



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2023
OF THE CONDITION AND AFFAIRS OF THE

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NAIC Group Code 0155 NAIC Company Code 21735 Employer's ID Number 36-3789786
(Current) (Prior)

Organized under the Laws of OH, State of Domicile or Port of Entry OH
Country of Domicile United States of America

Incorporated/Organized 09/13/1992 Commenced Business 11/16/1992

Statutory Home Office 6300 WILSON MILLS ROAD, W33, CLEVELAND, OH, US 44143-2182
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 6300 WILSON MILLS ROAD, W33
(Street and Number)
CLEVELAND, OH, US 44143-2182, 440-461-5000

Mail Address P.O. BOX 89490, CLEVELAND, OH, US 44101-6490
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 6300 WILSON MILLS ROAD, W33
(Street and Number)

CLEVELAND, OH, US 44143-2182 , 440-395-4460
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address PROGRESSIVE.COM

(Name) _____ (Area Code) (Telephone Number) _____
FINANCIAL REPORTING@PROGRESSIVE.COM, 440-603-5500
(E-mail Address) _____ (FAX Number) _____

OFFICERS

PRESIDENT PATRICK KEVIN CALLAHAN TREASURER DANIEL JOSEPH WITALEC
SECRETARY MICHAEL ROBERT UTH

OTHER

GREGORY FRANK MISCHLICH #, (ASST. SECRETARY) SANDRA LEE RIHVALKSY, (ASST. TREASURER)

DIRECTORS OR TRUSTEES

DIRECTORS OR TRUSTEES MICHAEL VINCENT ESPOSITO BRIAN JACOB GURA
DANIEL JOSEPH WITALEC

State of OHIO County of CUYAHOGA 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.

PATRICK KEVIN CALLAHAN
PRESIDENT

GREGORY FRANK MISCHLICH #
ASSISTANT SECRETARY

SANDRA LEE RIHALSKY
ASSISTANT TREASURER

Subscribed and sworn to before me this
9TH day of FEBRUARY, 2024

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

DIANA M PISTONE
Notary Public, State of Ohio
My Comm. Exp. Jan. 16, 2026
Recorded in Cuyahoga County





ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Georgia	DURING THE YEAR 2023							NAIC Company Code	21735	
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. Farmersowners 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	5,411,192	5,095,937			2,444,681	2,100,050	2,210,181	226,508	(5,471)	(1,647)	13,599	305,063	170,021
10. Financial Guaranty													
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence	1,827,330	1,731,905			831,189	632,944	747,325	535,904	3,031	71,320	159,046	101,460	57,385
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	662,552,575	641,620,697			164,608,755	390,913,044	437,896,228	305,188,659	10,431,460	11,133,688	27,062,622	315,878	20,761,178
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage	321,587,764	306,206,201			86,800,450	234,976,750	231,060,612	3,827,877	326,392	464,507	1,096,450	691,209	10,073,648
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	
32. Reins nonproportional assumed liability	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	
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)	991,379,460	954,654,741			254,685,074	629,617,047	672,932,590	310,480,738	10,880,402	11,806,094	28,584,850	1,413,610	31,062,233
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

(a) Finance and service charges not included in Lines 1 to 35 \$ 11,898,374

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Hawaii	DURING THE YEAR 2023							NAIC Company Code	21735	
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. Farmersowners Multiple Peril													
4. Homeowners Multiple Peril													
5.1 Commercial Multiple Peril (Non-Liability Portion)													
5.2 Commercial Multiple Peril (Liability Portion)													
6. Mortgage Guaranty													
8. Ocean Marine													
9. Inland Marine													
10. Financial Guaranty													
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence													
17.2 Other Liability - Claims-Made													
17.3 Excess Workers' Compensation													
18.1 Products Liability - Occurrence													
18.2 Products Liability - Claims-Made													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)													1,660
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)													1,660
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Idaho		DURING THE YEAR 2023							NAIC Company Code	21735	
Line of Business			Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
			1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire														
2.1 Allied Lines														
2.2 Multiple Peril Crop														
2.3 Federal Flood														
2.4 Private Crop														
2.5 Private Flood														
3. Farmowners Multiple Peril														
4. Homeowners Multiple Peril														
5.1 Commercial Multiple Peril (Non-Liability Portion)														
5.2 Commercial Multiple Peril (Liability Portion)														
6. Mortgage Guaranty														
8. Ocean Marine														
9. Inland Marine														
10. Financial Guaranty														
11.1 Medical Professional Liability - Occurrence														
11.2 Medical Professional Liability - Claims-Made														
12. Earthquake														
13.1 Comprehensive (hospital and medical) ind (b)														
13.2 Comprehensive (hospital and medical) group (b)														
14. Credit A&H (Group and Individual)														
15.1 Vision Only (b)														
15.2 Dental Only (b)														
15.3 Disability Income (b)														
15.4 Medicare Supplement (b)														
15.5 Medicaid Title XIX (b)														
15.6 Medicare Title XVIII (b)														
15.7 Long-Term Care (b)														
15.8 Federal Employees Health Benefits Plan (b)														
15.9 Other Health (b)														
16. Workers' Compensation														
17.1 Other Liability - Occurrence														
17.2 Other Liability - Claims-Made														
17.3 Excess Workers' Compensation														
18.1 Products Liability - Occurrence														
18.2 Products Liability - Claims-Made														
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)														4,750
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.	XXX.
32. Reins nonproportional assumed liability	XXX.		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.	XXX.
34. Aggregate Write-Ins for Other Lines of Business														
35. Total (a)														4,750
DETAILS OF WRITE-INS														
3401.														
3402.														
3403.														
3498. Summary of remaining write-ins for Line 34 from overflow page														
3499. Totals (Lines 3401 thru 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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF Illinois		DURING THE YEAR 2023							NAIC Company Code	21735	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire													
2.1 Allied Lines													
2.2 Multiple Peril Crop													
2.3 Federal Flood													
2.4 Private Crop													
2.5 Private Flood													
3. Farmersowners 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													5,345
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													228
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)							104,430	11,820	7,508	5,162	(5,422)	1,582	5,573
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Maine	DURING THE YEAR 2023								NAIC Company Code	21735
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. Farmersowners 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 .....													.351
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.	XXX.
32. Reins nonproportional assumed liability	XXX.	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.	XXX.
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													351
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Minnesota	DURING THE YEAR 2023							NAIC Company Code	21735
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												1,084
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)												1,084
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF North Carolina		DURING THE YEAR 2023							NAIC Company Code	21735	
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. Farmersowners 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	5,557,708	5,169,724			2,605,516	1,932,856	2,039,381	273,696	8,072	11,493	15,192	326,725	107,788
10. Financial Guaranty													
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence	1,658,118	1,558,304			782,414	475,435	136,035	214,392	283	(53,161)	23,800	86,098	36,744
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	250,673,022	235,921,370			67,044,338	157,634,233	183,402,779	126,330,437	2,001,860	3,076,027	8,582,314	241,212	5,599,364
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage	286,237,129	270,758,543			77,709,268	159,174,201	162,819,143	3,445,036	68,006	196,345	837,830	553,938	6,392,772
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	XXX
32. Reins nonproportional assumed liability	XXX	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	XXX
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)	544,125,976	513,407,941			148,141,535	320,514,784	349,904,108	131,179,060	2,232,693	3,444,605	9,806,742	1,207,973	12,136,668
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

(a) Finance and service charges not included in Lines 1 to 35 \$ 8,440,901

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Ohio	DURING THE YEAR 2023							NAIC Company Code	21735	
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. Farmersowners 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)													11,314
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.	XXX.
32. Reins nonproportional assumed liability	XXX.	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.	XXX.
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													11,314
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Oklahoma	DURING THE YEAR 2023								NAIC Company Code	21735
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. Farmersowners 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													1,430
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.	XXX.
32. Reins nonproportional assumed liability	XXX.	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.	XXX.
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													1,430
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Rhode Island	DURING THE YEAR 2023								NAIC Company Code	21735
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. Farmersowners 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) .....													.655
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.	XXX.
32. Reins nonproportional assumed liability	XXX.	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.	XXX.
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													655
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Virginia	DURING THE YEAR 2023								NAIC Company Code	21735
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. Farmersowners 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) .....													.500
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.	XXX.
32. Reins nonproportional assumed liability	XXX.	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.	XXX.
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													500
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Grand Total	DURING THE YEAR 2023								NAIC Company Code	21735
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. Farmersowners 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	10,968,900	10,265,661			5,050,196	4,032,905	4,249,559	500,205	2,601	9,844	28,792	631,788	277,809
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	3,486,047	3,290,210			1,613,603	1,108,379	883,371	750,299	3,314	18,159	182,846	187,558	94,129
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	913,225,597	877,542,067			231,653,093	548,546,054	621,297,784	431,519,096	12,433,320	14,209,715	35,644,935	557,090	26,387,632
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage	607,824,892	576,964,744			164,509,718	394,149,224	393,878,028	7,272,913	394,398	660,853	1,934,281	1,245,147	16,466,421
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	XXX
32. Reins nonproportional assumed liability	XXX	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	XXX
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)	1,535,505,436	1,468,062,682			402,826,609	950,236,261	1,022,848,518	441,667,305	13,118,256	15,245,277	38,393,174	2,621,583	43,226,218
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

(a) Finance and service charges not included in Lines 1 to 35 \$ 20,339,274

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE F - PART 1

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effectuated or (Cancelled) during Current Year

