



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Alabama | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|------|---|---|-----------------------------------|--|---------------------------------------|---|-----------------------------|---------------------------|---|--|--|--|
| Line of Business | | Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken | | 3 1 Direct Premiums Written | 4 2 Dividends Paid or Credited to Policyholders on Direct Business | 5 Direct Unearned Premium Reserves | 6 Direct Losses Paid (deducting salvage) | 7 Direct Losses Incurred | 8 Direct Losses Unpaid | 9 Direct Defense and Cost Containment Expense Paid | 10 Direct Defense and Cost Containment Expense Incurred | 11 Direct Defense and Cost Containment Expense Unpaid | 12 Commissions and Brokerage Expenses |
| | | 1 Direct Premiums Written | 2 Dividends Paid or Credited to Policyholders on Direct Business | | | | | | | | | | |
| 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 | | (1,297) | | (1,297) | | | | | | | | | 35,101 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | | (21) | | (21) | | | |
| 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 | |
| 32. Reins nonproportional assumed liability | | XXX | | XXX | | XXX | | XXX | | XXX | | XXX | |
| 33. Reins nonproportional assumed financial lines | | XXX | | XXX | | XXX | | XXX | | XXX | | XXX | |
| 34. Aggregate Write-Ins for Other Lines of Business | | | | | | | | (611) | | (611) | | | |
| 35. Total (a) | | (1,297) | | (1,297) | | | | | | | | | 35,101 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Alaska | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 | | |
|---|--------|--------------------------|--------|------------------------------|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| Line of Business | | | | 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 | 19,020 | | 20,223 | | | 4,516 | | (1,148) | | (415) | | 4,173 | | 80 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 7,240 | | 7,286 | | | 1,526 | | | | (2,210) | | (2,210) | | 15 | |
| 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 | |
| 32. Reins nonproportional assumed liability | XXX | | XXX | | | XXX | | | | XXX | | XXX | | XXX | |
| 33. Reins nonproportional assumed financial lines | XXX | | XXX | | | XXX | | | | XXX | | XXX | | XXX | |
| 34. Aggregate Write-Ins for Other Lines of Business | | | | | | | | | | | | | | | |
| 35. Total (a) | | 26,260 | | 27,510 | | | 6,042 | | (3,359) | | (2,441) | | 3,708 | | 140 |
| 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 \$ 89

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Arizona | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|---------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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 | | | | | | | | | | | | | (1) |
| 10. Financial Guaranty | | | | | | | | | | | | | |
| 11.1 Medical Professional Liability - Occurrence | | | | | | | | | | | | | |
| 11.2 Medical Professional Liability - Claims-Made | | | | | | | | | | | | | |
| 12. Earthquake | | | | | | | | | | | | | |
| 13.1 Comprehensive (hospital and medical) ind (b) | | | | | | | | | | | | | |
| 13.2 Comprehensive (hospital and medical) group (b) | | | | | | | | | | | | | |
| 14. Credit A&H (Group and Individual) | | | | | | | | | | | | | |
| 15.1 Vision Only (b) | | | | | | | | | | | | | |
| 15.2 Dental Only (b) | | | | | | | | | | | | | |
| 15.3 Disability Income (b) | | | | | | | | | | | | | |
| 15.4 Medicare Supplement (b) | | | | | | | | | | | | | |
| 15.5 Medicaid Title XIX (b) | | | | | | | | | | | | | |
| 15.6 Medicare Title XVIII (b) | | | | | | | | | | | | | |
| 15.7 Long-Term Care (b) | | | | | | | | | | | | | |
| 15.8 Federal Employees Health Benefits Plan (b) | | | | | | | | | | | | | |
| 15.9 Other Health (b) | | | | | | | | | | | | | |
| 16. Workers' Compensation | | | | | | | | | | | | | |
| 17.1 Other Liability - Occurrence | | | | | | | | | | | | | |
| 17.2 Other Liability - Claims-Made | | | | | | | | | | | | | |
| 17.3 Excess Workers' Compensation | | | | | | | | | | | | | |
| 18.1 Products Liability - Occurrence | | | | | | | | | | | | | |
| 18.2 Products Liability - Claims-Made | | | | | | | | | | | | | |
| 19.1 Private Passenger Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.2 Other Private Passenger Auto Liability | | | | | | | | | | | | | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | | | | | | | |
| 21.2 Commercial Auto Physical Damage | | | | | | | | | | | | | |
| 22. Aircraft (all perils) | | | | | | | | | | | | | |
| 23. Fidelity | | | | | | | | | | | | | |
| 24. Surety | | | | | | | | | | | | | |
| 26. Burglary and Theft | | | | | | | | | | | | | |
| 27. Boiler and Machinery | | | | | | | | | | | | | |
| 28. Credit | | | | | | | | | | | | | |
| 29. International | | | | | | | | | | | | | |
| 30. Warranty | | | | | | | | | | | | | |
| 31. Reins nonproportional assumed property | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 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) | (1,825) | (1,825) | | | | | | | | | | | |
| 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 \$ 40

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Arkansas | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|--------|
| 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 | 84,279 | 87,680 | | 35,297 | 99,346 | 99,703 | 1,531 | | | (9) | 144 | 6,023 | 17,041 |
| 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 | 28,865 | 29,577 | | 12,927 | | (290) | 2,413 | | | (32) | 325 | 1,963 | 5,830 |
| 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) | 14,937 | 15,771 | | 5,144 | 5,679 | 25 | 4,501 | 32 | (449) | 102 | 1,562 | 2,915 | |
| 19.2 Other Private Passenger Auto Liability | 285,963 | 294,512 | | 104,194 | 184,968 | 173,508 | 107,079 | 217 | (1,786) | 4,287 | 31,644 | 54,098 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 375,323 | 382,714 | | 152,786 | 200,234 | 213,983 | 7,226 | (122) | 2,547 | 3,140 | 39,376 | 70,014 | |
| 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) | 789,367 | 810,254 | | 310,348 | 488,027 | 484,728 | 122,750 | 128 | 271 | 7,997 | 80,568 | 149,897 | |
| 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 \$ 10,568

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | California | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|-------|
| 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 | 9,454,559 | 9,052,289 | | 4,607,258 | 5,795,982 | 5,545,763 | 413,875 | 17,317 | 5,833 | 22,469 | 1,018,076 | .244,396 | |
| 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 | 3,962,840 | 3,856,902 | | 1,949,612 | 1,096,110 | 1,101,912 | 1,042,487 | 24,209 | 19,040 | 183,776 | 432,086 | .102,223 | |
| 17.2 Other Liability - Claims-Made | | | | | (20,000) | (20,000) | | 1,091 | 1,091 | | | | |
| 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 | 4,464,232 | 4,256,128 | | 2,270,657 | 1,911,673 | 2,661,465 | 3,117,602 | 307,808 | 392,108 | 281,784 | .544,805 | .114,091 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | (180) | (180) | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 31,595,204 | 30,418,721 | | 15,875,387 | 18,898,132 | 19,423,467 | 3,052,269 | 41,222 | 34,220 | 66,666 | 3,863,837 | .797,932 | |
| 21.2 Commercial Auto Physical Damage | | | | | | | | (120) | (120) | | | | |
| 22. Aircraft (all perils) | | | | | | | | | | | | | |
| 23. Fidelity | | | | | | | | | | | | | |
| 24. Surety | 2,200 | 2,206 | | 127 | | | | | | | | .378 | |
| 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) | 49,479,034 | 47,586,246 | | 24,703,040 | 27,681,897 | 28,712,607 | 7,626,233 | 391,348 | 451,993 | 554,696 | 5,858,804 | 1,259,020 | |
| 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 \$ 640,531

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Colorado | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|-----------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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 | 168,004 | 178,637 | | | 75,059 | 60,950 | 61,655 | 2,583 | | (31) | .291 | 12,883 | 11,776 |
| 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 | 69,423 | 72,474 | | | 30,964 | 2,595 | 1,879 | .5,918 | | (84) | .769 | 5,254 | 4,857 |
| 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) | | | | | (2,073) | (2,073) | (2,073) | (20) | | (20) | | | |
| 19.2 Other Private Passenger Auto Liability | 1,546,802 | 1,599,083 | | | 498,415 | 994,342 | 1,281,075 | 1,160,550 | | 33,461 | 36,050 | 63,103 | 144,608 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | 101,000 |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 1,618,526 | 1,664,313 | | | 562,377 | 625,447 | 652,270 | 3,308 | | (103) | 2,674 | 4,899 | 151,007 |
| 21.2 Commercial Auto Physical Damage | | | | | | | | | | | | | 105,734 |
| 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) | 3,402,755 | 3,514,507 | | | 1,166,815 | 1,681,261 | 1,994,806 | 1,172,359 | | 33,338 | 38,589 | 69,062 | 313,752 |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | 223,366 |
| 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 \$ 21,761

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Connecticut | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|-------|
| 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 | 146,871 | 137,556 | | 75,882 | 92,262 | (7,622) | 7,762 | 1,054 | (4,165) | 61 | 22,031 | 2,314 | |
| 5.1 Commercial Multiple Peril (Non-Liability Portion) | 159,648 | 111,461 | | 83,190 | 325 | 9,988 | 14,176 | | 1,558 | 2,500 | 23,058 | 2,508 | |
| 5.2 Commercial Multiple Peril (Liability Portion) | 265,237 | 192,512 | | 126,419 | 18,684 | 73,696 | 77,090 | | 7,194 | 10,289 | 38,107 | 4,176 | |
| 6. Mortgage Guaranty | | | | | | | | | | | | | |
| 8. Ocean Marine | | | | | | | | | | | | | |
| 9. Inland Marine | 5,091,461 | 5,062,086 | | 2,487,837 | 1,976,635 | 1,925,893 | 482,645 | 9,238 | 8,317 | 23,763 | 507,040 | 80,379 | |
| 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 | 2,492,549 | 2,575,603 | | 1,193,915 | 2,125,040 | 1,855,679 | 2,541,570 | 73,403 | 49,233 | 133,396 | 223,316 | 39,398 | |
| 17.2 Other Liability - Claims-Made | 22,452 | 16,084 | | 12,747 | | 2,507 | 3,700 | | | | 3,303 | | |
| 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 | 148,268,597 | 138,696,118 | | 44,434,251 | 78,657,510 | 100,065,924 | 105,437,162 | 3,043,503 | 3,972,498 | 9,077,769 | 16,094,790 | 2,358,860 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | 61,701,819 | 58,894,321 | | 31,518,198 | 31,394,655 | 43,161,953 | 71,023,603 | 1,802,103 | 4,231,143 | 8,003,000 | 5,406,755 | 1,009,387 | |
| 21.1 Private Passenger Auto Physical Damage | 75,884,401 | 70,625,096 | | 23,582,738 | 46,430,215 | 47,348,582 | 843,147 | 59,744 | 121,346 | 254,704 | 7,824,782 | 1,205,688 | |
| 21.2 Commercial Auto Physical Damage | 19,056,997 | 18,175,168 | | 9,735,556 | 9,778,457 | 9,427,538 | 633,932 | 8,366 | (20,109) | 138,648 | 1,595,310 | 309,978 | |
| 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) | 313,090,030 | 294,486,005 | | 113,250,732 | 173,624,115 | 206,998,185 | 182,867,483 | 5,387,715 | 8,784,437 | 17,858,791 | 31,738,492 | 5,013,038 | |
| 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 \$ 3,071,382

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Delaware | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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 | | | | | | | | | | | | | 25,736 |
| 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) | | | | | | | | | | | | | 25,736 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | District of Columbia | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 | |
|---|------------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|---------|
| 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 | 9,187 | | 9,092 | | 5,000 | 966 | 1,129 | 503 | | 3 | 1,378 | | 349 | |
| 5.1 Commercial Multiple Peril (Non-Liability Portion) | | | | | | | | | | | | | | |
| 5.2 Commercial Multiple Peril (Liability Portion) | | | | | | | | | | | | | | |
| 6. Mortgage Guaranty | | | | | | | | | | | | | | |
| 8. Ocean Marine | | | | | | | | | | | | | | |
| 9. Inland Marine | 93 | | 84 | | 57 | | (1) | 4 | | | | 14 | 4 | |
| 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 | 9,698 | | 9,982 | | 5,561 | | 1,920 | 7,266 | | 36 | 203 | 952 | 344 | |
| 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) | 153,304 | | 145,686 | | 42,757 | 64,466 | 42,632 | 86,476 | | 304 | (1,338) | 2,252 | 15,047 | 5,545 |
| 19.2 Other Private Passenger Auto Liability | 7,450,987 | | 6,941,308 | | 2,089,086 | 4,156,561 | 4,595,933 | 3,293,879 | | 122,570 | 128,333 | 265,880 | 747,272 | 289,075 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 4,335,842 | | 4,065,957 | | 1,203,211 | 2,763,573 | 2,720,790 | 197,717 | | 3,535 | 1,851 | 23,171 | 423,505 | 155,557 |
| 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 | |
| 32. Reins nonproportional assumed liability | 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 | |
| 34. Aggregate Write-Ins for Other Lines of Business | | | | | | | | | | | | | | |
| 35. Total (a) | 11,959,111 | | 11,172,109 | | 3,345,673 | 6,985,567 | 7,362,403 | 3,585,845 | | 126,409 | 128,881 | 291,509 | 1,188,168 | 450,873 |
| 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 \$ 149,225

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Florida | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | | | | | | | | | | | | (8,708) | 83,837 |
| 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) | | | | | | | | | | | | (8,708) | 83,837 |
| 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 CASUALTY INSURANCE COMPANY

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 | 24260 |
|---|------|---|---|-----------------------------------|--|---------------------------------------|---|-----------------------------|---------------------------|---|--|--|--|
| Line of Business | | Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken | | 3 1 Direct Premiums Written | 4 2 Dividends Paid or Credited to Policyholders on Direct Business | 5 Direct Unearned Premium Reserves | 6 Direct Losses Paid (deducting salvage) | 7 Direct Losses Incurred | 8 Direct Losses Unpaid | 9 Direct Defense and Cost Containment Expense Paid | 10 Direct Defense and Cost Containment Expense Incurred | 11 Direct Defense and Cost Containment Expense Unpaid | 12 Commissions and Brokerage Expenses |
| | | 1 Direct Premiums Written | 2 Dividends Paid or Credited to Policyholders on Direct Business | | | | | | | | | | |
| 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 | | | | | | | | (2,427) | (2,427) | | | | 45,400 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | | (863) | (863) | | | | |
| 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 | | | | | | | | (16,396) | (16,396) | | | | |
| 35. Total (a) | | | | | | | | | | (15) | (15) | | 45,400 |
| 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 CASUALTY INSURANCE COMPANY

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 | 24260 |
|---|-----------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|---------|--|--------------------------------|
| 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 | 547,922 | 536,670 | | | 276,047 | 631,130 | 649,536 | 31,415 | | | 859 | 2,082 | 57,322 | 30,603 |
| 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 | 274,722 | 273,338 | | | 135,580 | 30,833 | 97,246 | 202,362 | 26,677 | 52,909 | 76,506 | 28,350 | 15,362 | |
| 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) | 67,488 | 67,615 | | | 32,693 | 16,011 | 15,767 | 15,248 | (32) | (15) | (3,497) | 2,151 | 1,198 | |
| 19.2 Other Private Passenger Auto Liability | 757,504 | 735,997 | | | 383,940 | 393,816 | 473,843 | 480,934 | 15,709 | 18,947 | 22,013 | 74,590 | 37,177 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 581,145 | 536,810 | | | 300,852 | 422,965 | 434,402 | 22,115 | 18 | | 1,465 | 63,632 | 30,406 | |
| 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) | 2,228,780 | 2,150,431 | | | 1,129,112 | 1,494,755 | 1,670,795 | 752,074 | 42,373 | 72,700 | 98,569 | 226,044 | 114,747 | |
| 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 \$ 14,519

(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 CASUALTY INSURANCE COMPANY

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 | 24260 | |
|---|------|--------------------------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | | | | | | | | | | | | | | 4,755 |
| 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. | |
| 32. Reins nonproportional assumed liability | XXX. | | XXX. | | XXX. | | XXX. | | XXX. | | XXX. | | XXX. | |
| 33. Reins nonproportional assumed financial lines | XXX. | | XXX. | | XXX. | | XXX. | | XXX. | | XXX. | | XXX. | |
| 34. Aggregate Write-Ins for Other Lines of Business | | | | | | | | | | | | | | |
| 35. Total (a) | | | | | | | | | | | | | | 4,755 |
| 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 CASUALTY INSURANCE COMPANY

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 | 24260 | |
|---|------|---|--------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | | | | | | | | | (27) | 8 | (20) | (22) | 1 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | 6,675 |
| 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) | | | | | | | | | (990) | (1,017) | 8 | (20) | (22) |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Indiana | DURING THE YEAR 2023 | | | | | | | NAIC Company Code | 24260 | |
|---|------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | | | | | | | | | 16,518 | 16,518 | | | 41,596 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | | | 20 | 20 | | | |
| 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 | | | | | | | | | 16,538 | 16,538 | | | |
| 35. Total (a) | | | | | | | | | | | | | 41,596 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Iowa | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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) | | | | | | | | | | | | | 9,080 |
| 19.2 Other Private Passenger Auto Liability | | | | | | | (100) | (100) | | | | | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | (984) | (984) | | | | | |
| 21.2 Commercial Auto Physical Damage | | | | | | | | | | | | | |
| 22. Aircraft (all perils) | | | | | | | | | | | | | |
| 23. Fidelity | | | | | | | (11,526) | (11,526) | | | | | |
| 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 | | | | | | | (12,609) | (12,609) | | | | | |
| 35. Total (a) | | | | | | | | | | | | | 9,080 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Kansas | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|-------|
| 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) | | | | | | | | 69 | | | | | |
| 19.2 Other Private Passenger Auto Liability | | | | | | | | (444) | ...(23) | | | | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | 8 | 3 | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | (37) | 14 | | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | | 26 | ...(6) | | | | |
| 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 | | | | | | | | (348) | 138 | | | | |
| 35. Total (a) | | | | | | | | | | (45) | 17 | | |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Kentucky | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|-------|
| 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 | 582,684 | 373,552 | | 362,027 | 79,315 | 74,000 | 34,014 | | (426) | 1,138 | 74,273 | 12,762 | |
| 5.1 Commercial Multiple Peril (Non-Liability Portion) | | | | | | | | | | | | | |
| 5.2 Commercial Multiple Peril (Liability Portion) | | | | | | | | | | | | | |
| 6. Mortgage Guaranty | | | | | | | | | | | | | |
| 8. Ocean Marine | | | | | | | | | | | | | |
| 9. Inland Marine | 3,119,497 | 2,955,314 | | 1,430,494 | 968,229 | 991,971 | 83,572 | 6,462 | 7,132 | 6,430 | 316,745 | 69,277 | |
| 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 | 840,488 | 810,820 | | 391,422 | 471,512 | 175,397 | 70,663 | 17,155 | (19,652) | 14,289 | 85,750 | 18,611 | |
| 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) | 18,153,219 | 18,119,406 | | 5,168,062 | 10,962,951 | 11,976,494 | 301,950 | 20,441 | 68,705 | 382,159 | 1,866,245 | 432,579 | |
| 19.2 Other Private Passenger Auto Liability | 115,762,644 | 112,591,115 | | 34,383,424 | 67,537,493 | 77,116,683 | 65,763,364 | 1,323,884 | 1,911,071 | 3,822,233 | 12,670,224 | 2,756,519 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 80,361,924 | 74,601,788 | | 26,465,700 | 52,406,961 | 52,780,005 | 2,358,464 | 59,974 | 133,231 | 301,609 | 8,369,576 | 1,770,420 | |
| 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) | 218,820,458 | 209,451,995 | | 68,201,129 | 132,422,896 | 143,110,984 | 68,612,026 | 1,427,917 | 2,100,060 | 4,527,859 | 23,382,812 | 5,060,168 | |
| 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 \$ 3,202,448

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Louisiana | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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) | | | | | | | | | | | | | 24,715 |
| 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) | | | | | | | | | | | | | 24,715 |
| 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 CASUALTY INSURANCE COMPANY

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 | 24260 | |
|---|---------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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 | | 198 | 194 | | | | | | | | | 20 | 5 |
| 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 | 337,492 | 350,347 | | 111,052 | 86,728 | 466,455 | 520,576 | 3,893 | 10,828 | 21,650 | 30,086 | 8,689 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 291,741 | 283,184 | | 98,325 | 208,583 | 211,420 | 7,742 | | (7,441) | 528 | 25,526 | 7,482 | |
| 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 | | | | 209,488 | 293,865 | 676,429 | 528,324 | 3,893 | 3,387 | 22,179 | 55,632 | 16,176 | |
| 35. Total (a) | 629,431 | 633,726 | | | | | | | | | | | |
| 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 \$ 6,450

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Maryland | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|-------|
| 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) | 157,313 | 143,436 | | 80,242 | 41,647 | 60,732 | 25,751 | | 2,954 | 4,620 | 19,359 | 3,313 | |
| 5.2 Commercial Multiple Peril (Liability Portion) | 460,786 | 361,589 | | 241,099 | 216,168 | 173,252 | 165,617 | | (6,524) | 23,223 | 57,611 | 9,696 | |
| 6. Mortgage Guaranty | | | | | | | | | | | | | |
| 8. Ocean Marine | | | | | | | | | | | | | |
| 9. Inland Marine | 5,285,979 | 6,222,865 | | 2,684,807 | 2,793,473 | 2,121,308 | 1,046,724 | 27,294 | 22,168 | 60,235 | 452,550 | 111,386 | |
| 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 | 865,236 | 974,861 | | 447,656 | | 20,322 | 104,634 | | 561 | 3,627 | 71,094 | 18,225 | |
| 17.2 Other Liability - Claims-Made | 37,059 | 35,363 | | 19,182 | | 4,882 | 8,587 | | | | 5,407 | .780 | |
| 17.3 Excess Workers' Compensation | | | | | | | | | | | | | |
| 18.1 Products Liability - Occurrence | | | | | | | | | | | | | |
| 18.2 Products Liability - Claims-Made | | | | | | | | | | | | | |
| 19.1 Private Passenger Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.2 Other Private Passenger Auto Liability | | | | | | | | | | | | | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | 3,324,294 | 3,349,757 | | 1,683,635 | 1,311,233 | 866,907 | 1,228,053 | 15,359 | 23,734 | 195,840 | 261,558 | 69,956 | |
| 19.4 Other Commercial Auto Liability | 75,178,609 | 78,589,215 | | 38,330,397 | 39,423,498 | 41,158,076 | 58,183,734 | 1,041,781 | 1,685,626 | 6,820,361 | 6,385,015 | 1,582,292 | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | | | | | | | |
| 21.2 Commercial Auto Physical Damage | 28,137,673 | 28,034,525 | | 14,187,716 | 17,025,768 | 16,449,094 | 1,347,509 | 39,380 | (20,835) | 153,344 | 2,298,545 | .592,159 | |
| 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) | 113,446,950 | 117,711,612 | | 57,674,733 | 60,811,788 | 60,854,573 | 62,110,609 | 1,123,814 | 1,707,683 | 7,261,251 | 9,551,140 | 2,394,507 | |
| 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 \$ 615,902

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Massachusetts | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|-------|
| 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 | 82,851 | 74,617 | | | | | | | | | | | |
| 5.1 Commercial Multiple Peril (Non-Liability Portion) | 433,407 | 358,480 | | | | | | | | | | | |
| 5.2 Commercial Multiple Peril (Liability Portion) | 2,398,997 | 1,786,929 | | | | | | | | | | | |
| 6. Mortgage Guaranty | | | | | | | | | | | | | |
| 8. Ocean Marine | | | | | | | | | | | | | |
| 9. Inland Marine | 4,896,663 | 4,512,157 | | | | | | | | | | | |
| 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 | 1,559,644 | 1,373,525 | | | | | | | | | | | |
| 17.2 Other Liability - Claims-Made | 58,833 | 49,093 | | | | | | | | | | | |
| 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) | 6,297,030 | 5,805,785 | | | | | | | | | | | |
| 19.2 Other Private Passenger Auto Liability | 64,932,536 | 61,625,256 | | | | | | | | | | | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | 1,485,172 | 1,373,895 | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | 38,643,537 | 36,466,426 | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 50,748,156 | 46,728,584 | | | | | | | | | | | |
| 21.2 Commercial Auto Physical Damage | 19,704,863 | 17,862,217 | | | | | | | | | | | |
| 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) | 191,241,687 | 178,016,963 | | 78,050,108 | 101,438,756 | 115,438,494 | 65,423,342 | 1,715,173 | 2,849,455 | 6,641,231 | 18,788,174 | 5,799,837 | |
| 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 \$ 2,034,685

