
AA-1128987	00000	Lloyd's Syndicate Number 2987	GBR		1	-	-	6	-	-	-	-	-	7	-	-	-	-	-	7	
AA-1126033	00000	Lloyd's Syndicate Number 33	GBR		2	-	-	8	-	-	-	-	-	8	-	-	-	-	-	8	
AA-1126435	00000	Lloyd's Syndicate Number 435	GBR		-	-	-	1	-	-	-	-	-	1	-	-	-	-	-	1	
AA-1126623	00000	Lloyd's Syndicate Number 623	GBR		1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
AA-1127084	00000	Lloyd's Syndicate Number 1084	GBR		(3)	-	-	1	-	-	-	-	-	1	-	-	-	-	-	1	
AA-1120156	00000	Lloyd's Syndicate Number 1686	GBR		(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
AA-1120171	00000	Lloyd's Syndicate Number 1856	GBR		-	-	-	2	-	-	-	-	-	2	-	-	-	-	-	2	
AA-1128001	00000	Lloyd's Syndicate Number 2001	GBR		1	-	-	2	-	-	-	-	-	2	-	-	-	-	-	2	
AA-1128003	00000	Lloyd's Syndicate Number 2003	GBR		-	-	-	3	-	-	-	-	-	3	-	-	-	-	-	3	
AA-1128010	00000	Lloyd's Syndicate Number 2010	GBR		(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
AA-1128623	00000	Lloyd's Syndicate Number 2623	GBR		3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
AA-1126004	00000	Lloyd's Syndicate Number 4444	GBR		(3)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
AA-3194130	00000	Endurance Specialty Ins Ltd	BMU		-	-	-	13	-	-	-	-	-	13	-	-	-	-	-	13	
AA-1840000	00000	Mapfre Re Compania de Reaseguros SA	ESP		(2)	-	-	4	-	-	-	-	-	4	-	-	-	-	-	4	
AA-3190686	00000	Partner Reins Co Ltd	BMU		-	-	-	1	-	-	-	-	-	1	-	-	-	-	-	1	
AA-3190870	00000	Validus Reins Ltd	BMU		(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
AA-1340125	00000	Hannover Rueck SE	DEU		65	-	-	24	-	-	-	-	-	24	-	-	-	-	-	24	
1299999 - Total Authorized, Other Non-U.S. Insurers						61	-	67	-	-	-	-	-	67	-	-	-	-	-	67	
1499999 - Total Authorized Excluding Protected Cells						93,075	-	22,597	-	18,936	-	39,703	-	81,235	-	-	-	-	-	81,235	
Total Unauthorized, Other Non-U.S. Insurers																					
AA-1120191	00000	Convex Ins UK Ltd	GBR		7	-	-	20	-	2	-	-	-	22	-	-	-	-	-	22	
AA-3191190	00000	Hamilton Re Ltd	BMU		2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
AA-1460080	00000	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	CHE		18	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	

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		
AA-1780116	00000	Chaucer Ins Co Designated Activity Co	IRL		1	—	—	—	—	—	—	—	—	—	—	—	—	—	
AA-1340028	00000	Devk Ruckversicherungs und Beteiligungs AG	DEU		1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
AA-3191437	00000	Group Ark Ins Ltd	BMU		2	—	—	—	—	—	—	—	—	—	—	—	—	—	—
AA-5420050	00000	KOREAN REINS CO	KOR		2	—	—	5	—	—	—	—	—	—	5	—	—	—	5
AA-1440060	00000	LANSFORSAKRINGS BOLAG ENS AB	SWE		2	—	—	—	—	—	—	—	—	—	—	—	—	—	—
AA-1460019	00000	MS Amlin AG	CHE		1	—	—	2	—	—	—	—	—	—	2	—	—	2	—
AA-1440076	00000	SiriusPoint Intl Ins Corp (publ)	SWE		1	—	—	3	—	—	—	—	—	—	3	—	—	3	—
AA-5324100	00000	Taiping Reins Co Ltd	HKG		—	—	—	4	—	—	—	—	—	—	4	—	—	4	—
AA-3191432	00000	Vantage Risk Ltd	BMU		(1)	—	—	—	—	—	—	—	—	—	—	—	—	—	—
2699999 - Total Unauthorized, Other Non-U.S. Insurers						35	—	33	—	2	—	—	—	35	—	—	—	—	35
2899999 - Total Unauthorized Excluding Protected Cells						35	—	33	—	2	—	—	—	35	—	—	—	—	35
Total Certified, Other Non-U.S. Insurers																			
CR-3194126	00000	Arch Reins Ltd	BMU		2	—	—	47	—	—	—	—	—	—	48	—	—	—	48
CR-3190770	00000	Chubb Tempest Reins Ltd	BMU		—	—	—	7	—	—	—	—	—	—	7	—	—	—	7
CR-3191289	00000	Fidelis Ins Bermuda Ltd	BMU		3	—	—	4	—	—	—	—	—	—	4	—	—	—	4
CR-1120175	00000	Fidelis Underwriting Ltd	GBR		3	—	—	9	—	—	—	—	—	—	9	—	—	—	9
CR-3190875	00000	Hiscox Ins Co (Bermuda) Ltd	BMU		2	—	—	10	—	—	—	—	—	—	10	—	—	—	10
4099999 - Total Certified, Other Non-U.S. Insurers						10	—	77	—	1	—	—	—	—	78	—	—	—	78
4299999 - Total Certified Excluding Protected Cells						10	—	77	—	1	—	—	—	—	78	—	—	—	78
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells						93,120	—	22,707	—	18,939	—	39,703	—	81,348	—	—	—	81,348	
9999999 - Totals						93,120	—	22,707	—	18,939	—	39,703	—	81,348	—	—	—	81,348	