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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 Commis- sions	15 Columns 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
34-1524319 ..	16322 ..	Progressive Direct Insurance Company	OH.....		1,379,115	4,568	1,889	301,532	45,137	59,175	21,749	362,171		796,221		16,159		780,062	
0199999.	Total Authorized - Affiliates - U.S. Intercompany Pooling				1,379,115	4,568	1,889	301,532	45,137	59,175	21,749	362,171		796,221		16,159		780,062	
0499999.	Total Authorized - Affiliates - U.S. Non-Pool																		
0799999.	Total Authorized - Affiliates - Other (Non-U.S.)																		
0899999.	Total Authorized - Affiliates				1,379,115	4,568	1,889	301,532	45,137	59,175	21,749	362,171		796,221		16,159		780,062	
13-2673100 ..	22039 ..	General Reinsurance Corporation	DE.....							2								2	
13-1675535 ..	25364 ..	Swiss Reinsurance America Corporation	NY.....						1									1	
0999999.	Total Authorized - Other U.S. Unaffiliated Insurers									3								3	
AA-9991139 ..	00000 ..	North Carolina Reinsurance Facility	NC.....		156,390	18,260	2,984	65,915		15,042		40,656		142,857		19,168		123,689	
1099999.	Total Authorized - Pools - Mandatory Pools				156,390	18,260	2,984	65,915		15,042		40,656		142,857		19,168		123,689	
1499999.	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				1,535,505	22,828	4,873	367,447	45,137	74,220	21,749	402,827		939,081		35,327		903,754	
1899999.	Total Unauthorized - Affiliates - U.S. Non-Pool																		
2199999.	Total Unauthorized - Affiliates - Other (Non-U.S.)																		
2299999.	Total Unauthorized - Affiliates																		
2899999.	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																		
3299999.	Total Certified - Affiliates - U.S. Non-Pool																		
3599999.	Total Certified - Affiliates - Other (Non-U.S.)																		
3699999.	Total Certified - Affiliates																		
4299999.	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																		
4699999.	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																		
4999999.	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																		
5099999.	Total Reciprocal Jurisdiction - Affiliates																		
5699999.	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)																		
5799999.	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)				1,535,505	22,828	4,873	367,447	45,137	74,220	21,749	402,827		939,081		35,327		903,754	
5899999.	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)				1,535,505	22,828	4,873	367,447	45,137	74,220	21,749	402,827		939,081		35,327		903,754	
9999999 Totals				1,535,505	22,828	4,873	367,447	45,137	74,220	21,749	402,827		939,081		35,327			903,754	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE F - PART 3 (Continued)Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk										36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)		
		21	22	23	24				Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 28 * 120%)	30	31	32	33	34	
34-1524319 ..	Progressive Direct Insurance Company .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling				XXX		16,159	780,062														
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX																	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX																	
0899999. Total Authorized - Affiliates				XXX		16,159	780,062														
13-2673100 .. General Reinsurance Corporation .....		.....	.....	0000	.....	.....	.....	.....	2	.....	.....	2	.....	.....	.....	.....	.....	.....	2	1	.....
13-1675535 .. Swiss Reinsurance America Corporation .....		.....	.....	0000	.....	.....	.....	1	.....	.....	1	.....	.....	.....	1	.....	.....	.....	1	2	.....
0999999. Total Authorized - Other U.S. Unaffiliated Insurers				XXX					3			3							4	XXX	
AA-9991139 .. North Carolina Reinsurance Facility .....				.....	.....	0000	.....	19,168	123,689	.....	.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999. Total Authorized - Pools - Mandatory Pools				XXX		19,168	123,689					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				XXX		35,327	903,754					3	4						4	XXX	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX								XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX																XXX	
2299999. Total Unauthorized - Affiliates				XXX																XXX	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX																XXX	
3299999. Total Certified - Affiliates - U.S. Non-Pool				XXX								XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999. Total Certified - Affiliates - Other (Non-U.S.)				XXX																XXX	
3699999. Total Certified - Affiliates				XXX																XXX	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)				XXX																XXX	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool				XXX								XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)				XXX																XXX	
5099999. Total Reciprocal Jurisdiction - Affiliates				XXX																XXX	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)				XXX																XXX	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)				XXX		35,327	903,754					3	4						4	XXX	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)				XXX		35,327	903,754					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 Totals				XXX		35,327	903,754					3	4						4	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 40 + 41 - 45)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 42+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50										
		37 Current	Overdue																								
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41																				
34-152439 ..	Progressive Direct Insurance Company	6,457							6,457								YES										
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling		6,457							6,457								XXX										
0499999. Total Authorized - Affiliates - U.S. Non-Pool																	XXX										
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																	XXX										
0899999. Total Authorized - Affiliates		6,457							6,457								XXX										
13-2673100 ..	General Reinsurance Corporation																YES										
13-1675535 ..	Swiss Reinsurance America Corporation																YES										
0999999. Total Authorized - Other U.S. Unaffiliated Insurers																	XXX										
AA-9991139 ..	North Carolina Reinsurance Facility	21,244							21,244								YES										
1099999. Total Authorized - Pools - Mandatory Pools		21,244							21,244								XXX										
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		27,701							27,701								XXX										
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																	XXX										
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																	XXX										
2299999. Total Unauthorized - Affiliates																	XXX										
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																	XXX										
3299999. Total Certified - Affiliates - U.S. Non-Pool																	XXX										
3599999. Total Certified - Affiliates - Other (Non-U.S.)																	XXX										
3699999. Total Certified - Affiliates																	XXX										
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																	XXX										
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																	XXX										
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																	XXX										
5099999. Total Reciprocal Jurisdiction - Affiliates																	XXX										
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)																	XXX										
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		27,701							27,701								XXX										
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																	XXX										
9999999 Totals		27,701							27,701								XXX										

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE F - PART 3 (Continued)

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															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			
		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 Past Due Amounts in Dispute (Col. 45 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67				
34-1524319 ..	Progressive Direct Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0499999. Total Authorized - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0899999. Total Authorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
13-2673100 .. General Reinsurance Corporation		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
13-167553 .. Swiss Reinsurance America Corporation		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			
AA-9991139 .. North Carolina Reinsurance Facility		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
1099999. Total Authorized - Pools - Mandatory Pools		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2299999. Total Unauthorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX																		
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX																		
3699999. Total Certified - Affiliates		XXX																		
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX																		
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5099999. Total Reciprocal Jurisdiction - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		XXX																		
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		XXX																		
9999999 Totals		XXX																		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE F - PART 3 (Continued)

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

(Total Provision for Reinsurance)

ID Number From Col. 1	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%)	71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Unauthorized and Reciprocal Jurisdiction Reinsurance		75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Total Provision for Reinsurance			
				72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([(Col. 47 * 20%) + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	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)	
34-1524319 ..	Progressive Direct Insurance Company	XXX.....	XXX.....				XXX.....	XXX.....		
0199999.	Total Authorized - Affiliates - U.S. Intercompany Pooling		XXX	XXX			XXX	XXX		
0499999.	Total Authorized - Affiliates - U.S. Non-Pool		XXX	XXX			XXX	XXX		
0799999.	Total Authorized - Affiliates - Other (Non-U.S.)		XXX	XXX			XXX	XXX		
0899999.	Total Authorized - Affiliates		XXX	XXX			XXX	XXX		
13-2673100 ..	General Reinsurance Corporation	XXX.....	XXX.....				XXX.....	XXX.....		
13-1675535 ..	Swiss Reinsurance America Corporation	XXX.....	XXX.....				XXX.....	XXX.....		
0999999.	Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX			XXX	XXX		
AA-9991139 ..	North Carolina Reinsurance Facility	XXX.....	XXX.....				XXX.....	XXX.....		
1099999.	Total Authorized - Pools - Mandatory Pools		XXX	XXX			XXX	XXX		
1499999.	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX	XXX			XXX	XXX		
1899999.	Total Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX		
2199999.	Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX		
2299999.	Total Unauthorized - Affiliates				XXX	XXX	XXX	XXX		
2899999.	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX	XXX	XXX	XXX		
3299999.	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3599999.	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3699999.	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4299999.	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4699999.	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool							XXX		
4999999.	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)							XXX		
5099999.	Total Reciprocal Jurisdiction - Affiliates							XXX		
5699999.	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)							XXX		
5799999.	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)									
5899999.	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)									
9999999 Totals										

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE F - PART 4

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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:

	<u>1</u> Name of Reinsurer	<u>2</u> Commission Rate	<u>3</u> Ceded Premium
1.
2.
3.
4.
5.

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.

	<u>1</u> Name of Reinsurer	<u>2</u> Total Recoverables	<u>3</u> Ceded Premiums	<u>4</u> Affiliated
6.	Progressive Direct Insurance Company	796,221	1,379,115	Yes [X] No []
7.	North Carolina Reinsurance Facility	142,857	156,390	Yes [] No [X]
8.	General Reinsurance Corporation	2	.....	Yes [] No [X]
9.	Swiss Reinsurance America Corporation	1	.....	Yes [] No [X]
10.	.....	.....	.....	Yes [] 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)	354,552,676		354,552,676
2. Premiums and considerations (Line 15)	288,127,948		288,127,948
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	27,701,050	(6,457,000)	21,244,050
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	28,438,571		28,438,571
6. Net amount recoverable from reinsurers		780,065,000	780,065,000
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	698,820,245	773,608,000	1,472,428,245
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	167,339,790	427,596,000	594,935,790
10. Taxes, expenses, and other obligations (Lines 4 through 8)	8,514,726		8,514,726
11. Unearned premiums (Line 9)	115,342,242	362,171,000	477,513,242
12. Advance premiums (Line 10)	5,108,660		5,108,660
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	35,327,217	(16,159,000)	19,168,217
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	147,027,324		147,027,324
19. Total liabilities excluding protected cell business (Line 26)	478,659,959	773,608,000	1,252,267,959
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	220,160,286	XXX	220,160,286
22. Totals (Line 38)	698,820,245	773,608,000	1,472,428,245

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?

Yes [] No []

If yes, give full explanation: SEE NOTES TO FINANCIAL STATEMENTS #26

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

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

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS
SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2014.....	41		41	12					3			16 8	
3. 2015.....													
4. 2016.....													
5. 2017.....													
6. 2018.....													
7. 2019.....													
8. 2020.....													
9. 2021.....													
10. 2022.....													
11. 2023.....													
12. Totals	XXX	XXX	XXX	12					3			16 XXX	

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

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2014.....	16		16	38.4		38.4				2.0	
3. 2015.....										2.0	
4. 2016.....										2.0	
5. 2017.....										2.0	
6. 2018.....										2.0	
7. 2019.....										2.0	
8. 2020.....										2.0	
9. 2021.....										2.0	
10. 2022.....										2.0	
11. 2023.....										2.0	
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS
SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	220	177	28	2	15	.....	12	85	XXX.....
2. 2014.....	83,291	1,983	81,308	47,446	933	1,981	6	6,864	.....	1,403	55,352	15,090
3. 2015.....	90,826	2,358	88,468	55,607	1,110	2,534	3	8,323	.....	1,487	65,351	17,036
4. 2016.....	104,114	2,510	101,604	64,359	1,468	2,868	1	9,785	.....	1,640	75,542	19,502
5. 2017.....	119,717	3,063	116,654	70,337	1,818	3,203	14	10,674	.....	1,792	82,382	20,589
6. 2018.....	145,467	3,561	141,906	83,406	2,163	3,547	7	11,909	.....	2,168	96,692	23,576
7. 2019.....	170,130	4,384	165,746	93,742	1,533	3,858	3	13,384	.....	2,389	109,448	26,219
8. 2020.....	187,326	4,658	182,668	83,394	1,662	3,063	3	12,269	.....	2,263	97,061	22,531
9. 2021.....	203,056	3,312	199,745	107,869	1,906	2,945	2	13,559	.....	2,766	122,465	28,434
10. 2022.....	212,958	3,512	209,446	99,300	1,800	1,596	1	13,099	.....	2,228	112,194	26,200
11. 2023.....	252,353	4,434	247,919	64,413	1,241	344	.....	12,211	.....	1,479	75,726	27,633
12. Totals	XXX	XXX	XXX	770,092	15,812	25,967	42	112,093	.....	19,626	892,298	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	2,872	2,803	8	.....	40	.....	.....	.....	61	.....	.....	179	6
2. 2014.....	223	197	6	.....	10	.....	.....	.....	14	.....	.....	56	2
3. 2015.....	322	279	420	414	14	.....	.....	.....	20	.....	.....	.83	3
4. 2016.....	570	449	1,797	1,791	29	.....	.....	.....	.36	.....	.....	191	6
5. 2017.....	962	753	2,245	2,240	56	.....	.....	.....	59	.....	.....	.330	15
6. 2018.....	1,475	893	2,021	2,015	131	.....	.....	.....	130	.....	.....	.848	.38
7. 2019.....	1,520	275	2,018	2,017	254	.....	.....	.....	190	.....	.....	1,691	.74
8. 2020.....	3,535	906	5,113	3,455	524	.....	.....	.....	633	.....	.....	.455	137
9. 2021.....	8,954	536	3,904	1,611	1,712	.....	.....	.....	1,050	.....	.....	.503	427
10. 2022.....	22,769	901	7,222	1,375	3,153	.....	.....	.....	2,119	.....	.....	.871	34,023
11. 2023.....	61,816	1,379	30,811	3,316	4,509	.....	.....	.....	5,905	.....	.....	2,278	100,281
12. Totals	105,016	9,370	55,566	18,233	10,433	.....	.....	.....	4,249	.....	.....	4,107	157,878
									10,218	.....	.....		7,643