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF Michigan | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|------|---|--------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|
| 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 | | | | | | | | 1,000,000 | 1,000,000 | | | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | .666 |
| 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 | | | | | | | | 1,000,000 | 1,000,000 | | | |
| 35. Total (a) | | | | | | | | | | | | 666 |
| 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 CASUALTY INSURANCE COMPANY

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 | 24260 | |
|---|------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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) | | | | | | | | | | | | | 10,691 |
| 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) | | | | | | | | | | | | | 10,691 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Mississippi | DURING THE YEAR 2023 | | | | | | | NAIC Company Code | 24260 | |
|---|------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | | | | | | | | | | | | | 16,065 |
| 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) | | | | | | | | | | | | | 16,065 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Missouri | DURING THE YEAR 2023 | | | | | | | NAIC Company Code | 24260 | | |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|------------|-----------|
| 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 | 6,670,553 | 6,680,752 | | | | | | | | | | | | |
| 5.1 Commercial Multiple Peril (Non-Liability Portion) | 474,211 | 322,507 | | 3,330,270 | 5,781,541 | 5,548,038 | 506,836 | 33,336 | 30,278 | 68,582 | 565,281 | 139,843 | | |
| 5.2 Commercial Multiple Peril (Liability Portion) | 654,221 | 477,820 | | 265,072 | 265,056 | 198,998 | 46,055 | | (9,634) | 8,502 | 67,429 | 9,929 | | |
| 6. Mortgage Guaranty | | | | 361,529 | 78,277 | 231,141 | 329,336 | .861 | 21,646 | 46,680 | 81,591 | 13,701 | | |
| 8. Ocean Marine | | | | | | | | | | | | | | |
| 9. Inland Marine | 9,867,984 | 9,799,468 | | | 4,735,306 | 4,472,340 | 4,239,184 | 1,138,799 | 10,411 | 5,316 | 54,590 | 964,001 | 206,981 | |
| 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 | 2,194,076 | 2,216,845 | | | 1,044,174 | 1,259,016 | 1,489,536 | 1,326,553 | 3,696 | 71,604 | 100,861 | 215,107 | 46,019 | |
| 17.2 Other Liability - Claims-Made | 29,963 | 22,207 | | | 14,845 | | 2,416 | 6,042 | | | | 4,403 | 628 | |
| 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 | 243,248,934 | 226,033,573 | | | 74,767,392 | 121,843,673 | 147,793,778 | 130,871,751 | 1,683,149 | 2,161,790 | 7,658,590 | 27,035,326 | 5,096,757 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | 82,360,412 | 81,460,537 | | | | 40,583,454 | 41,380,635 | 48,164,167 | 83,588,511 | 2,139,965 | 3,226,766 | 8,044,795 | 7,847,484 | 1,726,988 |
| 21.1 Private Passenger Auto Physical Damage | 185,861,741 | 167,000,826 | | | | 62,422,702 | 114,824,178 | 115,917,052 | 4,393,185 | 90,991 | 190,495 | 465,994 | 19,587,530 | 3,893,265 |
| 21.2 Commercial Auto Physical Damage | 41,615,074 | 38,852,611 | | | | 20,876,620 | 21,340,976 | 21,013,213 | 1,190,715 | 49,890 | (1,894) | 208,407 | 3,994,351 | 872,084 |
| 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) | 572,977,171 | 532,867,145 | | | 208,401,363 | 311,396,566 | 344,776,521 | 223,510,972 | 4,016,042 | 5,703,560 | 16,692,895 | 60,362,504 | 12,006,195 | |
| 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 \$ 6,880,045

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Montana | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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 | | 838 | 736 | | | | | | | | | 1 | 84 |
| 10. Financial Guaranty | | | | | | | | | | | | | 36 |
| 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 | | 2,703 | 2,749 | | | | | | | | | 10 | 286 |
| 17.2 Other Liability - Claims-Made | | | | | | | | | | | | | 126 |
| 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 | | 36,349 | 37,478 | | | | | | | | | | 1,808 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | 81,160 | 83,999 | | | | | | | | | | 3,844 |
| 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 |
| 32. Reins nonproportional assumed liability | | | XXX | | | | | | | | | | XXX |
| 33. Reins nonproportional assumed financial lines | | XXX | XXX | | | | | | | | | | XXX |
| 34. Aggregate Write-Ins for Other Lines of Business | | | | | | | | | | | | | |
| 35. Total (a) | | 121,049 | 124,962 | | 55,784 | 141,585 | 145,313 | 25,648 | | (146) | 568 | 13,069 | 5,815 |
| 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 \$ 546

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Nebraska | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 | |
|---|------|--------------------------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | | | | | | | | | | | | | | 8,865 |
| 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) | | | | | | | | | | | | | | 8,865 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Nevada | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|------|---|---|-----------------------------------|--|---------------------------------------|---|-----------------------------|---------------------------|---|--|--|--|
| Line of Business | | Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken | | 3 1 Direct Premiums Written | 4 2 Dividends Paid or Credited to Policyholders on Direct Business | 5 Direct Unearned Premium Reserves | 6 Direct Losses Paid (deducting salvage) | 7 Direct Losses Incurred | 8 Direct Losses Unpaid | 9 Direct Defense and Cost Containment Expense Paid | 10 Direct Defense and Cost Containment Expense Incurred | 11 Direct Defense and Cost Containment Expense Unpaid | 12 Commissions and Brokerage Expenses |
| | | 1 Direct Premiums Written | 2 Dividends Paid or Credited to Policyholders on Direct Business | | | | | | | | | | |
| 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 | | | | | | | | (500) | (500) | (15) | (15) | | 8,202 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | (933) | (933) | | | | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | | | (750) | (750) | | | |
| 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 | | | | | | | | (2,183) | (2,183) | (271) | (271) | | |
| 35. Total (a) | | | | | | | | | | | | | 8,202 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF New Hampshire | | DURING THE YEAR 2023 | | | | | | | NAIC Company Code | 24260 | |
|---|--------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | 6,853 | 6,853 | | | 2,695 | | | 112 | 1,005 | | (12) | 75 | 548 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | 3,243 |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 6,219 | 5,719 | | | 2,572 | 1,479 | 1,453 | (317) | | | 1 | 4 | 498 |
| 21.2 Commercial Auto Physical Damage | | | | | | | | | | | | | 2,875 |
| 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) | 13,073 | 12,572 | | | 5,267 | 1,479 | 1,565 | 688 | | (11) | 79 | 1,046 | 6,118 |
| 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 \$ 124

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF New Jersey | | DURING THE YEAR 2023 | | | | | | | NAIC Company Code | 24260 | |
|---|------|---|--------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | | | | | | | 1,300,940 | | 1,508,077 | .853,221 | 72,777 | 72,777 | 10,000 |
| 17.3 Excess Workers' Compensation | | | | | | | | | | | | | |
| 18.1 Products Liability - Occurrence | | | | | | | | | | | | | |
| 18.2 Products Liability - Claims-Made | | | | | | | | | | | | | |
| 19.1 Private Passenger Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.2 Other Private Passenger Auto Liability | | | | | | | | | | | | | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | 2,690 | | 2,690 | | | | .380 |
| 19.4 Other Commercial Auto Liability | | | | | | | | 7,141 | | 5,563 | | | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | | | | | .262 | | |
| 21.2 Commercial Auto Physical Damage | | | | | | | | | | | | (578) | |
| 22. Aircraft (all perils) | | | | | | | | | | | | | |
| 23. Fidelity | | | | | | | | (1,564) | | (1,564) | | | |
| 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 | | | | | | | 1,309,206 | 1,514,766 | 853,221 | 73,039 | 72,199 | 10,000 | |
| 35. Total (a) | | | | | | | | | | | | | 380 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | New Mexico | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|-------|
| 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 | 63 | 64 | | | 11 | | | | 2 | | | 8 | |
| 10. Financial Guaranty | | | | | | | | | | | | 5 | |
| 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 | 128,550 | 133,395 | | 36,740 | 34,434 | 130,136 | 235,416 | | 1,774 | 8,816 | 16,423 | 8,958 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 101,899 | 103,335 | | 30,425 | 50,524 | 57,165 | 1,320 | .266 | .322 | .130 | 13,110 | .7,060 | |
| 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 | | | | 67,176 | 84,958 | 187,300 | 236,738 | 266 | 2,095 | 8,946 | 29,540 | 16,023 | |
| 35. Total (a) | 230,512 | 236,794 | | | | | | | | | | | |
| 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 \$ 1,698

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | New York | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|-------|
| 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 | 5,002,626 | 5,714,076 | | 2,416,266 | 3,163,586 | 2,764,601 | 1,077,559 | 51,340 | 41,912 | 47,608 | 467,103 | 113,470 | |
| 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 | 1,565,085 | 1,794,993 | | 711,669 | 960,000 | 707,058 | 2,736,856 | 36,858 | 113,041 | 143,524 | 134,224 | 35,508 | |
| 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) | 142,809,632 | 135,458,595 | | 37,262,708 | .82,791,128 | 86,201,082 | 86,058,757 | 11,680,096 | 13,544,533 | 25,970,459 | 14,362,482 | 4,295,377 | |
| 19.2 Other Private Passenger Auto Liability | 276,127,627 | 270,371,250 | | 71,986,982 | 189,847,586 | 210,553,425 | 239,782,812 | 8,707,466 | 7,761,449 | 24,544,556 | 28,787,394 | 10,180,922 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | 22,701,304 | 23,500,748 | | 11,238,199 | 18,454,324 | 21,011,322 | 17,518,328 | 1,444,931 | 2,026,779 | 4,473,222 | 2,049,338 | 678,530 | |
| 19.4 Other Commercial Auto Liability | 220,784,746 | 229,952,017 | | 110,347,164 | 116,914,466 | 185,752,066 | 321,016,164 | 5,367,222 | 9,376,936 | 23,090,474 | 20,747,278 | 6,352,466 | |
| 21.1 Private Passenger Auto Physical Damage | 217,755,851 | 206,440,568 | | 58,907,979 | 159,268,436 | 157,212,486 | 2,865,381 | 98,208 | 19,643 | 483,157 | 21,957,118 | 4,935,631 | |
| 21.2 Commercial Auto Physical Damage | 51,577,331 | 51,341,705 | | 26,170,222 | 35,010,929 | 35,056,694 | 2,502,366 | 72,975 | 2,093 | 279,141 | 4,748,918 | 1,169,014 | |
| 22. Aircraft (all perils) | | | | | | | | | | | | | |
| 23. Fidelity | | | | | | | | (232) | (232) | (513) | (513) | | |
| 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) | 938,324,201 | 924,573,950 | | 319,041,189 | 606,410,223 | 699,258,502 | 673,558,224 | 27,458,583 | 32,885,875 | 79,032,141 | 93,253,856 | 27,760,919 | |
| 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 \$ 8,544,505

(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 CASUALTY INSURANCE COMPANY

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 | 24260 |
|---|-------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | | | | | | | | | | | | | |
| 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) | (902) | (902) | | | | | | | | | | | |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | North Dakota | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | | | | | | | | | | | | | 11,648 |
| 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) | | | | | | | | | | | | | 11,648 |
| 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 CASUALTY INSURANCE COMPANY

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 | 24260 | |
|---|------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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 | | 1,429 | 1,666 | | | | | | | | | | |
| 10. Financial Guaranty | | | | | | | | | | | | | |
| 11.1 Medical Professional Liability - Occurrence | | | | | | | | | | | | | |
| 11.2 Medical Professional Liability - Claims-Made | | 34,425 | 34,429 | | | | | | | | | | |
| 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 | | 900,000 | 902,466 | | | | | | | | | | |
| 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 | | 5,029,308 | 5,098,452 | | | | | | | | | | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | 142,998 | 137,728 | | | | | | | | | | |
| 21.2 Commercial Auto Physical Damage | | 5,076,139 | 5,050,978 | | | | | | | | | | |
| 22. Aircraft (all perils) | | | | | | | | | | | | | |
| 23. Fidelity | | | | | | | | | | | | | |
| 24. Surety | | 7,110 | 408 | | | | | | | | | | |
| 26. Burglary and Theft | | | | | | | | | | | | | |
| 27. Boiler and Machinery | | | | | | | | | | | | | |
| 28. Credit | | | | | | | | | | | | | |
| 29. International | | | | | | | | | | | | | |
| 30. Warranty | | | | | | | | | | | | | |
| 31. Reins nonproportional assumed property | | XXX | XXX | | | | | | | | | | |
| 32. Reins nonproportional assumed liability | | XXX | XXX | | | | | | | | | | |
| 33. Reins nonproportional assumed financial lines | | XXX | XXX | | | | | | | | | | |
| 34. Aggregate Write-Ins for Other Lines of Business | | | | | | | | | | | | | |
| 35. Total (a) | | 11,385,673 | 11,413,232 | | | | | | | | | | |
| 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 \$ 156,585

(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 CASUALTY INSURANCE COMPANY

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 | 24260 |
|---|------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | | | | | | | | | | | | | 8,509 |
| 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) | | | | | | | | | | | | | 8,509 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Oregon | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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) | | | | | | | (476) | (476) | | | | | |
| 19.2 Other Private Passenger Auto Liability | | | | | | | (837) | (837) | | | | | 4,150 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | (139) | (139) | | | | | |
| 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 | | | | | | | (1,452) | (1,452) | | | | | |
| 35. Total (a) | | | | | | | | | | | | | 4,150 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Pennsylvania | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 | |
|---|------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|-------|
| 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 | | 275 | 263 | | | 95 | | | | 9 | | | 28 | |
| 10. Financial Guaranty | | | | | | | | | | | | | 10 | |
| 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 | | | | | | | | | | 1,002 | | | 1,500 | |
| 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) | | 222,795 | 238,087 | | 51,251 | 56,697 | 34,795 | 85,157 | 190 | (5,682) | 11,595 | 22,585 | 9,233 | |
| 19.2 Other Private Passenger Auto Liability | | 1,549,769 | 1,598,921 | | 376,909 | 647,720 | 573,147 | 853,924 | 94,370 | (8,402) | 162,987 | 157,788 | 63,851 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | 1 | 10 | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | (287) | 212 | (21) | 68 | (379) |
| 21.1 Private Passenger Auto Physical Damage | | 1,912,008 | 1,934,726 | | 462,294 | 676,933 | 619,382 | (56,273) | 330 | (604) | 2,397 | 194,182 | 79,776 | |
| 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) | | 3,684,847 | 3,771,996 | | 890,549 | 1,381,269 | 1,226,955 | 884,041 | 94,890 | (14,709) | 178,547 | 374,205 | 152,870 | |
| 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 \$ 41,697

(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 CASUALTY INSURANCE COMPANY

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 | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|-----------|
| 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 | 66,333 | 59,685 | | | 34,058 | 14,148 | 15,499 | 3,348 | 4 | 27 | 9,952 | 1,207 | |
| 5.1 Commercial Multiple Peril (Non-Liability Portion) | | | | | | | | | | | | | |
| 5.2 Commercial Multiple Peril (Liability Portion) | | | | | | | | | | | | | |
| 6. Mortgage Guaranty | | | | | | | | | | | | | |
| 8. Ocean Marine | | | | | | | | | | | | | |
| 9. Inland Marine | 3,966 | 4,164 | | | 1,356 | | 14 | 164 | 1 | 5 | 450 | 80 | |
| 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) | 110,198,674 | 104,407,538 | | | 30,483,162 | 194,884 | 252,425 | 207,296 | 26,982 | 38,662 | 68,954 | | |
| 19.2 Other Private Passenger Auto Liability | | | | | | 56,636,254 | 68,523,867 | 61,852,827 | 1,168,989 | 1,647,485 | 4,852,730 | 12,233,955 | 2,361,259 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | (2,067) | (2,067) | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 46,916,445 | 42,739,911 | | | 13,905,251 | 32,683,478 | 33,872,301 | 1,477,914 | 50,042 | 48,694 | 132,840 | 4,852,693 | 1,004,451 |
| 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) | 157,185,418 | 147,211,298 | | | 44,423,827 | 89,526,697 | 102,662,040 | 63,541,549 | 1,246,013 | 1,734,846 | 5,054,556 | 17,097,049 | 3,366,998 |
| 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 \$ 1,090,635

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | South Carolina | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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) | | | | | | | | | | | | | 1,230 |
| 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) | | | | | | | | | | | | | 1,230 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | South Dakota | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | | | | | | | | | | | | | 12,612 |
| 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) | | | | | | | | | | | | | 12,612 |
| 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF Tennessee | | DURING THE YEAR 2023 | | | | | | | NAIC Company Code | 24260 | |
|---|------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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. Farmers 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 | | 1,388 | 1,189 | | | | | | | | | 2 | 138 |
| 10. Financial Guaranty | | | | | | | | | | | | | 38 |
| 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 | | | | | | | | | (703) | 11,475 | | 1,188 | 16,120 |
| 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) | | | | | | | | | 61,026 | 202,615 | 147,349 | 958 | 19,889 |
| 19.2 Other Private Passenger Auto Liability | | 41,292,168 | 36,645,797 | | 12,745,217 | 21,514,537 | 28,357,288 | 19,484,522 | | 386,962 | 663,558 | 1,378,075 | 4,238,680 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | 1,114,929 |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | 32,245,208 | 27,671,830 | | 10,422,006 | 20,217,627 | 21,247,763 | 1,535,528 | | 17,775 | 46,480 | 115,330 | 3,307,865 |
| 21.2 Commercial Auto Physical Damage | | | | | | | | | | | | | 869,761 |
| 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 | | | | | |
| 32. Reins nonproportional assumed liability | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | | | |
| 33. Reins nonproportional assumed financial lines | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | | | |
| 34. Aggregate Write-Ins for Other Lines of Business | | | | | | | | | | | | | |
| 35. Total (a) | | 73,538,763 | 64,318,816 | | 23,167,551 | 41,787,093 | 49,800,875 | 21,178,915 | | 405,695 | 731,116 | 1,529,854 | 7,546,683 |
| 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 \$ 885,368

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF Texas | | DURING THE YEAR 2023 | | | | | | | NAIC Company Code | 24260 | |
|---|------------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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 | 3,370,026 | 3,042,690 | | | 1,733,074 | 437,722 | 604,317 | 432,147 | 216 | 5,512 | 14,735 | 505,554 | 84,555 |
| 5.1 Commercial Multiple Peril (Non-Liability Portion) | | | | | | | | | | | | | |
| 5.2 Commercial Multiple Peril (Liability Portion) | | | | | | | | | | | | | |
| 6. Mortgage Guaranty | | | | | | | | | | | | | |
| 8. Ocean Marine | | | | | | | | | | | | | |
| 9. Inland Marine | 34,728,514 | 33,174,309 | | | 16,318,251 | 10,786,783 | 10,917,440 | 1,111,440 | 37,015 | 30,747 | 67,408 | 4,157,315 | 868,306 |
| 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 | 5,215,846 | 5,136,309 | | | 2,458,124 | 1,707,651 | 2,265,097 | 2,469,831 | 293,195 | 343,155 | 303,474 | 617,779 | 131,752 |
| 17.2 Other Liability - Claims-Made | | | | | | | | | | | | | |
| 17.3 Excess Workers' Compensation | | | | | | | | | | | | | |
| 18.1 Products Liability - Occurrence | | | | | | | | | | | | | |
| 18.2 Products Liability - Claims-Made | | | | | | | | | | | | | |
| 19.1 Private Passenger Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.2 Other Private Passenger Auto Liability | | | | | | | | | | | | | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | | | | | | | |
| 21.2 Commercial Auto Physical Damage | | | | | | | | | | | | | |
| 22. Aircraft (all perils) | | | | | | | | | | | | | |
| 23. Fidelity | | | | | | | | | | | | | |
| 24. Surety | | | | | | | | | | | | | |
| 26. Burglary and Theft | | | | | | | | | | | | | |
| 27. Boiler and Machinery | | | | | | | | | | | | | |
| 28. Credit | | | | | | | | | | | | | |
| 29. International | | | | | | | | | | | | | |
| 30. Warranty | | | | | | | | | | | | | |
| 31. Reins nonproportional assumed property | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 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) | 43,314,386 | 41,353,308 | | | 20,509,449 | 12,930,581 | 13,785,280 | 4,013,418 | 330,427 | 379,414 | 385,616 | 5,280,648 | 1,084,613 |
| 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 \$ 394,298

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF Utah | | DURING THE YEAR 2023 | | | | | | | NAIC Company Code | 24260 | |
|---|---------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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 | 2,580 | 2,687 | | | 1,250 | 2,160 | 2,184 | (84) | | | 3 | 273 | 79 |
| 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 | 2,622 | 2,778 | | | 952 | | 45 | 263 | | (3) | 15 | 230 | 87 |
| 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) | 5,230 | 5,575 | | | 1,756 | (206) | 14 | (1,122) | | (7) | 41 | 693 | 175 |
| 19.2 Other Private Passenger Auto Liability | 73,242 | 77,379 | | | 23,614 | 26,870 | 39,880 | 50,114 | | (146) | 1,887 | 9,899 | 2,440 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 60,170 | 64,344 | | | 22,903 | 48,536 | 49,367 | (314) | | (16) | 63 | 6,811 | 2,022 |
| 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) | 143,844 | 152,763 | | | 50,476 | 77,360 | 91,491 | 48,857 | | (171) | 2,010 | 17,906 | 4,803 |
| 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 \$ 922

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Vermont | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|-------|---|-----------------------------|--|----------------------------------|--|------------------------|----------------------|--|--|--|------------------------------------|--------------------------|
| 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 | | | | | | | | | | | | | |
| 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) | (316) | (316) | | | | | | | | | | | |
| 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 CASUALTY INSURANCE COMPANY

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 | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|---------|
| 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 | | | 78 | | | | | | | | | | |
| 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 | | | 99 | | | | | | | | | | |
| 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) | | 12,773 | 7,570 | | | | | | | | | | |
| 19.2 Other Private Passenger Auto Liability | | 10,086,451 | 6,096,291 | | | | | | | | | | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | (19) | 3,990,160 | 1,601,788 | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | (7,232) | 154,776 | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | 6,535,474 | 3,954,034 | | | | | | | | | | |
| 21.2 Commercial Auto Physical Damage | | | (1,710) | 2,581,440 | 2,480,569 | | | | | | | | |
| 22. Aircraft (all perils) | | | | 52,334 | | | | | | | | | |
| 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 | | | | | | | | | | |
| 32. Reins nonproportional assumed liability | XXX | | XXX | | | | | | | | | | |
| 33. Reins nonproportional assumed financial lines | XXX | | XXX | | | | | | | | | | |
| 34. Aggregate Write-Ins for Other Lines of Business | | | | | | | | | | | | | |
| 35. Total (a) | | 16,625,737 | 10,265,444 | | 6,576,804 | 4,813,215 | 8,991,918 | 8,246,965 | 3,606 | 206,733 | 234,352 | 1,882,356 | 579,893 |
| 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 \$ 149,306