Annual Statement for the Year 2023 of the Integrity Property and Casualty Insurance Company

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 From Reinsurers Less Penalty (Col. 15 - 27)	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Col. 28*120%)	Reinsurance Payable & Funds Held (Col. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 29 - 30)	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	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Collateral (Col. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Col. 31 - 32)	Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un- collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)					
Total Authorized, Affiliates, U.S. Intercompany Pooling																		
31-4192970	GRANGE INS CO						80,975	-	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling				XXX			80,975	-	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
0899999 - Total Authorized, Affiliates, Total Authorized - Affiliates				XXX			80,975	-										XXX
Total Authorized, Other U.S. Unaffiliated Insurers																		
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO					-	54	-	54	64	-	64			64	1		1
51-0434766	AXIS REINS CO					-	11	-	11	13	-	13			13	3		-
47-0574325	BERKLEY INS CO					-	1	-	1	2	-	2			2	2		-
42-0234980	EMPLOYERS MUT CAS CO					-	4	-	4	5	-	5			5	4		-
35-2293075	ENDURANCE ASSUR CORP					-	-	-	-	-	-	-			-	2		-
13-2673100	GENERAL REINS CORP					-	7	-	7	8	-	8			8	1		-
52-1952955	RENAISSANCE REINS US INC					-	-	-	-	-	-	-			-	2		-
47-0698507	ODYSSEY REINS CO					-	-	-	-	-	-	-			-	2		-
13-1675535	SWISS REINS AMER CORP					-	51	-	51	61	-	61			61	2		1
42-0644327	UNITED FIRE & CAS CO					-	-	-	-	-	-	-			-	4		-
22-2005057	EVEREST REINS CO					-	4	-	4	5	-	5			5	2		-
87-2252307	TRISURA INS CO					-	-	-	-	-	-	-			-	4		-
13-4924125	MUNICH REINS AMER INC					-	23	-	23	27	-	27			27	2		1
13-3138390	NAVIGATORS INS CO					-	17	-	17	20	-	20			20	3		1
23-1641984	QBE REINS CORP					-	-	-	-	-	-	-			-	2		-
13-5616275	TRANSATLANTIC REINS CO					-	21	-	21	26	-	26			26	2		1
04-1543470	LIBERTY MUT INS CO					-	-	-	-	-	-	-			-	3		-
099999 - Total Authorized, Other U.S. Unaffiliated Insurers				XXX		-	193	-	193	232	-	232			232	XXX		5
Total Authorized, Other Non-U.S. Insurers																		
AA-1120198	Lloyd's Syndicate Number 1618					-	-	-	-	-	-	-	-	-	-	3		-
AA-1128987	Lloyd's Syndicate Number 2987					-	7	-	7	8	-	8			8	3		-
AA-1126033	Lloyd's Syndicate Number 33					-	8	-	8	10	-	10			10	3		-
AA-1126435	Lloyd's Syndicate Number 435					-	1	-	1	2	-	2			2	3		-
AA-1126623	Lloyd's Syndicate Number 623					-	-	-	-	-	-	-			-	3		-
AA-1127084	Lloyd's Syndicate Number 1084					-	1	-	1	2	-	2			2	3		-
AA-1120156	Lloyd's Syndicate Number 1686					-	-	-	-	-	-	-			-	3		-
AA-1120171	Lloyd's Syndicate Number 1856					-	2	-	2	3	-	3			3	3		-
AA-1128001	Lloyd's Syndicate Number 2001					-	2	-	2	3	-	3			3	3		-
AA-1128003	Lloyd's Syndicate Number 2003					-	3	-	3	4	-	4			4	3		-
AA-1128010	Lloyd's Syndicate Number 2010					-	-	-	-	-	-	-			-	3		-
AA-1128623	Lloyd's Syndicate Number 2623					-	-	-	-	-	-	-			-	3		-
AA-1126004	Lloyd's Syndicate Number 4444					-	13	-	13	16	-	16			16	2		-
AA-3194130	Endurance Specialty Ins Ltd					-	-	-	-	-	-	-			-	2		-
AA-1840000	Mapfre Re Compania de Reaseguros SA					-	4	-	4	5	-	5			5	2		-
AA-3190686	Partner Reins Co Ltd					-	1	-	1	1	-	1			1	2		-
AA-3190870	Validus Reins Ltd					-	-	-	-	-	-	-			-	3		-

Annual Statement for the Year 2023 of the Integrity Property and Casualty Insurance Company

