



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

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

NAIC Group Code ..... 0067, ..... 0067 ..... NAIC Company Code ..... 16721 ..... Employer's ID Number ..... 31-0239840 .....  
*(Current) (Prior)*

Organized under the Laws of ..... OH ..... State of Domicile or Port of Entry ..... OH .....

Country of Domicile ..... US .....

Incorporated/Organized ..... 01/24/1827 ..... Commenced Business ..... 07/17/1826 .....

Statutory Home Office ..... 525 VINE STREET, SUITE 1925 ..... CINCINNATI, OH, US 45202 .....

Main Administrative Office ..... 525 VINE STREET, SUITE 1925 ..... CINCINNATI, OH, US 45202 ..... 513-621-1826 .....  
*(Telephone)*

Mail Address ..... 525 VINE STREET, SUITE 1925 ..... CINCINNATI, OH, US 45202 .....

Primary Location of Books and  
Records ..... 525 VINE STREET, SUITE 1925 ..... CINCINNATI, OH, US 45202 ..... 513-621-1826 .....  
*(Telephone)*

Internet Website Address ..... WWW.CINEQLIFE.COM .....

Statutory Statement Contact ..... JOSHUA C KORSON ..... 517-649-4756 .....  
*(Telephone)*

JKORSON@FBINSMI.COM ..... 513-621-4531 .....  
*(E-Mail) (Fax)*

OFFICERS

..... CARL JOSEPH BEDNARSKI, PRESIDENT ..... ANDREW JAMES KOK, SECRETARY .....

..... DONOLD EUGENE SIMON, EXECUTIVE VICE PRESIDENT ..... THOMAS LIGOURI NUGENT#, TREASURER .....

OTHER

..... THOMAS ALAN SCHROTE, CHIEF OPERATING OFFICER .....

DIRECTORS OR TRUSTEES

..... DAVID HOWARD BAHRMAN .....	..... CARL JOSEPH BEDNARSKI .....
..... LEONA MARY DANIELS .....	..... MICHAEL ALLEN DERUITER .....
..... TRAVIS EDWARD FAHLEY .....	..... MICHAEL CHARLES FUSILIER .....
..... BENJAMIN JEFFERY LACROSS .....	..... JENNIFER LYNN LEWIS .....
..... PATRICK WILLIAM MCGUIRE .....	..... MICHAEL RICHARD MULDERS .....
..... ABRAHAM JOHN PASCH# .....	..... PAUL DAVID PRIDGEON .....
..... JEFFERY BLAIR SANBORN .....	..... STEPHANIE LEE SCHAFER .....
..... LARRY MARTIN SHAW .....	..... LARRY ALLEN WALTON# .....

State of Michigan .....  
 County of Eaton .....

SS

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

x	x	x
Carl Joseph Bednarski President	Donald Eugene Simon Executive Vice President	Thomas Ligouri Nugent Treasurer

Subscribed and sworn to before me  
 this ..... day of  
 ..... , 2024

x

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



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR 2023

NAIC Group Code: 0067

NAIC Company Code: 16721

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

NONE

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

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


**EXHIBIT OF PREMIUMS AND LOSSES**

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR 2023

NAIC Group Code: 0067

NAIC Company Code: 16721

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

**NONE**

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

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

## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR 2023

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

NAIC Group Code: 0067

NAIC Company Code: 16721

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

NONE

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

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



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2023

NAIC Group Code: 0067

NAIC Company Code: 16721

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

NONE

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

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



## EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR 2023

NAIC Group Code: 0067

NAIC Company Code: 16721

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

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

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



## EXHIBIT OF PREMIUMS AND LOSSES

GRAND TOTAL DURING THE YEAR 2023

NAIC Group Code: 0067

NAIC Company Code: 16721

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

(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 .