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	78	101
2. 2014.....	56,544	1,136	55,408	67.9	57.3	68.1	.....	.....	2.0	32	25
3. 2015.....	67,240	1,806	65,434	74.0	76.6	74.0	.....	.....	2.0	49	35
4. 2016.....	79,443	3,710	75,733	76.3	147.8	74.5	.....	.....	2.0	126	65
5. 2017.....	87,537	4,825	82,712	73.1	157.5	70.9	.....	.....	2.0	214	115
6. 2018.....	102,619	5,078	97,540	70.5	142.6	68.7	.....	.....	2.0	.587	261
7. 2019.....	114,967	3,828	111,139	67.6	87.3	67.1	.....	.....	2.0	1,246	444
8. 2020.....	109,174	6,026	103,148	58.3	129.4	56.5	.....	.....	2.0	4,287	1,800
9. 2021.....	140,629	4,055	136,574	69.3	122.4	68.4	.....	.....	2.0	10,711	3,398
10. 2022.....	150,293	4,076	146,218	70.6	116.0	69.8	.....	.....	2.0	27,715	6,308
11. 2023.....	181,944	5,937	176,007	72.1	133.9	71.0	.....	.....	2.0	87,932	12,349
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	XXX	132,979	24,899

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS
SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2014.....	617.....		617.....	360.....		34.....		25.....		3.....	419.....	36.....	
3. 2015.....	667.....		667.....	309.....		35.....		28.....		2.....	372.....	35.....	
4. 2016.....	773.....		773.....	651.....		52.....		42.....		2.....	745.....	45.....	
5. 2017.....	839.....	1.....	838.....	488.....		53.....		48.....		3.....	589.....	46.....	
6. 2018.....	979.....	1.....	978.....	780.....	10.....	58.....		54.....		3.....	883.....	50.....	
7. 2019.....	1,105.....	1.....	1,104.....	758.....		51.....		51.....		4.....	860.....	48.....	
8. 2020.....	914.....	1.....	913.....	432.....		28.....		37.....		3.....	497.....	34.....	
9. 2021.....	958.....	1.....	957.....	354.....		32.....		41.....		5.....	427.....	38.....	
10. 2022.....	1,185.....	2.....	1,183.....	405.....		20.....		46.....		7.....	471.....	46.....	
11. 2023.....	1,501.....	2.....	1,499.....	127.....		2.....		36.....		3.....	165.....	41.....	
12. Totals	XXX	XXX	XXX	4,664	10	365		407		36	5,427	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	1.....												1.....
2. 2014.....													
3. 2015.....													
4. 2016.....													
5. 2017.....	8.....												8.....
6. 2018.....	13.....				2.....								16.....
7. 2019.....	5.....				1.....								6.....
8. 2020.....	43.....		5.....		6.....		1.....		1.....				56.....
9. 2021.....	210.....		14.....		17.....		2.....		5.....		1.....	248.....	2.....
10. 2022.....	552.....		42.....		31.....		5.....		14.....		2.....	643.....	4.....
11. 2023.....	719.....		178.....		40.....		14.....		32.....		4.....	983.....	12.....
12. Totals	1,550		239		97		22		53		7	1,961	18

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount		
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid	
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid		
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		1.....	
2. 2014.....	419.....		419.....	67.9.....		67.9.....				2.0.....		
3. 2015.....	372.....		372.....	55.8.....		55.8.....				2.0.....		
4. 2016.....	745.....		745.....	96.4.....		96.4.....				2.0.....		
5. 2017.....	597.....		597.....	71.2.....		71.3.....				2.0.....	8.....	
6. 2018.....	908.....	10.....	898.....	92.7.....	956.5.....	91.9.....				2.0.....	13.....	
7. 2019.....	866.....		866.....	78.3.....		78.4.....				2.0.....	5.....	
8. 2020.....	553.....		553.....	60.5.....	0.3.....	60.6.....				2.0.....	48.....	
9. 2021.....	675.....		675.....	70.5.....	0.8.....	70.5.....				2.0.....	.223.....	
10. 2022.....	1,114.....		1,113.....	93.9.....	1.7.....	94.1.....				2.0.....	594.....	
11. 2023.....	1,148.....		1,148.....	76.5.....	9.7.....	76.5.....				2.0.....	897.....	
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		1,789	172

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

**SCHEDULE P - PART 1D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

(\$000 OMITTED)

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

(\$000 OMITTED)

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

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

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	.....
2. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	2.0.....	.....	.....
3. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	2.0.....	.....	.....
4. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	2.0.....	.....	.....
5. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	2.0.....	.....	.....
6. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	2.0.....	.....	.....
7. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	2.0.....	.....	.....
8. 2020.....	.....	.....	.....	.....	.....	.....	.....	.....	2.0.....	.....	.....
9. 2021.....	.....	.....	.....	.....	.....	.....	.....	.....	2.0.....	.....	.....
10. 2022.....	.....	.....	.....	.....	.....	.....	.....	.....	2.0.....	.....	.....
11. 2023.....	6.....	.....	6.....	55.8.....	(739.3).....	55.6.....	.....	.....	2.0.....	5.....	1.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	XXX	5.....	1.....

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

Schedule P - Part 1G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	2							2	XXX.....	
2. 2014.....	509	6	503	166		5		14		1	185	25	
3. 2015.....	530	8	522	155		6		18			178	28	
4. 2016.....	554	10	545	233	12	17		24		1	262	33	
5. 2017.....	583	12	572	227	3	8		37		1	270	38	
6. 2018.....	632	15	617	196	7	10		27		2	227	39	
7. 2019.....	705	18	687	288	1	15		29		1	332	43	
8. 2020.....	782	9	772	299	2	18		36		4	352	63	
9. 2021.....	905	2	903	291		24		29		2	344	50	
10. 2022.....	984	2	983	412		8		46		2	466	77	
11. 2023	1,082	1	1,081	222		1		30		1	252	51	
12. Totals	XXX	XXX	XXX	2,491	23	113	1	291		16	2,871	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2014.....													
3. 2015.....												1	
4. 2016.....													
5. 2017.....													
6. 2018.....												1	
7. 2019.....	6				1							7	
8. 2020.....	15		2	1	4		1		1			22	
9. 2021.....	.37		7		9		1		2			56	1
10. 2022.....	92		21		18		3		6		1	139	2
11. 2023	103		75		12		6		16		1	211	4
12. Totals	254		105	1	44		10		26		2	437	7

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2014.....	185		185	36.4		36.8			2.0		
3. 2015.....	179		179	33.7		34.3			2.0		
4. 2016.....	274	12	262	49.5	126.6	48.1			2.0		
5. 2017.....	273	3	270	46.7	21.4	47.3			2.0		
6. 2018.....	235	7	228	37.1	44.6	36.9			2.0		
7. 2019.....	341	1	340	48.4	6.1	49.5			2.0	6	1
8. 2020.....	377	3	374	48.2	31.8	48.4			2.0	16	6
9. 2021.....	400		400	44.1		44.2			2.0	44	11
10. 2022.....	606		606	61.5		61.6			2.0	112	27
11. 2023	464		464	42.9		42.9			2.0	177	34
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	358	80

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....
2. 2014.....	1	.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2015.....	.....	.....	11	.....	.....	.....	.....	.....	.....	.....	.....	11
4. 2016.....	.....	.....	25	.....	.....	.....	.....	.....	.....	.....	.....	25
5. 2017.....	.....	.....	302	.....	.....	.....	.....	.....	.....	.....	.....	302
6. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1
7. 2019.....	.....	.....	.....	.....	.....	.....	.....	1	.....	.....	.....	40
8. 2020.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9. 2021.....	2	.....	2	40	.....	.....	.....	.....	.....	.....	.....	.....
10. 2022.....	2	.....	2	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. 2023.....	2	.....	2	.....	.....	.....	.....	.....	.....	.....	.....	.....
12. Totals	XXX	XXX	XXX	378	.....	.....	.....	1	.....	.....	379	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	.....	.....	
1. Prior.....
2. 2014.....
3. 2015.....
4. 2016.....
5. 2017.....
6. 2018.....
7. 2019.....
8. 2020.....
9. 2021.....
10. 2022.....	1	.....	.....
11. 2023	70	.....	.....	.....	.....	1	.....	1	.....	71	.....
12. Totals	70	.....	.....	.....	1	.....	1	.....	.....	72	.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	XXX.....	.....	.....
2. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2.0	.....
3. 2015.....	11	.....	11	11,151.8	.....	11,151.8	.....	.....	.....	2.0	.....
4. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2.0	.....
5. 2017.....	25	.....	25	25,273.9	.....	25,273.9	.....	.....	.....	2.0	.....
6. 2018.....	302	.....	302	302,846.0	.....	302,846.0	.....	.....	.....	2.0	.....
7. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	2.0	.....
8. 2020.....	1	.....	1	871.3	.....	871.3	.....	.....	.....	2.0	.....
9. 2021.....	41	.....	41	2,210.5	.....	2,210.5	.....	.....	.....	2.0	.....
10. 2022.....	1	.....	1	27.5	.....	27.5	.....	.....	.....	2.0	.....
11. 2023	71	.....	71	3,151.7	28.4	3,396.1	.....	.....	2.0	70	1
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	XXX	70	2

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	11		3		4		16	18	XXX	
2. 2022	3,241		3,241	2,003		6		340		269	2,349	XXX	
3. 2023	3,670		3,670	1,477		2		332		87	1,811	XXX	
4. Totals	XXX	XXX	XXX	3,491		12		675		371	4,178	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior	3										11	4				
2. 2022	7		2				2				28	12				
3. 2023	103		61		5		4		33		121	205	11			
4. Totals	113		63		5		6		33		160	221	11			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	3	
2. 2022	2,361		2,361	72.9		72.9			2.0	9	3
3. 2023	2,015		2,015	54.9		54.9			2.0	164	41
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	176	44

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	(316).....		174.....		82.....		1,054.....	(60).....	XXX.....	
2. 2022.....	120,812.....		120,812.....	109,572.....		188.....		12,276.....		28,691.....	122,035.....	60,474.....	
3. 2023.....	156,187.....		156,187.....	115,815.....		74.....		13,130.....		19,811.....	129,019.....	63,274.....	
4. Totals.....	XXX.....	XXX.....	XXX.....	225,071.....		437.....		25,487.....		49,556.....	250,995.....	XXX.....	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.....	174.....		(56).....		150.....				24.....		702.....	.291.....	.39.....			
2. 2022.....	202.....		(433).....		132.....		3.....		.87.....		1,128.....	(9).....	44.....			
3. 2023.....	10,591.....		(7,291).....		392.....		123.....		1,199.....		15,043.....	5,014.....	2,797.....			
4. Totals.....	10,967.....		(7,780).....		674.....		126.....		1,310.....		16,874.....	5,296.....	2,880.....			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	117.....	174.....
2. 2022.....	122,027.....		122,027.....	101.0.....		101.0.....			2.0.....	(231).....	222.....
3. 2023.....	134,033.....		134,033.....	85.8.....		85.8.....			2.0.....	3,300.....	1,714.....
4. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	3,186.....	2,110.....