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF Washington | | DURING THE YEAR 2023 | | | | | | | NAIC Company Code | 24260 | |
|---|-------------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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 | 578,221 | 565,449 | | | 289,068 | 201,892 | 539,401 | 386,797 | 922 | 17,631 | 18,355 | 86,719 | 12,272 |
| 5.1 Commercial Multiple Peril (Non-Liability Portion) | | | | | | | | | | | | | |
| 5.2 Commercial Multiple Peril (Liability Portion) | | | | | | | | | | | | | |
| 6. Mortgage Guaranty | | | | | | | | | | | | | |
| 8. Ocean Marine | | | | | | | | | | | | | |
| 9. Inland Marine | 4,750,708 | 4,494,561 | | | 2,322,422 | 2,235,875 | 2,122,275 | 154,116 | 5,266 | 1,304 | 11,685 | 554,409 | 100,907 |
| 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 | 2,039,680 | 2,016,038 | | | 987,171 | 663,950 | 452,834 | 698,239 | 2,206 | (2,839) | 66,046 | 236,367 | 43,306 |
| 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) | 16,158,816 | 15,723,340 | | | 5,474,775 | 11,575,359 | 12,231,387 | 1,299,648 | 191,779 | 206,041 | 422,779 | 1,708,983 | 342,759 |
| 19.2 Other Private Passenger Auto Liability | 179,992,783 | 177,324,996 | | | 57,937,897 | 118,554,887 | 142,623,065 | 150,715,905 | 2,637,017 | 3,777,472 | 10,889,551 | 19,360,959 | 3,818,833 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | 10,510 | 10,627 | | | 3,149 | | 2,311 | 5,306 | | 481 | 708 | 1,045 | 223 |
| 19.4 Other Commercial Auto Liability | 219,599 | 219,104 | | | 84,547 | 19,566 | 673,185 | 783,555 | 7,391 | 15,945 | 38,067 | 21,236 | 4,658 |
| 21.1 Private Passenger Auto Physical Damage | 117,769,708 | 110,861,998 | | | 38,644,673 | 85,000,493 | 82,652,990 | 2,752,789 | 194,393 | 219,294 | 506,008 | 11,605,095 | 2,498,279 |
| 21.2 Commercial Auto Physical Damage | 78,168 | 76,136 | | | 32,647 | 22,642 | 22,973 | 7,775 | | (190) | 571 | 7,688 | 1,656 |
| 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) | 321,598,193 | 311,292,249 | | | 105,776,350 | 218,274,535 | 241,320,292 | 156,804,130 | 3,038,974 | 4,235,139 | 11,953,768 | 33,582,502 | 6,822,894 |
| 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 \$ 2,729,426

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | West Virginia | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|-------|
| 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 | | | | | | | | | | | | 1,915 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | | | | | | | |
| 21.2 Commercial Auto Physical Damage | | | | | | | | | | | | | |
| 22. Aircraft (all perils) | | | | | | | | | | | | | |
| 23. Fidelity | | | | | | | | | | | | | |
| 24. Surety | | | | | | | | | | | | | |
| 26. Burglary and Theft | | | | | | | | | | | | | |
| 27. Boiler and Machinery | | | | | | | | | | | | | |
| 28. Credit | | | | | | | | | | | | | |
| 29. International | | | | | | | | | | | | | |
| 30. Warranty | | | | | | | | | | | | | |
| 31. Reins nonproportional assumed property | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | |
| 32. Reins nonproportional assumed liability | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | |
| 33. Reins nonproportional assumed financial lines | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | XXX. | |
| 34. Aggregate Write-Ins for Other Lines of Business | | | | | | | | | | | | | |
| 35. Total (a) | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | |
| 3401. | | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page | | | | | | | | | | | | | |
| 3499. Totals (Lines 3401 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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Wisconsin | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 | |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|--------|--------|
| 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 | 67,537 | 66,198 | | | 18,004 | .265 | 1,626 | 8,844 | | (29) | .628 | 5,935 | 6,115 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | 67,263 | 65,560 | | | 17,542 | 11,570 | 27,040 | 12,128 | | (80) | .137 | .259 | 6,011 | 6,196 |
| 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) | 134,801 | 131,758 | | | 35,546 | 11,835 | 28,666 | 20,972 | | (80) | 108 | 888 | 11,947 | 12,311 |
| 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 \$ 942

(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 CASUALTY INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| NAIC Group Code | 0155 | BUSINESS IN THE STATE OF | Wyoming | DURING THE YEAR 2023 | | | | | | | | NAIC Company Code | 24260 |
|---|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|-------|
| 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 | | | | | | | | | | | | | 3,704 |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | | | | | | | | | | | | | |
| 19.4 Other Commercial Auto Liability | | | | | | | | | | | | | |
| 21.1 Private Passenger Auto Physical Damage | | | | | | | | (2,600) | (2,600) | | | | |
| 21.2 Commercial Auto Physical Damage | | | | | | | | | | | | | |
| 22. Aircraft (all perils) | | | | | | | | | | | | | |
| 23. Fidelity | | | | | | | | (9,597) | (9,597) | | | | |
| 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 | | | | | | | | (12,197) | (12,197) | | | | |
| 35. Total (a) | | | | | | | | | | | | | 3,704 |
| 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 CASUALTY INSURANCE COMPANY

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 | 24260 |
|---|---------------|---|-----------------------------|---|---------------------------------------|---|-----------------------------|---------------------------|---|---|--|--|--------------------------------|
| 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. Farmers Multiple Peril | | | | | | | | | | | | | |
| 4. Homeowners Multiple Peril | 11,506,725 | 10,943,393 | | 5,870,144 | 6,642,846 | 6,816,853 | 1,387,103 | 36,238 | 49,925 | 108,884 | 1,277,621 | 255,541 | |
| 5.1 Commercial Multiple Peril (Non-Liability Portion) | 1,224,579 | 935,884 | | 658,771 | 347,947 | 383,729 | 179,331 | | 5,504 | 31,094 | 171,471 | 28,512 | |
| 5.2 Commercial Multiple Peril (Liability Portion) | 3,779,242 | 2,818,850 | | 2,017,538 | 374,581 | 1,755,262 | 2,159,315 | .861 | 189,578 | 301,065 | 509,498 | 92,006 | |
| 6. Mortgage Guaranty | | | | | | | | | | | | | |
| 8. Ocean Marine | | | | | | | | | | | | | |
| 9. Inland Marine | 83,009,020 | 81,801,233 | | 39,794,081 | 34,733,917 | 33,123,086 | 5,756,948 | 169,348 | 128,971 | 313,844 | 9,013,409 | 1,987,802 | |
| 10. Financial Guaranty | | | | | | | | | | | | | |
| 11.1 Medical Professional Liability - Occurrence | | | | | | | | | | | | | |
| 11.2 Medical Professional Liability - Claims-Made | 34,425 | 34,429 | | 2,924 | | 1,911 | | | | (451) | | | .482 |
| 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 | 21,123,345 | 21,146,761 | | 10,149,699 | 8,573,124 | 8,669,900 | 11,695,665 | 493,028 | 657,962 | 1,079,382 | 2,213,864 | 504,015 | |
| 17.2 Other Liability - Claims-Made | 1,048,307 | 1,025,212 | | 153,278 | 30,589,922 | 15,807,132 | 34,052,389 | 73,868 | 136,877 | 339,934 | 21,910 | 46,116 | |
| 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) | 183,895,224 | 175,587,430 | | 50,213,991 | 112,297,614 | 117,010,632 | 92,460,040 | 12,742,448 | 14,704,251 | 27,182,459 | 18,613,290 | 5,273,416 | |
| 19.2 Other Private Passenger Auto Liability | 1,211,662,026 | 1,155,006,211 | | 360,174,541 | 706,453,826 | 840,049,473 | 831,911,815 | 20,435,470 | 23,770,471 | 66,511,031 | 130,636,446 | 31,226,373 | |
| 19.3 Commercial Auto No-Fault (Personal Injury Protection) | 27,521,261 | 28,235,290 | | 13,694,397 | 21,034,821 | 23,213,972 | 19,375,761 | 1,620,453 | 2,224,990 | 4,874,167 | 2,442,642 | 792,891 | |
| 19.4 Other Commercial Auto Liability | 479,023,586 | 485,873,221 | | 240,911,843 | 244,143,932 | 338,855,742 | 557,865,646 | 10,605,413 | 19,519,691 | 49,001,899 | 43,765,487 | 12,006,449 | |
| 21.1 Private Passenger Auto Physical Damage | 860,187,482 | 795,290,975 | | 274,987,433 | 574,385,918 | 576,025,067 | 19,905,048 | .693,653 | .928,953 | 2,584,873 | 88,703,685 | 19,369,514 | |
| 21.2 Commercial Auto Physical Damage | 160,362,661 | 154,581,802 | | .81,143,564 | .91,807,735 | .87,082,946 | .7,061,397 | .199,137 | (50,787) | 938,719 | 14,244,461 | 3,538,583 | |
| 22. Aircraft (all perils) | | | | | | | | | | | | | |
| 23. Fidelity | | | | | | | | | | | | | |
| 24. Surety | 9,310 | 6,286 | | | 6,829 | | | | | | | | .515 |
| 26. Burglary and Theft | | | | | | | | | | | | | |
| 27. Boiler and Machinery | | | | | | | | | | | | | |
| 28. Credit | | | | | | | | | | | | | |
| 29. International | | | | | | | | | | | | | |
| 30. Warranty | | | | | | | | | | | | | |
| 31. Reins nonproportional assumed property | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 32. Reins nonproportional assumed liability | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 33. Reins nonproportional assumed financial lines | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 34. Aggregate Write-Ins for Other Lines of Business | | | | | | | | | | | | | |
| 35. Total (a) | 3,044,387,193 | 2,913,286,978 | | 1,079,779,031 | 1,831,330,839 | 2,048,739,660 | 1,583,821,932 | 47,069,080 | 62,266,286 | 153,283,473 | 311,613,782 | 75,122,216 | |
| 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 \$ 30,643,697

(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 CASUALTY INSURANCE COMPANY

SCHEDULE F - PART 1

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

| 1 ID Number | 2 NAIC Company Code | 3 Name of Reinsured | 4 Domiciliary Jurisdiction | 5 Assumed Premium | Reinsurance On | | 8 Known Case Losses and LAE | 9 Contingent Commissions Payable | 10 Assumed Premiums Receivable | 11 Unearned Premium | 12 Funds Held By or Deposited With Reinsured Companies | 13 Letters of Credit Posted | 14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit | 15 Amount of Assets Pledged or Collateral Held in Trust |
|---|------------------------------|---|----------------------------------|-------------------------|---|------------------|-----------------------------------|---|---|---------------------------|--|-----------------------------------|--|---|
| | | | | | 6 Paid Losses and Loss Adjustment Expenses | 7 Cols. 6 + 7 | | | | | | | | |
| 06-0281045 | 10243 | National Continental Insurance Company | NY | | 53 | 1,569 | 1,622 | | | (2) | | | | |
| 34-1094197 | 24252 | Progressive American Insurance Company | OH | 3,581,217 | 13,137 | 983,624 | 996,761 | | | 31,144 | 1,005,794 | | | |
| 31-1193845 | 17350 | Progressive Bayside Insurance Company | OH | 5,851 | 123 | 1,205 | 1,328 | | | | 1,870 | | | |
| 39-1453002 | 42994 | Progressive Classic Insurance Company | WI | 181,116 | 659 | 59,887 | 60,546 | | | | 65,434 | | | |
| 20-3187866 | 12302 | Progressive Freedom Insurance Company | OH | 127,555 | 663 | 31,408 | 32,071 | | | 990 | 36,491 | | | |
| 34-1374634 | 42412 | Progressive Gulf Insurance Company | OH | 531,139 | 3,834 | 165,368 | 169,202 | | | 416 | 179,050 | | | |
| 34-1787734 | 10187 | Progressive Michigan Insurance Company | MI | 822,085 | 167 | 394,061 | 394,228 | | | 1,674 | 270,731 | | | |
| 93-0935623 | 35190 | Progressive Mountain Insurance Company | OH | 1,425,918 | 9,489 | 538,691 | 548,180 | | | 16,263 | 481,848 | | | |
| 34-1318335 | 38628 | Progressive Northern Insurance Company | WI | 3,194,559 | 6,815 | 1,063,899 | 1,070,714 | | | 8,644 | 1,084,611 | | | |
| 91-1187829 | 42919 | Progressive Northwestern Insurance Company | OH | 920,950 | 2,596 | 208,224 | 210,820 | | | | 316,017 | | | |
| 34-1287020 | 37834 | Progressive Preferred Insurance Company | OH | 1,924,778 | 7,538 | 643,849 | 651,387 | | | 879 | 673,467 | | | |
| 59-1951700 | 38784 | Progressive Southeastern Insurance Company | IN | 1,101,499 | 3,189 | 406,311 | 409,500 | | | 6,703 | 417,833 | | | |
| 34-1172685 | 32786 | Progressive Specialty Insurance Company | OH | 2,222,915 | 9,295 | 742,058 | 751,353 | | | 5,364 | 691,273 | | | |
| 0199999. Affiliates - U.S. Intercompany Pooling | | | | 16,039,582 | 57,558 | 5,240,154 | 5,297,712 | | | 72,075 | 5,224,419 | | | |
| 68-0004572 | 11410 | Drive New Jersey Insurance Company | NJ | 716,881 | 33,212 | 564,696 | 597,908 | | | 203,277 | 251,109 | | | |
| 06-0281045 | 10243 | National Continental Insurance Company | NY | | | 2,929 | 2,929 | | | | | | | |
| 74-1082840 | 29203 | Progressive County Mutual Insurance Company | TX | 7,147,014 | 368,324 | 2,409,615 | 2,777,939 | | | 1,540,621 | 2,334,414 | | | |
| 72-1269745 | 10050 | Progressive Security Insurance Company | LA | 656,566 | 34,435 | 149,451 | 183,886 | | | 156,957 | 187,950 | | | |
| 95-2676519 | 27804 | Progressive West Insurance Company | OH | 586,157 | 35,801 | 245,990 | 281,791 | | | 125,563 | 158,895 | | | |
| 0399999. Affiliates - U.S. Non-Pool - Other | | | | 9,106,618 | 471,772 | 3,372,681 | 3,844,453 | | | 2,026,418 | 2,932,368 | | | |
| 0499999. Total - U.S. Non-Pool | | | | 9,106,618 | 471,772 | 3,372,681 | 3,844,453 | | | 2,026,418 | 2,932,368 | | | |
| 0799999. Total - Other (Non-U.S.) | | | | | | | | | | | | | | |
| 0899999. Total - Affiliates | | | | 25,146,200 | 529,330 | 8,612,835 | 9,142,165 | | | 2,098,493 | 8,156,787 | | | |
| 13-5124990 | 19380 | American Home Assurance Company | NY | | | 63 | 63 | | | | | | | |
| 04-2198460 | 21822 | First State Insurance Company | CT | | | 35 | 35 | | | | | | | |
| 13-2673100 | 22039 | General Reinsurance Corporation | DE | | | 56 | 56 | | | | | | | |
| 25-1149494 | 19437 | Lexington Insurance Company | DE | | | 36 | 36 | | | | | | | |
| 31-4177100 | 23787 | Nationwide Mutual Insurance Company | OH | | | 21 | 21 | | | | | | | |
| 13-1290712 | 20583 | XL Reinsurance America, Inc. | NY | | | 4 | 4 | | | | | | | |
| 94-1590201 | 26220 | Yosemite Insurance Company | OK | | | 14 | 14 | | | | | | | |
| 0999999. Total Other U.S. Unaffiliated Insurers | | | | | | 229 | 229 | | | | | | | |
| 1299999. Total - Pools and Associations | | | | | | | | | | | | | | |
| 9999999 Totals | | | | 25,146,200 | 529,330 | 8,613,064 | 9,142,394 | | | 2,098,493 | 8,156,787 | | | |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

SCHEDULE F - PART 3

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

| 1 ID Number | 2 NAIC Company Code | 3 Name of Reinsurer | 4 Domiciliary Jurisdiction | 5 Special Code | 6 Reinsurance Premiums Ceded | Reinsurance Recoverable On | | | | | | | | | | 16 Amount in Dispute included in Column 15 | Reinsurance Payable | | 19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18] | 20 Funds Held by Company Under Reinsurance Treaties |
|-------------------|--|---|----------------------------------|----------------------|---------------------------------------|----------------------------|------------------|-------------------------------------|-------------------------------------|--------------------------------|-------------------------------|----------------------------|--------------------------------------|---|------------------------------------|--|---------------------|-----------|--|---|
| | | | | | | 7 Paid Losses | 8 Paid LAE | 9 Known Case Loss Reserves | 10 Known Case LAE Reserves | 11 IBNR Loss Reserves | 12 IBNR LAE Reserves | 13 Unearned Premiums | 14 Contingent Commis- sions | 15 Columns 7 through 14 Totals | 17 Ceded Balances Payable | 18 Other Amounts Due to Reinsurers | | | | |
| 34-1094197 | 24252 | Progressive American Insurance Company | OH | | 563,785 | 1,234 | 644 | 176,728 | 25,220 | 49,391 | 12,946 | 184,725 | | 450,888 | | | 450,888 | | | |
| 31-1193845 | 17350 | Progressive Bayside Insurance Company | OH | | 140,946 | 309 | 160 | 44,182 | 6,305 | 12,348 | 3,236 | 46,181 | | 112,721 | | | 609 | 112,112 | | |
| 39-1453002 | 42994 | Progressive Classic Insurance Company | WI | | 845,677 | 1,852 | 965 | 265,091 | 37,831 | 74,086 | 19,418 | 277,087 | | 676,330 | | | 5,200 | 671,130 | | |
| 20-3187886 | 12302 | Progressive Freedom Insurance Company | OH | | 140,946 | 309 | 160 | 44,182 | 6,305 | 12,348 | 3,236 | 46,181 | | 112,721 | | | | 112,721 | | |
| 34-1374634 | 42412 | Progressive Gulf Insurance Company | OH | | 563,785 | 1,234 | 644 | 176,728 | 25,220 | 49,391 | 12,946 | 184,725 | | 450,888 | | | 450,888 | | | |
| 34-1787734 | 10187 | Progressive Michigan Insurance Company | MI | | 1,127,569 | 2,469 | 1,287 | 353,455 | 50,442 | 98,781 | 25,891 | 369,449 | | 901,774 | | | | 901,774 | | |
| 93-0935623 | 35190 | Progressive Mountain Insurance Company | OH | | 281,892 | 617 | 322 | 88,364 | 12,610 | 24,695 | 6,473 | 92,362 | | 225,443 | | | | 225,443 | | |
| 34-1318335 | 38628 | Progressive Northern Insurance Company | WI | | 3,382,708 | 7,406 | 3,862 | 1,060,365 | 151,325 | 296,344 | 77,673 | 1,108,348 | | 2,705,323 | | | | 2,705,323 | | |
| | | Progressive Northwestern Insurance Company | | | | | | | | | | | | | | | | | | |
| 91-1187829 | 42919 | | OH | | 3,382,708 | 7,406 | 3,862 | 1,060,365 | 151,325 | 296,344 | 77,673 | 1,108,348 | | 2,705,323 | | | 12,613 | 2,692,710 | | |
| 34-1287020 | 37834 | Progressive Preferred Insurance Company | OH | | 1,691,354 | 3,703 | 1,931 | 530,183 | 75,662 | 148,172 | 38,837 | 554,174 | | 1,352,662 | | | | 1,352,662 | | |
| 59-1951700 | 38784 | | IN | | 281,892 | 617 | 322 | 88,364 | 12,610 | 24,695 | 6,473 | 92,362 | | 225,443 | | | | 225,443 | | |
| 34-1172685 | 32786 | Progressive Specialty Insurance Company | OH | | 1,973,247 | 4,320 | 2,253 | 618,546 | 88,273 | 172,867 | 45,309 | 646,536 | | 1,578,104 | | | | 1,578,104 | | |
| 0199999 | Total Authorized - Affiliates - U.S. Intercompany Pooling | | | | | 14,376,509 | 31,476 | 16,412 | 4,506,553 | 643,128 | 1,259,462 | 330,111 | 4,710,478 | | 11,497,620 | | | 18,422 | 11,479,198 | |
| 0499999 | Total Authorized - Affiliates - U.S. Non-Pool | | | | | | | | | | | | | | | | | | | |
| 0799999 | Total Authorized - Affiliates - Other (Non-U.S.) | | | | | | | | | | | | | | | | | | | |
| 0899999 | Total Authorized - Affiliates | | | | | 14,376,509 | 31,476 | 16,412 | 4,506,553 | 643,128 | 1,259,462 | 330,111 | 4,710,478 | | 11,497,620 | | | 18,422 | 11,479,198 | |
| 06-0237820 | 20699 | ACE Property and Casualty Insurance Company | PA | | | | 16 | | 43 | 1 | | | | | 60 | | | | 60 | |
| 38-3207001 | 10166 | Accident Fund Ins Co of Amer | MI | | | | | | | 4 | | | | | 4 | | | | 4 | |
| 51-0434766 | 20370 | Axis Reinsurance Company | NY | | | 111 | | 298 | 4 | | | | | | 413 | | | | 413 | |
| 42-0234980 | 21415 | Employers Mut Cas Co | IA | | | | | | | 5 | | | | | 5 | | | | 5 | |
| 35-2293075 | 11551 | Endurance Reinsurance Corp of America | DE | | | 143 | | 256 | 3 | | | | | | 402 | | | | 402 | |
| 22-2005057 | 26921 | Everest Reinsurance Company | DE | | | 232 | | 243 | | 30 | | 37 | | | 310 | | (14) | | 324 | |
| 13-2673100 | 22039 | General Reinsurance Corporation | DE | | | | 1 | 553 | 56 | 43 | | | | | 653 | | | | 653 | |
| 95-2769232 | 27847 | Insurance Co of the West | CA | | | 28 | | | | 17 | | 14 | | | 31 | | (20) | | 51 | |
| 95-2379438 | 20338 | Palomar Specialty Ins Co | OR | | | (2) | | | | | 1 | | | | 1 | | | | 1 | |
| 13-1675535 | 25364 | Swiss Reinsurance America Corporation | NY | | | 879 | | 2,091 | | 299 | 4 | 170 | | | 2,564 | | (89) | | 2,653 | |
| 06-0384680 | 11452 | Insurance Company | CT | | | 189 | | | | 35 | | 100 | | | 135 | | 14 | | 121 | |
| 13-5616275 | 19453 | Transatlantic Reinsurance Company | NY | | | 95 | | 170 | 2 | | | | | | 267 | | | | 267 | |
| 13-3088732 | 40517 | WCF National Ins Co | UT | | | 28 | | | | 9 | | 13 | | | 22 | | (20) | | 42 | |
| 0999999 | Total Authorized - Other U.S. Unaffiliated Insurers | | | | | 1,354 | 365 | 1 | 3,654 | 66 | 442 | 5 | 334 | | 4,867 | | (129) | | 4,996 | |
| AA-9991114 | 00000 | Idaho CAIP | RI | | | | | | (5) | | | | | | (5) | | | | (5) | |
| AA-9991134 | 00000 | New Jersey CAIP | RI | | | 1 | | | | | | | | | 1 | | | | 1 | |
| AA-9991146 | 00000 | Rhode Island CAIP | RI | | | (1) | 101 | | | | | | | | 100 | | | | 100 | |
| 1199999 | Total Authorized - Pools - Voluntary Pools | | | | | | | | | | | | | | 96 | | | | 96 | |
| 1499999 | Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999) | | | | | 14,377,863 | 31,841 | 16,509 | 4,510,207 | 643,194 | 1,259,904 | 330,116 | 4,710,812 | | 11,502,583 | | 18,293 | | 11,484,290 | |
| 1899999 | Total Unauthorized - Affiliates - U.S. Non-Pool | | | | | | | | | | | | | | | | | | | |
| 2199999 | Total Unauthorized - Affiliates - Other (Non-U.S.) | | | | | | | | | | | | | | | | | | | |
| 2299999 | Total Unauthorized - Affiliates | | | | | | | | | | | | | | | | | | | |
| AA-3191219 | 00000 | American Bankers Mutual Insurance, Ltd. | BMU | | | 12 | | 43 | 1 | | | | | | 56 | | | | 56 | |
| 2699999 | Total Unauthorized - Other Non-U.S. Insurers | | | | | | | | | | | | | | 56 | | | | 56 | |
| 2899999 | Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999) | | | | | | | | | | | | | | 56 | | | | 56 | |
| 3299999 | Total Certified - Affiliates - U.S. Non-Pool | | | | | | | | | | | | | | | | | | | |
| 3599999 | Total Certified - Affiliates - Other (Non-U.S.) | | | | | | | | | | | | | | | | | | | |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