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)	Stressed Recoverable (Col. 28*120%)	Stressed Recoverable (Col. 29 – 30)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 29 – 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 – 32)	Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-1340125	Hannover Rueck SE					–	24	–	24	28	–	28	–	28	–	28	3	1	
1299999 – Total Authorized, Other Non-U.S. Insurers				XXX		–	67	–	67	81	–	81	–	81	–	81	XXX	2	
1499999 – Total Authorized Excluding Protected Cells				XXX		–	81,235	–	260	312	–	312	–	312	–	312	XXX	7	
Total Unauthorized, Other Non-U.S. Insurers																			
AA-1120191	Convex Ins UK Ltd			22	0001		22	–	–	22	26	–	26	–	22	4	3	1	–
AA-3191190	Hamilton Re Ltd					–	–	–	–	–	–	–	–	–	–	–	4	4	–
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS					–	–	–	–	–	–	–	–	–	–	–	2	–	–
AA-1780116	Chaucer Ins Co Designated Activity Co					–	–	–	–	–	–	–	–	–	–	–	3	–	–
AA-1340028	Devk Ruckversicherungen und Beteiligungs AG					–	–	–	–	–	–	–	–	–	–	–	2	–	–
AA-3191437	Group Ark Ins Ltd					–	–	–	–	–	–	–	–	–	–	–	3	–	–
AA-5420050	KOREAN REINS CO	5	0002			5	–	–	5	6	–	6	–	5	1	3	–	–	–
AA-1440060	LANSFORSAKRINGS BOLAG ENS AB					–	–	–	–	–	–	–	–	–	–	–	3	–	–
AA-1460019	MS Amlin AG	2	0003			2	–	–	2	2	–	2	–	2	2	–	3	–	–
AA-1440076	SiriusPoint Intl Ins Corp (publ)			3	0004	3	–	–	3	3	–	3	–	3	3	1	4	–	–
AA-5324100	Taiping Reins Co Ltd	4	0004			4	–	–	4	5	–	5	–	5	4	1	3	–	–
AA-3191432	Vantage Risk Ltd					–	–	–	–	–	–	–	–	–	–	–	4	–	–
2699999 – Total Unauthorized, Other Non-U.S. Insurers		33	XXX	3		35	–	–	35	42	–	42	–	35	7	XXX	1	–	–
2899999 – Total Unauthorized Excluding Protected Cells		33	XXX	3		35	–	–	35	42	–	42	–	35	7	XXX	1	–	–
Total Certified, Other Non-U.S. Insurers																			
CR-3194126	Arch Reins Ltd			48	0005		48	–	–	48	57	–	57	–	48	10	2	1	–
CR-3190770	Chubb Tempest Reins Ltd	7	0006			7	–	–	7	8	–	8	–	7	1	2	–	–	–
CR-3191289	Fidelis Ins Bermuda Ltd	4	0007			4	–	–	4	5	–	5	–	4	1	3	–	–	–
CR-1120175	Fidelis Underwriting Ltd	9	0008			9	–	–	9	10	–	10	–	9	2	3	–	–	–
CR-3190875	Hiscox Ins Co (Bermuda) Ltd	10	0009			10	–	–	10	12	–	12	–	10	2	2	–	–	–
4099999 – Total Certified, Other Non-U.S. Insurers		78	XXX			78	–	–	78	93	–	93	–	78	16	XXX	2	–	–
4299999 – Total Certified Excluding Protected Cells		78	XXX			78	–	–	78	93	–	93	–	78	16	XXX	2	–	–
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		110	XXX	3		113	81,235	–	373	448	–	448	–	113	335	XXX	3	7	
9999999 – Totals		110	XXX	3		113	81,235	–	373	448	–	448	–	113	335	XXX	3	7	

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44	45	46	47	48	49	50	51	52	53
		37	38	39	40	41	42	43										
ID Number From Col. 1	Name of Reinsurer From Col. 3	Current	Overdue 1 - 29 Days	Overdue 30 - 90 Days	Overdue 91 - 120 Days	Overdue Over 120 Days	Overdue Total Cols. 37 + 42 (In total should equal Cols. 7 + 8)	Overdue Total Cols. 38 + 39 + 40 + 41	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Total Recoverable on Paid Losses & LAE Over 90 Days	Past Due Amounts in Dispute Included in Cols. 40 & 41	Recoverable on Paid Losses & LAE Over 90 Days	Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	Amounts Received Prior 90 Days	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
Total Authorized, Affiliates, U.S. Intercompany Pooling																		
31-4192970	GRANGE INS CO																YES	-
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling																		
0499999 - Total Authorized, Affiliates, U.S. Non-Pool, Total																		
Total Authorized, Other U.S. Unaffiliated Insurers																		
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	-							-	-	-	-	-	-	-	-	YES	-
51-0434766	AXIS REINS CO	-							-	-	-	-	-	-	-	-	YES	-
47-0574325	BERKLEY INS CO	-							-	-	-	-	-	-	-	-	YES	-
42-0234980	EMPLOYERS MUT CAS CO	-							-	-	-	-	-	-	-	-	YES	-
35-2293075	ENDURANCE ASSUR CORP	-							-	-	-	-	-	-	-	-	YES	-
13-2673100	GENERAL REINS CORP	-							-	-	-	-	-	-	-	-	YES	-
52-1952955	RENAISSANCE REINS US INC	-							-	-	-	-	-	-	-	-	YES	-
47-0698507	ODYSSEY REINS CO	-							-	-	-	-	-	-	-	-	YES	-
13-1675535	SWISS REINS AMER CORP	-							-	-	-	-	-	-	-	-	YES	-
42-0644327	UNITED FIRE & CAS CO	-							-	-	-	-	-	-	-	-	YES	-
22-2005057	EVEREST REINS CO	-							-	-	-	-	-	-	-	-	YES	-
87-2252307	TRISURA INS CO	-							-	-	-	-	-	-	-	-	YES	-
13-4924125	MUNICH REINS AMER INC	-							-	-	-	-	-	-	-	-	YES	-
13-3138390	NAVIGATORS INS CO	-							-	-	-	-	-	-	-	-	YES	-
23-1641984	QBE REINS CORP	-							-	-	-	-	-	-	-	-	YES	-
13-5616275	TRANSATLANTIC REINS CO	-							-	-	-	-	-	-	-	-	YES	-
04-1543470	LIBERTY MUT INS CO	-							-	-	-	-	-	-	-	-	YES	-
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers																		
Total Authorized, Other Non-U.S. Insurers																		
AA-1120198	Lloyd's Syndicate Number 1618	-							-	-	-	-	-	-	-	-	YES	-
AA-1128987	Lloyd's Syndicate Number 2987	-							-	-	-	-	-	-	-	-	YES	-
AA-1126033	Lloyd's Syndicate Number 33	-							-	-	-	-	-	-	-	-	YES	-
AA-1126435	Lloyd's Syndicate Number 435	-							-	-	-	-	-	-	-	-	YES	-
AA-1126623	Lloyd's Syndicate Number 623	-							-	-	-	-	-	-	-	-	YES	-
AA-1127084	Lloyd's Syndicate Number 1084	-							-	-	-	-	-	-	-	-	YES	-
AA-1120156	Lloyd's Syndicate Number 1686	-							-	-	-	-	-	-	-	-	YES	-
AA-1120171	Lloyd's Syndicate Number 1856	-							-	-	-	-	-	-	-	-	YES	-
AA-1128001	Lloyd's Syndicate Number 2001	-							-	-	-	-	-	-	-	-	YES	-
AA-1128003	Lloyd's Syndicate Number 2003	-							-	-	-	-	-	-	-	-	YES	-
AA-1128010	Lloyd's Syndicate Number 2010	-							-	-	-	-	-	-	-	-	YES	-
AA-1128623	Lloyd's Syndicate Number 2623	-							-	-	-	-	-	-	-	-	YES	-
AA-1126004	Lloyd's Syndicate Number 4444	-							-	-	-	-	-	-	-	-	YES	-
AA-3194130	Endurance Specialty Ins Ltd	-							-	-	-	-	-	-	-	-	YES	-
AA-1840000	Mapfre Re Compania de Reaseguros SA	-							-	-	-	-	-	-	-	-	YES	-
AA-3190686	Partner Reins Co Ltd	-							-	-	-	-	-	-	-	-	YES	-
AA-3190870	Validus Reins Ltd	-							-	-	-	-	-	-	-	-	YES	-
AA-1340125	Hannover Rueck SE	-							-	-	-	-	-	-	-	-	YES	-
1299999 - Total Authorized, Other Non-U.S. Insurers																		
1499999 - Total Authorized Excluding Protected Cells																		