Schedule P - Part 1K - Fidelity/Surety

N O N E

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 1M - International

N O N E

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 1R - Section 1 - Products Liability - Occurrence

N O N E

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 1T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

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

1.	Prior	16,616	16,184	15,977	15,438	15,518	15,600	15,671	15,690	15,725	15,770	44	80
2.	2014	49,468	48,442	48,543	48,825	48,315	48,416	48,456	48,482	48,476	48,530	55	48
3.	2015	XXX	56,190	55,982	56,456	57,308	56,755	56,913	56,952	57,063	57,091	28	139
4.	2016	XXX	XXX	64,829	65,119	65,602	66,058	65,490	65,850	65,920	65,912	(8)	62
5.	2017	XXX	XXX	XXX	71,689	71,544	71,818	72,307	71,640	71,831	71,978	147	338
6.	2018	XXX	XXX	XXX	XXX	83,623	84,789	85,132	86,065	85,178	85,501	323	(564)
7.	2019	XXX	XXX	XXX	XXX	XXX	97,049	97,892	98,199	98,806	97,565	(1,242)	(634)
8.	2020	XXX	XXX	XXX	XXX	XXX	XXX	90,490	89,863	89,466	90,245	780	382
9.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	117,362	120,919	121,964	1,045	4,602
10.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	125,845	131,000	5,155	XXX
11.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	157,892	XXX	XXX	XXX
										12	Totals	6,327	4,453

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

2013-2023: Annual Revenue (in millions)													12. Totals	68	141
1. Prior	350	438	474	459	459	471	508	519	535	535	535	535			16
2. 2014	337	306	358	375	365	394	394	394	394	394	394	394			
3. 2015	XXX	355	349	332	354	354	345	344	344	344	344	344			
4. 2016	XXX	XXX	573	612	684	712	704	704	703	703	703	703			(1)
5. 2017	XXX	XXX	XXX	510	569	549	559	558	553	549	549	(4)			(9)
6. 2018	XXX	XXX	XXX	XXX	654	738	806	839	847	844	844	(2)			5
7. 2019	XXX	XXX	XXX	XXX	XXX	754	800	843	849	815	(35)				(28)
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	512	570	543	515	(27)				(55)
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	599	652	629	(24)				30
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	895	1,054	159	XXX			
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,080	XXX	XXX			

**SCHEDULE P - PART 2D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

SCHEDUI F P - PART 2F - COMMERCIAL MUI TIPI E PERII

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

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	XX.								
7. 2019...	XXX	XXX	XXX	XX.	XX.							
8. 2020...	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	

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

**SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)**

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

SCHEDULE I - PART II - SECTION I - OTHER EXAMINER OCCURRENCE												
1. Prior.....	67	49	47	51	52	52	52	50	50	50	50	
2. 2014.....	194	183	180	176	171	171	171	171	171	171	171	
3. 2015.....	XXX	171	177	163	164	161	161	161	161	161	161	
4. 2016.....	XXX	XXX	229	238	246	234	237	237	239	238	(1)	1
5. 2017.....	XXX	XXX	XXX	227	251	241	238	238	234	233	(1)	(5)
6. 2018.....	XXX	XXX	XXX	XXX	194	214	213	203	201	201		(2)
7. 2019.....	XXX	XXX	XXX	XXX	XXX	319	306	318	314	310	(4)	(8)
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	349	333	321	336	15	3
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	373	354	369	15	(4)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	514	553	39	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	418	XXX	XXX	
12. Totals.....											64	(15)

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

SCHEDULE F - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS MADE												
1. Prior.....	21	.....144	.....150	.....210	.....210	.....210	.....210	.....210	.....210	.....210	.....210	.....210
2. 2014.....	1	.....1	.....2	.....7								
3. 2015.....	XXX	.....11	.....11	.....12	.....11	.....11	.....11	.....11	.....11	.....11	.....11	.....11
4. 2016.....	XXX	.....XXX		.....1								
5. 2017.....	XXX	.....XXX	.....XXX	.....27	.....25	.....25	.....25	.....25	.....25	.....25	.....25	.....25
6. 2018.....	XXX	.....XXX	.....XXX	.....XXX	.....310	.....302	.....302	.....302	.....302	.....302	.....302	.....302
7. 2019.....	XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....4						
8. 2020.....	XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....4					
9. 2021.....	XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....55	.....40	.....40		(15)
10. 2022.....	XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....XXX	.....50		(50)	.....XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	70	XXX	XXX
										12. Totals	(50)	(15)

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

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.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	135.....	123.....	132.....	9.....	(3).....
2. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,039.....	2,021.....	(17).....	XXX.....
3. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,651	XXX	XXX
										4. Totals	(9)	(3)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	5,307.....	2,803.....	2,935.....	132.....	(2,372).....						
2. 2022.....	XXX.....	107,518.....	109,664.....	2,146.....	XXX.....							
3. 2023	XXX	119,704	XXX	XXX								
										4. Totals	2,278	(2,372)

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....	XXX.....	XXX.....										
2. 2022.....	XXX.....	XXX.....	XXX.....									
3. 2023	XXX	XXX	XXX									
										4. Totals		

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX.....	XXX.....										
2. 2022.....	XXX.....	XXX.....	XXX.....									
3. 2023	XXX	XXX	XXX									
										4. Totals		

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....	XXX.....	XXX.....										
2. 2014.....	XXX.....	XXX.....										
3. 2015.....	XXX.....	XXX.....										
4. 2016.....	XXX.....	XXX.....										
5. 2017.....	XXX.....	XXX.....										
6. 2018.....	XXX.....	XXX.....										
7. 2019.....	XXX.....	XXX.....										
8. 2020.....	XXX.....	XXX.....										
9. 2021.....	XXX.....	XXX.....										
10. 2022.....	XXX.....	XXX.....	XXX.....									
11. 2023	XXX	XXX	XXX									
										12. Totals		

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

N O N E

Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 2T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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.....000.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....	.....1.....
2. 2014.....12.....	.....12.....	.....12.....	.....12.....	.....12.....	.....12.....	.....12.....	.....12.....	.....12.....	.....12.....	.....12.....	.....12.....	.....4.....
3. 2015.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4.....
4. 2016.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4.....
5. 2017.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4.....
6. 2018.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4.....
7. 2019.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4.....
8. 2020.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4.....
9. 2021.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4.....
10. 2022.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4.....
11. 2023.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4.....

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

1. Prior.....000.....	.....8,494.....	.....12,577.....	.....14,254.....	.....14,875.....	.....15,226.....	.....15,410.....	.....15,514.....	.....15,582.....	.....15,652.....	.....2,702.....	.....129.....
2. 2014.....23,385.....	.....38,022.....	.....43,793.....	.....46,524.....	.....47,614.....	.....48,064.....	.....48,265.....	.....48,387.....	.....48,425.....	.....48,488.....	.....9,763.....	.....5,325.....
3. 2015.....XXX.....	.....25,601.....	.....43,739.....	.....50,677.....	.....54,439.....	.....55,947.....	.....56,429.....	.....56,750.....	.....56,964.....	.....57,028.....	.....10,933.....	.....6,100.....
4. 2016.....XXX.....	.....XXX.....	.....29,824.....	.....50,450.....	.....58,742.....	.....62,833.....	.....64,302.....	.....65,243.....	.....65,598.....	.....65,757.....	.....12,346.....	.....7,149.....
5. 2017.....XXX.....	.....XXX.....	.....XXX.....	.....32,045.....	.....54,966.....	.....64,505.....	.....68,471.....	.....70,410.....	.....71,239.....	.....71,707.....	.....12,977.....	.....7,598.....
6. 2018.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....37,647.....	.....65,460.....	.....76,100.....	.....81,437.....	.....83,728.....	.....84,783.....	.....14,629.....	.....8,909.....
7. 2019.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....43,962.....	.....74,694.....	.....87,634.....	.....93,574.....	.....96,064.....	.....15,897.....	.....10,248.....
8. 2020.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....38,358.....	.....67,554.....	.....79,456.....	.....84,791.....	.....13,085.....	.....9,309.....
9. 2021.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....48,833.....	.....91,403.....	.....108,905.....	.....15,974.....	.....12,033.....	.....12,033.....
10. 2022.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....51,650.....	.....99,095.....	.....14,909.....	.....10,150.....	.....10,150.....
11. 2023.....XXX.....	.....XXX.....63,516.....	.....11,844.....	.....9,995.....	.....9,995.....						

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

1. Prior.....000.....	.....299.....	.....433.....	.....453.....	.....453.....	.....470.....	.....508.....	.....508.....	.....534.....	.....534.....	.....2.....	.....1.....
2. 2014.....98.....	.....195.....	.....286.....	.....313.....	.....342.....	.....394.....	.....394.....	.....394.....	.....394.....	.....394.....	.....25.....	.....11.....
3. 2015.....XXX.....	.....86.....	.....201.....	.....282.....	.....335.....	.....341.....	.....345.....	.....344.....	.....344.....	.....344.....	.....24.....	.....11.....
4. 2016.....XXX.....	.....XXX.....	.....101.....	.....321.....	.....517.....	.....641.....	.....687.....	.....702.....	.....703.....	.....703.....	.....32.....	.....13.....
5. 2017.....XXX.....	.....XXX.....	.....XXX.....	.....110.....	.....265.....	.....394.....	.....463.....	.....510.....	.....536.....	.....541.....	.....32.....	.....14.....
6. 2018.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....115.....	.....366.....	.....544.....	.....664.....	.....764.....	.....829.....	.....32.....	.....18.....
7. 2019.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....130.....	.....423.....	.....647.....	.....752.....	.....809.....	.....32.....	.....15.....
8. 2020.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....113.....	.....323.....	.....391.....	.....460.....	.....22.....	.....12.....
9. 2021.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....73.....	.....203.....	.....386.....	.....23.....	.....14.....	.....14.....
10. 2022.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....116.....	.....424.....	.....25.....	.....17.....	.....17.....
11. 2023.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....129.....	.....129.....	.....15.....	.....14.....	.....14.....

**SCHEDULE P - PART 3D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8. 2020.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9. 2021.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10. 2022.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. 2023.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8. 2020.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9. 2021.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10. 2022.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. 2023.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

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

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....000.....												
2. 2014.....												
3. 2015.....XXX.....												
4. 2016.....XXX.....XXX.....												
5. 2017.....XXX.....XXX.....XXX.....												
6. 2018.....XXX.....XXX.....XXX.....X.....												
7. 2019.....XXX.....XXX.....XXX.....XX.....XX.....												
8. 2020.....XXX.....XXX.....XXX.....XX.....XX.....XX.....												
9. 2021.....XXX.....XXX.....XXX.....XXX.....XX.....XX.....X.....												
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....000.....											XXX.....	XXX.....
2. 2014.....											XXX.....	XXX.....
3. 2015.....XXX.....											XXX.....	XXX.....
4. 2016.....XXX.....XXX.....											XXX.....	XXX.....
5. 2017.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
6. 2018.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
7. 2019.....XXX.....XXX.....XXX.....XX.....XX.....											XXX.....	XXX.....
8. 2020.....XXX.....XXX.....XXX.....XX.....XX.....XX.....											XXX.....	XXX.....
9. 2021.....XXX.....XXX.....XXX.....XXX.....XX.....XX.....X.....											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.....

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....000.....24.....35.....43.....45.....45.....45.....48.....48.....50.....1.....0												
2. 2014.....67.....112.....145.....155.....171.....171.....171.....171.....171.....171.....171.....16.....9												
3. 2015.....XXX.....73.....118.....143.....160.....160.....160.....160.....160.....160.....160.....18.....10												
4. 2016.....XXX.....XXX.....88.....163.....181.....215.....236.....236.....238.....238.....238.....21.....12												
5. 2017.....XXX.....XXX.....XXX.....108.....165.....216.....227.....232.....233.....233.....233.....25.....13												
6. 2018.....XXX.....XXX.....XXX.....XXX.....97.....159.....182.....188.....200.....200.....200.....26.....13												
7. 2019.....XXX.....XXX.....XXX.....XXX.....XXX.....135.....220.....273.....293.....303.....303.....25.....17												
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....159.....234.....286.....315.....315.....38.....25												
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....175.....270.....315.....315.....30.....20												
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....261.....420.....48.....28.....28												
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....222.....30.....17												

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....000.....130.....130.....210.....210.....210.....210.....210.....210.....210.....210.....210.....												
2. 2014.....												
3. 2015.....XXX.....11.....11.....11.....11.....11.....11.....11.....11.....11.....11.....												
4. 2016.....XXX.....XXX.....												
5. 2017.....XXX.....XXX.....25.....25.....25.....25.....25.....25.....25.....25.....25.....25.....												
6. 2018.....XXX.....XXX.....XXX.....182.....302.....302.....302.....302.....302.....302.....												
7. 2019.....XXX.....XXX.....XXX.....XXX.....												
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....												
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....40.....40.....40.....												
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	114.....	128.....	XXX.....	XXX.....
2. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,721.....	2,009.....	XXX.....	XXX.....
3. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,479.....	XXX.....	XXX.....