SCHEDULE F - PART 3

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

| 1 ID Number | 2 NAIC Com- pany 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 | | | |
| 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) | 14,377,863 | | 31,853 | | 16,509 | 4,510,250 | | 643,195 | 1,259,904 | 330,116 | 4,710,812 | | | 11,502,639 | | | 18,293 | | 11,484,346 | |
| 5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999) | | | | | | | | | | | | | | | | | | | | |
| 9999999 Totals | | | 14,377,863 | | 31,853 | 16,509 | 4,510,250 | 643,195 | 1,259,904 | 330,116 | 4,710,812 | | | 11,502,639 | | | 18,293 | | 11,484,346 | |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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 | | | | | | | | | | Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34) | 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 | 35 | | |
| 34-1094197 .. | Progressive American Insurance Company | | | | | 450,888 | | | | 450,888 | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 31-1193845 .. | Progressive Bayside Insurance Company | | | | | 609 | 112,112 | | | 609 | 112,112 | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 39-1453002 .. | Progressive Classic Insurance Company | | | | | 5,200 | 671,130 | | | 5,200 | 671,130 | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 20-3187886 .. | Progressive Freedom Insurance Company | | | | | 112,721 | | | | 112,721 | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 34-1374634 .. | Progressive Gulf Insurance Company | | | | | 450,888 | | | | 450,888 | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 34-1787734 .. | Progressive Michigan Insurance Company | | | | | 901,774 | | | | 901,774 | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 93-0935623 .. | Progressive Mountain Insurance Company | | | | | 225,443 | | | | 225,443 | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 34-1318335 .. | Progressive Northern Insurance Company | | | | | 2,705,323 | | | | 2,705,323 | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 91-1187829 .. | Progressive Northwestern Insurance Company | | | | | 12,613 | 2,692,710 | | | 12,613 | 2,692,710 | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 34-1287020 .. | Progressive Preferred Insurance Company | | | | | 1,352,662 | | | | 1,352,662 | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 59-1951700 .. | Progressive Southeastern Insurance Company | | | | | 225,443 | | | | 225,443 | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 34-1172685 .. | Progressive Specialty Insurance Company | | | | | 1,578,104 | | | | 1,578,104 | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling | | | | | | XXX | | | | 18,422 | 11,479,198 | | 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 | |
| 0799999. Total Authorized - Affiliates - Other (Non-U.S.) | | | | | | XXX | | | | | | | | | | | | | XXX | | | | |
| 0899999. Total Authorized - Affiliates | | | | | | XXX | | | | 18,422 | 11,479,198 | | | | | | | | | XXX | | | |
| 06-0237820 .. | ACE Property and Casualty Insurance Company | | | | | 60 | | | | 60 | | | 72 | | | 72 | | | 72 | 1 | | 1 | |
| 38-3207001 .. | Accident Fund Ins Co of Amer | | | | | 4 | | | | 4 | | | 5 | | | 5 | | | 5 | 3 | | | |
| 51-0434766 .. | Axis Reinsurance Company | | | | | 413 | | | | 413 | | | 496 | | | 496 | | | 496 | 3 | | | |
| 42-0234980 .. | Employers Mut Cas Co | | | | | 5 | | | | 5 | | | 6 | | | 6 | | | 6 | 3 | | | |
| 35-2293075 .. | Endurance Reinsurance Corp of America | | | | | 402 | | | | 402 | | | 482 | | | 482 | | | 482 | 2 | | 10 | |
| 22-2005057 .. | Everest Reinsurance Company | | | | | (14) | 324 | | | 310 | | | 372 | | | (14) | 386 | | 386 | 2 | | 8 | |
| 13-2673100 .. | General Reinsurance Corporation | | | | | 653 | | | | 653 | | | 784 | | | 784 | | | 784 | 1 | | 13 | |
| 95-2769232 .. | Insurance Co of the West | | | | | (20) | 51 | | | 31 | | | 37 | | | (20) | 57 | | 57 | 3 | | 2 | |
| 95-2379438 .. | Palomar Specialty Ins Co | | | | | 1 | | | | 1 | | | 1 | | | 1 | 1 | | 1 | 4 | | | |
| 13-1675535 .. | Swiss Reinsurance America Corporation | | | | | (89) | 2,653 | | | 2,564 | | | 3,077 | | | (89) | 3,166 | | 3,166 | 2 | | 66 | |
| 06-0384680 .. | The Hartford Steam Boiler Inspection and Insurance Company | | | | | 14 | 121 | | | 135 | | | 162 | | | 14 | 148 | | 148 | 1 | | 2 | |
| 13-5616275 .. | Transatlantic Reinsurance Company | | | | | (20) | 267 | | | 267 | | | 320 | | | 320 | 320 | | 320 | 1 | | 5 | |
| 13-3088732 .. | WCF National Ins Co | | | | | 42 | | | | 22 | | | 26 | | | (20) | 46 | | 46 | 3 | | 1 | |
| 0999999. Total Authorized - Other U.S. Unaffiliated Insurers | | | | | | XXX | | | | (129) | 4,996 | | 4,867 | | | 5,840 | (129) | 5,969 | | 5,969 | XXX | | 123 |
| AA-9991114 .. | Idaho CAIP | | | | | (5) | | | | | | | | | | | | | | 3 | | | |
| AA-9991134 .. | New Jersey CAIP | | | | | 1 | | | | 1 | | | 1 | | | 1 | | | 1 | 3 | | | |
| AA-9991146 .. | Rhode Island CAIP | | | | | 100 | | | | 100 | | | 120 | | | 120 | | | 120 | 3 | | 3 | |
| 1199999. Total Authorized - Pools - Voluntary Pools | | | | | | XXX | | | | (5) | 101 | | 101 | | | 121 | | | 121 | XXX | | 3 | |
| 1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999) | | | | | | 18,288 | 11,484,295 | | | 4,968 | | | 5,962 | | | (129) | 6,091 | | 6,091 | XXX | | 126 | |
| 1899999. Total Unauthorized - Affiliates - U.S. Non-Pool | | | | | | XXX | | | | | | | XXX | | | XXX | | | XXX | XXX | | XXX | |
| 2199999. Total Unauthorized - Affiliates - Other (Non-U.S.) | | | | | | XXX | | | | | | | XXX | | | XXX | | | XXX | | | | |
| 2299999. Total Unauthorized - Affiliates | | | | | | XXX | | | | | | | XXX | | | XXX | | | XXX | | | | |
| AA-3191219 .. | American Bankers Mutual Insurance, Ltd. | | | | | 201 | 56 | | | 56 | | | 67 | | | 67 | 67 | | 6 | 6 | 2 | | |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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 | | | | | | | | | | | | | | |
|---|-------------------------------|------------|----|-----|-----|--------|------------|----|--|---|--|-------------------------------------|---|---|---------------------------------------|----|-------|----|----|-------|-----|---|---|
| | | 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; 120%) | Stressed Recoverable (Col. 28 * 120%) | 30 | 31 | 32 | 33 | 34 | 35 | Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer) | 36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer) |
| 2699999. Total Unauthorized - Other Non-U.S. Insurers | | | | XXX | 201 | 56 | | | | | 56 | | 67 | | | 67 | | 67 | | | XXX | 2 | |
| 2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999) | | | | XXX | 201 | 56 | | | | | 56 | | 67 | | | 67 | | 67 | | | XXX | 2 | |
| 3299999. Total Certified - Affiliates - U.S. Non-Pool | | | | 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 | |
| 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 | 201 | 18,344 | 11,484,295 | | | | 5,024 | | 6,029 | | (129) | | 6,158 | | 67 | 6,091 | XXX | 2 | 126 |
| 5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999) | | | | XXX | | | | | | | XXX | | XXX | | XXX | | XXX | | | XXX | XXX | XXX | |
| 9999999 Totals | | | | XXX | 201 | 18,344 | 11,484,295 | | | | 5,024 | | 6,029 | | (129) | | 6,158 | | 67 | 6,091 | XXX | 2 | 126 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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 Included in Col. 43 | 45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41 | 46 Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 44) | 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/[Col. 42/Col. 46+48]) | 51 Percentage More Than 120 Days Overdue (Col. 41/[Col. 42/Col. 46+48]) | 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 Overdue | 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 | | | | | | | | | | | | | | | | | | | | |
| 34-1094197 .. | Progressive American Insurance Company | 1,878 | | | | | | 1,878 | | 1,878 | | | | | | | YES | | | | | | | | | | |
| 31-1193845 .. | Progressive Bayside Insurance Company | 469 | | | | | | 469 | | 469 | | | | | | | YES | | | | | | | | | | |
| 39-1453002 .. | Progressive Classic Insurance Company | 2,817 | | | | | | 2,817 | | 2,817 | | | | | | | YES | | | | | | | | | | |
| 20-3187886 .. | Progressive Freedom Insurance Company | 469 | | | | | | 469 | | 469 | | | | | | | YES | | | | | | | | | | |
| 34-1374634 .. | Progressive Gulf Insurance Company | 1,878 | | | | | | 1,878 | | 1,878 | | | | | | | YES | | | | | | | | | | |
| 34-1787734 .. | Progressive Michigan Insurance Company | 3,756 | | | | | | 3,756 | | 3,756 | | | | | | | YES | | | | | | | | | | |
| 93-0935623 .. | Progressive Mountain Insurance Company | 939 | | | | | | 939 | | 939 | | | | | | | YES | | | | | | | | | | |
| 34-1318335 .. | Progressive Northern Insurance Company | 11,268 | | | | | | 11,268 | | 11,268 | | | | | | | YES | | | | | | | | | | |
| 91-118729 .. | Progressive Northwestern Insurance Company | 11,268 | | | | | | 11,268 | | 11,268 | | | | | | | YES | | | | | | | | | | |
| 34-1287020 .. | Progressive Preferred Insurance Company | 5,634 | | | | | | 5,634 | | 5,634 | | | | | | | YES | | | | | | | | | | |
| 59-1951700 .. | Progressive Southeastern Insurance Company | 939 | | | | | | 939 | | 939 | | | | | | | YES | | | | | | | | | | |
| 34-1172685 .. | Progressive Specialty Insurance Company | 6,573 | | | | | | 6,573 | | 6,573 | | | | | | | YES | | | | | | | | | | |
| 0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling | | 47,888 | | | | | | 47,888 | | 47,888 | | | | | | | XXX | | | | | | | | | | |
| 0499999. Total Authorized - Affiliates - U.S. Non-Pool | | | | | | | | | | | | | | | | | XXX | | | | | | | | | | |
| 0799999. Total Authorized - Affiliates - Other (Non-U.S.) | | | | | | | | | | | | | | | | | XXX | | | | | | | | | | |
| 0899999. Total Authorized - Affiliates | | 47,888 | | | | | | 47,888 | | 47,888 | | | | | | | XXX | | | | | | | | | | |
| 06-0237820 .. | ACE Property and Casualty Insurance Company | 16 | | | | | | 16 | | 16 | | | | | | | YES | | | | | | | | | | |
| 38-3207001 .. | Accident Fund Inc Co of Amer | | | | | | | | | | | | | | | | YES | | | | | | | | | | |
| 51-0434766 .. | Axis Reinsurance Company | 111 | | | | | | 111 | | 111 | | | | | | | YES | | | | | | | | | | |
| 42-0234980 .. | Employers Mut Cas Co | | | | | | | | | | | | | | | | YES | | | | | | | | | | |
| 35-2293075 .. | Endurance Reinsurance Corp of America | 94 | 49 | | | | | 49 | 143 | | | | | | | | YES | | | | | | | | | | |
| 22-2005057 .. | Everest Reinsurance Company | | | | | | | | | | | | | | | | YES | | | | | | | | | | |
| 13-2673100 .. | General Reinsurance Corporation | 1 | | | | | | 1 | | 1 | | | | | | | YES | | | | | | | | | | |
| 95-2769232 .. | Insurance Co of the West | | | | | | | | | | | | | | | | YES | | | | | | | | | | |
| 95-2379438 .. | Palomar Specialty Ins Co | | | | | | | | | | | | | | | | YES | | | | | | | | | | |
| 13-1675535 .. | Swiss Reinsurance America Corporation | | | | | | | | | | | | | | | | YES | | | | | | | | | | |
| 06-0384680 .. | The Hartford Steam Boiler Inspection and Insurance Company | | | | | | | | | | | | | | | | YES | | | | | | | | | | |
| 13-5616275 .. | Transatlantic Reinsurance Company | 63 | 32 | | | | | 32 | 95 | | | | | | | | YES | | | | | | | | | | |
| 13-3088732 .. | WCF National Ins Co | | | | | | | | | | | | | | | | YES | | | | | | | | | | |
| 0999999. Total Authorized - Other U.S. Unaffiliated Insurers | | 285 | 81 | | | | | 81 | 366 | | | | | | | | XXX | | | | | | | | | | |
| AA-9991114 .. | Idaho CAIP | (5) | | | | | | | (5) | | | | | | | | YES | | | | | | | | | | |
| AA-9991134 .. | New Jersey CAIP | 1 | | | | | | | 1 | | | | | | | | YES | | | | | | | | | | |
| AA-9991146 .. | Rhode Island CAIP | 100 | | | | | | 100 | | 100 | | | | | | | YES | | | | | | | | | | |
| 1199999. Total Authorized - Pools - Voluntary Pools | | 96 | | | | | | 96 | | 96 | | | | | | | XXX | | | | | | | | | | |
| 1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999) | | 48,269 | 81 | | | | | 81 | 48,350 | | | | | | | | XXX | | | | | | | | | | |
| 1899999. Total Unauthorized - Affiliates - U.S. Non-Pool | | | | | | | | | | | | | | | | | XXX | | | | | | | | | | |
| 2199999. Total Unauthorized - Affiliates - Other (Non-U.S.) | | | | | | | | | | | | | | | | | XXX | | | | | | | | | | |
| 2299999. Total Unauthorized - Affiliates | | | | | | | | | | | | | | | | | XXX | | | | | | | | | | |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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 Included in Col. 43 | 45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41 | 46 Total Recoverable on Paid Losses & LAE Over 90 Days Past Due 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 | 38 1 - 29 Days | 39 30 - 90 Days | 40 91 - 120 Days | 41 Over 120 Days | 42 Total Overdue Cols. 38+39 +40+41 | | | | | | | | | | | |
| AA-3191219 .. | American Bankers Mutual Insurance, Ltd. | 12 | | | | | 12 | | | 12 | | | | | | | YES..... | |
| 2699999. Total Unauthorized - Other Non-U.S. Insurers | | 12 | | | | | | | 12 | | | 12 | | | | | XXX | |
| 2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999) | | 12 | | | | | | | 12 | | | 12 | | | | | 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) | | 48,281 | 81 | | | | 81 | 48,362 | | | 48,362 | | | 0.2 | | | XXX | |
| 5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999) | | | | | | | | | | | | | | | | | XXX | |
| 9999999 Totals | | 48,281 | 81 | | | | 81 | 48,362 | | | 48,362 | | | 0.2 | | | XXX | |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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 Not 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 | | | | |
| 34-1094197 .. | Progressive American Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 31-1193845 .. | Progressive Bayside Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 39-1453002 .. | Progressive Classic Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 20-3187886 .. | Progressive Freedom Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 34-1374634 .. | Progressive Gulf Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 34-1787734 .. | Progressive Michigan Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 93-0935623 .. | Progressive Mountain Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 34-1318335 .. | Progressive Northern Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 91-1187829 .. | Progressive Northwestern Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 34-1287020 .. | Progressive Preferred Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 59-1951700 .. | Progressive Southeastern Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 34-1172685 .. | Progressive Specialty 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 | | | |
| 06-0237820 .. | ACE Property and Casualty Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 38-3207001 .. | Accident Fund Inc Co of Amer | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 51-0434766 .. | Axis Reinsurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 42-0234980 .. | Employers Mut Cas Co | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 35-2293075 .. | Endurance Reinsurance Corp of America | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 22-2005057 .. | Everest Reinsurance Company | 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 | | | |
| 95-2769232 .. | Insurance Co of the West | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 95-2379438 .. | Palomar Specialty Ins Co | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 13-1675535 .. | Swiss Reinsurance America Corporation | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 06-0384680 .. | The Hartford Steam Boiler Inspection and Insurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 13-5616275 .. | Transatlantic Reinsurance Company | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 13-3088732 .. | WCF National Ins Co | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 0999999 .. | Total Authorized - Other U.S. Unaffiliated Insurers | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| AA-9991114 .. | Idaho CAIP | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| AA-9991134 .. | New Jersey CAIP | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| AA-9991146 .. | Rhode Island CAIP | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |
| 1199999 .. | Total Authorized - Pools - Voluntary 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 | | | |
| AA-3191219 .. | American Bankers Mutual Insurance, Ltd. | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | | |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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), not to exceed 100%) | 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 | 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 | 20% of Recoverable on Paid Losses & LAE Over 90 Days | Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63) | Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66) | 20% of Amount in Col. 67 | |
| 2699999. Total Unauthorized - Other Non-U.S. Insurers | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | |
| 2899999. Total Unauthorized Excluding Protected Cells (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 | | | | XXX | XXX | | | | | | | | | | | | |
| 3599999. Total Certified - Affiliates - Other (Non-U.S.) | | XXX | | | | XXX | XXX | | | | | | | | | | | | |
| 3699999. Total Certified - Affiliates | | XXX | | | | XXX | XXX | | | | | | | | | | | | |
| 4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999) | | XXX | | | | XXX | 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 | | | | XXX | XXX | | | | | | | | | | | | |
| 5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999) | | XXX | | | | XXX | XXX | | | | | | | | | | | | |
| 9999999 Totals | | XXX | | | | XXX | XXX | | | | | | | | | | | | |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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 Reinsurance | | Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance | | 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 | 74 Complete if Col. 52 = "No"; Otherwise Enter 0 | 75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Col. 73 + 74) | 76 Provision for Amounts Ceded to Unauthorized Reinsurers (Col. 71 + 72 Not in Excess of Col. 15) | 77 Provision for Amounts Ceded to Certified Reinsurers (Col. 64 + 69) | 78 Total Provision for Reinsurance (Cols. 75 + 76 + 77) | |
| 34-1094197 .. | Progressive American Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 31-1193845 .. | Progressive Bayside Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 39-1453002 .. | Progressive Classic Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 20-3187886 .. | Progressive Freedom Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 34-1374634 .. | Progressive Gulf Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 34-1787734 .. | Progressive Michigan Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 93-0935625 .. | Progressive Mountain Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 34-1318335 .. | Progressive Northern Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 91-1187829 .. | Progressive Northwestern Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 34-1287020 .. | Progressive Preferred Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 59-1951700 .. | Progressive Southeastern Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 34-1172685 .. | Progressive Specialty 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. | | |
| 06-0237820 .. | ACE Property and Casualty Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 38-3207001 .. | Accident Fund Ins Co of Amer | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 51-0434766 .. | Axis Reinsurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 42-0234980 .. | Employers Mut Cas Co | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 35-2293075 .. | Endurance Reinsurance Corp of America | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 22-2005057 .. | Everest Reinsurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 13-2673100 .. | General Reinsurance Corporation | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 95-2769232 .. | Insurance Co of the West | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 95-2379438 .. | Palomar Specialty Ins Co | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 13-1675535 .. | Swiss Reinsurance America Corporation | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 06-0384680 .. | The Hartford Steam Boiler Inspection and Insurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 13-5616275 .. | Transatlantic Reinsurance Company | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 13-3088732 .. | WCF National Ins Co | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 0999999. Total Authorized - Other U.S. Unaffiliated Insurers | | XXX. | XXX. | | | | | XXX. | XXX. | | |
| AA-9991114 .. | Idaho CAIP | XXX. | XXX. | | | | | XXX. | XXX. | | |
| AA-9991134 .. | New Jersey CAIP | XXX. | XXX. | | | | | XXX. | XXX. | | |
| AA-9991146 .. | Rhode Island CAIP | XXX. | XXX. | | | | | XXX. | XXX. | | |
| 1199999. Total Authorized - Pools - Voluntary 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. | | |
| AA-3191219 .. | American Bankers Mutual Insurance, Ltd. | | | | XXX. | XXX. | XXX. | | XXX. | | |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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 Reinsurance | | Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance | | Total Provision for Reinsurance | | | |
|---|----------------------------------|--|--|--|--|---|-----|---------------------------------|-----|-----|--|
| | | | | 72 | 73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 | 74 Complete if Col. 52 = "No"; Otherwise Enter 0 | 75 | 76 | 77 | 78 | |
| 2699999. Total Unauthorized - Other Non-U.S. Insurers | | | | | 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 | | XXX | | |
| 3599999. Total Certified - Affiliates - Other (Non-U.S.) | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | XXX | | |
| 3699999. Total Certified - Affiliates | XXX | 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 | | XXX | | |
| 4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool | XXX | XXX | XXX | | | | | | XXX | XXX | |
| 4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.) | XXX | XXX | XXX | | | | | | XXX | XXX | |
| 5099999. Total Reciprocal Jurisdiction - Affiliates | XXX | XXX | XXX | | | | | | XXX | XXX | |
| 5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999) | | XXX | XXX | | | | | | XXX | 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 CASUALTY INSURANCE COMPANY

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 CASUALTY INSURANCE COMPANY

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 Northern Insurance Company | 2,705,323 | 3,382,708 | Yes [X] No [] |
| 7. | Progressive Northwestern Insurance Company | 2,705,323 | 3,382,708 | Yes [X] No [] |
| 8. | Progressive Specialty Insurance Company | 1,578,104 | 1,973,247 | Yes [X] No [] |
| 9. | Progressive Preferred Insurance Company | 1,352,662 | 1,691,354 | Yes [X] No [] |
| 10. | Progressive Michigan Insurance Company | 901,774 | 1,127,569 | Yes [X] No [] |

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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) | 15,972,349,856 | | 15,972,349,856 |
| 2. Premiums and considerations (Line 15) | 2,715,788,299 | | 2,715,788,299 |
| 3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) | 48,361,557 | (48,361,557) | |
| 4. Funds held by or deposited with reinsured companies (Line 16.2) | | | |
| 5. Other assets | 424,728,878 | | 424,728,878 |
| 6. Net amount recoverable from reinsurers | | 11,484,345,697 | 11,484,345,697 |
| 7. Protected cell assets (Line 27) | | | |
| 8. Totals (Line 28) | 19,161,228,590 | 11,435,984,140 | 30,597,212,730 |
| LIABILITIES (Page 3) | | | |
| 9. Losses and loss adjustment expenses (Lines 1 through 3) | 7,004,298,014 | 6,743,465,000 | 13,747,763,014 |
| 10. Taxes, expenses, and other obligations (Lines 4 through 8) | 776,082,174 | | 776,082,174 |
| 11. Unearned premiums (Line 9) | 4,525,754,283 | 4,710,812,000 | 9,236,566,283 |
| 12. Advance premiums (Line 10) | 18,752,699 | | 18,752,699 |
| 13. Dividends declared and unpaid (Line 11.1 and 11.2) | | | |
| 14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) | 18,292,860 | (18,292,860) | |
| 15. Funds held by company under reinsurance treaties (Line 13) | | | |
| 16. Amounts withheld or retained by company for account of others (Line 14) | 13,312,617 | | 13,312,617 |
| 17. Provision for reinsurance (Line 16) | | | |
| 18. Other liabilities | 2,116,744,176 | | 2,116,744,176 |
| 19. Total liabilities excluding protected cell business (Line 26) | 14,473,236,823 | 11,435,984,140 | 25,909,220,963 |
| 20. Protected cell liabilities (Line 27) | | | |
| 21. Surplus as regards policyholders (Line 37) | 4,687,991,767 | XXX | 4,687,991,767 |
| 22. Totals (Line 38) | 19,161,228,590 | 11,435,984,140 | 30,597,212,730 |