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. 38 + 39 + 40 + 41													
Total Unauthorized, Other Non-U.S. Insurers																				
AA-1120191	Convex Ins UK Ltd		—															—	YES	—
AA-3191190	Hamilton Re Ltd		—															—	YES	—
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS		—															—	YES	—
AA-1780116	Chaucer Ins Co Designated Activity Co		—															—	YES	—
AA-1340028	Devk Ruckversicherungs und Beteiligungs AG		—															—	YES	—
AA-3191437	Group Ark Ins Ltd		—															—	YES	—
AA-5420050	KOREAN REINS CO		—															—	YES	—
AA-1440060	LANSFORSAKRINGS BOLAG ENS AB		—															—	YES	—
AA-1460019	MS Amlin AG		—															—	YES	—
AA-1440076	SiriusPoint Intl Ins Corp (publ)		—															—	YES	—
AA-5324100	Taiping Reins Co Ltd		—															—	YES	—
AA-3191432	Vantage Risk Ltd		—															—	YES	—
2699999	— Total Unauthorized, Other Non-U.S. Insurers		—														—	—	XXX	—
2899999	— Total Unauthorized Excluding Protected Cells		—														—	—	XXX	—
Total Certified, Other Non-U.S. Insurers																				
CR-3194126	Arch Reins Ltd		—															—	YES	—
CR-3190770	Chubb Tempest Reins Ltd		—															—	YES	—
CR-3191289	Fidelis Ins Bermuda Ltd		—															—	YES	—
CR-1120175	Fidelis Underwriting Ltd		—															—	YES	—
CR-3190875	Hiscox Ins Co (Bermuda) Ltd		—															—	YES	—
4099999	— Total Certified, Other Non-U.S. Insurers		—														—	—	XXX	—
4299999	— Total Certified Excluding Protected Cells		—														—	—	XXX	—
5799999	— Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		—														—	—	XXX	—
9999999	— Totals		—														—	—	XXX	—

Annual Statement for the Year 2023 of the Integrity Property and Casualty Insurance Company

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Provision for Certified Reinsurance															69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)		
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0	66	67	68		
ID Number From Col. 1	Name of Reinsurer From Col. 3	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col.24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days	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	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			
Total Authorized, Affiliates, U.S. Intercompany Pooling																			
31-419290	GRANGE INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
Total Authorized, Other U.S. Unaffiliated Insurers																			
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
51-0434766	AXIS REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
47-0574325	BERKLEY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
42-0234980	EMPLOYERS MUT CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
35-2293075	ENDURANCE ASSUR CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-2673100	GENERAL REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
52-1952955	RENAISSANCE REINS US INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
47-0698507	ODYSSEY REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-1675535	SWISS REINS AMER CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
42-0644327	UNITED FIRE & CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
22-2005057	EVEREST REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
87-2252307	TRISURA INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-4924125	MUNICH REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-3138390	NAVIGATORS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
23-1641984	QBE REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-5616275	TRANSATLANTIC REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
04-1543470	LIBERTY MUT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
Total Authorized, Other Non-U.S. Insurers																			
AA-1120198	Lloyd's Syndicate Number 1618	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1128987	Lloyd's Syndicate Number 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1126033	Lloyd's Syndicate Number 33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1126435	Lloyd's Syndicate Number 435	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1126623	Lloyd's Syndicate Number 623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1127084	Lloyd's Syndicate Number 1084	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120156	Lloyd's Syndicate Number 1686	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120171	Lloyd's Syndicate Number 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1128001	Lloyd's Syndicate Number 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1128003	Lloyd's Syndicate Number 2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1128010	Lloyd's Syndicate Number 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1128623	Lloyd's Syndicate Number 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1126004	Lloyd's Syndicate Number 4444	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3194130	Endurance Specialty Ins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1840000	Mapfre Re Compania de Reaseguros SA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3190686	Partner Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3190870	Validus Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1340125	Hannover Rueck SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