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	000.....	2,810.....	2,668.....	2,918.....	1,770.....						
2. 2022.....	XXX.....	102,653.....	109,760.....	43,858.....	16,572.....							
3. 2023.....	XXX.....	115,889.....	44,048.....	16,429.....								

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	XXX.....	000.....			XXX.....	XXX.....						
2. 2022.....	XXX.....			XXX.....	XXX.....							
3. 2023.....	XXX.....		XXX.....	XXX.....								

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX.....	000.....			XXX.....	XXX.....						
2. 2022.....	XXX.....			XXX.....	XXX.....							
3. 2023.....	XXX.....		XXX.....	XXX.....								

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	000.....										XXX.....	XXX.....
2. 2014.....											XXX.....	XXX.....
3. 2015.....	XXX.....										XXX.....	XXX.....
4. 2016.....	XXX.....	XXX.....									XXX.....	XXX.....
5. 2017.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....						XXX.....	XXX.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....	XXX.....					XXX.....	XXX.....
9. 2021.....	XXX.....				XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
10. 2022.....	XXX.....			XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence

N O N E

Schedule P - Part 3R - Section 2 - Product Liability - Claims-Made

N O N E

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 3T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

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

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	3,089	1,528	730							8	8
2. 2014.....	6,515	1,966	781	690						1	6
3. 2015.....	XXX	6,996	2,123	871	801					8	6
4. 2016.....	XXX	XXX	8,397	2,498	1,051	969				10	6
5. 2017.....	XXX	XXX	XXX	10,272	2,922	1,263	1,105	(8)	10		6
6. 2018.....	XXX	XXX	XXX	XXX	12,488	3,569	1,572	1,400	9		6
7. 2019.....	XXX	XXX	XXX	XXX	XXX	13,943	4,242	1,616	1,724		1
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	15,474	4,571	2,244		2,301
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,671	5,545		2,928
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19,763		6,883
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		29,430

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	32	13	4								
2. 2014.....	69	19	9	.4							
3. 2015.....	XXX	.70	22	10	3						
4. 2016.....	XXX	XXX	.84	27	11	3					
5. 2017.....	XXX	XXX	XXX	88	28	12	4				
6. 2018.....	XXX	XXX	XXX	XXX	102	34	14	5			
7. 2019.....	XXX	XXX	XXX	XXX	XXX	109	38	.14	7		
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	88	.31	13		6
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.99	35		16
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	126		.47
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		191

**SCHEDULE P - PART 4D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

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							
8. 2020.....	XXX	XXX	XXX	XXX							
9. 2021.....	XXX	XXX	XXX	XXX							
10. 2022.....	XXX	XXX	XXX	XXX							
11. 2023	XXX	XXX	XXX	XXX							

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

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							
8. 2020.....	XXX	XXX	XXX	XXX							
9. 2021.....	XXX	XXX	XXX	XXX							
10. 2022.....	XXX	XXX	XXX	XXX							
11. 2023	XXX	XXX	XXX	XXX							4

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

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

1. Prior.....										
2. 2014.....										
3. 2015.....	XXX.....									
4. 2016.....	XXX.....	XXX.....								
5. 2017.....	XXX.....	XXX.....	XXX.....							
6. 2018.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2019.....	XXX.....	XXX.....	XX.....	XX.....	XX.....					
8. 2020.....	XXX.....	XXX.....	XX.....	XX.....	XX.....	XX.....				
9. 2021.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....	XX.....	XX.....			
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....										
2. 2014.....										
3. 2015.....	XXX.....									
4. 2016.....	XXX.....	XXX.....								
5. 2017.....	XXX.....	XXX.....	XXX.....							
6. 2018.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2019.....	XXX.....	XXX.....	XX.....	XX.....	XX.....					
8. 2020.....	XXX.....	XXX.....	XX.....	XX.....	XX.....	XX.....				
9. 2021.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....	XX.....	XX.....			
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	16	6	1							
2. 2014.....	.34	12	3	2						
3. 2015.....	XXX.....	34	12	3	2					
4. 2016.....	XXX.....	XXX.....	.36	13	2	2				
5. 2017.....	XXX.....	XXX.....	XXX.....	38	12	3	2			
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	.47	14	3	2		
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX.....	57	16	5	2	
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX.....	XXX.....	66	.20	6	2
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX.....	XXX.....	XXX.....	.74	22	8
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX.....	XXX.....	XXX.....	.76	24	
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	81

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....	21	14	20							
2. 2014.....	1	1	2	7						
3. 2015.....	XXX.....			1						
4. 2016.....	XXX.....	XXX.....		1						
5. 2017.....	XXX.....	XXX.....	XXX.....	2						
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	4					
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX.....	4				
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX.....	XXX.....	4			
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX.....	XXX.....	XXX.....	15		
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX.....	XXX.....	XXX.....	.50		
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	70

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	47	3	
2. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	163	4
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	65

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	(5,479)	(675)	(56)						
2. 2022.....	XXX.....	(6,418)	(430)							
3. 2023.....	XXX	XXX	(7,168)							

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....	XXX.....									
2. 2022.....	XXX.....									
3. 2023.....	XXX	XXX								

NONE

SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX.....									
2. 2022.....	XXX.....									
3. 2023.....	XXX	XXX								

NONE

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior.....										
2. 2014.....										
3. 2015.....	XXX.....									
4. 2016.....	XXX.....	XXX								
5. 2017.....	XXX.....	XXX	XXX							
6. 2018.....	XXX.....	XXX	XX	XX						
7. 2019.....	XXX.....	XXX	XX	XX	XX					
8. 2020.....	XXX.....	XXX	XX	XXX	XXX	XX				
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 4N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence

N O N E

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

N O N E

Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 4T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

**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	1									
2. 2014	4	4	4	4	4	4	4	4	4	4
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 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	XX							
6. 2018	XXX	XXX	XX	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	1									
2. 2014	8	8	8	8	8	8	8	8	8	8
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	

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**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	2,400	433	168	58	22	2,002	11	6	2	1
2. 2014	7,213	9,229	9,565	9,680	9,719	9,739	9,750	9,759	9,762	9,763
3. 2015	XXX	7,823	10,295	10,684	10,828	10,884	10,898	10,924	10,931	10,933
4. 2016	XXX	XXX	8,890	11,607	12,064	12,235	12,280	12,319	12,339	12,346
5. 2017	XXX	XXX	XXX	9,285	12,195	12,689	12,844	12,922	12,958	12,977
6. 2018	XXX	XXX	XXX	XXX	10,340	13,761	14,298	14,509	14,586	14,629
7. 2019	XXX	XXX	XXX	XXX	XXX	11,377	14,928	15,567	15,810	15,897
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	9,129	12,284	12,871	13,085
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,636	15,133	15,974
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,259	14,909
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,844

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	717	300	126	68	45	28	15	9	7	6
2. 2014	2,460	504	193	80	41	26	15	6	2	2
3. 2015	XXX	2,961	595	245	104	51	40	13	5	3
4. 2016	XXX	XXX	3,247	703	281	115	73	34	13	6
5. 2017	XXX	XXX	XXX	3,517	764	300	150	70	35	15
6. 2018	XXX	XXX	XXX	XXX	4,075	864	363	156	80	38
7. 2019	XXX	XXX	XXX	XXX	XXX	4,530	989	399	160	74
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	4,042	893	347	137
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,585	1,194	427
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,496	1,141
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,794

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	732	.93	.25	.8	.4	3,391	3		1	
2. 2014	14,382	14,975	15,049	15,071	15,077	15,088	15,090	15,090	15,090	15,090
3. 2015	XXX	16,129	16,897	16,989	17,015	17,029	17,033	17,034	17,035	17,036
4. 2016	XXX	XXX	18,462	19,344	19,448	19,486	19,496	19,500	19,501	19,502
5. 2017	XXX	XXX	XXX	19,387	20,424	20,540	20,572	20,582	20,587	20,589
6. 2018	XXX	XXX	XXX	XXX	22,138	23,399	23,524	23,560	23,571	23,576
7. 2019	XXX	XXX	XXX	XXX	XXX	24,930	26,027	26,165	26,206	26,219
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	21,244	22,364	22,491	22,531
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26,656	28,247	28,434
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,523	26,200
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,633

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

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	8	1	1							
2. 2014	19	.23	.24	.24	.24	.25	.25	.25	.25	.25
3. 2015	XXX	.17	.22	.24	.24	.24	.24	.24	.24	.24
4. 2016	XXX	XXX	.20	.29	.30	.31	.32	.32	.32	.32
5. 2017	XXX	XXX	XXX	.22	.29	.31	.32	.32	.32	.32
6. 2018	XXX	XXX	XXX	XXX	.22	.30	.32	.32	.32	.32
7. 2019	XXX	XXX	XXX	XXX	.XXX	.20	.29	.31	.32	.32
8. 2020	XXX	XXX	XXX	XXX	.XXX	XXX	.14	.20	.21	.22
9. 2021	XXX	XXX	XXX	XXX	.XXX	XXX	.XXX	.13	.21	.23
10. 2022	XXX	XXX	XXX	XXX	.XXX	XXX	.XXX	.XXX	.16	.25
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15

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	4	1								
2. 2014	5	1								
3. 2015	XXX	6	2	1						
4. 2016	XXX	XXX	9	3	1	1				
5. 2017	XXX	XXX	XXX	9	3	1	1			
6. 2018	XXX	XXX	XXX	XXX	10	3	1	1		
7. 2019	XXX	XXX	XXX	XXX	.XXX	12	4	2	1	
8. 2020	XXX	XXX	XXX	XXX	.XXX	XXX	8	2	1	
9. 2021	XXX	XXX	XXX	XXX	.XXX	XXX	.XXX	11	4	2
10. 2022	XXX	XXX	XXX	XXX	.XXX	XXX	.XXX	.XXX	12	4
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12

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	4	1								
2. 2014	33	.35	.35	.35	.35	.35	.35	.35	.36	.36
3. 2015	XXX	.33	.35	.35	.35	.35	.35	.35	.35	.35
4. 2016	XXX	XXX	.40	.44	.44	.45	.45	.45	.45	.45
5. 2017	XXX	XXX	XXX	.41	.46	.46	.46	.46	.46	.46
6. 2018	XXX	XXX	XXX	XXX	.46	.49	.50	.50	.50	.50
7. 2019	XXX	XXX	XXX	XXX	.XXX	.43	.47	.48	.48	.48
8. 2020	XXX	XXX	XXX	XXX	.XXX	XXX	.31	.34	.34	.34
9. 2021	XXX	XXX	XXX	XXX	.XXX	XXX	.XXX	.34	.38	.38
10. 2022	XXX	XXX	XXX	XXX	.XXX	XXX	.XXX	.XXX	.42	.46
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 5D - WORKERS' COMPENSATION**(EXCLUDING EXCESS WORKERS' COMPENSATION)****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.....	XX.....							
6. 2018.....	XXX.....	XXX.....	XX.....	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**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.....	XX.....							
6. 2018.....	XXX.....	XXX.....	XX.....	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.....	XX.....							
6. 2018.....	XXX.....	XXX.....	XX.....	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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL
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.....	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 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.....	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.....	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 5F - Medical Professional Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