(20) Schedule F - Part 1

**NONE**

(21) Schedule F - Part 2

**NONE**

(22) Schedule F - Part 3 - Ceded Reinsurance

**NONE**

(23) Schedule F - Part 3 - Credit Risk

**NONE**

(24) Schedule F - Part 3 - Aging of Ceded Reinsurance

**NONE**

(25) Schedule F - Part 3 - Provision for Reinsurance for Certified Reinsurers

**NONE**

(26) Schedule F - Part 3 - Total Provision for Reinsurance

**NONE**

(27) Schedule F - Part 4 - Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3

**NONE**

(28) Schedule F - Part 5A

**NONE**

(28) Schedule F - Part 5B

**NONE**

**SCHEDULE F - PART 6**

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12).....	3,022,117		3,022,117
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.....	25,404		25,404
6. Net amount recoverable from reinsurers.....			
7. Protected cell assets (Line 27).....			
8. Totals (Line 28).....	3,047,520		3,047,520
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3).....			
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	23,058		23,058
11. Unearned premiums (Line 9).....			
12. Advance premiums (Line 10).....			
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....			
15. Funds held by company under reinsurance treaties (Line 13).....			
16. Amounts withheld or retained by company for account of others (Line 14).....			
17. Provision for reinsurance (Line 16).....			
18. Other liabilities.....	1,740		1,740
19. Total liabilities excluding protected cell business (Line 26).....	24,799		24,799
20. Protected cell liabilities (Line 27).....			
21. Surplus as regards policyholders (Line 37).....	3,022,722	XXX	3,022,722
22. Totals (Line 38).....	3,047,520		3,047,520

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?  
If yes, give full explanation:

(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**

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior	24	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(7)	(7)	-	-
2. 2014												
3. 2015	XXX											
4. 2016	XXX	XXX										
5. 2017	XXX	XXX	XXX									
6. 2018	XXX	XXX	XXX	XXX								
7. 2019	XXX	XXX	XXX	XXX	XXX							
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior	14	8	2	4	1	(5)	(6)	(6)	(9)	(9)	-	(3)
2. 2014												
3. 2015	XXX											
4. 2016	XXX	XXX										
5. 2017	XXX	XXX	XXX									
6. 2018	XXX	XXX	XXX	XXX								
7. 2019	XXX	XXX	XXX	XXX	XXX							
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	(3)

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

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

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

(EXCLUDING EXCESS WORKERS' COMPENSATION)

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

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

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

(59) Schedule P - Part 2M - International

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

(61) Schedule P - Part 2T - Warranty

**NONE**

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

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

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.	XXX	(2)	(8)	(10)	(12)	(18)	(19)	(19)	(9)	(9)		
2. 2014.												
3. 2015.	XXX											
4. 2016.	XXX	XXX										
5. 2017.	XXX	XXX	XXX									
6. 2018.	XXX	XXX	XXX	XXX								
7. 2019.	XXX	XXX	XXX	XXX	XXX							
8. 2020.	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2021.	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

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

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

(EXCLUDING EXCESS WORKERS' COMPENSATION)

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

**SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL**

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

**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**

**SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS****SECTION 1**

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

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

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

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

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

(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**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

**SCHEDULE P INTERROGATORIES**

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? If the answer to question 1.1 is "no", leave the following questions blank.  
If the answer to question 1.1 is "yes", please answer the following questions:..... **NO**
- 1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?..... **\$**
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP No. 65?
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve?
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2?
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

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

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement?..... **YES**
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement?..... **YES**
4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10?..... **NO**

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

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

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

5. What were the net premiums (in thousands of dollars) in force at the end of the year for:
- 5.1. Fidelity..... **\$**
- 5.2. Surety..... **\$**
6. Claim count information is reported per claim or per claimant (indicate which)..... **PER CLAIM**  
If not the same in all years, explain in Interrogatory 7.
- 7.1. The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses?..... **NO**
- 7.2. An extended statement may be attached.....