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 CASUALTY INSURANCE COMPANY
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..... | 16,793 | 26 | 16,767 | 8,464 | | .60 | | 1,738 | | | 32 | 10,262 | |
| 3. 2015..... | 19,230 | 12 | 19,218 | 7,778 | | .57 | | 2,152 | | | 56 | 9,987 | |
| 4. 2016..... | 21,631 | 26 | 21,606 | 7,324 | | .45 | | 2,114 | | | 62 | 9,482 | |
| 5. 2017..... | 23,961 | 26 | 23,935 | 11,444 | | (3) | | 2,653 | | | 90 | 14,094 | |
| 6. 2018..... | 26,409 | 26 | 26,383 | 9,296 | | 122 | | 1,973 | | | 95 | 11,391 | |
| 7. 2019..... | 28,325 | 29 | 28,295 | 12,373 | | 363 | | 2,324 | | | 104 | 15,059 | |
| 8. 2020..... | 27,121 | 24 | 27,097 | 16,240 | | .38 | | 1,887 | | | 87 | 18,165 | |
| 9. 2021..... | 28,410 | 24 | 28,387 | 14,254 | | .88 | | .802 | | | 102 | 15,145 | |
| 10. 2022..... | 29,326 | .566 | 28,760 | 16,724 | 39 | 152 | 2 | 1,060 | | | 162 | 17,895 | |
| 11. 2023..... | 31,232 | 249 | 30,982 | 16,056 | | 61 | | 1,046 | | | 18 | 17,164 | |
| 12. Totals | XXX | XXX | XXX | 119,953 | 39 | 982 | 2 | 17,748 | | | 809 | 138,643 | |
| | | | | | | | | | | | | 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..... | 3 | | | | 3 | | | | 1 | | | | 7 |
| 2. 2014..... | | | | | | | | | | | | | |
| 3. 2015..... | | | | | | | | | | | | | |
| 4. 2016..... | | | | | | | | | | | | | |
| 5. 2017..... | | | | | | | | | | | | | |
| 6. 2018..... | | | | | | | | | | | | | |
| 7. 2019..... | 30 | | | | 6 | | | | 3 | | | .38 | 1 |
| 8. 2020..... | 56 | | | | 6 | | 11 | | 3 | | | .5 | .76 |
| 9. 2021..... | 142 | | 23 | | 7 | | 18 | | 14 | | | .6 | .204 |
| 10. 2022..... | 852 | | 151 | | 43 | | 47 | | 109 | | | 25 | 1,202 |
| 11. 2023..... | 2,668 | | 883 | | 136 | | 88 | 1 | 414 | | | 104 | 4,189 |
| 12. Totals | 3,751 | | 1,057 | | 202 | | 164 | 1 | 543 | | | 140 | 5,716 |
| | | | | | | | | | | | | | 237 |

| | 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..... | 3 | 4 |
| 2. 2014..... | 10,262 | | 10,262 | .61.1 | | .61.2 | | | | .49.0 | |
| 3. 2015..... | 9,987 | | 9,987 | .51.9 | | .52.0 | | | | .49.0 | |
| 4. 2016..... | 9,482 | | 9,482 | .43.8 | | .43.9 | | | | .49.0 | |
| 5. 2017..... | 14,094 | | 14,094 | .58.8 | | .58.9 | | | | .49.0 | |
| 6. 2018..... | 11,391 | | 11,391 | .43.1 | | .43.2 | | | | .49.0 | |
| 7. 2019..... | 15,097 | | 15,097 | .53.3 | | .53.4 | | | | .49.0 | .30 |
| 8. 2020..... | 18,241 | | 18,241 | .67.3 | .0.3 | .67.3 | | | | .49.0 | .56 |
| 9. 2021..... | 15,349 | | 15,349 | .54.0 | .0.5 | .54.1 | | | | .49.0 | .165 |
| 10. 2022..... | 19,138 | 42 | 19,096 | .65.3 | 7.3 | .66.4 | | | | .49.0 | 1,003 |
| 11. 2023..... | 21,353 | 1 | 21,353 | 68.4 | 0.4 | .68.9 | | | | .49.0 | 3,551 |
| 12. Totals | XXX | XXX | XXX | XXX | XXX | XXX | | | XXX | 4,808 | 908 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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..... | 16,706 | 14,885 | 1,240 | 89 | 687 | ..... | 504 | 3,659 | XXX..... | |
| 2. 2014..... | 2,827,048 | 43,149 | 2,783,899 | 1,720,175 | 19,095 | 65,109 | 66 | 234,312 | ..... | 45,598 | 2,000,434 | 522,394 | |
| 3. 2015..... | 2,835,222 | 44,907 | 2,790,315 | 1,802,133 | 24,889 | 72,915 | 121 | 256,467 | ..... | 44,604 | 2,106,505 | 528,883 | |
| 4. 2016..... | 3,036,608 | 45,007 | 2,991,601 | 1,988,399 | 37,101 | 81,774 | 206 | 283,174 | ..... | 47,457 | 2,316,039 | 557,442 | |
| 5. 2017..... | 3,517,138 | 51,401 | 3,465,737 | 2,160,584 | 30,633 | 90,808 | 139 | 307,858 | ..... | 51,499 | 2,528,479 | 592,311 | |
| 6. 2018..... | 4,166,380 | 56,518 | 4,109,863 | 2,503,555 | 30,553 | 99,986 | 105 | 339,735 | ..... | 62,952 | 2,912,617 | 664,411 | |
| 7. 2019..... | 4,780,011 | 65,639 | 4,714,371 | 2,843,970 | 31,149 | 107,854 | 60 | 371,300 | ..... | 73,147 | 3,291,914 | 729,582 | |
| 8. 2020..... | 5,060,296 | 67,301 | 4,992,996 | 2,529,668 | 29,622 | 80,765 | 108 | 331,748 | ..... | 73,290 | 2,912,453 | 613,914 | |
| 9. 2021..... | 5,295,147 | 52,085 | 5,243,063 | 3,079,264 | 32,624 | 72,295 | 39 | 344,359 | ..... | 89,195 | 3,463,256 | 738,595 | |
| 10. 2022..... | 5,430,135 | 53,219 | 5,376,916 | 2,819,941 | 31,991 | 38,525 | 1 | 334,030 | ..... | 74,196 | 3,160,505 | 677,196 | |
| 11. 2023 | 6,503,410 | 68,661 | 6,434,749 | 1,861,917 | 23,346 | 8,266 | 1 | 313,891 | ..... | 53,307 | 2,160,727 | 698,155 | |
| 12. Totals | XXX | XXX | XXX | 23,326,315 | 305,888 | 719,536 | 935 | 3,117,560 | ..... | 615,750 | 26,856,588 | 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 | | Case Basis | | | | | | | |
| | 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..... | 148,957 | 143,933 | 320 | ..... | 2,283 | ..... | ..... | ..... | 3,694 | ..... | ..... | 11,321 | 239 | | | |
| 2. 2014..... | 4,871 | 3,676 | 64 | ..... | 222 | ..... | ..... | ..... | 243 | ..... | ..... | 1,724 | 43 | | | |
| 3. 2015..... | 7,898 | 5,888 | 6,442 | 6,379 | 516 | ..... | ..... | ..... | 533 | ..... | ..... | 3,121 | 103 | | | |
| 4. 2016..... | 19,822 | 15,714 | 26,598 | 26,542 | 959 | ..... | ..... | ..... | 1,123 | ..... | ..... | 6,247 | 228 | | | |
| 5. 2017..... | 15,932 | 8,583 | 32,019 | 31,961 | 1,659 | ..... | ..... | ..... | 1,471 | ..... | ..... | 10,537 | 459 | | | |
| 6. 2018..... | 23,331 | 6,135 | 26,338 | 26,282 | 3,595 | ..... | ..... | ..... | 2,828 | ..... | ..... | 23,675 | 1,095 | | | |
| 7. 2019..... | 50,578 | 9,869 | 24,898 | 24,882 | 8,224 | ..... | ..... | ..... | 4,311 | ..... | ..... | 53,261 | 2,155 | | | |
| 8. 2020..... | 89,340 | 12,187 | 91,333 | 40,866 | 15,497 | ..... | 19,940 | ..... | 15,526 | ..... | 8,007 | 178,584 | 3,446 | | | |
| 9. 2021..... | 239,980 | 7,951 | 84,272 | 17,374 | 48,162 | ..... | 19,200 | ..... | 24,653 | ..... | 10,486 | 390,942 | 10,042 | | | |
| 10. 2022..... | 595,045 | 10,847 | 185,905 | 14,157 | 78,819 | ..... | 30,543 | ..... | 50,310 | ..... | 18,071 | 915,618 | 26,517 | | | |
| 11. 2023 | 1,635,790 | 21,377 | 847,787 | 37,143 | 112,132 | ..... | 60,158 | ..... | 151,138 | ..... | 58,673 | 2,748,485 | 137,837 | | | |
| 12. Totals | 2,831,547 | 246,160 | 1,325,976 | 225,586 | 272,069 | ..... | 129,841 | ..... | 255,828 | ..... | 95,237 | 4,343,515 | 182,165 | | | |

| | 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..... | 5,344 | 5,977 |
| 2. 2014..... | 2,024,995 | 22,837 | 2,002,158 | 71.6 | 52.9 | 71.9 | ..... | ..... | 49.0 | 1,260 | 464 |
| 3. 2015..... | 2,146,904 | 37,278 | 2,109,627 | 75.7 | 83.0 | 75.6 | ..... | ..... | 49.0 | 2,072 | 1,049 |
| 4. 2016..... | 2,401,849 | 79,562 | 2,322,287 | 79.1 | 176.8 | 77.6 | ..... | ..... | 49.0 | 4,165 | 2,082 |
| 5. 2017..... | 2,610,331 | 71,315 | 2,539,016 | 74.2 | 138.7 | 73.3 | ..... | ..... | 49.0 | 7,407 | 3,130 |
| 6. 2018..... | 2,999,368 | 63,076 | 2,936,292 | 72.0 | 111.6 | 71.4 | ..... | ..... | 49.0 | 17,252 | 6,423 |
| 7. 2019..... | 3,411,135 | 65,960 | 3,345,176 | 71.4 | 100.5 | 71.0 | ..... | ..... | 49.0 | 40,726 | 12,535 |
| 8. 2020..... | 3,173,818 | 82,782 | 3,091,036 | 62.7 | 123.0 | 61.9 | ..... | ..... | 49.0 | 127,621 | 50,963 |
| 9. 2021..... | 3,912,186 | 57,988 | 3,854,198 | 73.9 | 111.3 | 73.5 | ..... | ..... | 49.0 | 298,927 | 92,015 |
| 10. 2022..... | 4,133,119 | 56,996 | 4,076,123 | 76.1 | 107.1 | 75.8 | ..... | ..... | 49.0 | 755,947 | 159,672 |
| 11. 2023 | 4,991,079 | 81,867 | 4,909,212 | 76.7 | 119.2 | 76.3 | ..... | ..... | 49.0 | 2,425,058 | 323,428 |
| 12. Totals | XXX | XXX | XXX | XXX | XXX | XXX | ..... | ..... | XXX | 3,685,778 | 657,738 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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..... | 1,746 | 1,509 | 63 | 14 | 40 | | 19 | 326 | XXX..... | |
| 2. 2014..... | 287,627 | 1,952 | 285,675 | 151,428 | 1,163 | 8,993 | 39 | 15,643 | | 1,952 | 174,863 | 23,328 | |
| 3. 2015..... | 315,293 | 1,516 | 313,778 | 165,258 | 315 | 9,333 | | 17,791 | | 2,183 | 192,067 | 25,464 | |
| 4. 2016..... | 398,386 | 1,479 | 396,907 | 246,232 | 3,714 | 13,591 | 25 | 23,599 | | 2,692 | 279,683 | 32,180 | |
| 5. 2017..... | 466,912 | 1,730 | 465,182 | 281,399 | 1,063 | 14,841 | | 26,548 | | 3,057 | 321,725 | 34,291 | |
| 6. 2018..... | 596,115 | 2,036 | 594,079 | 348,744 | 2,964 | 18,911 | 14 | 31,909 | | 4,067 | 396,587 | 38,650 | |
| 7. 2019..... | 753,611 | 2,821 | 750,790 | 439,777 | 1,905 | 24,046 | | 39,093 | | 5,170 | 501,012 | 43,545 | |
| 8. 2020..... | 844,813 | 3,187 | 841,626 | 395,576 | 1,346 | 20,814 | 48 | 38,352 | | 5,017 | 453,348 | 38,078 | |
| 9. 2021..... | 1,202,993 | 8,529 | 1,194,464 | 534,833 | 6,559 | 24,015 | 154 | 51,962 | | 7,712 | 604,097 | 54,957 | |
| 10. 2022..... | 1,517,006 | 19,718 | 1,497,288 | 459,332 | 10,866 | 14,250 | 407 | 53,876 | | 7,404 | 516,185 | 64,518 | |
| 11. 2023 | 1,546,535 | 3,589 | 1,542,946 | 179,284 | 384 | 2,821 | 1 | 44,741 | | 4,838 | 226,462 | 58,127 | |
| 12. Totals | XXX | XXX | XXX | 3,203,609 | 31,787 | 151,679 | 700 | 343,553 | | 44,110 | 3,666,353 | 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..... | 7,654 | 7,529 | | | 62 | | | | 229 | | | 417 | 12 | | | |
| 2. 2014..... | 190 | 43 | | | 38 | | | | 17 | | | 202 | 4 | | | |
| 3. 2015..... | 438 | | | | 37 | | | | 11 | | | 487 | 4 | | | |
| 4. 2016..... | 3,154 | 774 | 39 | | 182 | | | | .57 | | | 2,658 | 16 | | | |
| 5. 2017..... | 4,175 | | 48 | | 357 | | | | 117 | | | 4,697 | 42 | | | |
| 6. 2018..... | 11,505 | 733 | 67 | | 1,052 | | | | 298 | | | 12,188 | 106 | | | |
| 7. 2019..... | 33,526 | | 104 | | 3,068 | | | | 674 | | | 37,373 | 241 | | | |
| 8. 2020..... | 59,963 | 1,048 | 4,498 | 5 | 5,604 | | .974 | | 1,306 | | | 71,291 | 441 | | | |
| 9. 2021..... | 217,997 | 2,256 | 12,537 | 241 | 21,661 | 126 | 3,197 | 52 | 5,732 | | | 258,449 | 1,634 | | | |
| 10. 2022..... | 484,269 | 14,185 | 52,318 | 1,864 | 42,296 | 1,200 | 5,801 | 181 | 15,715 | | | 582,969 | 4,539 | | | |
| 11. 2023 | 629,254 | 1,073 | 184,564 | 297 | 46,125 | 11 | 16,062 | 10 | 34,349 | | | 7,553 | 908,962 | | | |
| 12. Totals | 1,452,126 | 27,641 | 254,175 | 2,407 | 120,484 | 1,337 | 26,033 | 244 | 58,504 | | | 10,485 | 1,879,693 | | | |
| | | | | | | | | | | | | | 20,957 | | | |

| | 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..... | 125 | 292 |
| 2. 2014..... | 176,310 | 1,245 | 175,065 | .61.3 | 63.8 | .61.3 | | | .49.0 | 147 | 55 |
| 3. 2015..... | 192,869 | 315 | 192,553 | .61.2 | 20.8 | .61.4 | | | .49.0 | 438 | 48 |
| 4. 2016..... | 286,852 | 4,512 | 282,340 | 72.0 | 305.1 | 71.1 | | | .49.0 | 2,419 | 239 |
| 5. 2017..... | 327,485 | 1,063 | 326,422 | 70.1 | 61.5 | 70.2 | | | .49.0 | 4,223 | 474 |
| 6. 2018..... | 412,485 | 3,710 | 408,775 | .69.2 | 182.2 | .68.8 | | | .49.0 | 10,839 | 1,349 |
| 7. 2019..... | 540,289 | 1,905 | 538,385 | 71.7 | 67.5 | 71.7 | | | .49.0 | 33,631 | 3,742 |
| 8. 2020..... | 527,086 | 2,447 | 524,639 | .62.4 | 76.8 | .62.3 | | | .49.0 | 63,408 | 7,884 |
| 9. 2021..... | 871,933 | 9,387 | 862,546 | .72.5 | 110.1 | .72.2 | | | .49.0 | 228,037 | 30,412 |
| 10. 2022..... | 1,127,858 | 28,704 | 1,099,154 | .74.3 | 145.6 | .73.4 | | | .49.0 | 520,538 | 62,431 |
| 11. 2023 | 1,137,199 | 1,776 | 1,135,424 | 73.5 | 49.5 | 73.6 | | | .49.0 | 812,449 | 96,513 |
| 12. Totals | XXX | XXX | XXX | XXX | XXX | XXX | | | XXX | 1,676,253 | 203,440 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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..... | 74 | | | | 4 | | | 78 | 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 | 74 | | | | 4 | | | 78 | 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..... | 754 | | | | 24 | | | | 7 | | | 785 | 1 | | | |
| 2. 2014..... | | | | | | | | | | | | | | | | |
| 3. 2015..... | | | | | | | | | | | | | | | | |
| 4. 2016..... | | | | | | | | | | | | | | | | |
| 5. 2017..... | | | | | | | | | | | | | | | | |
| 6. 2018..... | | | | | | | | | | | | | | | | |
| 7. 2019..... | | | | | | | | | | | | | | | | |
| 8. 2020..... | | | | | | | | | | | | | | | | |
| 9. 2021..... | | | | | | | | | | | | | | | | |
| 10. 2022..... | | | | | | | | | | | | | | | | |
| 11. 2023..... | | | | | | | | | | | | | | | | |
| 12. Totals | 754 | | | | 24 | | | | 7 | | | 785 | 1 | | | |

| | 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..... | 754 | 30 |
| 2. 2014..... | | | | | | | | | 49.0 | | |
| 3. 2015..... | | | | | | | | | 49.0 | | |
| 4. 2016..... | | | | | | | | | 49.0 | | |
| 5. 2017..... | | | | | | | | | 49.0 | | |
| 6. 2018..... | | | | | | | | | 49.0 | | |
| 7. 2019..... | | | | | | | | | 49.0 | | |
| 8. 2020..... | | | | | | | | | 49.0 | | |
| 9. 2021..... | | | | | | | | | 49.0 | | |
| 10. 2022..... | | | | | | | | | 49.0 | | |
| 11. 2023..... | | | | | | | | | 49.0 | | |
| 12. Totals | XXX | XXX | XXX | XXX | XXX | XXX | | | XXX | 754 | 30 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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..... | 36 | ..... | 35 | 3 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | 3 | |
| 8. 2020..... | 233 | 49 | 184 | 33 | ..... | ..... | ..... | ..... | ..... | ..... | ..... | 33 | |
| 9. 2021..... | 1,213 | 32 | 1,180 | .698 | .7 | .74 | ..... | 6 | ..... | 5 | .771 | .46 | |
| 10. 2022..... | 3,702 | 106 | 3,596 | 1,680 | 12 | .24 | ..... | 34 | ..... | 29 | 1,726 | 133 | |
| 11. 2023..... | 8,010 | 216 | 7,793 | 911 | 9 | 2 | ..... | 35 | ..... | 2 | 938 | 160 | |
| 12. Totals | XXX | XXX | XXX | 3,325 | 29 | 99 | ..... | 75 | ..... | 35 | 3,470 | 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..... | ..... | ..... | 3 | ..... | ..... | ..... | 1 | ..... | ..... | ..... | 4 | ..... | ..... |
| 9. 2021..... | 195 | ..... | 30 | ..... | .27 | ..... | 10 | ..... | .32 | ..... | .294 | 1 | ..... |
| 10. 2022..... | 611 | ..... | 275 | 2 | 85 | ..... | 64 | 1 | 125 | ..... | 1,156 | 15 | ..... |
| 11. 2023..... | 1,444 | ..... | 2,198 | 26 | 202 | ..... | 287 | 2 | 476 | 1 | 4,578 | 57 | ..... |
| 12. Totals | 2,249 | ..... | 2,507 | 28 | 315 | ..... | 362 | 3 | 633 | 2 | 6,032 | 74 | ..... |

| | 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..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .49.0 | ..... |
| 3. 2015..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .49.0 | ..... |
| 4. 2016..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .49.0 | ..... |
| 5. 2017..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .49.0 | ..... |
| 6. 2018..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | .49.0 | ..... |
| 7. 2019..... | 3 | ..... | 3 | 7.7 | ..... | 7.7 | ..... | ..... | ..... | .49.0 | ..... |
| 8. 2020..... | 37 | ..... | 37 | 15.9 | .0.1 | .20.1 | ..... | ..... | .49.0 | 3 | 1 |
| 9. 2021..... | 1,073 | 8 | 1,065 | .88.5 | .23.9 | .90.3 | ..... | ..... | .49.0 | .225 | .69 |
| 10. 2022..... | 2,897 | 16 | 2,882 | .78.3 | .14.8 | .80.1 | ..... | ..... | .49.0 | .883 | .273 |
| 11. 2023..... | 5,554 | 38 | 5,516 | 69.3 | 17.7 | .70.8 | ..... | ..... | .49.0 | 3,616 | 961 |
| 12. Totals | XXX | XXX | XXX | XXX | XXX | XXX | ..... | ..... | XXX | 4,727 | 1,305 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
SCHEDULE P - PART 1F - SECTION 1 - MEDICAL PROFESSIONAL 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..... | | | | | | | | | 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 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..... | | | | | | | | | | | |
| 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 CASUALTY INSURANCE COMPANY
SCHEDULE P - PART 1F - SECTION 2 - MEDICAL PROFESSIONAL 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..... | 15 | | | 15 | | | | | | | | | |
| 3. 2015..... | 15 | | | 15 | | | | | | | | | |
| 4. 2016..... | 15 | | | 15 | | | | | | | | | |
| 5. 2017..... | 15 | | | 15 | | | | | | | | | |
| 6. 2018..... | 15 | | | 15 | | | | | | | | | |
| 7. 2019..... | 15 | | | 15 | | | | | | | | | |
| 8. 2020..... | 15 | | | 15 | | | | | | | | | |
| 9. 2021..... | 15 | | | 15 | | | | | | | | | |
| 10. 2022..... | 16 | | | 16 | | | | | | | | | |
| 11. 2023 | 17 | | | 17 | | | | | | | | | |
| 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 | 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..... | | | | | | | | | .49.0 | | |
| 3. 2015..... | | | | | | | | | .49.0 | | |
| 4. 2016..... | | | | | | | | | .49.0 | | |
| 5. 2017..... | | | | | | | | | .49.0 | | |
| 6. 2018..... | | | | | | | | | .49.0 | | |
| 7. 2019..... | | | | | | | | | .49.0 | | |
| 8. 2020..... | | | | | | | | | .49.0 | | |
| 9. 2021..... | | | | | | | | | .49.0 | | |
| 10. 2022..... | | | | | | | | | .49.0 | | |
| 11. 2023 | | | | | | | | | .49.0 | | |
| 12. Totals | XXX | XXX | XXX | XXX | XXX | XXX | | | XXX | | |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
**SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
 BOILER AND MACHINERY)**

(\$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..... | | | | | | | | | | | | XXX..... | |
| 3. 2015..... | | | | | | | | | | | | XXX..... | |
| 4. 2016..... | | | | | | | | | | | | XXX..... | |
| 5. 2017..... | | | | | | | | | | | | XXX..... | |
| 6. 2018..... | | | | | | | | | | | | XXX..... | |
| 7. 2019..... | | | | | | | | | | | | XXX..... | |
| 8. 2020..... | | | | | | | | | | | | XXX..... | |
| 9. 2021..... | | | | | | | | | | | | XXX..... | |
| 10. 2022..... | | | | | | | | | | | | XXX..... | |
| 11. 2023..... | | | | | | | | | | | | XXX..... | |
| 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 CASUALTY INSURANCE COMPANY