Annual Statement for the Year 2023 of the Integrity Property and Casualty Insurance Company

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Provision for Certified Reinsurance															69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)			
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0	66	67	68			
ID Number From Col. 1	Name of Reinsurer From Col. 3	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col.24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days	Amount of Credit Allowed for Net Recoverables (Col. 57 +[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days	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				
1299999 – Total Authorized, Other Non-U.S. Insurers	XXX	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	XXX			
Total Unauthorized, Other Non-U.S. Insurers																				
AA-1120191	Convex Ins UK Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-3191190	Hamilton Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1780116	Chaucer Ins Co Designated Activity Co Devk Ruckversicherungs und Beteiligungs AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1340028		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-3191437	Group Ark Ins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-5420050	KOREAN REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1440060	LANSFORSAKRINGS BOLAG ENS AB	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1460019	MS Amlin AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1440076	SiriusPoint Intl Ins Corp (publ)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-5324100	Taiping Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-3191432	Vantage Risk Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2699999 – Total Unauthorized, Other Non-U.S. Insurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2899999 – Total Unauthorized Excluding Protected Cells	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
Total Certified, Other Non-U.S. Insurers																				
CR-3194126	Arch Reins Ltd	3	07/01/2015	20.000		48	10	100.000	100.000		48	–	–	–	–	–	–			
CR-3190770	Chubb Tempest Reins Ltd	2	11/19/2020	10.000		7	1	100.001	100.000		7	–	–	–	–	–	–			
CR-3191289	Fidelis Ins Bermuda Ltd	4	12/07/2021	50.000		4	2	99.989	100.000		4	–	–	–	–	–	–			
CR-1120175	Fidelis Underwriting Ltd	4	01/10/2022	50.000		9	4	99.999	100.000		9	–	–	–	–	–	–			
CR-3190875	Hiscox Ins Co (Bermuda) Ltd	3	08/04/2021	20.000		10	2	100.004	100.000		10	–	–	–	–	–	–			
4099999 – Total Certified, Other Non-U.S. Insurers	XXX	XXX	XXX			78	19	XXX	XXX		78	–	–	–	–	–	–			
4299999 – Total Certified Excluding Protected Cells	XXX	XXX	XXX			78	19	XXX	XXX		78	–	–	–	–	–	–			
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells	XXX	XXX	XXX			78	19	XXX	XXX		78	–	–	–	–	–	–			
9999999 – Totals	XXX	XXX	XXX	XXX		78	19	XXX	XXX		78	–	–	–	–	–	–			

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 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 = "Yes"; 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)
Total Authorized, Affiliates, U.S. Intercompany Pooling										
31-4192970	GRANGE INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling										
Total Authorized, Other U.S. Unaffiliated Insurers										
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
51-0434766	AXIS REINS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
47-0574325	BERKLEY INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
42-0234980	EMPLOYERS MUT CAS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
35-2293075	ENDURANCE ASSUR CORP	—	XXX	XXX	—	—	—	XXX	XXX	—
13-2673100	GENERAL REINS CORP	—	XXX	XXX	—	—	—	XXX	XXX	—
52-1952955	RENAISSANCE REINS US INC	—	XXX	XXX	—	—	—	XXX	XXX	—
47-0698507	ODYSSEY REINS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
13-1675535	SWISS REINS AMER CORP	—	XXX	XXX	—	—	—	XXX	XXX	—
42-0644327	UNITED FIRE & CAS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
22-2005057	EVEREST REINS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
87-2252307	TRISURA INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
13-4924125	MUNICH REINS AMER INC	—	XXX	XXX	—	—	—	XXX	XXX	—
13-3138390	NAVIGATORS INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
23-1641984	QBE REINS CORP	—	XXX	XXX	—	—	—	XXX	XXX	—
13-5616275	TRANSATLANTIC REINS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
04-1543470	LIBERTY MUT INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers										
Total Authorized, Other Non-U.S. Insurers										
AA-1120198	Lloyd's Syndicate Number 1618	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1128987	Lloyd's Syndicate Number 2987	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1126033	Lloyd's Syndicate Number 33	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1126435	Lloyd's Syndicate Number 435	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1126623	Lloyd's Syndicate Number 623	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1127084	Lloyd's Syndicate Number 1084	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1120156	Lloyd's Syndicate Number 1686	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1120171	Lloyd's Syndicate Number 1856	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1128001	Lloyd's Syndicate Number 2001	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1128003	Lloyd's Syndicate Number 2003	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1128010	Lloyd's Syndicate Number 2010	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1128623	Lloyd's Syndicate Number 2623	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1126004	Lloyd's Syndicate Number 4444	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-3194130	Endurance Specialty Ins Ltd.	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1840000	Mapfre Re Compania de Reaseguros SA	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-3190686	Partner Reins Co Ltd.	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-3190870	Validus Reins Ltd.	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1340125	Hannover Rueck SE	—	XXX	XXX	—	—	—	XXX	XXX	—
1299999 - Total Authorized, Other Non-U.S. Insurers										
1499999 - Total Authorized Excluding Protected Cells										

Annual Statement for the Year 2023 of the Integrity Property and Casualty Insurance Company

SCHEDULE F - PART 3 (CONTINUED)