**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 Cincinnati Equitable 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)	*	
			38-1718391			Michigan Farm Bureau	MI	UIP	Ultimate Controlling Company	Board of Directors				NO		
0067	Michigan Farm Bureau Group	21555	38-1316179			Farm Bureau Mutual Insurance Company of Michigan	MI	IA	Michigan Farm Bureau	Other	Michigan Farm Bureau		NO	1		
0067	Michigan Farm Bureau Group	63096	38-6056370			Farm Bureau Life Insurance Company of Michigan	MI	IA	Michigan Farm Bureau	Ownership	100.000	Michigan Farm Bureau		NO		
0067	Michigan Farm Bureau Group	21547	38-6056228			Farm Bureau General Insurance Company of Michigan	MI	IA	Michigan Farm Bureau	Ownership	100.000	Michigan Farm Bureau		NO		
			38-2961817			Michigan Farm Bureau Financial Corporation	MI	UDP	Michigan Farm Bureau	Ownership	100.000	Michigan Farm Bureau		NO		
			27-5177082			FBL Real Estate Holdings, LLC	MI	DS	Farm Bureau Life Insurance Company of Michigan	Ownership	100.000	Michigan Farm Bureau		NO		
			38-2102277			MFB, Inc.	MI	NIA	Michigan Farm Bureau	Ownership	100.000	Michigan Farm Bureau		NO		
			86-1744708			Gravity Works Design, LLC	MI	NIA	Financial Corporation	Ownership	100.000	Michigan Farm Bureau		NO		
			38-1883116			Community Service Acceptance Company	MI	NIA	Michigan Farm Bureau	Ownership	100.000	Michigan Farm Bureau		NO		
0067	Michigan Farm Bureau Group	74799	73-1333608			Leaders Life Insurance Company	OK	IA	Financial Corporation	Ownership	100.000	Michigan Farm Bureau		NO		
			31-1154154			Cincinnati Equitable Companies, Inc.	OH	NIA	Michigan Farm Bureau	Ownership	100.000	Michigan Farm Bureau		NO		
0067	Michigan Farm Bureau Group	88064	35-1452221			Cincinnati Equitable Life Insurance Company	OH	IA	Financial Corporation	Cincinnati Equitable Companies, Inc.	Ownership	100.000	Michigan Farm Bureau		NO	
0067	Michigan Farm Bureau Group	16721	31-0239840			Cincinnati Equitable Insurance Company	OH	RE	Michigan Farm Bureau	Financial Corporation	Ownership	100.000	Michigan Farm Bureau		NO	

Asterisk	Explanation

**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)
21555	38-1316179	Farm Bureau Mutual Insurance Company of Michigan.....						(67,982,338)			(67,982,338)	(428,574,777)
63096	38-6056370	Farm Bureau Life Insurance Company of Michigan.....	(2,000,000)	632,000							(1,368,000)	(3,486,642)
21547	38-60556228	Farm Bureau General Insurance Company of Michigan.....						67,982,338			67,982,338	533,999,748
	38-2961817	Michigan Farm Bureau Financial Corporation.....	7,247,000	(4,332,000)							2,915,000	
	38-2102277	MFB, Inc.....		700,000							700,000	
	38-1883116	Community Service Acceptance Company.....	(2,247,000)								(2,247,000)	
74799	73-1333608	Leaders Life Insurance Company.....										3,484,528
88064	35-1452221	Cincinnati Equitable Life Insurance Company.....	(3,000,000)	3,000,000							—	2,114
9999999 - Control Totals.....			—	—				—	XXX		—	105,424,971

**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)
Farm Bureau Mutual Insurance Company of Michigan.....	Michigan Farm Bureau.....	100.000 %	NO.....	Michigan Farm Bureau.....	Michigan Farm Bureau Group.....	100.000 %	NO.....
Farm Bureau Life Insurance Company of Michigan.....	Michigan Farm Bureau Financial Corporation.....	100.000 %	NO.....	Michigan Farm Bureau.....	Michigan Farm Bureau Group.....	100.000 %	NO.....
Farm Bureau General Insurance Company.....	Michigan Farm Bureau Financial Corporation.....	100.000 %	NO.....	Michigan Farm Bureau.....	Michigan Farm Bureau Group.....	100.000 %	NO.....
Leaders Life Insurance Company.....	Michigan Farm Bureau Financial Corporation.....	100.000 %	NO.....	Michigan Farm Bureau.....	Michigan Farm Bureau Group.....	100.000 %	NO.....
Cincinnati Equitable Life Insurance Company.....	Cincinnati Equitable Companies, Inc.....	100.000 %	NO.....	Michigan Farm Bureau.....	Michigan Farm Bureau Group.....	100.000 %	NO.....
Cincinnati Equitable Insurance Company.....	Michigan Farm Bureau Financial Corporation.....	100.000 %	NO.....	Michigan Farm Bureau.....	Michigan Farm Bureau Group.....	100.000 %	NO.....