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..... | 304 | 191 | 231 | 417 | ..... | ..... | ..... | ..... | (72)..... | |
| 2. 2014..... | 35,442 | 2,521 | 32,921 | 8,313 | 504 | 344 | 8 | 1,346 | ..... | ..... | 119 | 9,491..... | |
| 3. 2015..... | 35,264 | 2,597 | 32,667 | 10,499 | 1,045 | 588 | 7 | 1,649 | ..... | ..... | 83 | 11,685..... | |
| 4. 2016..... | 36,130 | 2,767 | 33,363 | 14,886 | 1,304 | 1,306 | ..... | 1,719 | ..... | ..... | 73 | 16,607..... | |
| 5. 2017..... | 37,349 | 3,032 | 34,318 | 15,126 | 1,798 | 608 | 7 | 2,547 | ..... | ..... | 97 | 16,476..... | |
| 6. 2018..... | 40,234 | 3,656 | 36,578 | 13,760 | 1,171 | 732 | 4 | 2,295 | ..... | ..... | 128 | 15,613..... | |
| 7. 2019..... | 44,885 | 4,498 | 40,387 | 16,701 | 2,729 | 1,039 | 19 | 1,630 | ..... | ..... | 39 | 16,622..... | |
| 8. 2020..... | 48,239 | 2,275 | 45,964 | 20,368 | 922 | 661 | 2 | 2,117 | ..... | ..... | 124 | 22,221..... | |
| 9. 2021..... | 54,983 | 497 | 54,487 | 13,610 | 191 | 621 | ..... | 1,897 | ..... | ..... | 99 | 15,938..... | |
| 10. 2022..... | 59,944 | 438 | 59,506 | 19,969 | 188 | 373 | ..... | 2,282 | ..... | ..... | 137 | 22,435..... | |
| 11. 2023..... | 61,426 | 359 | 61,067 | 6,747 | ..... | 57 | ..... | 1,511 | ..... | ..... | 77 | 8,314..... | |
| 12. Totals | XXX | XXX | XXX | 140,283 | 10,043 | 6,560 | 466 | 18,994 | ..... | ..... | 976 | 155,329 | |
| | | | | | | | | | | | | 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..... | 1,558 | 430 | 1,932 | 831 | 698 | 391 | 1,123 | 755 | 1 | ..... | ..... | ..... | 2,906 |
| 2. 2014..... | 12 | ..... | ..... | ..... | 1 | ..... | ..... | ..... | 1 | ..... | ..... | ..... | 15 |
| 3. 2015..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 4. 2016..... | 78 | ..... | ..... | ..... | 36 | ..... | ..... | ..... | 8 | ..... | ..... | ..... | 122 |
| 5. 2017..... | 196 | 98 | ..... | ..... | 1 | ..... | ..... | ..... | 1 | ..... | ..... | ..... | 99 |
| 6. 2018..... | 836 | 99 | ..... | ..... | 35 | 2 | ..... | ..... | 11 | ..... | ..... | ..... | 782 |
| 7. 2019..... | 870 | 99 | ..... | ..... | 169 | 27 | ..... | ..... | 28 | ..... | ..... | ..... | .940 |
| 8. 2020..... | 1,450 | 2 | 513 | 105 | 171 | 3 | 29 | ..... | .57 | ..... | ..... | 2,111 | |
| 9. 2021..... | 4,733 | .4 | 1,212 | 33 | 591 | ..... | 48 | ..... | 161 | ..... | ..... | 6,707 | |
| 10. 2022..... | 4,872 | 3 | 3,063 | 74 | 608 | ..... | 180 | 1 | 278 | ..... | ..... | 17 | 8,923 |
| 11. 2023..... | 7,259 | 3 | 6,832 | 108 | 609 | ..... | 371 | 4 | 892 | ..... | ..... | 118 | 15,848 |
| 12. Totals | 21,865 | 739 | 13,553 | 1,151 | 2,920 | 422 | 1,751 | 760 | 1,437 | ..... | ..... | 142 | 38,452 |
| | | | | | | | | | | | | | 407 |

| | 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 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | | 35 | 36 |
| | 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..... | 2,229 | 677 |
| 2. 2014..... | 10,018 | 512 | 9,506 | 28.3 | 20.3 | 28.9 | ..... | ..... | .49.0 | 12 | 3 |
| 3. 2015..... | 12,737 | 1,052 | 11,685 | 36.1 | 40.5 | 35.8 | ..... | ..... | .49.0 | ..... | ..... |
| 4. 2016..... | 18,034 | 1,304 | 16,730 | 49.9 | 47.1 | 50.1 | ..... | ..... | .49.0 | 78 | 44 |
| 5. 2017..... | 18,479 | 1,904 | 16,575 | 49.5 | 62.8 | 48.3 | ..... | ..... | .49.0 | 98 | 1 |
| 6. 2018..... | 17,670 | 1,276 | 16,394 | 43.9 | 34.9 | 44.8 | ..... | ..... | .49.0 | .737 | 45 |
| 7. 2019..... | 20,437 | 2,875 | 17,561 | 45.5 | 63.9 | 43.5 | ..... | ..... | .49.0 | .770 | 170 |
| 8. 2020..... | 25,366 | 1,034 | 24,332 | 52.6 | 45.5 | 52.9 | ..... | ..... | .49.0 | 1,856 | 255 |
| 9. 2021..... | 22,873 | 229 | 22,644 | 41.6 | 46.0 | 41.6 | ..... | ..... | .49.0 | 5,907 | 799 |
| 10. 2022..... | 31,625 | 267 | 31,358 | 52.8 | 61.0 | 52.7 | ..... | ..... | .49.0 | 7,858 | 1,065 |
| 11. 2023..... | 24,277 | 115 | 24,162 | 39.5 | 32.1 | 39.6 | ..... | ..... | .49.0 | 13,980 | 1,867 |
| 12. Totals | XXX | XXX | XXX | XXX | XXX | XXX | ..... | ..... | XXX | 33,527 | 4,926 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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..... | 627 | 597 | 36 | 34 | 1 | | 1 | 33 | XXX..... | |
| 2. 2014..... | 245 | 86 | 159 | | | | | | | | | 2 | |
| 3. 2015..... | 171 | 236 | (65) | | | | | 3 | | | 3 | 1 | |
| 4. 2016..... | 153 | 28 | 125 | 3 | | | | 1 | | | 4 | 2 | |
| 5. 2017..... | 140 | 5 | 136 | | | | | | | | | | |
| 6. 2018..... | 134 | | 134 | 7,350 | | | | 13 | | | 7,363 | | |
| 7. 2019..... | 138 | 1 | 137 | | | | | | | | | | |
| 8. 2020..... | 143 | 9 | 134 | 23,933 | | | | | | | 23,933 | 1 | |
| 9. 2021..... | 461 | 47 | 415 | 9,800 | | | | 4 | | | 9,804 | | |
| 10. 2022..... | 577 | 137 | 441 | 7,382 | 4 | | | | | | 7,378 | 1 | |
| 11. 2023..... | 710 | 265 | 445 | 7,558 | | | | 25 | | | 7,583 | 2 | |
| 12. Totals | XXX | XXX | XXX | 56,654 | 600 | 36 | 34 | 48 | | 1 | 56,103 | 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..... | 418 | 397 | | | 5 | 5 | | | | | | | 21 |
| 2. 2014..... | | | | | | | | | | | | | |
| 3. 2015..... | | | | | | | | | | | | | |
| 4. 2016..... | | | | | | | | | | | | | |
| 5. 2017..... | | | | | | | | | | | | | |
| 6. 2018..... | | | | | | | | | | | | | |
| 7. 2019..... | | | | | | | | | | | | | |
| 8. 2020..... | | | | | | 13 | | 16 | | | | 30 | |
| 9. 2021..... | | | 2 | | | 41 | | 51 | | | | .93 | |
| 10. 2022..... | | | 739 | | | 54 | | .67 | | | | .860 | |
| 11. 2023..... | 94 | | 15,488 | 64 | 5 | 5 | 161 | | 70 | | | 15,641 | 1 |
| 12. Totals | 512 | 397 | 16,229 | 64 | 5 | 5 | 161 | | 204 | | | 16,645 | 1 |

| | 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..... | 21 | |
| 2. 2014..... | | | | 0.1 | | .0.1 | | | | .49.0 | |
| 3. 2015..... | 3 | | 3 | 1.9 | | (5.1) | | | | .49.0 | |
| 4. 2016..... | 4 | | 4 | 2.7 | | .3.3 | | | | .49.0 | |
| 5. 2017..... | | | | 0.3 | | 0.3 | | | | .49.0 | |
| 6. 2018..... | 7,363 | | 7,363 | 5,478.9 | | 5,478.9 | | | | .49.0 | |
| 7. 2019..... | | | | 0.0 | | 0.0 | | | | .49.0 | |
| 8. 2020..... | 23,963 | | 23,963 | 16,757.4 | 0.0 | 17,882.9 | | | | .49.0 | 29 |
| 9. 2021..... | 9,897 | | 9,897 | 2,146.1 | 0.0 | 2,387.2 | | | | .49.0 | 2 |
| 10. 2022..... | 8,242 | 4 | 8,238 | 1,427.2 | 2.8 | 1,869.7 | | | | .49.0 | 739 |
| 11. 2023..... | 23,289 | 64 | 23,225 | 3,279.4 | 24.3 | 5,217.6 | | | | .49.0 | 15,517 |
| 12. Totals | XXX | XXX | XXX | XXX | XXX | XXX | | | XXX | 16,279 | 366 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
**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 | 798 | | 200 | | 94 | | 1,061 | 1,092 | XXX | |
| 2. 2022 | 197,404 | | 197,404 | 138,111 | | 202 | | 15,961 | | 20,615 | 154,275 | XXX | |
| 3. 2023 | 207,488 | | 207,488 | 71,425 | | 74 | | 13,039 | | 4,097 | 84,539 | XXX | |
| 4. Totals | XXX | XXX | XXX | 210,335 | | 476 | | 29,095 | | 25,773 | 239,906 | 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 | 419 | | 40 | | 30 | | 47 | | 10 | | 458 | 546 | 21 | | | |
| 2. 2022 | 1,605 | | 328 | | 89 | | 176 | | 126 | | 1,882 | 2,325 | 65 | | | |
| 3. 2023 | 10,296 | | 4,175 | | 284 | | 269 | | 1,642 | | 6,894 | 16,667 | 851 | | | |
| 4. Totals | 12,319 | | 4,544 | | 403 | | 493 | | 1,779 | | 9,235 | 19,538 | 936 | | | |

| | 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 | 459 | 88 |
| 2. 2022 | 156,599 | | 156,599 | 79.3 | | 79.3 | | | 49.0 | 1,933 | 392 |
| 3. 2023 | 101,206 | | 101,206 | 48.8 | | 48.8 | | | 49.0 | 14,471 | 2,196 |
| 4. Totals | XXX | XXX | XXX | XXX | XXX | XXX | | | XXX | 16,863 | 2,675 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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..... | (8,549) | (14) | 4,427 | 1 | 2,560 | | | 27,765 | (1,549).....XXX..... | |
| 2. 2022..... | 3,941,878 | 1,292 | 3,940,586 | 2,966,306 | 1,419 | 4,447 | 2 | 320,462 | | | 724,994 | 3,289,794.....1,420,916 | |
| 3. 2023 | 4,912,089 | 15 | 4,912,074 | 3,177,777 | (25) | 1,730 | | 347,322 | | | 498,393 | 3,526,854.....1,490,781 | |
| 4. Totals | XXX | XXX | XXX | 6,135,534 | 1,381 | 10,605 | 3 | 670,343 | | | 1,251,152 | 6,815,099.....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..... | 5,619 | | 2,161 | | 4,917 | | 16 | | 768 | | | 16,114 | 13,481.....1,218 | | | |
| 2. 2022..... | 5,897 | 4 | (7,798) | (6) | 3,392 | 4 | 517 | | 3,914 | | | 27,295 | 5,921.....968 | | | |
| 3. 2023 | 268,018 | 3 | (173,334) | (2) | 11,403 | | 4,248 | | 34,513 | | | 388,340 | 144,848.....65,574 | | | |
| 4. Totals | 279,534 | 8 | (178,970) | (8) | 19,712 | 4 | 4,781 | | 39,196 | | | 431,748 | 164,249.....67,760 | | | |

| | 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..... | 7,780 | 5,701 |
| 2. 2022..... | 3,297,138 | 1,424 | 3,295,714 | 83.6 | 110.2 | 83.6 | | | 49.0 | (1,899) | 7,820 |
| 3. 2023 | 3,671,678 | (24) | 3,671,702 | 74.7 | (159.2) | 74.7 | | | 49.0 | 94,683 | 50,164 |
| 4. Totals | XXX | XXX | XXX | XXX | XXX | XXX | | | XXX | 100,564 | 63,685 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

SCHEDULE P - PART 1K - FIDELITY/SURETY

(\$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..... | (27) | (12) | | | | | | 27 | (16)..... | |
| 2. 2022..... | 1..... | | 1..... | | | | | | | | | XXX..... | |
| 3. 2023 | 3..... | | 3..... | | | | | | | | | XXX | |
| 4. Totals | XXX | XXX | XXX | (27) | (12) | | | | | | 27 | (16)..... | |

| | 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 | | | | | | | | | | | | | | | | |
| 2. 2022..... | | | | | | | | | | | | | | | | |
| 3. 2023 | | | | | | | | | | | | | | | | |
| 4. 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..... | | XXX..... | XXX..... |
| 2. 2022..... | | | | | | | | | | 49.0 | |
| 3. 2023 | | | | | | | | | | 49.0 | |
| 4. Totals | XXX | XXX | XXX | XXX | XXX | XXX | | | XXX | | |

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
SCHEDULE P - PART 10 - REINSURANCE - NONPROPORTIONAL ASSUMED LIABILITY
 (\$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..... | 790 | | | | | | | | 790 | XXX..... |
| 2. 2014..... | | | | | | | | | | | | | XXX..... |
| 3. 2015..... | | | | | | | | | | | | | XXX..... |
| 4. 2016..... | | | | | | | | | | | | | XXX..... |
| 5. 2017..... | | | | | | | | | | | | | XXX..... |
| 6. 2018..... | | | | | | | | | | | | | XXX..... |
| 7. 2019..... | | | | | | | | | | | | | XXX..... |
| 8. 2020..... | | | | | | | | | | | | | XXX..... |
| 9. 2021..... | | | | | | | | | | | | | XXX..... |
| 10. 2022..... | | | | | | | | | | | | | XXX..... |
| 11. 2023 | | | | | | | | | | | | | XXX |
| 12. Totals | XXX | XXX | XXX | 790 | | | | | | | | 790 | 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..... | 112 | | 230 | | | | | | | | | | 342 | XXX..... |
| 2. 2014..... | | | | | | | | | | | | | | XXX..... |
| 3. 2015..... | | | | | | | | | | | | | | XXX..... |
| 4. 2016..... | | | | | | | | | | | | | | XXX..... |
| 5. 2017..... | | | | | | | | | | | | | | XXX..... |
| 6. 2018..... | | | | | | | | | | | | | | XXX..... |
| 7. 2019..... | | | | | | | | | | | | | | XXX..... |
| 8. 2020..... | | | | | | | | | | | | | | XXX..... |
| 9. 2021..... | | | | | | | | | | | | | | XXX..... |
| 10. 2022..... | | | | | | | | | | | | | | XXX..... |
| 11. 2023 | | | | | | | | | | | | | | XXX |
| 12. Totals | 112 | | 230 | | | | | | | | | | 342 | XXX |

| | 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..... | | 342 |
| 2. 2014..... | | | | | | | | | | | 49.0 |
| 3. 2015..... | | | | | | | | | | | 49.0 |
| 4. 2016..... | | | | | | | | | | | 49.0 |
| 5. 2017..... | | | | | | | | | | | 49.0 |
| 6. 2018..... | | | | | | | | | | | 49.0 |
| 7. 2019..... | | | | | | | | | | | 49.0 |
| 8. 2020..... | | | | | | | | | | | 49.0 |
| 9. 2021..... | | | | | | | | | | | 49.0 |
| 10. 2022..... | | | | | | | | | | | 49.0 |
| 11. 2023 | | | | | | | | | | | 49.0 |
| 12. Totals | XXX | XXX | XXX | XXX | XXX | XXX | | | XXX | | 342 |

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 CASUALTY INSURANCE COMPANY

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

| Years in Which Losses Were Incurred | INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED) | | | | | | | | | | DEVELOPMENT | |
|---|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|----------------|----------------|
| | 1 2014 | 2 2015 | 3 2016 | 4 2017 | 5 2018 | 6 2019 | 7 2020 | 8 2021 | 9 2022 | 10 2023 | 11 One Year | 12 Two Year |
| 1. Prior..... | 308 | 215 | 186 | 402 | 355 | 354 | 356 | 355 | 355 | 355 | | (1) |
| 2. 2014..... | 8,635 | 8,597 | 8,661 | 8,595 | 8,562 | 8,512 | 8,524 | 8,524 | 8,524 | 8,524 | | |
| 3. 2015..... | XXX | 8,133 | 7,843 | 7,798 | 7,883 | 7,832 | 7,835 | 7,835 | 7,835 | 7,835 | | |
| 4. 2016..... | XXX | XXX | 7,917 | 7,466 | 7,401 | 7,374 | 7,359 | 7,368 | 7,368 | 7,368 | | |
| 5. 2017..... | XXX | XXX | XXX | 11,748 | 11,679 | 11,461 | 11,445 | 11,435 | 11,440 | 11,441 | 1 | 6 |
| 6. 2018..... | XXX | XXX | XXX | XXX | 9,461 | 9,334 | 9,487 | 9,530 | 9,416 | 9,418 | 1 | (112) |
| 7. 2019..... | XXX | XXX | XXX | XXX | XXX | 12,795 | 12,730 | 12,804 | 12,782 | 12,771 | (11) | (33) |
| 8. 2020..... | XXX | XXX | XXX | XXX | XXX | XXX | 16,406 | 16,466 | 16,341 | 16,352 | 10 | (115) |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 15,118 | 14,316 | 14,533 | 216 | (585) |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 17,897 | 17,928 | 31 | XXX |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 19,893 | XXX | XXX |
| | | | | | | | | | | | 12. Totals | 249 |
| | | | | | | | | | | | | (840) |

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

| | | | | | | | | | | | | |
|---------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|----------|
| 1. Prior..... | 608,011 | 602,016 | 591,038 | 574,502 | 581,873 | 585,999 | 587,168 | 589,449 | 591,008 | 592,977 | 1,969 | 3,527 |
| 2. 2014..... | 1,804,385 | 1,769,214 | 1,772,883 | 1,783,750 | 1,762,774 | 1,765,818 | 1,767,708 | 1,767,138 | 1,767,167 | 1,767,604 | 437 | 465 |
| 3. 2015..... | XXX | 1,839,898 | 1,846,304 | 1,859,324 | 1,866,146 | 1,846,560 | 1,851,685 | 1,853,062 | 1,852,417 | 1,852,627 | 210 | (435) |
| 4. 2016..... | XXX | XXX | 1,996,875 | 2,021,350 | 2,031,168 | 2,043,424 | 2,023,743 | 2,034,762 | 2,035,584 | 2,037,990 | 2,406 | 3,228 |
| 5. 2017..... | XXX | XXX | XXX | 2,207,471 | 2,213,620 | 2,224,278 | 2,241,106 | 2,222,459 | 2,228,754 | 2,229,687 | 933 | 7,228 |
| 6. 2018..... | XXX | XXX | XXX | XXX | 2,570,971 | 2,585,738 | 2,592,393 | 2,615,156 | 2,585,626 | 2,593,730 | 8,104 | (21,427) |
| 7. 2019..... | XXX | XXX | XXX | XXX | XXX | 2,964,740 | 2,969,591 | 2,989,967 | 3,010,302 | 2,969,566 | (40,737) | (20,401) |
| 8. 2020..... | XXX | XXX | XXX | XXX | XXX | XXX | 2,731,013 | 2,719,753 | 2,710,202 | 2,743,762 | 33,560 | 24,009 |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 3,371,141 | 3,449,012 | 3,485,186 | 36,173 | 114,045 |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 3,576,177 | 3,691,784 | 115,607 | XXX |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 4,444,183 | XXX | XXX | XXX |
| | | | | | | | | | | | 12. Totals | 158,661 |
| | | | | | | | | | | | | 110,240 |

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

| | | | | | | | | | | | | |
|---------------|---------|---------|---------|---------|---------|---------|---------|---------|-----------|---------|------------|----------|
| 1. Prior..... | 128,316 | 123,464 | 121,669 | 117,710 | 117,600 | 118,336 | 117,209 | 117,686 | 117,968 | 117,838 | (130) | 153 |
| 2. 2014..... | 163,756 | 158,866 | 163,439 | 159,764 | 157,931 | 159,289 | 159,324 | 159,698 | 159,303 | 159,404 | 101 | (294) |
| 3. 2015..... | XXX | 178,994 | 183,086 | 182,630 | 178,547 | 176,037 | 175,386 | 175,455 | 175,173 | 174,752 | (421) | (703) |
| 4. 2016..... | XXX | XXX | 260,422 | 261,789 | 266,721 | 262,905 | 259,956 | 258,809 | 259,025 | 258,684 | (340) | (125) |
| 5. 2017..... | XXX | XXX | XXX | 302,855 | 301,051 | 308,956 | 303,343 | 299,057 | 299,474 | 299,757 | 283 | 700 |
| 6. 2018..... | XXX | XXX | XXX | XXX | 364,651 | 376,771 | 387,177 | 377,948 | 376,993 | 376,568 | (425) | (1,380) |
| 7. 2019..... | XXX | XXX | XXX | XXX | XXX | 469,428 | 487,266 | 503,258 | 498,654 | 498,618 | (36) | (4,640) |
| 8. 2020..... | XXX | XXX | XXX | XXX | XXX | XXX | 478,257 | 497,016 | 490,788 | 484,982 | (5,806) | (12,035) |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | 780,939 | 800,065 | 804,853 | 4,788 | 23,913 | |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 974,711 | 1,029,563 | 54,852 | XXX | |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 1,056,334 | XXX | XXX | XXX |
| | | | | | | | | | | | 12. Totals | 52,865 |
| | | | | | | | | | | | | 5,590 |

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

| | | | | | | | | | | | | |
|---------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------------|-------|
| 1. Prior..... | 1,002 | 1,014 | 1,025 | 1,005 | 1,007 | 1,152 | 1,145 | 1,111 | 1,127 | 1,129 | 2 | 18 |
| 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 | 9 | 3 | 3 | 3 | 3 | | |
| 8. 2020..... | XXX | XXX | XXX | XXX | XXX | XXX | 79 | 54 | 40 | 37 | (3) | (17) |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 1,283 | 1,067 | 1,027 | (41) | (256) |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 2,896 | 2,723 | (173) | XXX |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 5,007 | XXX | XXX |
| | | | | | | | | | | | 12. Totals | (216) |
| | | | | | | | | | | | | (273) |

SCHEDULE P - PART 2E - 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 | XXX | 9 | 3 | 3 | 3 | 3 | | |
| 8. 2020..... | XXX | XXX | XXX | XXX | XXX | XXX | 79 | 54 | 40 | 37 | (3) | (17) |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 1,283 | 1,067 | 1,027 | (41) | (256) |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 2,896 | 2,723 | (173) | XXX |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 5,007 | XXX | XXX |
| | | | | | | | | | | | 12. Totals | (216) |
| | | | | | | | | | | | | (273) |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

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

| | | | | | | | | | | | | |
|------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------|-------|
| 1. Prior | 15,448 | 13,622 | 13,344 | 13,445 | 13,677 | 14,271 | 14,834 | 14,393 | 14,709 | 14,053 | (656) | (341) |
| 2. 2014 | 10,639 | 9,574 | 9,304 | 8,669 | 8,208 | 8,165 | 8,164 | 8,174 | 8,172 | 8,159 | (13) | (15) |
| 3. 2015 | XXX | 12,539 | 12,549 | 11,360 | 10,693 | 10,147 | 10,039 | 10,041 | 10,029 | 10,036 | 7 | (5) |
| 4. 2016 | XXX | XXX | 14,740 | 15,062 | 14,672 | 14,563 | 14,367 | 14,748 | 14,911 | 15,003 | 92 | 255 |
| 5. 2017 | XXX | XXX | XXX | 15,709 | 15,624 | 14,989 | 14,653 | 14,312 | 14,093 | 14,027 | (66) | (285) |
| 6. 2018 | XXX | XXX | XXX | XXX | 14,229 | 15,290 | 14,092 | 13,752 | 13,627 | 14,088 | 461 | 336 |
| 7. 2019 | XXX | XXX | XXX | XXX | XXX | 16,442 | 16,461 | 15,313 | 15,551 | 15,904 | 353 | 591 |
| 8. 2020 | XXX | XXX | XXX | XXX | XXX | XXX | 23,366 | 22,589 | 22,240 | 22,158 | (82) | (432) |
| 9. 2021 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 21,063 | 19,718 | 20,586 | 868 | (477) |
| 10. 2022 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 28,811 | 28,798 | (13) | XXX |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 21,760 | XXX | XXX | |
| 12. Totals | | | | | | | | | | | 950 | (373) |