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

1 ID Number From Col. 1	2 Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; 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%])	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)
			Total Provision for Reinsurance							
Total Unauthorized, Other Non-U.S. Insurers										
AA-1120191...	Convex Ins UK Ltd.	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-3191190...	Hamilton Re Ltd.	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-1460080...	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-1780116...	Chaucer Ins Co Designated Activity Co.	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-1340028...	Devk Ruckversicherungs und Beteiligungs AG	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-3191437...	Group Ark Ins Ltd.	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-5420050...	KOREAN REINS CO	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-1440060...	LANSFORSAKRINGS BOLAG ENS AB	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-1460019...	MS Amlin AG	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-1440076...	SiriusPoint Intl Ins Corp (publ)	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-5324100...	Taiping Reins Co Ltd.	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-3191432...	Vantage Risk Ltd.	—	—	—	XXX	XXX	XXX	—	XXX	—
2699999 – Total Unauthorized, Other Non-U.S. Insurers		—	—	—	XXX	XXX	XXX	—	XXX	—
Total Certified, Other Non-U.S. Insurers										
CR-3194126...	Arch Reins Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—
CR-3190770...	Chubb Tempest Reins Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—
CR-3191289...	Fidelis Ins Bermuda Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—
CR-1120175...	Fidelis Underwriting Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—
CR-3190875...	Hiscox Ins Co (Bermuda) Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—
4099999 – Total Certified, Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—
4299999 – Total Certified Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		—	—	—	—	—	—	—	—	—
9999999 – Totals		—	—	—	—	—	—	—	—	—

Annual Statement for the Year 2023 of the Integrity Property and Casualty Insurance Company

SCHEDULE F - PART 4

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

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
0001	1	021000089	Citibank Europe	22
0002	1	026004226	Societe Generale	5
0003	1	026002574	Barclays	2
0004	1	021000089	Citibank Europe	4
0005	1	026009593	Bank of America	48
0006	1	021000089	Citibank Europe	7
0007	1	021000089	Citibank London	4
0008	1	981390502	Lloyds Corporate Markets	9
0009	1	026008044	Commerzbank	10
9999999 - Totals				111

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.	GRANGE INS CO.....		92,720
2.	HARTFORD STEAM BOIL INSPEC & INS CO.....		111
3.	Hannover Rueck SE.....		65
4.	RENAISSANCE REINS US INC.....		52
5.	ODYSSEY REINS CO.....		29

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.	GRANGE INS CO.....	80,975	92,720	YES.....
7.	HARTFORD STEAM BOIL INSPEC & INS CO.....	54	111	NO.....
8.	SWISS REINS AMER CORP.....	51	23	NO.....
9.	Arch Reins Ltd.....	48	2	NO.....
10.	Hannover Rueck SE.....	24	65	NO.....

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	20,735,478		20,735,478
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.....	169,999		169,999
6. Net amount recoverable from reinsurers.....			
7. Protected cell assets (Line 27).....		86,499,484	86,499,484
8. Totals (Line 28).....	20,905,477	86,499,484	107,404,961
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	—	46,796,887	46,796,887
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	104,459		104,459
11. Unearned premiums (Line 9).....		39,702,597	39,702,597
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.....	4,528,575		4,528,575
19. Total liabilities excluding protected cell business (Line 26).....	4,633,034	86,499,484	91,132,518
20. Protected cell liabilities (Line 27).....			
21. Surplus as regards policyholders (Line 37).....	16,272,443	XXX	16,272,443
22. Totals (Line 38).....	20,905,477	86,499,484	107,404,961

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? YES
 If yes, give full explanation: The Company participates in a 100% pooling agreement that includes the Company and Grange Insurance Company and their collective insurance subsidiaries.

(30) Schedule H - Part 1

NONE

(30) Write-Ins for Line 11 - Deductions

NONE

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

NONE

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

NONE

(31) Schedule H - Part 4 - Reinsurance

NONE

(32) Schedule H - Part 5

NONE

(35) Schedule P - Part 1A - Columns 1 to 12

NONE

(35) Schedule P - Part 1A - Columns 13 to 25

NONE

(35) Schedule P - Part 1A - Columns 26 to 36

NONE

(36) Schedule P - Part 1B - Columns 1 to 12

NONE

(36) Schedule P - Part 1B - Columns 13 to 25

NONE

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

NONE

(37) Schedule P - Part 1C - Columns 1 to 12

NONE

(37) Schedule P - Part 1C - Columns 13 to 25

NONE

(37) Schedule P - Part 1C - Columns 26 to 36

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

(43) Schedule P - Part 1H - Section 1 - Columns 1 to 12

NONE

(43) Schedule P - Part 1H - Section 1 - Columns 13 to 25

NONE

(43) Schedule P - Part 1H - Section 1 - Columns 26 to 36

NONE

(44) Schedule P - Part 1H - Section 2 - Columns 1 to 12

NONE

(44) Schedule P - Part 1H - Section 2 - Columns 13 to 25

NONE

(44) Schedule P - Part 1H - Section 2 - Columns 26 to 36

NONE

(45) Schedule P - Part 1I - Columns 1 to 12

NONE

(45) Schedule P - Part 1I - Columns 13 to 25

NONE

(45) Schedule P - Part 1I - Columns 26 to 36

NONE

(46) Schedule P - Part 1J - Columns 1 to 12

NONE

(46) Schedule P - Part 1J - Columns 13 to 25

NONE

(46) Schedule P - Part 1J - Columns 26 to 36

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

(51) Schedule P - Part 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

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

(59) Schedule P - Part 2M - International

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

(61) Schedule P - Part 2T - Warranty

NONE

(62) Schedule P - Part 3A - Homeowners/Farmowners

NONE

(62) Schedule P - Part 3B - Private Passenger Auto Liability/Medical

NONE

(62) Schedule P - Part 3C - Commercial Auto/Truck Liability/Medical

NONE

(62) Schedule P - Part 3D - Workers' Compensation (Excluding Excess Workers' Compensation)

NONE

(62) Schedule P - Part 3E - Commercial Multiple Peril

NONE

(63) Schedule P - Part 3F - Section 1 - Medical Professional Liability - Occurrence