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

### REQUIRED FILINGS

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

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

### SUPPLEMENTAL FILINGS

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

	Response
	<b>March Filing</b>
11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
12. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
15. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	SEE EXPLANATION
20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	NO
21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution contracts be filed with the state of domicile and the NAIC by March 1?	NO
28. Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?	NO
29. Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?	NO
	<b>April Filing</b>
30. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
31. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
32. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
33. Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?	NO
34. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	NO
35. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit – Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	NO
36. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO
37. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
	<b>August Filing</b>
38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

Explanation	Barcode
1.	 1 6 7 2 1 2 0 2 3 4 4 0 0 0 0 0 0 0
2.	
3.	
4.	
5.	
6.	
7.	
8. N/A	
9.	
10.	
11. N/A	 1 6 7 2 1 2 0 2 3 4 2 0 0 0 0 0 0 0
12. N/A	 1 6 7 2 1 2 0 2 3 2 4 0 0 0 0 0 0 0
13. N/A	 1 6 7 2 1 2 0 2 3 3 6 0 0 0 0 0 0 0
14. N/A	 1 6 7 2 1 2 0 2 3 4 5 5 0 0 0 0 0 0
15. N/A	 1 6 7 2 1 2 0 2 3 4 9 0 0 0 0 0 0 0
16. N/A	 1 6 7 2 1 2 0 2 3 3 8 5 0 0 0 0 0 0
17. N/A	 1 6 7 2 1 2 0 2 3 4 0 1 0 0 0 0 0
18. N/A	 1 6 7 2 1 2 0 2 3 3 6 5 0 0 0 0 0 0
19. WAIVED BY OHIO	
20. N/A	 1 6 7 2 1 2 0 2 3 3 9 9 0 0 0 0 0 0
21. N/A	 1 6 7 2 1 2 0 2 3 4 0 0 0 0 0 0 0 0
22. N/A	 1 6 7 2 1 2 0 2 3 5 0 0 0 0 0 0 0 0
23. N/A	 1 6 7 2 1 2 0 2 3 5 0 5 0 0 0 0 0 0
24. N/A	 1 6 7 2 1 2 0 2 3 2 2 4 0 0 0 0 0 0
25. N/A	 1 6 7 2 1 2 0 2 3 2 2 5 0 0 0 0 0 0
26. N/A	 1 6 7 2 1 2 0 2 3 2 2 6 0 0 0 0 0 0
27. N/A	 1 6 7 2 1 2 0 2 3 5 5 5 0 0 0 0 0 0
28. N/A	 1 6 7 2 1 2 0 2 3 5 7 0 0 0 0 0 0 0
29. NO PREMIUM TO REPORT	 1 6 7 2 1 2 0 2 3 6 0 0 0 0 0 0 0 0
30. N/A	 1 6 7 2 1 2 0 2 3 2 3 0 0 0 0 0 0 0
31. N/A	 1 6 7 2 1 2 0 2 3 3 0 6 0 0 0 0 0 0
32. N/A	 1 6 7 2 1 2 0 2 3 2 1 0 0 0 0 0 0 0
33. N/A	 1 6 7 2 1 2 0 2 3 2 1 6 0 0 0 0 0 0
34. N/A	 1 6 7 2 1 2 0 2 3 5 5 0 0 0 0 0 0 0
35. N/A	 1 6 7 2 1 2 0 2 3 2 9 0 0 0 0 0 0 0
36. N/A	 1 6 7 2 1 2 0 2 3 5 6 0 0 0 0 0 0 0
37. N/A	 1 6 7 2 1 2 0 2 3 5 6 5 0 0 0 0 0 0
38	

**OVERFLOW PAGE FOR WRITE-INS**

**OVERFLOW PAGE FOR WRITE-INS**



## **EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS**

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

To Be Filed by March 1

NAIC Group Code: 0067

NAIC Company Code: 16721

	Direct Business Only			
	Prior Year	Current Year		
	1	2	3	4
	Written Premium	Written Premium	Losses Paid (deducting salvage)	Losses Unpaid (Case Base)
1. Completed operations.....				
2. Errors & omissions (E&O).....				
3. Directors & officers (D&O).....				
4. Environmental liability.....				
5. Excess workers' compensation.....				
6. Commercial excess & umbrella.....				
7. Personal umbrella.....				
8. Employment liability.....				
9. Aggregate write-ins for facilities and premises (CGL).....				
10. Internet & cyber liability.....				
11. Aggregate write-ins for other.....				
12. Total ASL 17 - other liability (sum of lines 1 through 11).....				
<b>Details of Write-Ins</b>	<b>NONE</b>			
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.....				
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.....				