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
**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..... | 13,645 | 14,113 | 13,720 | (392) | 75 |
| 2. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 137,793 | 140,511 | 2,718 | XXX..... | |
| 3. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 86,524 | XXX | XXX |
| | | | | | | | | | | 4. Totals | 2,326 | 75 |

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

| | | | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|-----------|-----------|-----------|----------|----------|
| 1. Prior..... | XXX..... | 164,656 | 106,606 | 111,112 | 4,506 | (53,543) |
| 2. 2022..... | XXX..... | 2,929,850 | 2,971,339 | 41,489 | XXX..... | |
| 3. 2023 | XXX | XXX | 3,289,867 | XXX | XXX |
| | | | | | | | | | | 4. Totals | 45,995 | (53,543) |

SCHEDULE P - PART 2K - FIDELITY/SURETY

| | | | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------|----------|------|
| 1. Prior..... | XXX..... | (15) | (31) | (16) | (31) | |
| 2. 2022..... | XXX..... | XXX..... | |
| 3. 2023 | XXX | XXX | XXX |
| | | | | | | | | | | 4. Totals | (16) | (31) |

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

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

NONE

SCHEDULE P - PART 2M - INTERNATIONAL

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

**SCHEDULE P - PART 2N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

**SCHEDULE P - PART 20 - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

**SCHEDULE P - PART 2P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

SCHEDULE P - PART 2R - SECTION 1 - PRODUCTS 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..... | XXX..... | | | | | | | | |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | | | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | XXX..... |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 12. Totals | | | | | | | | | | | | |

NONE**SCHEDULE P - PART 2R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE**

| | | | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|-----|-----|-----|----------|
| 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..... | XX..... | | | | | | | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 9. 2021..... | XXX..... | | | | | |
| 10. 2022..... | XXX..... | | | | XXX..... |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX |
| 12. Totals | | | | | | | | | | | | |

NONE**SCHEDULE P - PART 2S - FINANCIAL GUARANTY/MORTGAGE GUARANTY**

| | | | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| 1. Prior..... | XXX..... | |
| 2. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XX..... | XXX..... |
| 3. 2023 | XXX | XXX | XXX | XXX | XX | XXX |
| 4. Totals | | | | | | | | | | | | |

NONE**SCHEDULE P - PART 2T - WARRANTY**

| | | | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| 1. Prior..... | XXX..... | |
| 2. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XX..... | XXX..... |
| 3. 2023 | XXX | XXX | XXX | XXX | XX | XXX |
| 4. Totals | | | | | | | | | | | | |

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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..... | 72..... | 110..... | 213..... | 298..... | 349..... | 350..... | 350..... | 349..... | 349..... | 16..... | 3..... |
| 2. 2014..... | 7,358..... | 8,093..... | 8,436..... | 8,492..... | 8,508..... | 8,512..... | 8,524..... | 8,524..... | 8,524..... | 8,524..... | 2,198..... | 1,566..... |
| 3. 2015..... | XXX..... | 6,769..... | 7,636..... | 7,697..... | 7,719..... | 7,832..... | 7,835..... | 7,835..... | 7,835..... | 7,835..... | 1,949..... | 1,495..... |
| 4. 2016..... | XXX..... | XXX..... | 6,450..... | 7,126..... | 7,270..... | 7,349..... | 7,354..... | 7,368..... | 7,368..... | 7,368..... | 2,118..... | 1,555..... |
| 5. 2017..... | XXX..... | XXX..... | XXX..... | 9,502..... | 11,038..... | 11,147..... | 11,410..... | 11,422..... | 11,440..... | 11,441..... | 2,915..... | 1,938..... |
| 6. 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | 7,684..... | 8,981..... | 9,178..... | 9,252..... | 9,410..... | 9,418..... | 2,209..... | 1,946..... |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 10,520..... | 12,250..... | 12,385..... | 12,731..... | 12,736..... | 2,906..... | 2,208..... |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 14,114..... | 15,917..... | 16,227..... | 16,278..... | 16,278..... | 3,382..... | 1,509..... |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 10,842..... | 13,541..... | 14,343..... | 14,343..... | 2,634..... | 1,390..... |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 13,718..... | 16,835..... | 16,835..... | 2,950..... | 1,382..... |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 16,117..... | 2,792..... | 1,228..... |

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

| | | | | | | | | | | | | |
|---------------|--------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|--------------|--------------|
| 1. Prior..... | 000..... | 319,658..... | 464,400..... | 525,419..... | 549,412..... | 566,699..... | 572,702..... | 579,319..... | 582,378..... | 585,350..... | 24,175..... | 4,329..... |
| 2. 2014..... | 894,095..... | 1,406,934..... | 1,609,193..... | 1,702,781..... | 1,737,771..... | 1,753,215..... | 1,760,046..... | 1,763,615..... | 1,764,751..... | 1,766,122..... | 349,075..... | 173,277..... |
| 3. 2015..... | XXX..... | 890,402..... | 1,464,349..... | 1,676,850..... | 1,774,512..... | 1,817,805..... | 1,834,020..... | 1,843,960..... | 1,848,353..... | 1,850,039..... | 350,857..... | 177,923..... |
| 4. 2016..... | XXX..... | XXX..... | 962,233..... | 1,589,441..... | 1,828,406..... | 1,945,343..... | 1,988,440..... | 2,015,174..... | 2,026,238..... | 2,032,866..... | 367,933..... | 189,280..... |
| 5. 2017..... | XXX..... | XXX..... | XXX..... | 1,032,831..... | 1,723,139..... | 2,000,787..... | 2,114,743..... | 2,178,493..... | 2,207,623..... | 2,220,620..... | 388,913..... | 202,939..... |
| 6. 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | 1,200,437..... | 2,019,686..... | 2,320,793..... | 2,468,961..... | 2,538,318..... | 2,572,883..... | 431,817..... | 231,499..... |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 1,380,676..... | 2,293,878..... | 2,669,151..... | 2,845,718..... | 2,920,615..... | 465,193..... | 262,235..... |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 1,210,951..... | 2,075,212..... | 2,421,247..... | 2,580,704..... | 381,149..... | 229,319..... |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 1,448,078..... | 2,648,581..... | 3,118,897..... | 438,748..... | 289,805..... |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 1,535,679..... | 2,826,475..... | 399,816..... | 321,472..... | 250,864..... |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 1,846,836..... | 321,472..... | 238,845..... | |

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

| | | | | | | | | | | | | |
|---------------|-------------|-------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|-------------|-------------|
| 1. Prior..... | 000..... | 64,389..... | 93,330..... | 106,579..... | 111,652..... | 114,728..... | 116,130..... | 117,038..... | 117,364..... | 117,650..... | 1,702..... | 355..... |
| 2. 2014..... | 45,208..... | 87,697..... | 123,385..... | 142,069..... | 151,631..... | 155,736..... | 157,591..... | 158,488..... | 159,126..... | 159,219..... | 15,085..... | 8,238..... |
| 3. 2015..... | XXX..... | 46,846..... | 97,175..... | 132,486..... | 155,309..... | 168,446..... | 171,418..... | 172,631..... | 172,987..... | 174,276..... | 16,215..... | 9,244..... |
| 4. 2016..... | XXX..... | XXX..... | 63,654..... | 141,057..... | 192,796..... | 231,410..... | 246,187..... | 252,398..... | 255,230..... | 256,084..... | 20,236..... | 11,927..... |
| 5. 2017..... | XXX..... | XXX..... | XXX..... | 71,882..... | 155,133..... | 226,994..... | 264,423..... | 280,182..... | 290,381..... | 295,176..... | 21,494..... | 12,756..... |
| 6. 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | 84,862..... | 202,424..... | 286,255..... | 332,184..... | 353,674..... | 364,677..... | 23,788..... | 14,756..... |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | 100,343..... | 245,092..... | 353,109..... | 425,053..... | 461,919..... | 461,919..... | 26,183..... | 17,121..... |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 93,303..... | 229,841..... | 341,833..... | 414,996..... | 414,996..... | 21,946..... | 15,692..... |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 132,983..... | 357,531..... | 552,136..... | 552,136..... | 29,799..... | 23,523..... |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 173,257..... | 462,309..... | 462,309..... | 32,245..... | 27,734..... |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 181,721..... | 21,871..... | 22,338..... | |

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

| | | | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|------------|------------|---------|---------|
| 1. Prior..... | 000..... | 31..... | 66..... | 88..... | 156..... | 200..... | 231..... | 246..... | 277..... | 351..... | 2..... | |
| 2. 2014..... | | | | | | | | | | | | |
| 3. 2015..... | XXX..... | | | | | | | | | | | |
| 4. 2016..... | XXX..... | XXX..... | | | | | | | | | | |
| 5. 2017..... | XXX..... | XXX..... | XXX..... | | | | | | | | | |
| 6. 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | | | |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 18..... | 32..... | 33..... | 33..... | 33..... | 5..... | |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 283..... | 731..... | 765..... | 765..... | 36..... | 8..... |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 823..... | 1,692..... | 1,692..... | 90..... | 28..... |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 903..... | 74..... | 28..... |

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

| | | | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|------------|------------|---------|---------|
| 1. Prior..... | 000..... | | | | | | | | | | | |
| 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..... | 3..... | 3..... | 3..... | 3..... | 3..... | 3..... | | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 18..... | 32..... | 33..... | 33..... | 33..... | 5..... | |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 283..... | 731..... | 765..... | 765..... | 36..... | 8..... |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 823..... | 1,692..... | 1,692..... | 90..... | 28..... |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 903..... | 74..... | 28..... |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

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

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

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

| | | | | | | | | | | | | | |
|-----|------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--------|-------|-------|
| 1. | Prior..... | 000..... | 4,626 | 6,418 | 8,016 | 10,236 | 10,279 | 10,383 | 11,286 | 11,219 | 11,147 | 79 | 66 |
| 2. | 2014..... | 2,756 | 5,232 | 6,819 | 7,513 | 8,038 | 8,051 | 8,133 | 8,141 | 8,141 | 8,145 | 1,057 | 1,559 |
| 3. | 2015..... | XXX..... | 3,441 | 6,506 | 8,927 | 9,682 | 9,970 | 10,012 | 10,016 | 10,029 | 10,036 | 1,094 | 1,520 |
| 4. | 2016..... | XXX..... | XXX..... | 4,375 | 8,050 | 10,528 | 12,844 | 13,532 | 14,317 | 14,563 | 14,888 | 1,201 | 1,657 |
| 5. | 2017..... | XXX..... | XXX..... | XXX..... | 5,105 | 8,792 | 11,922 | 13,203 | 13,531 | 13,869 | 13,928 | 1,472 | 1,704 |
| 6. | 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | 4,088 | 8,955 | 10,833 | 12,639 | 12,825 | 13,318 | 1,487 | 1,272 |
| 7. | 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 4,528 | 10,344 | 12,241 | 14,305 | 14,991 | 1,258 | 915 |
| 8. | 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 8,559 | 15,133 | 18,015 | 20,104 | 1,615 | 1,179 |
| 9. | 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 5,108 | 11,216 | 14,040 | 1,227 | 986 |
| 10. | 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 12,412 | 20,153 | 2,209 | 1,358 |
| 11. | 2023..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 6,804 | 1,034 | 808 |

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

| 1. | Prior | 000 | 1,845 | 2,092 | 2,343 | 2,378 | 2,616 | 2,644 | 2,662 | 2,684 | 2,716 | 28 | 13 |
|-----|-------|-----|-------|-------|-------|-------|-------|-------|--------|--------|--------|----|----|
| 2. | 2014 | | | | | | | | | | | | 2 |
| 3. | 2015 | XXX | | | | | | | | | | | 1 |
| 4. | 2016 | XXX | XXX | | | | | 3 | 3 | 3 | 3 | 1 | 1 |
| 5. | 2017 | XXX | XXX | XXX | | | | | | | | | |
| 6. | 2018 | XXX | XXX | XXX | XXX | 7,350 | 7,350 | 7,350 | 7,350 | 7,350 | 7,350 | | |
| 7. | 2019 | XXX | XXX | XXX | XXX | XXX | | | | | | | |
| 8. | 2020 | XXX | XXX | XXX | XXX | XXX | XXX | 9,073 | 24,508 | 24,508 | 23,933 | 1 | |
| 9. | 2021 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 9,800 | 9,800 | 9,800 | | |
| 10. | 2022 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 7,378 | | |
| 11. | 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 7,558 | 1 | |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
**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..... | 12,186 | 13,184 | XXX..... | XXX..... |
| 2. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 109,818 | 138,313 | XXX..... | XXX..... |
| 3. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 71,499 | XXX | XXX | XXX |

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

| | | | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|-----------|-----------|-----------|---------|
| 1. Prior..... | XXX..... | 000..... | 102,507 | 98,399 | 81,670 | 42,375 |
| 2. 2022..... | XXX..... | 2,785,168 | 2,969,332 | 1,039,972 | 379,976 |
| 3. 2023 | XXX | 3,179,532 | 1,048,659 | 376,548 |

SCHEDULE P - PART 3K - FIDELITY/SURETY

| | | | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|-----------|-----------|----------|----------|
| 1. Prior..... | XXX..... | 000..... | (15)..... | (31)..... | XXX..... | XXX..... |
| 2. 2022..... | XXX..... | | | XXX..... | XXX..... |
| 3. 2023 | XXX | 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 | 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..... | ..... | ..... | XXX..... | XXX..... |
| 9. 2021..... | XXX..... | | | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... | ..... | XXX..... | XXX..... |
| 10. 2022..... | XXX..... | | | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | ..... | ..... | XXX..... | XXX..... |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

**SCHEDULE P - PART 3N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

| 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..... | | | | | | | | | | | XXX..... | XXX..... |
| 2. 2014..... | | | | | | | | | | | XXX..... | XXX..... |
| 3. 2015.....XXX..... | | | | | | | | | | | XXX..... | XXX..... |
| 4. 2016.....XXX.....XXX..... | | | | | | | | | | | XXX..... | XXX..... |
| 5. 2017.....XXX.....XXX.....XXX..... | | | | | | | | | | | XXX..... | XXX..... |
| 6. 2018.....XXX.....XXX.....XXX.....XXX..... | | | | | | | | | | | XXX..... | XXX..... |
| 7. 2019.....XXX.....XXX.....XXX.....XXX..... | | | | | | | | | | | XXX..... | XXX..... |
| 8. 2020.....XXX.....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 3O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

| | | | | | | | | | | | |
|---|-----|------|------|-------|-------|-------|-------|-------|-------|----------|----------|
| 1. Prior.....000..... | 117 | .325 | .507 | 2,244 | 2,324 | 2,341 | 2,368 | 2,385 | 3,175 | XXX..... | XXX..... |
| 2. 2014..... | | | | | | | | | | XXX..... | XXX..... |
| 3. 2015.....XXX..... | | | | | | | | | | XXX..... | XXX..... |
| 4. 2016.....XXX.....XXX..... | | | | | | | | | | XXX..... | XXX..... |
| 5. 2017.....XXX.....XXX.....XXX..... | | | | | | | | | | XXX..... | XXX..... |
| 6. 2018.....XXX.....XXX.....XXX.....XXX..... | | | | | | | | | | XXX..... | XXX..... |
| 7. 2019.....XXX.....XXX.....XXX.....XXX..... | | | | | | | | | | XXX..... | XXX..... |
| 8. 2020.....XXX.....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 3P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

| | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|----------|----------|
| 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.....XXX..... | | | | | | | | | | XXX..... | XXX..... |
| 8. 2020.....XXX.....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 CASUALTY INSURANCE COMPANY

SCHEDULE P - PART 3R - SECTION 1 - PRODUCTS 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..... | 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 3R - SECTION 2 - PRODUCTS 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..... | XXX..... | | | | | | | | |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XX | | | | | | | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | | |
| 9. 2021..... | XXX..... | | | | | |
| 10. 2022..... | XXX..... | | | | |
| 11. 2023..... | XXX..... | | | |

SCHEDULE P - PART 3S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

| | | | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--|----------|----------|
| 1. Prior..... | XXX..... | | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... |  | XXX..... | XXX..... |
| 2. 2022..... | XXX..... | XXX..... | XXX..... | XX | XX | XX | XX | XX | XX | | XXX..... | XXX..... |
| 3. 2023..... | XXX..... | XXX..... | XXX..... | XX | XX | XX | XX | XX | XX | | XXX..... | XXX..... |

SCHEDULE P - PART 3T - WARRANTY

| | | | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--|----------|----------|
| 1. Prior..... | XXX..... | | | |
| 2. 2022..... | XXX..... | XXX..... | XXX..... | XX | XX | XX | XX | XX | XX | | | |
| 3. 2023..... | XXX..... | XXX..... | XXX..... | XX | XX | XX | XX | XX | XX | | XXX..... | XXX..... |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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..... | 92 | 29 | 14 | 132 | | | | | | |
| 2. 2014..... | 590 | .77 | 19 | 39 | | | | | | |
| 3. 2015..... | XXX..... | 642 | 84 | 21 | 19 | | | | | |
| 4. 2016..... | XXX..... | XXX..... | 687 | 89 | 34 | 20 | | | | |
| 5. 2017..... | XXX..... | XXX..... | XXX..... | 730 | 154 | 33 | 21 | | | |
| 6. 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | 888 | 162 | 34 | .21 | | |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 892 | 170 | .34 | 3 | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 868 | 148 | .36 | 11 |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 931 | .139 | .41 |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | .966 | .198 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 971 |

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

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| 1. Prior..... | 112,733 | .51,106 | 26,035 | (1) | 3 | 8 | 1,073 | .23 | .173 | .320 |
| 2. 2014..... | 240,886 | .68,175 | 27,299 | .24,641 | 1 | 1 | .269 | 1 | .39 | .64 |
| 3. 2015..... | XXX..... | 237,082 | 68,884 | .28,657 | .27,275 | 1 | .153 | 2 | .165 | .62 |
| 4. 2016..... | XXX..... | XXX..... | 269,092 | .77,212 | .33,450 | .30,134 | .17 | 4 | .218 | .56 |
| 5. 2017..... | XXX..... | XXX..... | XXX..... | 333,612 | .92,674 | .40,185 | .35,364 | 7 | .223 | .58 |
| 6. 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | .397,259 | .111,334 | .49,269 | .43,988 | .212 | .56 |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | .432,095 | .131,967 | .55,251 | .57,025 | .17 |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | .461,132 | .140,400 | .67,549 | .70,408 |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | .491,928 | .164,169 | .86,098 |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | .590,349 | .202,291 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 870,802 |

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

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|---------|---------|
| 1. Prior..... | 15,051 | 5,677 | 2,244 | .2 | 2 | | | | | |
| 2. 2014..... | 27,138 | 9,156 | 4,393 | 1,955 | 1 | | 1 | | | |
| 3. 2015..... | XXX..... | 27,945 | 10,871 | 4,863 | 1,604 | 13 | 11 | | | |
| 4. 2016..... | XXX..... | XXX..... | 36,458 | 13,941 | 5,689 | 1,941 | 15 | .20 | .20 | .39 |
| 5. 2017..... | XXX..... | XXX..... | XXX..... | .48,249 | 15,824 | 6,783 | 2,524 | .16 | .14 | .48 |
| 6. 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | .60,002 | .20,586 | .8,219 | 3,177 | .40 | .67 |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | .72,337 | .24,679 | .9,251 | .4,238 | .104 | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | .79,491 | .24,438 | .10,593 | .5,467 | |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | .116,403 | .38,950 | .15,441 | |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | .151,466 | .56,074 | |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 200,318 |

**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..... | XXX..... | | | | | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2021..... | 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 | 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..... | .XXX | 9 | | | | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 61 | .20 | 7 | 4 |
| 9. 2021..... | XXX..... | 336 | .111 | .40 |
| 10. 2022..... | XXX..... | .956 | .335 |
| 11. 2023 | XXX | XXX | 2,458 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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..... | |

NONE

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

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

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

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-------|
| 1. Prior..... | 4,240 | 2,772 | 2,346 | 1,974 | 2,462 | 1,715 | 1,470 | 1,470 | 1,923 | 1,470 |
| 2. 2014..... | 3,462 | 1,501 | 475 | 191 | | | | | | |
| 3. 2015..... | XXX..... | 3,376 | 1,511 | .460 | 194 | | | | | |
| 4. 2016..... | XXX..... | XXX..... | 3,542 | 1,586 | 438 | 204 | | | | |
| 5. 2017..... | XXX..... | XXX..... | XXX..... | 3,759 | 1,594 | 482 | 220 | | | |
| 6. 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | 4,445 | 1,899 | 561 | 219 | | |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 5,365 | 2,274 | 648 | 256 | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 7,346 | 2,948 | .964 | 437 |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 7,863 | 2,961 | 1,227 |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 6,981 | 3,168 |
| 11. 2023..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 7,091 |

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

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--------|
| 1. Prior..... | 565 | .72 | .59 | 26 | 8 | | | | | |
| 2. 2014..... | 173 | 169 | 448 | 1,450 | | | | | | |
| 3. 2015..... | XXX..... | 182 | 499 | 1,543 | 12 | | | | | |
| 4. 2016..... | XXX..... | XXX..... | 492 | 1,576 | 12 | 12 | | | | |
| 5. 2017..... | XXX..... | XXX..... | XXX..... | 2,740 | 16 | 13 | 13 | | | |
| 6. 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | 7,751 | 16 | 13 | 13 | | |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 5,884 | 16 | 13 | 13 | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 7,280 | 17 | 14 | 13 |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 4,709 | 2,506 | 42 |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 21,204 | 793 |
| 11. 2023..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 15,478 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
**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 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..... | 3,944 | 457 | 88 |
| 2. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 9,893 | 505 |
| 3. 2023..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 4,444 |

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|-----------|-----------|-----------|
| 1. Prior..... | XXX..... | (132,786) | (16,847) | 2,178 |
| 2. 2022..... | XXX..... | (147,606) | (7,275) |
| 3. 2023..... | XXX | XXX | (169,084) |

SCHEDULE P - PART 4K - FIDELITY/SURETY

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

NONE

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

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| 1. Prior..... | XXX..... |
| 2. 2022..... | XXX..... |
| 3. 2023..... | 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 |
| 7. 2019..... | XXX..... | XXX..... | XX |
| 8. 2020..... | XXX..... | XXX..... | XX |
| 9. 2021..... | XXX..... |
| 10. 2022..... | XXX..... |
| 11. 2023..... | XXX |

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

**SCHEDULE P - PART 4N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

| 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..... | XX..... | | | | | | |
| 6. 2018..... | XXX..... | XXX..... | XX..... | XX..... | | | | | | |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |

NONE

**SCHEDULE P - PART 4O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|-----|-----|
| 1. Prior..... | 2,555 | 2,607 | 2,428 | 2,237 | 405 | 348 | 346 | 338 | 746 | 230 |
| 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..... | | | |
| 10. 2022..... | XXX..... | | |
| 11. 2023 | XXX | XXX | |

**SCHEDULE P - PART 4P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

| | | | | | | | | | | |
|---------------|----------|----------|----------|----------|----------|----------|----------|----------|-----|--|
| 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..... | XX..... | XX..... | XX..... | | | | |
| 9. 2021..... | XXX..... | XXX..... | XX..... | XX..... | XXX..... | XXX..... | XXX..... | | | |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

SCHEDULE P - PART 4R - SECTION 1 - PRODUCTS 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..... | XXX..... | | | | | | |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | | |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | | |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | | |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | | |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |

NONE**SCHEDULE P - PART 4R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE**