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	1								
2. 2014.....	14	15	16	16	16	16	16	16	16	16
3. 2015.....	XXX	15	17	18	18	18	18	18	18	18
4. 2016.....	XXX	XXX	17	20	20	21	21	21	21	21
5. 2017.....	XXX	XXX	XXX	21	25	25	25	25	25	25
6. 2018.....	XXX	XXX	XXX	XXX	22	26	26	26	26	26
7. 2019.....	XXX	XXX	XXX	XXX	XXX	21	24	25	25	25
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	32	37	38	38
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25	29	30
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	39	48
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30

SECTION 2A

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

SECTION 3A

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					1		1		
2. 2014.....	24	25	25	25	25	25	25	25	25	25
3. 2015.....	XXX	26	28	28	28	28	28	28	28	28
4. 2016.....	XXX	XXX	31	33	33	33	33	33	33	33
5. 2017.....	XXX	XXX	XXX	35	38	38	39	39	38	38
6. 2018.....	XXX	XXX	XXX	XXX	36	39	39	39	39	39
7. 2019.....	XXX	XXX	XXX	XXX	XXX	40	43	43	43	43
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	59	62	63	63
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	48	50	50
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	72	77
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51

Schedule P - Part 5H - Other Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5H - Other Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5H - Other Liability - Claims-Made - Section 3B

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B

N O N E

Schedule P - Part 5T - Warranty - Section 1

N O N E

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	(7)										
2. 2014.....	624	624	624	624	624	624	624	624	624	624	
3. 2015.....	XXX	667	667	667	667	667	667	667	667	667	
4. 2016.....	XXX	XXX	.773	.773	.773	.773	.773	.773	.773	.773	
5. 2017.....	XXX	XXX	XXX	839	839	839	839	839	839	839	
6. 2018.....	XXX	XXX	XXX	XXX	979	979	979	979	979	979	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	1,105	1,105	1,105	1,105	1,105	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	914	914	914	914	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	958	958	958	
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,185	1,185	
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,501	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,501
13. Earned Premiums (Sch P-Pt. 1)		617	667	773	839	979	1,105	914	958	1,185	1,501
											XXX

SECTION 2

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

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

SECTION 1

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

SECTION 2

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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

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

SECTION 2

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

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

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	(3)										
2. 2014.....	511	511	511	511	511	511	511	511	511	511	
3. 2015.....	XXX	530	530	530	530	530	530	530	530	530	
4. 2016.....	XXX	XXX	554	554	554	554	554	554	554	554	
5. 2017.....	XXX	XXX	XXX	583	583	583	583	583	583	583	
6. 2018.....	XXX	XXX	XXX	XXX	632	632	632	632	632	632	
7. 2019.....	XXX	XXX	XXX	XXX	705	705	705	705	705	705	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	782	782	782	782	782	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	905	905	905	905	
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	984	984	984	
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,082	1,082
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,082
13. Earned Premiums (Sch P-Pt. 1)	509	530	554	583	632	705	782	905	984	1,082	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....	6	6	6	6	6	6	6	6	6	6	
3. 2015.....	XXX	8	8	8	8	8	8	8	8	8	
4. 2016.....	XXX	XXX	10	10	10	10	10	10	10	10	
5. 2017.....	XXX	XXX	XXX	12	12	12	12	12	12	12	
6. 2018.....	XXX	XXX	XXX	15	15	15	15	15	15	15	
7. 2019.....	XXX	XXX	XXX	18	18	18	18	18	18	18	
8. 2020.....	XXX	XXX	XXX	XXX	9	9	9	9	9	9	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2	2	
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2	
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1
13. Earned Premiums (Sch P-Pt. 1)	6	8	10	12	15	18	9	2	2	1	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

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

SECTION 2B

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

SCHEDULE P - PART 6M - INTERNATIONAL

SECTION 1

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

SECTION 2

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

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1

N O N E

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2

N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1

N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS
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? Yes [] No [X]
 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:

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 #65? Yes [] No [X]

1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]

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? Yes [] No [] N/A [X]

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

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

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []

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 [X] No []

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? Yes [] No [X]

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 force at the end of the year for:

(in thousands of dollars) 5.1 Fidelity
 5.2 Surety

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

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

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.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 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. Total						

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(es)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.....	.....	00000	34-0963169	.....	0000080661	NYSE	The Progressive Corporation .....	.. OH....	.... UIP....	Board, Management	Board .....	.....	The Progressive Corporation .....	.... NO....	.... 138....
.0155	Progressive Insurance Group	27804	95-2676519	.....	.....	.....	Drive Insurance Company .....	.. OH....	.... IA....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 1389....
.....	.....	00000	83-0371533	.....	.....	.....	Progressive Agency Holdings, Inc. .....	.. DE....	.... NIA....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	11410	68-0004572	.....	.....	.....	Drive New Jersey Insurance Company .....	.. NJ....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	12879	20-4093467	.....	.....	.....	Progressive Commercial Casualty Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	24252	34-1094197	.....	.....	.....	Progressive American Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	17350	31-1193845	.....	.....	.....	Progressive Bayside Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	24260	34-6513736	.....	.....	.....	Progressive Casualty Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.....	.....	00000	34-1576555	.....	.....	.....	PC Investment Company .....	.. DE....	.... NIA....	Progressive Casualty Insurance Company	Ownership.....	100.000	The Progressive Corporation .....	.... YES....	.... 13....
.0155	Progressive Insurance Group	29203	74-1082840	.....	.....	.....	Progressive County Mutual Insurance Company .....	.. TX....	.... IA....	Progressive Casualty Insurance Company	Management.....	.....	The Progressive Corporation .....	.... NO....	.... 123....
.0155	Progressive Insurance Group	42412	34-1374634	.....	.....	.....	Progressive Gulf Insurance Company .....	.. OH....	.... IA....	Progressive Casualty Insurance Company	Ownership.....	100.000	The Progressive Corporation .....	.... YES....	.... 13....
.0155	Progressive Insurance Group	32786	34-1172685	.....	.....	.....	Progressive Specialty Insurance Company .....	.. OH....	.... IA....	Progressive Casualty Insurance Company	Ownership.....	100.000	The Progressive Corporation .....	.... YES....	.... 13....
.....	.....	00000	.....	.....	.....	.....	Trussville/Cahaba, AL , LLC .....	.. OH....	.... NIA....	Progressive Specialty Insurance Company	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	42994	39-1453002	.....	.....	.....	Progressive Classic Insurance Company .....	.. WI....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	10067	99-0311930	.....	.....	.....	Progressive Hawaii Insurance Corp. .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	10187	34-1787734	.....	.....	.....	Progressive Michigan Insurance Company .....	.. MI....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	35190	99-0935623	.....	.....	.....	Progressive Mountain Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	38628	34-1318335	.....	.....	.....	Progressive Northern Insurance Company .....	.. WI....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	42919	91-1187829	.....	.....	.....	Progressive Northwestern Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	37834	34-1287020	.....	.....	.....	Progressive Preferred Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	10050	72-1269745	.....	.....	.....	Progressive Security Insurance Company .....	.. LA....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	38784	59-1951700	.....	.....	.....	Progressive Southeastern Insurance Company .....	.. IN....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.0155	Progressive Insurance Group	12302	20-3187886	.....	.....	.....	Progressive Freedom Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.....	.....	00000	27-2393886	.....	.....	.....	Progressive Commercial Advantage Agency, Inc. .....	.. OH....	.... NIA....	Progressive Agency Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 137....
.....	.....	00000	20-1583033	.....	.....	.....	Progressive Commercial Holdings, Inc. .....	.. DE....	.... NIA....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	10194	59-3213819	.....	.....	.....	Artisan and Truckers Casualty Company .....	.. WI....	.... IA....	Progressive Commercial Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	10243	06-0281045	.....	.....	.....	National Continental Insurance Company .....	.. NY....	.... IA....	Progressive Commercial Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	10193	59-3213719	.....	.....	.....	Progressive Express Insurance Company .....	.. OH....	.... IA....	Progressive Commercial Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	11770	36-3298008	.....	.....	.....	United Financial Casualty Company .....	.. OH....	.... IA....	Progressive Commercial Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	15643	47-1849658	.....	.....	.....	Blue Hill Specialty Insurance Company, Inc. .....	.. IL....	.... IA....	Progressive Commercial Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	35-0160330	.....	.....	.....	Protective Insurance Corporation .....	.. IN....	.... NIA....	Progressive Commercial Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 136....
.0155	Progressive Insurance Group	12416	35-6021485	.....	.....	.....	Protective Insurance Company .....	.. IN....	.... IA....	Protective Insurance Corporation	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 136....
.0155	Progressive Insurance Group	40460	35-1524574	.....	.....	.....	Sagamore Insurance Company .....	.. IN....	.... IA....	Protective Insurance Company	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 136....
.0155	Progressive Insurance Group	13149	26-1865258	.....	.....	.....	Protective Specialty Insurance Company .....	.. IN....	.... IA....	Protective Insurance Company	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 136....
.....	.....	00000	26-0327941	.....	.....	.....	B&L Brokerage Services, Inc. .....	.. IN....	.... NIA....	Protective Insurance Corporation	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 136....
.....	.....	00000	45-3337116	.....	.....	.....	B&L Management Inc. .....	.. DE....	.... NIA....	Protective Insurance Corporation	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 136....
.....	.....	00000	35-1864904	.....	.....	.....	B&L Insurance, LTD. .....	.. BMU....	.... IA....	Protective Insurance Corporation	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 136....
.....	.....	00000	38-3564766	.....	.....	.....	Transport Specialty Insurance Agency, Inc. .....	.. MI....	.... NIA....	B&L Brokerage Services, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 136....
.....	.....	00000	83-0371538	.....	.....	.....	Progressive Direct Holdings, Inc. .....	.. DE....	.... UDP....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	44180	23-2599971	.....	.....	.....	Mountain Laurel Assurance Company .....	.. OH....	.... IA....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	11851	62-0484104	.....	.....	.....	Progressive Advanced Insurance Company .....	.. OH....	.... IA....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	58-1772717	.....	.....	.....	Progressive Auto Pro Insurance Agency, Inc. .....	.. FL....	.... NIA....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	44288	62-1444848	.....	.....	.....	Progressive Choice Insurance Company .....	.. OH....	.... IA....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	16322	34-1524319	.....	.....	.....	Progressive Direct Insurance Company .....	.. OH....	.... IA....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	.....	.....	.....	.....	Gadsden, AL , LLC .....	.. OH....	.... NIA....	Progressive Direct Insurance Company	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	14800	22-2404709	.....	.....	.....	Progressive Garden State Insurance Company .....	.. NJ....	.... IA....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	37605	33-0350911	.....	.....	.....	Progressive Marathon Insurance Company .....	.. MI....	.... IA....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	24279	34-0472535	.....	.....	.....	Progressive Max Insurance Company .....	.. OH....	.... IA....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.... NO....	.... 13....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- iliary Loca- tion	10 Rela- tion- ship to Report- ing Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(es)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
.0155 ...	Progressive Insurance Group	44695 ...	86-0686869	.....	.....	Progressive Paloverde Insurance Company .....	.. IN.....	IA.....	Progressive Direct Holdings, Inc.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.0155 ...	Progressive Insurance Group	21735 ...	36-3789786	.....	.....	Progressive Premier Insurance Company of Illinois .....	.. OH.....	RE.....	Progressive Direct Holdings, Inc.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.0155 ...	Progressive Insurance Group	10192 ...	59-3213815	.....	.....	Progressive Select Insurance Company .....	.. OH.....	IA.....	Progressive Direct Holdings, Inc.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	34-1804869	.....	.....	Progressive Advantage Agency, Inc. .....	.. OH.....	NIA.....	Progressive Direct Holdings, Inc.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.0155 ...	Progressive Insurance Group	21727 ...	36-3789787	.....	.....	Progressive Universal Insurance Company .....	.. WI.....	IA.....	Progressive Direct Holdings, Inc.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.0155 ...	Progressive Insurance Group	16816 ...	84-4920049	.....	.....	Progressive Life Insurance Company .....	.. OH.....	IA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	99-0311966	.....	.....	Garden Sun Insurance Services, Inc. .....	.. HI.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	95-2706008	.....	.....	Pacific Motor Club .....	.. CA.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	11-3203413	.....	.....	PROGNY Agency, Inc. .....	.. NY.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	34-1574447	.....	.....	Progressive Adjusting Company, Inc. .....	.. OH.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	13-3673368	.....	.....	Progressive Capital Management Corp. .....	.. NY.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	34-1378861	.....	.....	Progressive Investment Company, Inc. .....	.. DE.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	34-6530101	.....	.....	Progressive Premium Budget, Inc. .....	.. OH.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	34-1574448	.....	.....	Progressive RSC, Inc. .....	.. OH.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	84-3633213	.....	.....	358 Ventures, Inc. .....	.. OH.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	20-2702408	.....	.....	Progressive Vehicle Service Company .....	.. OH.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	51-0295493	.....	.....	Village Transport Corp. .....	.. DE.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	34-1324270	.....	.....	Wilson Mills Land Co. .....	.. OH.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	87-4036792	.....	.....	Progressive Next Inc. .....	.. DE.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 13
.....	.....	00000 ...	59-3491541	.....	.....	ARX Holding Corp. .....	.. DE.....	NIA.....	The Progressive Corporation	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134
.0155 ...	Progressive Insurance Group	11072 ...	56-2512990	.....	.....	ASI Home Insurance Corp. .....	.. FL.....	IA.....	ARX Holding Corp.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134
.0155 ...	Progressive Insurance Group	13142 ...	26-1996532	.....	.....	ASI Preferred Insurance Corp. .....	.. FL.....	IA.....	ARX Holding Corp.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134
.0155 ...	Progressive Insurance Group	10872 ...	59-3459912	.....	.....	American Strategic Insurance Corp. .....	.. FL.....	IA.....	ARX Holding Corp.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134
.0155 ...	Progressive Insurance Group	11059 ...	75-2904629	.....	.....	ASI Lloyds .....	.. TX.....	IA.....	ASI Lloyds, Inc.	Management.....	.....	The Progressive Corporation .....	... NO.....	... 1345
.0155 ...	Progressive Insurance Group	12196 ...	20-1284676	.....	.....	ASI Assurance Corp. .....	.. FL.....	IA.....	ARX Holding Corp.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134
.0155 ...	Progressive Insurance Group	14042 ...	27-3421622	.....	.....	ASI Select Insurance Corp. .....	.. IN.....	IA.....	ARX Holding Corp.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134
.....	.....	00000 ...	59-3621835	.....	.....	ASI Lloyds, Inc. .....	.. TX.....	NIA.....	ARX Holding Corp.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134
.....	.....	00000 ...	11-3644072	.....	.....	Sunshine Security Insurance Agency, Inc. .....	.. FL.....	NIA.....	ARX Holding Corp.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134
.0155 ...	Progressive Insurance Group	13038 ...	26-1142659	.....	.....	ASI Underwriters Corp. .....	.. FL.....	NIA.....	ARX Holding Corp.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134
.....	.....	00000 ...	81-1112584	.....	.....	Progressive Property Insurance Company .....	.. LA.....	IA.....	ARX Holding Corp.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134
.....	.....	00000 ...	26-0325360	.....	.....	ASI Select Auto Insurance Corp. .....	.. CA.....	NIA.....	ARX Holding Corp.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134
.....	.....	00000 ...	47-4504370	.....	.....	Ark Royal Underwriters, LLC .....	.. FL.....	NIA.....	ARX Holding Corp.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134
.....	.....	PropertyPlus Insurance Agency, Inc. .....	.. DE.....	NIA.....	ARX Holding Corp.	Ownership.....	100.00 ...	The Progressive Corporation .....	... NO.....	... 134				