NONE

(63) Schedule P - Part 3F - Section 2 - Medical Professional Liability - Claims-Made

NONE

(63) Schedule P - Part 3G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)

NONE

(63) Schedule P - Part 3H - Section 1 - Other Liability - Occurrence

NONE

(63) Schedule P - Part 3H - Section 2 - Other Liability - Claims-Made

NONE

(64) Schedule P - Part 3I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)

NONE

(64) Schedule P - Part 3J - Auto Physical Damage

NONE

(64) Schedule P - Part 3K - Fidelity/Surety

NONE

(64) Schedule P - Part 3L - Other (Including Credit, Accident and Health)

NONE

(64) Schedule P - Part 3M - International

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

(66) Schedule P - Part 3T - Warranty

NONE

(67) Schedule P - Part 4A - Homeowners/Farmowners

NONE

(67) Schedule P - Part 4B - Private Passenger Auto Liability/Medical

NONE

(67) Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical

NONE

(67) Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

(69) Schedule P - Part 4M - International

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

(71) Schedule P - Part 4T - Warranty

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

(84) Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1

NONE

(84) Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2

NONE

(84) Schedule P - Part 6D - Workers' Compensation (Excluding Excess Workers' Compensation) - Section 1

NONE

(84) Schedule P - Part 6D - Workers' Compensation (Excluding Excess Workers' Compensation) - Section 2

NONE

(85) Schedule P - Part 6E - Commercial Multiple Peril - Section 1

NONE

(85) Schedule P - Part 6E - Commercial Multiple Peril - Section 2

NONE

(85) Schedule P - Part 6H - Other Liability - Occurrence - Section 1A

NONE

(85) Schedule P - Part 6H - Other Liability - Occurrence - Section 2A

NONE

(86) Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B

NONE

(86) Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B

NONE

(86) Schedule P - Part 6M - International - Section 1

NONE

(86) Schedule P - Part 6M - International - Section 2

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 OMITTED)

SECTION 1

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								
5. 2017.....	XXX	XXX	XXX							
6. 2018.....	XXX	XXX	XXX	XXX						
7. 2019.....	XXX	XXX	XXX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR-END (\$000 OMITTED)									
	1 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

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	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	

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	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**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?

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

1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2?

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

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1	2
Years in Which Premiums Were Earned and Losses Were Incurred	Section 1: Occurrence	
1.601. Prior.....		
1.602. 2014.....		
1.603. 2015.....		
1.604. 2016.....		
1.605. 2017.....		
1.606. 2018.....		
1.607. 2019.....		
1.608. 2020.....		
1.609. 2021.....		
1.610. 2022.....		
1.611. 2023.....		
1.612. Totals.....		

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement?..... **YES**

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement?..... **YES**

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10?..... **NO**

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.

Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums (in thousands of dollars) in force at the end of the year for:

5.1. Fidelity..... **\$**

5.2. Surety..... **\$**

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

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

7.2. An extended statement may be attached.....
As of 1/1/2017, the intercompany pooling agreement was amended. The intercompany pooling agreement now cedes underwriting results back only to the two parent companies, Grange Insurance Company and Integrity Insurance Company, with their respective stock subsidiary companies receiving 0% from the pool. Grange Insurance Company remains the lead company.

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

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

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)
14060	31-4192970	GRANGE INSURANCE COMPANY GRANGE INDEMNITY INSURANCE COMPANY		150,000,000			55,531,521		*		205,531,521	(987,927,000)
10322	31-1432675	TRUSTGARD INSURANCE COMPANY							*			365,670,000
40118	41-1405571	GRANGE INSURANCE COMPANY OF MICHIGAN							*			201,596,000
11136	31-1769414	GRANGE PROPERTY & CASUALTY INSURANCE CO.							*			32,807,000
11982	42-1610213	INTEGRITY INSURANCE COMPANY							*			135,047,000
14303	39-0367560	INTEGRITY PROPERTY & CASUALTY INS. CO.					(51,307,892)		*		(51,307,892)	137,657,000
12986	41-2236417	INTEGRITY SELECT INSURANCE COMPANY							*			80,975,000
10288	81-3455935	GRANGEAMERICA							*			34,175,000
00000	31-1145043							-				-
00000	31-1193707	NORTHVIEW INSURANCE AGENCY						-				-
00000	83-2982350	GRANGE MUTUAL HOLDING COMPANY										
00000	83-2949300	GRANGE HOLDINGS, INC.		(150,000,000)			(4,223,629)				(154,223,629)	
9999999 - Control Totals				-			-		XXX		-	-

SCHEDULE Y

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

1 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) (Yes/No)	8 Granted Disclaimer of Control / Affiliation of Column 5 Over Column 6 (Yes/No)
GRANGE INSURANCE COMPANY	GRANGE HOLDINGS, INC.....	100.000 %	NO.....	GRANGE MUTUAL HOLDING COMPANY.....	GRANGE INSURANCE POOL.....	100.000 %	NO.....
GRANGE INDEMNITY INSURANCE COMPANY	GRANGE INSURANCE COMPANY.....	100.000 %	NO.....	GRANGE MUTUAL HOLDING COMPANY.....	GRANGE INSURANCE POOL.....	100.000 %	NO.....
TRUSTGARD INSURANCE COMPANY	GRANGE INSURANCE COMPANY.....	100.000 %	NO.....	GRANGE MUTUAL HOLDING COMPANY.....	GRANGE INSURANCE POOL.....	100.000 %	NO.....
GRANGE INSURANCE COMPANY OF MICHIGAN	GRANGE INSURANCE COMPANY.....	100.000 %	NO.....	GRANGE MUTUAL HOLDING COMPANY.....	GRANGE INSURANCE POOL.....	100.000 %	NO.....
GRANGE PROPERTY & CASUALTY INSURANCE COMPANY	GRANGE INSURANCE COMPANY.....	100.000 %	NO.....	GRANGE MUTUAL HOLDING COMPANY.....	GRANGE INSURANCE POOL.....	100.000 %	NO.....
INTEGRITY INSURANCE COMPANY	GRANGE HOLDINGS, INC.....	100.000 %	NO.....	GRANGE MUTUAL HOLDING COMPANY.....	GRANGE INSURANCE POOL.....	100.000 %	NO.....
INTEGRITY SELECT INSURANCE COMPANY	INTEGRITY INSURANCE COMPANY.....	100.000 %	NO.....	GRANGE MUTUAL HOLDING COMPANY.....	GRANGE INSURANCE POOL.....	100.000 %	NO.....
INTEGRITY PROPERTY & CASUALTY INSURANCE COMPANY	INTEGRITY INSURANCE COMPANY.....	100.000 %	NO.....	GRANGE MUTUAL HOLDING COMPANY.....	GRANGE INSURANCE POOL.....	100.000 %	NO.....