Asterisk	Explanation
1	Schedule Y Part 1A is a common schedule for all companies of The Progressive Corporation, however column 10 requires specific relationship information relative to the reporting entity.
2	Progressive County Mutual Insurance Company is a Texas county mutual insurance company that is managed, but not owned by Progressive Casualty Insurance Company.
3	None of the companies that are part of The Progressive Corporation are Federally chartered or insured institutions and therefore, do not have Federal RSSD numbers.
4	Effective April 1, 2020, The Progressive Corporation purchased 100% ownership in the ARX Holding Corp.
5	ASI Lloyds is a Texas Lloyds insurance company that is managed, but not owned by ASI Lloyds, Inc.
6	Effective June 1, 2021 The Progressive Corporation purchased 100% ownership in the Protective Insurance Corporation ("Protective") and subsequently transferred all outstanding shares of Protective's common stock to Progressive Commercial Holdings, Inc.
7	Effective October 17, 2022, Drive Insurance Holdings, Inc. changed its name to Progressive Agency Holdings, Inc.
8	Effective December 14, 2022, all outstanding shares of common stock of Progressive West Insurance Company were transferred from Progressive Agency Holdings, Inc. to The Progressive Corporation.
9	Effective July 18, 2023, Progressive West Insurance Company changed its name to Drive Insurance Company.

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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)
34-0963169	34-0963169	The Progressive Corporation		(32,000,000)			1,165,076,419				1,133,076,419	
83-0371533	83-0371533	Progressive Agency Holdings, Inc.	172,000,000	(208,000,000)							(36,000,000)	
24260	34-6513736	Progressive Casualty Insurance Company	(120,000,000)	(10,000,000)	(19,605,688)		5,908,857,121	980,835,559	*		6,740,086,992	(7,573,679,225)
24252	34-1094197	Progressive American Insurance Company		85,000,000	58,650,900		(11,339,239)		*		132,311,661	
32786	34-1172685	Progressive Specialty Insurance Company	(10,000,000)		(30,897,080)		(46,769,150)		*		(87,666,230)	
38784	59-1951700	Progressive Southeastern Insurance Company		23,000,000	(9,490,258)		(5,423,192)		*		8,086,550	
38628	34-1318335	Progressive Northern Insurance Company	(15,000,000)				(74,208,350)		*		(89,208,350)	
37834	34-1287020	Progressive Preferred Insurance Company		20,000,000			(32,675,279)		*		(12,675,279)	
42412	34-1374634	Progressive Gulf Insurance Company		10,000,000	(52,239,771)		(10,718,342)		*		(52,958,113)	
42919	91-1187829	Progressive Northwestern Insurance Company		5,000,000	(24,917,000)		(70,725,327)		*		(90,642,327)	
42994	39-1453002	Progressive Classic Insurance Company		15,000,000	(31,909,937)		(15,508,048)		*		(32,417,985)	
17350	31-1193845	Progressive Bayside Insurance Company		5,000,000	(6,688,191)		(2,605,486)		*		(4,293,677)	
35190	93-0935623	Progressive Mountain Insurance Company		10,000,000			(4,796,195)		*		5,203,805	
10187	34-1787734	Progressive Michigan Insurance Company		20,000,000	(20,413,200)		(22,159,930)		*		(22,573,130)	
29203	74-1082840	Progressive County Mutual Insurance Company			(5,227,365)		(68,710,444)	(1,004,534,350)			(1,078,472,159)	5,613,359,228
10050	72-1269745	Progressive Security Insurance Company	(3,000,000)		2,527,963		(81,021,310)	(104,257,246)			(188,278,556)	431,084,628
11410	68-0004572	Drive New Jersey Insurance Company		(24,000,000)	(58,685,602)		(108,694,453)	93,495,053			2,328,563	1,033,606,038
10067	99-0311930	Progressive Hawaii Insurance Corp.		10,000,000			(73,661,636)				(156,347,238)	
12302	20-3187886	Progressive Freedom Insurance Company			(156,905)		(2,264,681)		*		7,735,319	
12879	20-4093467	Progressive Commercial Casualty Company					(17,815)	58,112			(116,608)	
83-0371538	83-0371538	Progressive Direct Holdings, Inc.	213,000,000	(180,500,000)							32,500,000	
16322	34-1524319	Progressive Direct Insurance Company	(200,000,000)		(218,272,027)		(3,523,214,639)	324,857,201	*		(3,616,629,465)	(4,432,296,407)
24279	34-0472535	Progressive Max Insurance Company	(5,000,000)		(25,516,500)		(26,822,185)	(257,659)	*		(57,596,344)	10,604
44695	86-0686869	Progressive Paloverde Insurance Company		10,000,000	(618,111)		(3,956,234)		*		5,425,655	
21735	36-3789786	Progressive Premier Insurance Company of Illinois		15,000,000	(380,172)		(9,303,173)		*		5,316,655	
21727	36-3789787	Progressive Universal Insurance Company		5,000,000	2,976,383		(22,744,560)		*		(14,768,177)	
37605	33-0350911	Progressive Marathon Insurance Company					(27,598,086)		*		(27,598,086)	
10192	59-3213815	Progressive Select Insurance Company		98,000,000	(105,203,792)		(844,634,748)	(279,569,280)			(1,131,407,820)	3,587,392,586
44288	62-1444848	Progressive Choice Insurance Company		5,000,000			(1,715,454)		*		3,284,546	
11851	62-0484104	Progressive Advanced Insurance Company		45,000,000	(17,010,782)		(21,407,121)		*		6,582,097	
14800	22-2404709	Progressive Garden State Insurance Company		2,500,000	5,054,750		(190,543,453)	(45,287,921)			(228,276,624)	844,903,821
44180	23-2599971	Mountain Laurel Assurance Company	(8,000,000)		(68,257,068)		(112,197,160)				(188,454,228)	
	20-1583033	Progressive Commercial Holdings, Inc.	14,000,000	(130,000,000)							(116,000,000)	
11770	36-3298008	United Financial Casualty Company		110,000,000	(155,956,500)		(621,037,756)	(99,307,940)			(766,302,196)	(4,176,936,404)
10243	06-0281045	National Continental Insurance Company			18,991,408		(20,596,911)	(167,698)			(1,773,201)	5,929,414
10194	59-3213819	Artisan and Truckers Casualty Company					(200,689,762)	(102,045,371)			(302,735,133)	1,398,716,508
10193	59-3213719	Progressive Express Insurance Company	(14,000,000)				(178,495,739)	(12,504,399)			(205,000,138)	1,908,514,943
15643	47-1849658	Blue Hill Specialty Insurance Company, Inc.		20,000,000	(13,176,735)		(45,486,583)	213,857,710			175,194,392	869,704,953