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

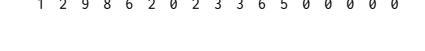
	March Filing	Response
1.	Will an actuarial opinion be filed by March 1?	YES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-based Capital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

SUPPLEMENTAL FILINGS

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

	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?	YES
22.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
23.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
25.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
27.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution contracts be filed with the state of domicile and the NAIC by March 1?	NO
28.	Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?	YES
29.	Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?	YES
	April Filing	
30.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
31.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
32.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
33.	Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?	NO
34.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	YES
35.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit – Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	NO
36.	Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO
37.	Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
	August Filing	
38.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

	Explanation	Barcode
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.	Business not written	 1 2 9 8 6 2 0 2 3 4 2 0 0 0 0 0 0
12.	Business not written	 1 2 9 8 6 2 0 2 3 2 4 0 0 0 0 0 0
13.	Business not written	 1 2 9 8 6 2 0 2 3 3 6 0 0 0 0 0 0
14.	Business not written	 1 2 9 8 6 2 0 2 3 4 5 5 0 0 0 0 0 0
15.	Business not written	 1 2 9 8 6 2 0 2 3 4 9 0 0 0 0 0 0 0
16.	Business not written	 1 2 9 8 6 2 0 2 3 3 8 5 0 0 0 0 0 0
17.	Business not written	 1 2 9 8 6 2 0 2 3 4 0 1 0 0 0 0 0 0
18.	Business not written	 1 2 9 8 6 2 0 2 3 3 6 5 0 0 0 0 0 0
19.		
20.		
21.		
22.	Business not written	 1 2 9 8 6 2 0 2 3 5 0 0 0 0 0 0 0
23.	Business not written	 1 2 9 8 6 2 0 2 3 5 0 5 0 0 0 0 0
24.	Business not written	 1 2 9 8 6 2 0 2 3 2 2 4 0 0 0 0 0 0
25.	Business not written	 1 2 9 8 6 2 0 2 3 2 2 5 0 0 0 0 0 0
26.	Business not written	 1 2 9 8 6 2 0 2 3 2 2 6 0 0 0 0 0 0
27.	Business not written	 1 2 9 8 6 2 0 2 3 5 5 5 0 0 0 0 0 0
28.		
29.		
30.	Business not written	 1 2 9 8 6 2 0 2 3 2 3 0 0 0 0 0 0
31.	Business not written	 1 2 9 8 6 2 0 2 3 3 3 0 6 0 0 0 0 0
32.	Business not written	 1 2 9 8 6 2 0 2 3 2 1 0 0 0 0 0 0
33.	Business not written	 1 2 9 8 6 2 0 2 3 2 1 6 0 0 0 0 0 0
34.		
35.	No business written	 1 2 9 8 6 2 0 2 3 2 9 0 0 0 0 0 0
36.	Business not written	 1 2 9 8 6 2 0 2 3 5 6 0 0 0 0 0 0
37.	No business written	 1 2 9 8 6 2 0 2 3 5 6 5 0 0 0 0 0 0
38		

OVERFLOW PAGE FOR WRITE-INS**UNDERWRITING AND INVESTMENT EXHIBIT – PART 3 – EXPENSES**

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
2404. Investment Banking	29,736	29,736
2497. Summary of remaining write-ins for Line 24 from overflow page	29,736	29,736

OVERFLOW PAGE FOR WRITE-INS


EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS

AS REPORTED ON LINE 17 OF THE EXHIBIT OF PREMIUMS AND LOSSES

To Be Filed by March 1

NAIC Group Code: 0267

NAIC Company Code: 12986

	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.....	184,847	160,579	125,000	
8. Employment liability.....	305	2,367		
9. Aggregate write-ins for facilities and premises (CGL).....				
10. Internet & cyber liability.....				
11. Aggregate write-ins for other.....	21,174	33,118	600	3,500
12. Total ASL 17 - other liability (sum of lines 1 through 11).....	206,326	196,064	125,600	3,500
Details of Write-Ins				
0901.....				
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.....				
1101. Commercial General Liability.....	21,174	33,118	600	3,500
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.....	21,174	33,118	600	3,500



1 2 9 8 6 2 0 2 3 6 0 0 1 6 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 Iowa

NAIC Group Code: 0267

NAIC Company Code: 12986

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

**MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR**

For The Year Ended December 31, 2023

(To Be Filed By March 1)

FOR THE STATE OF Minnesota

NAIC Group Code: 0267

NAIC Company Code: 12986

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



1 2 9 8 6 2 0 2 3 6 0 0 5 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 Wisconsin

NAIC Group Code: 0267

NAIC Company Code: 12986

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