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
34-1576555	34-1576555	PC Investment Company			(58,638,300)		414,581				(58,223,719)	
34-1378861	34-1378861	Progressive Investment Company, Inc.			1,117,300,551		389,462				1,117,690,013	
13-3673368	13-3673368	Progressive Capital Management Corp.					11,841,934				11,841,934	
34-1804869	34-1804869	Progressive Advantage Agency, Inc.					(300,058,375)				(300,058,375)	
27-2393886	27-2393886	Progressive Commercial Advantage Agency, Inc.					(2,030,589)				(2,030,589)	
34-1574447	34-1574447	Progressive Adjusting Company, Inc.					(145,843)				(145,843)	
51-0295493	51-0295493	Village Transport Corp.					1,194,300				1,194,300	
16816	84-4920049	Progressive Life Insurance Company		20,000,000			(7,424,193)				12,575,807	
27804	95-2676519	Drive Insurance Company		12,000,000	(282,240,971)		(88,020,448)	34,828,229			(323,433,190)	489,689,313
84-3633213	84-3633213	358 Ventures, Inc.					(4,782,494)				(4,782,494)	
87-4036792	87-4036792	Progressive Next Inc.					(11,701,551)				(11,701,551)	
59-3491541	59-3491541	ARX Holding Corp.	12,500,000	(36,000,000)			(7,570)				(23,507,570)	
10872	59-3459912	American Strategic Insurance Corp.		80,000,000			(126,558,625)	82,204,803	*		35,646,178	(429,903,101)
11059	75-2904629	ASI Lloyds		30,000,000			(9,249,931)	(8,988,646)	*		11,761,423	
13038	26-1142659	Progressive Property Insurance Company		(16,000,000)			(1,196,910)	(9,615,344)	*		(26,812,254)	
12196	20-1284676	ASI Assurance Corp.	(12,500,000)	(14,000,000)			(392,333)	(441,614)	*		(27,333,947)	
11072	56-2512990	ASI Home Insurance Corp.		3,000,000			(5,540,211)	(1,046,070)	*		(3,586,281)	
13142	26-1996532	ASI Preferred Insurance Corp.		(50,000,000)			(33,396,803)	(114,613,129)			(198,009,932)	429,903,101
14042	27-3421622	ASI Select Insurance Corp.		3,000,000			(8,916,180)		*		(5,916,180)	
11-3644072	11-3644072	Sunshine Security Insurance Agency Inc.					88,341				88,341	
35-0160330	35-0160330	Protective Insurance Corporation					(25,491)				(25,491)	
12416	35-6021485	Protective Insurance Company					(145,954)	(1,011,528)			(1,157,482)	(5,238,879)
40460	35-1524574	Sagamore Insurance Company					(7,201,661)	3,261,496			(3,940,165)	8,489,445
13149	26-1865258	Protective Specialty Insurance Company					(486,650)	(1,795,154)			(2,281,804)	(3,991,135)
	35-1864904	B&L Insurance, LTD						52,045,186			52,045,186	740,569
	26-0327941	B&L Brokerage Services, Inc.					1,162,095				1,162,095	
9999999 Control Totals										XXX		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

24260	Progressive Casualty Insurance Company	49.00%	16322	Progressive Direct Insurance Company	77.00%
24252	Progressive American Insurance Company	2.00%	24279	Progressive Max Insurance Company	6.00%
32786	Progressive Specialty Insurance Company	7.00%	21735	Progressive Premier Insurance Company of Illinois	2.00%
38784	Progressive Southeastern Insurance Company	1.00%	21727	Progressive Universal Insurance Company	4.00%
38628	Progressive Northern Insurance Company	12.00%	37605	Progressive Marathon Insurance Company	6.00%
37834	Progressive Preferred Insurance Company	6.00%	44695	Progressive Paloverde Insurance Company	0.50%
42412	Progressive Gulf Insurance Company	2.00%	11851	Progressive Advanced Insurance Company	4.00%
42919	Progressive Northwestern Insurance Company	12.00%	44288	Progressive Choice Insurance Company	0.50%
42994	Progressive Classic Insurance Company	3.00%			
17350	Progressive Bayside Insurance Company	0.50%	10872	American Strategic Insurance Corp	76.50%
35190	Progressive Mountain Insurance Company	1.00%	11059	ASI Lloyds	17.00%
10187	Progressive Michigan Insurance Company	4.00%	11072	ASI Home Insurance Corp	2.00%
12302	Progressive Freedom Insurance Company	0.50%	14042	ASI Select Insurance Corp	2.00%
			13038	Progressive Property Insurance Company	2.00%
			12196	ASI Assurance Corp	0.50%

Detailed Explanation

For the above listed companies, see Annual Statement Footnote 26 for further information.

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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 5 Over Column 6 (Yes/No)	8 Granted Disclaimer of Control Affiliation of Column 5 Over Column 6 (Yes/No)
Progressive Casualty Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive American Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Specialty Insurance Company	Progressive Casualty Insurance Company	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Southeastern Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Northern Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Preferred Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Gulf Insurance Company	Progressive Casualty Insurance Company	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Northwestern Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Classic Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Bayside Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Mountain Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Michigan Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive County Mutual Insurance Company .....	.....	.....	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Drive Insurance Company	The Progressive Corporation	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Security Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Drive New Jersey Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Hawaii Insurance Corp.	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Freedom Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Commercial Casualty Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Direct Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Max Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Paloverde Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Premier Insurance Company of Illinois	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Universal Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Marathon Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Select Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Choice Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Advanced Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Garden State Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Mountain Laurel Assurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
United Financial Casualty Company	Progressive Commercial Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
National Continental Insurance Company	Progressive Commercial Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Artisan and Truckers Casualty Company	Progressive Commercial Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Express Insurance Company	Progressive Commercial Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Blue Hill Specialty Insurance Company, Inc.	Progressive Commercial Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
American Strategic Insurance Corp	ARX Holding Corp.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
ASI Lloyds .....	.....	.....	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Property Insurance Company	ARX Holding Corp.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
ASI Assurance Corp	ARX Holding Corp.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
ASI Home Insurance Corp	ARX Holding Corp.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
ASI Preferred Insurance Corp	ARX Holding Corp.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
ASI Select Insurance Corp	ARX Holding Corp.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Protective Insurance Company	Protective Insurance Corporation	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
.....	Progressive Commercial Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Sagamore Insurance Company	Protective Insurance Company	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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

1 Insurers in Holding Company	2 Owners with Greater Than 10% Ownership	3 Ownership Percentage Column 2 of Column 1	4 Granted Disclaimer of Control\\ Affiliation of Column 2 Over Column 1 (Yes/No)	5 Ultimate Controlling Party	6 U.S. Insurance Groups or Entities Controlled by Column 5	7 Ownership Percentage (Column 5 of Column 6)	8 Granted Disclaimer of Control\\ Affiliation of Column 5 Over Column 6 (Yes/No)
Protective Specialty Insurance Company	Protective Insurance Company	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Life Insurance Company	The Progressive Corporation	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS
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.

		Responses
MARCH FILING		
1.	Will an actuarial opinion be filed by March 1?	YES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES
APRIL FILING		
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6.	Will Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
MAY FILING		
8.	Will this company be included in a combined annual statement which 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 Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

The following supplemental reports are required to be filed as part of your annual 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.

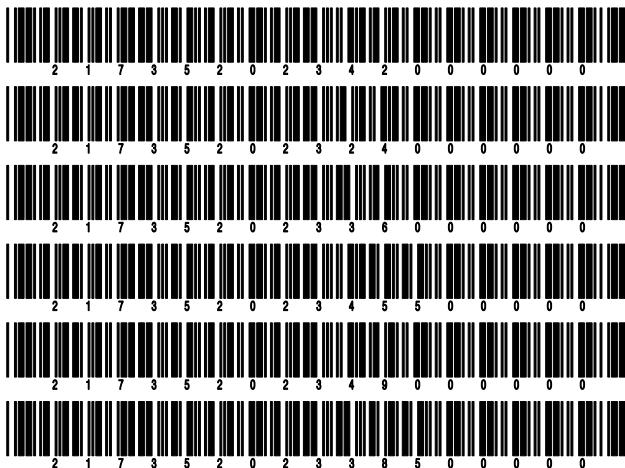
MARCH FILING		
11.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
12.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
15.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
16.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
17.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
18.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
20.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
21.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
22.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
23.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
25.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
27.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?	NO
28.	Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?	YES
29.	Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?	YES
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?	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
AUGUST FILING		
38.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

Explanations:

- 11.
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Bar Codes:

11. SIS Stockholder Information Supplement [Document Identifier 420]
12. Financial Guaranty Insurance Exhibit [Document Identifier 240]
13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]
14. Supplement A to Schedule T [Document Identifier 455]
15. Trusteed Surplus Statement [Document Identifier 490]
16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

17. Reinsurance Summary Supplemental Filing [Document Identifier 401]



18. Medicare Part D Coverage Supplement [Document Identifier 365]



21. Exceptions to the Reinsurance Attestation Supplement
[Document Identifier 400]



22. Bail Bond Supplement [Document Identifier 500]



23. Director and Officer Insurance Coverage Supplement [Document Identifier 505]



24. Relief from the five-year rotation requirement for lead audit partner
[Document Identifier 224]



25. Relief from the one-year cooling off period for independent CPA
[Document Identifier 225]



26. Relief from the Requirements for Audit Committees [Document Identifier 226]



27. Reinsurance Counterparty Reporting Exception – Asbestos and Pollution
Contracts [Document Identifier 555]



30. Credit Insurance Experience Exhibit [Document Identifier 230]



31. Long-Term Care Experience Reporting Forms [Document Identifier 306]



32. Accident and Health Policy Experience Exhibit [Document Identifier 210]



33. Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]



34. Cybersecurity and Identity Theft Insurance Coverage Supplement
[Document Identifier 550]



35. Life, Health & Annuity Guaranty Association Assessable Premium Exhibit -
Parts 1 and 2 [Document Identifier 290]



36. Private Flood Insurance Supplement [Document Identifier 560]



37. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS
OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Liabilities Line 25

	1 Current Year	2 Prior Year
2504. STATE PLAN LIABILITY	277,522	275,954
2597. Summary of remaining write-ins for Line 25 from overflow page	277,522	275,954



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

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 0155

NAIC Company Code 21735

	Direct Business Only			
	Prior Year	Current Year		
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 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	17,634	(49)		
8. Employment liability				
9. Aggregate write-ins for facilities & premises (CGL)	2,166,720	2,498,711	1,108,379	456,015
10. Internet & cyber liability				
11. Aggregate write-ins for other	860,055	987,385		
12. Total ASL 17 - other liability (sum of Lines 1 through 11)	3,044,409	3,486,047	1,108,379	456,015
DETAILS OF WRITE-INS				
0901. Comprehensive Personal Liability				
0902. Premises and Operations Liability	405,940	464,870	93,860	6,290
0903. Commercial General Liability	1,760,780	2,033,841	1,014,519	449,725
0998. Summary of remaining write-ins for Line 9 from overflow page				
0999. Totals (Lines 0901 thru 0903 plus 0998)(Line 9 above)	2,166,720	2,498,711	1,108,379	456,015
1101. Boaters	860,055	987,385		
1102. Motorist				
1103. Other				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	860,055	987,385		

SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS
OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Exhibit of Other Liabilities by Lines of Business Line 9

	Direct Business Only			
	Prior Year	Current Year		
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
0904.
0997. Summary of remaining write-ins for Line 9 from overflow page				

Additional Write-ins for Exhibit of Other Liabilities by Lines of Business Line11

	Direct Business Only			
	Prior Year	Current Year		
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
1104.
1197. Summary of remaining write-ins for Line 11 from overflow page				



**SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR**

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Georgia

NAIC Group Code 0155

NAIC Company Code 21735

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income
2. Health
3. Homeowners .....	..... NO
4. Individual Annuity
5. Individual Life
6. Lender-Placed Home and Auto
7. Long-Term Care
8. Other Health
9. Private Flood
10. Private Passenger Auto .....	..... YES
11. Short-Term Limited Duration Health Plans
12. Travel



**SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS
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: North Carolina

NAIC Group Code 0155

NAIC Company Code 21735

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income
2. Health
3. Homeowners .....	..... NO
4. Individual Annuity
5. Individual Life
6. Lender-Placed Home and Auto
7. Long-Term Care
8. Other Health
9. Private Flood
10. Private Passenger Auto .....	..... YES
11. Short-Term Limited Duration Health Plans
12. Travel