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

NONE**SCHEDULE P - PART 4S - FINANCIAL GUARANTY/MORTGAGE GUARANTY**

| | | | | | | | | | | |
|---------------|----------|----------|---------|----------|----------|---------|----------|----------|-----|--|
| 1. Prior..... | XXX..... | XXX..... | XX..... | XXX..... | XXX..... | XX..... | XX..... | | | |
| 2. 2022..... | XXX..... | XXX..... | XX..... | XXX..... | XX..... | XX..... | XXX..... | XXX..... | | |
| 3. 2023 | XXX | XXX | XX | XX | XX | XX | XXX | XXX | XXX | |

NONE**SCHEDULE P - PART 4T - WARRANTY**

| | | | | | | | | | | |
|---------------|----------|----------|---------|----------|----------|---------|----------|----------|-----|--|
| 1. Prior..... | XXX..... | XXX..... | XX..... | XXX..... | XXX..... | XX..... | XX..... | | | |
| 2. 2022..... | XXX..... | XXX..... | XX..... | XXX..... | XX..... | XX..... | XXX..... | XXX..... | | |
| 3. 2023 | XXX | XXX | XX | XX | XX | XX | XXX | XXX | XXX | |

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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 | 132 | 6 | 4 | 2 | 3 | 1 | | | | |
| 2. 2014 | 2,093 | 2,186 | 2,193 | 2,196 | 2,197 | 2,198 | 2,198 | 2,198 | 2,198 | 2,198 |
| 3. 2015 | XXX | 1,806 | 1,938 | 1,943 | 1,944 | 1,948 | 1,949 | 1,949 | 1,949 | 1,949 |
| 4. 2016 | XXX | XXX | 1,996 | 2,108 | 2,113 | 2,116 | 2,118 | 2,118 | 2,118 | 2,118 |
| 5. 2017 | XXX | XXX | XXX | 2,706 | 2,897 | 2,911 | 2,915 | 2,915 | 2,915 | 2,915 |
| 6. 2018 | XXX | XXX | XXX | XXX | 2,035 | 2,201 | 2,207 | 2,208 | 2,209 | 2,209 |
| 7. 2019 | XXX | XXX | XXX | XXX | XXX | 2,705 | 2,894 | 2,901 | 2,905 | 2,906 |
| 8. 2020 | XXX | XXX | XXX | XXX | XXX | XXX | 3,149 | 3,366 | 3,381 | 3,382 |
| 9. 2021 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 2,182 | 2,615 | 2,634 |
| 10. 2022 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 2,504 | 2,950 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 2,792 |

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 | 6 | 2 | 1 | | | | | | | |
| 2. 2014 | 76 | 7 | 4 | 2 | 1 | | | | | |
| 3. 2015 | XXX | 131 | 4 | 4 | 2 | | | | | |
| 4. 2016 | XXX | XXX | 98 | 7 | 1 | | | | | |
| 5. 2017 | XXX | XXX | XXX | 131 | 8 | 3 | 1 | | | |
| 6. 2018 | XXX | XXX | XXX | XXX | 124 | 5 | 4 | 2 | | |
| 7. 2019 | XXX | XXX | XXX | XXX | XXX | 128 | 6 | 4 | 1 | 1 |
| 8. 2020 | XXX | XXX | XXX | XXX | XXX | XXX | 148 | 15 | 3 | 2 |
| 9. 2021 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 331 | 13 | 5 |
| 10. 2022 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 332 | 16 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 212 |

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 | 120 | 7 | 3 | 3 | 1 | | | (1) | | |
| 2. 2014 | 3,681 | 3,759 | 3,762 | 3,763 | 3,764 | 3,764 | 3,764 | 3,764 | 3,764 | 3,764 |
| 3. 2015 | XXX | 3,312 | 3,434 | 3,442 | 3,443 | 3,443 | 3,444 | 3,444 | 3,444 | 3,444 |
| 4. 2016 | XXX | XXX | 3,556 | 3,666 | 3,670 | 3,671 | 3,673 | 3,673 | 3,673 | 3,673 |
| 5. 2017 | XXX | XXX | XXX | 4,633 | 4,834 | 4,847 | 4,853 | 4,853 | 4,853 | 4,853 |
| 6. 2018 | XXX | XXX | XXX | XXX | 3,971 | 4,140 | 4,152 | 4,155 | 4,155 | 4,155 |
| 7. 2019 | XXX | XXX | XXX | XXX | XXX | 4,932 | 5,100 | 5,112 | 5,114 | 5,115 |
| 8. 2020 | XXX | XXX | XXX | XXX | XXX | XXX | 4,695 | 4,877 | 4,887 | 4,893 |
| 9. 2021 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 3,721 | 4,011 | 4,029 |
| 10. 2022 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 4,026 | 4,348 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 4,231 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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..... | 86,283 | 14,782 | 5,387 | 1,910 | 751 | 560 | 417 | 255 | 71 | 42 |
| 2. 2014..... | 265,784 | 332,440 | 342,975 | 346,578 | 347,785 | 348,250 | 348,615 | 348,927 | 349,030 | 349,075 |
| 3. 2015..... | XXX..... | 259,964 | 332,832 | 344,001 | 347,919 | 349,408 | 349,798 | 350,518 | 350,761 | 350,857 |
| 4. 2016..... | XXX..... | XXX..... | 271,013 | 348,047 | 360,342 | 364,831 | 366,096 | 367,147 | 367,734 | 367,933 |
| 5. 2017..... | XXX..... | XXX..... | XXX..... | 284,455 | 367,798 | 380,916 | 385,068 | 387,355 | 388,334 | 388,913 |
| 6. 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | 311,895 | 407,995 | 422,563 | 428,326 | 430,530 | 431,817 |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 339,460 | 439,031 | 456,235 | 462,871 | 465,193 |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 274,043 | 360,601 | 375,893 | 381,149 |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 302,375 | 418,548 | 438,748 |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 285,254 | 399,816 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 321,472 |

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..... | 24,222 | 10,042 | 4,361 | 2,447 | 1,673 | 1,054 | 619 | 353 | 279 | 239 |
| 2. 2014..... | 80,027 | 15,947 | 6,074 | 2,545 | 1,342 | 885 | 527 | 194 | 84 | 43 |
| 3. 2015..... | XXX..... | 85,575 | 17,064 | 6,992 | 3,065 | 1,577 | 1,233 | 476 | 198 | 103 |
| 4. 2016..... | XXX..... | XXX..... | 89,480 | 19,109 | 7,741 | 3,295 | 2,119 | 1,094 | 462 | 228 |
| 5. 2017..... | XXX..... | XXX..... | XXX..... | 98,110 | 20,480 | 8,283 | 4,271 | 2,028 | 1,062 | 459 |
| 6. 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | 112,547 | 23,567 | 10,108 | 4,560 | 2,391 | 1,095 |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 124,006 | 26,371 | 10,799 | 4,383 | 2,155 |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 107,331 | 22,645 | 8,565 | 3,446 |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 140,864 | 28,290 | 10,042 |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 132,200 | 26,517 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 137,837 |

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..... | 28,901 | 3,119 | 835 | 279 | 101 | 90 | 38 | 23 | 20 | 17 |
| 2. 2014..... | 499,344 | 519,175 | 521,448 | 522,039 | 522,220 | 522,324 | 522,372 | 522,383 | 522,390 | 522,394 |
| 3. 2015..... | XXX..... | 502,330 | 525,340 | 527,839 | 528,486 | 528,725 | 528,823 | 528,864 | 528,873 | 528,883 |
| 4. 2016..... | XXX..... | XXX..... | 527,657 | 553,465 | 556,220 | 557,009 | 557,257 | 557,359 | 557,422 | 557,442 |
| 5. 2017..... | XXX..... | XXX..... | XXX..... | 558,304 | 588,076 | 591,127 | 591,844 | 592,116 | 592,263 | 592,311 |
| 6. 2018..... | XXX..... | XXX..... | XXX..... | XXX..... | 624,477 | 659,684 | 662,976 | 663,954 | 664,279 | 664,411 |
| 7. 2019..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 693,250 | 724,292 | 728,129 | 729,239 | 729,582 |
| 8. 2020..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 579,061 | 609,630 | 613,021 | 613,914 |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 692,370 | 733,911 | 738,595 |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 635,346 | 677,196 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 698,155 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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 | 4,231 | 1,052 | 425 | 131 | .53 | 21 | 10 | 7 | 2 | |
| 2. 2014 | 10,980 | 13,933 | 14,656 | 14,919 | 15,024 | 15,058 | 15,071 | 15,080 | 15,084 | 15,085 |
| 3. 2015 | XXX | 11,324 | 14,886 | 15,699 | 16,015 | 16,138 | 16,183 | 16,203 | 16,211 | 16,215 |
| 4. 2016 | XXX | XXX | 13,916 | 18,569 | 19,550 | 19,982 | 20,136 | 20,181 | 20,221 | 20,236 |
| 5. 2017 | XXX | XXX | XXX | 14,728 | 19,610 | 20,780 | 21,214 | 21,389 | 21,463 | 21,494 |
| 6. 2018 | XXX | XXX | XXX | XXX | 15,945 | 21,654 | 22,979 | 23,493 | 23,702 | 23,788 |
| 7. 2019 | XXX | XXX | XXX | XXX | XXX | 17,596 | 23,737 | 25,286 | 25,885 | 26,183 |
| 8. 2020 | XXX | XXX | XXX | XXX | XXX | XXX | 14,219 | 19,992 | 21,354 | 21,946 |
| 9. 2021 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 17,839 | 27,336 | 29,799 |
| 10. 2022 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 21,045 | 32,245 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 21,871 |

SECTION 2

| Years in Which Premiums Were Earned and Losses Were Incurred | NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END | | | | | | | | | |
|--|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| | 1 2014 | 2 2015 | 3 2016 | 4 2017 | 5 2018 | 6 2019 | 7 2020 | 8 2021 | 9 2022 | 10 2023 |
| 1. Prior | 1,711 | .712 | 273 | 117 | 58 | 33 | .23 | .18 | 15 | 12 |
| 2. 2014 | 3,734 | 1,096 | 451 | 190 | .72 | 35 | 20 | .12 | 5 | 4 |
| 3. 2015 | XXX | 4,461 | 1,226 | 548 | 229 | 88 | .43 | .20 | 9 | 4 |
| 4. 2016 | XXX | XXX | 5,755 | 1,582 | 722 | 298 | 130 | .76 | 34 | 16 |
| 5. 2017 | XXX | XXX | XXX | 6,262 | 1,830 | 754 | .342 | 161 | 74 | 42 |
| 6. 2018 | XXX | XXX | XXX | XXX | 7,372 | 2,132 | 942 | .427 | 199 | 106 |
| 7. 2019 | XXX | XXX | XXX | XXX | XXX | 8,447 | 2,500 | 1,140 | .554 | 241 |
| 8. 2020 | XXX | XXX | XXX | XXX | XXX | XXX | 8,155 | 2,353 | 1,081 | 441 |
| 9. 2021 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 13,533 | 3,908 | 1,634 |
| 10. 2022 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 15,414 | 4,539 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 13,918 |

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 | 1,779 | .245 | .77 | 21 | 9 | .7 | 3 | 2 | 1 | (1) |
| 2. 2014 | 21,800 | 23,036 | 23,238 | 23,298 | 23,312 | 23,318 | 23,323 | 23,325 | 23,327 | 23,328 |
| 3. 2015 | XXX | 23,596 | 25,137 | 25,369 | 25,438 | 25,452 | 25,461 | 25,464 | 25,464 | 25,464 |
| 4. 2016 | XXX | XXX | 29,571 | 31,734 | 32,027 | 32,133 | 32,165 | 32,170 | 32,176 | 32,180 |
| 5. 2017 | XXX | XXX | XXX | 31,476 | 33,770 | 34,132 | 34,231 | 34,270 | 34,281 | 34,291 |
| 6. 2018 | XXX | XXX | XXX | XXX | 35,154 | 38,053 | 38,488 | 38,601 | 38,637 | 38,650 |
| 7. 2019 | XXX | XXX | XXX | XXX | XXX | 39,954 | 42,879 | 43,324 | 43,487 | 43,545 |
| 8. 2020 | XXX | XXX | XXX | XXX | XXX | XXX | 34,499 | 37,446 | 37,925 | 38,078 |
| 9. 2021 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 48,782 | 54,081 | 54,957 |
| 10. 2022 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 58,475 | 64,518 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 58,127 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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

SECTION 3

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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..... | 3 | 5 | 5 | 5 |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 25 | 35 | 36 |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 56 | 90 |
| 11. 2023..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 74 |

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..... | 8 | 2 | 1 |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 30 | 15 |
| 11. 2023..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 57 |

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..... | 3 | 5 | 5 | 5 |
| 9. 2021..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 37 | 45 | 46 |
| 10. 2022..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 101 | 133 |
| 11. 2023..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | XXX..... | 160 |

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

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

N O N E

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

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

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

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

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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 | 155 | .39 | 20 | 11 | 4 | 1 | | 1 | | 2 |
| 2. 2014 | 940 | 1,022 | 1,041 | 1,051 | 1,055 | 1,056 | 1,057 | 1,057 | 1,057 | 1,057 |
| 3. 2015 | XXX | .945 | 1,054 | 1,078 | 1,090 | 1,093 | 1,093 | 1,093 | 1,094 | 1,094 |
| 4. 2016 | XXX | XXX | 1,020 | 1,142 | 1,174 | 1,190 | 1,197 | 1,198 | 1,200 | 1,201 |
| 5. 2017 | XXX | XXX | XXX | 1,250 | 1,423 | 1,457 | 1,465 | 1,469 | 1,471 | 1,472 |
| 6. 2018 | XXX | XXX | XXX | XXX | 1,192 | 1,442 | 1,466 | 1,483 | 1,486 | 1,487 |
| 7. 2019 | XXX | XXX | XXX | XXX | XXX | 1,058 | 1,214 | 1,243 | 1,255 | 1,258 |
| 8. 2020 | XXX | XXX | XXX | XXX | XXX | XXX | 1,348 | 1,565 | 1,600 | 1,615 |
| 9. 2021 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 1,010 | 1,194 | 1,227 |
| 10. 2022 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 1,747 | 2,209 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 1,034 |

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 | 95 | 50 | .23 | 11 | 3 | 1 | 1 | 1 | 1 | |
| 2. 2014 | 181 | 49 | .25 | 13 | 4 | 2 | 1 | 1 | 1 | |
| 3. 2015 | XXX | .213 | .55 | 24 | 8 | 2 | 1 | 1 | | |
| 4. 2016 | XXX | XXX | 225 | 66 | .34 | 15 | 7 | 6 | 4 | 2 |
| 5. 2017 | XXX | XXX | XXX | 232 | .67 | 26 | 13 | 8 | 3 | |
| 6. 2018 | XXX | XXX | XXX | XXX | 236 | 70 | .34 | 13 | 9 | 6 |
| 7. 2019 | XXX | XXX | XXX | XXX | XXX | 197 | .70 | .37 | 22 | 12 |
| 8. 2020 | XXX | XXX | XXX | XXX | XXX | XXX | 247 | .87 | 46 | .27 |
| 9. 2021 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 225 | 98 | .67 |
| 10. 2022 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | .419 | .82 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | 209 |

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 | 179 | 28 | 8 | 2 | 5 | 3 | 3 | 2 | 1 | 3 |
| 2. 2014 | 2,470 | 2,585 | 2,609 | 2,616 | 2,617 | 2,617 | 2,617 | 2,617 | 2,617 | 2,617 |
| 3. 2015 | XXX | 2,450 | 2,587 | 2,603 | 2,609 | 2,613 | 2,614 | 2,614 | 2,614 | 2,614 |
| 4. 2016 | XXX | XXX | 2,667 | 2,822 | 2,846 | 2,857 | 2,858 | 2,860 | 2,860 | 2,860 |
| 5. 2017 | XXX | XXX | XXX | 2,956 | 3,149 | 3,169 | 3,174 | 3,176 | 3,177 | 3,177 |
| 6. 2018 | XXX | XXX | XXX | XXX | 2,515 | 2,732 | 2,754 | 2,761 | 2,765 | 2,765 |
| 7. 2019 | XXX | XXX | XXX | XXX | XXX | 1,980 | 2,143 | 2,169 | 2,182 | 2,184 |
| 8. 2020 | XXX | XXX | XXX | XXX | XXX | XXX | 2,583 | 2,782 | 2,810 | 2,821 |
| 9. 2021 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 2,048 | 2,233 | 2,279 |
| 10. 2022 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 3,340 | 3,650 |
| 11. 2023 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | 2,051 |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE
SECTION 1B

| 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..... | 19 | 17 | 5 | 2 | 1 | 2 | | | | |
| 2. 2014..... | | | | | | | | | | |
| 3. 2015..... | XXX..... | | | | | | | | | |
| 4. 2016..... | XXX..... | XXX..... | XXX..... | | | | 1 | 1 | 1 | 1 |
| 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..... | 1 | 1 | 1 | 1 |
| 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 | 1 |

SECTION 2B

| 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..... | 38 | 17 | 8 | 5 | 3 | 2 | 1 | 1 | | |
| 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 | 1 |

SECTION 3B

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

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

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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

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1

| Years in Which Premiums Were Earned and Losses Were Incurred | CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED) | | | | | | | | | | 11 Current Year Premiums Earned |
|--|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|---------------------------------|
| | 1 2014 | 2 2015 | 3 2016 | 4 2017 | 5 2018 | 6 2019 | 7 2020 | 8 2021 | 9 2022 | 10 2023 | |
| 1. Prior..... | (2,241) | | | | | | | | | | |
| 2. 2014..... | 289,868 | 289,868 | 289,868 | 289,868 | 289,868 | 289,868 | 289,868 | 289,868 | 289,868 | 289,868 | |
| 3. 2015..... | XXX | 315,293 | 315,293 | 315,293 | 315,293 | 315,293 | 315,293 | 315,293 | 315,293 | 315,293 | |
| 4. 2016..... | XXX | XXX | 398,386 | 398,386 | 398,386 | 398,386 | 398,386 | 398,386 | 398,386 | 398,386 | |
| 5. 2017..... | XXX | XXX | XXX | 466,912 | 466,912 | 466,912 | 466,912 | 466,912 | 466,912 | 466,912 | |
| 6. 2018..... | XXX | XXX | XXX | XXX | 596,115 | 596,115 | 596,115 | 596,115 | 596,115 | 596,115 | |
| 7. 2019..... | XXX | XXX | XXX | XXX | XXX | 753,611 | 753,611 | 753,611 | 753,611 | 753,611 | |
| 8. 2020..... | XXX | XXX | XXX | XXX | XXX | XXX | 844,813 | 844,813 | 844,813 | 844,813 | |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 1,202,993 | 1,202,993 | 1,202,993 | |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 1,517,006 | 1,517,006 | |
| 11. 2023..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 1,546,535 | |
| 12. Totals..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 1,546,535 |
| 13. Earned Premiums (Sch P-Pt. 1) | 287,627 | 315,293 | 398,386 | 466,912 | 596,115 | 753,611 | 844,813 | 1,202,993 | 1,517,006 | 1,546,535 | 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..... | (14) | | | | | | | | | | |
| 2. 2014..... | 1,965 | 1,965 | 1,965 | 1,965 | 1,965 | 1,965 | 1,965 | 1,965 | 1,965 | 1,965 | |
| 3. 2015..... | XXX | 1,516 | 1,516 | 1,516 | 1,516 | 1,516 | 1,516 | 1,516 | 1,516 | 1,516 | |
| 4. 2016..... | XXX | XXX | 1,479 | 1,479 | 1,479 | 1,479 | 1,479 | 1,479 | 1,479 | 1,479 | |
| 5. 2017..... | XXX | XXX | XXX | 1,730 | 1,730 | 1,730 | 1,730 | 1,730 | 1,730 | 1,730 | |
| 6. 2018..... | XXX | XXX | XXX | XXX | 2,036 | 2,036 | 2,036 | 2,036 | 2,036 | 2,036 | |
| 7. 2019..... | XXX | XXX | XXX | XXX | XXX | 2,821 | 2,821 | 2,821 | 2,821 | 2,821 | |
| 8. 2020..... | XXX | XXX | XXX | XXX | XXX | XXX | 3,187 | 3,187 | 3,187 | 3,187 | |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 8,529 | 8,529 | 8,529 | |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 19,718 | 19,718 | 19,718 | |
| 11. 2023..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 3,589 | 3,589 | |
| 12. Totals..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 3,589 |
| 13. Earned Premiums (Sch P-Pt. 1) | 1,952 | 1,516 | 1,479 | 1,730 | 2,036 | 2,821 | 3,187 | 8,529 | 19,718 | 3,589 | 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 | | | | | | | | | |
| 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 | 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 | XXX | XXX | |
| 13. Earned Premiums (Sch P-Pt. 1) | | | | | | | | | | | XXX |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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 | 36 | 36 | 36 | 36 | 36 | |
| 8. 2020..... | XXX | XXX | XXX | XXX | XXX | XXX | 233 | 233 | 233 | 233 | |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 1,213 | 1,213 | 1,213 | |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 3,702 | 3,702 | |
| 11. 2023..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 8,010 | |
| 12. Totals..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 8,010 |
| 13. Earned Premiums (Sch P-Pt. 1) | | | | | | 36 | 233 | 1,213 | 3,702 | 8,010 | 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 | 49 | 49 | 49 | 49 | |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 32 | 32 | 32 | |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 106 | 106 | |
| 11. 2023..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 216 | |
| 12. Totals..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 216 |
| 13. Earned Premiums (Sch P-Pt. 1) | | | | | | 49 | 32 | 106 | 216 | 216 | 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..... | (151) | | | | | | | | | | |
| 2. 2014..... | 35,593 | 35,593 | 35,593 | 35,593 | 35,593 | 35,593 | 35,593 | 35,593 | 35,593 | 35,593 | |
| 3. 2015..... | XXX | 35,264 | 35,264 | 35,264 | 35,264 | 35,264 | 35,264 | 35,264 | 35,264 | 35,264 | |
| 4. 2016..... | XXX | XXX | 36,130 | 36,130 | 36,130 | 36,130 | 36,130 | 36,130 | 36,130 | 36,130 | |
| 5. 2017..... | XXX | XXX | XXX | 37,349 | 37,349 | 37,349 | 37,349 | 37,349 | 37,349 | 37,349 | |
| 6. 2018..... | XXX | XXX | XXX | XXX | 40,234 | 40,234 | 40,234 | 40,234 | 40,234 | 40,234 | |
| 7. 2019..... | XXX | XXX | XXX | XXX | XXX | 44,885 | 44,885 | 44,885 | 44,885 | 44,885 | |
| 8. 2020..... | XXX | XXX | XXX | XXX | XXX | XXX | 48,239 | 48,239 | 48,239 | 48,239 | |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | 54,983 | 54,983 | 54,983 | 54,983 | |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 59,944 | 59,944 | |
| 11. 2023..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 61,426 | |
| 12. Totals..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 61,426 |
| 13. Earned Premiums (Sch P-Pt. 1) | 35,442 | 35,264 | 36,130 | 37,349 | 40,234 | 44,885 | 48,239 | 54,983 | 59,944 | 61,426 | 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..... | (12) | | | | | | | | | | |
| 2. 2014..... | 2,532 | 2,532 | 2,532 | 2,532 | 2,532 | 2,532 | 2,532 | 2,532 | 2,532 | 2,532 | |
| 3. 2015..... | XXX | 2,597 | 2,597 | 2,597 | 2,597 | 2,597 | 2,597 | 2,597 | 2,597 | 2,597 | |
| 4. 2016..... | XXX | XXX | 2,767 | 2,767 | 2,767 | 2,767 | 2,767 | 2,767 | 2,767 | 2,767 | |
| 5. 2017..... | XXX | XXX | XXX | 3,032 | 3,032 | 3,032 | 3,032 | 3,032 | 3,032 | 3,032 | |
| 6. 2018..... | XXX | XXX | XXX | XXX | 3,656 | 3,656 | 3,656 | 3,656 | 3,656 | 3,656 | |
| 7. 2019..... | XXX | XXX | XXX | XXX | 4,498 | 4,498 | 4,498 | 4,498 | 4,498 | 4,498 | |
| 8. 2020..... | XXX | XXX | XXX | XXX | XXX | 2,275 | 2,275 | 2,275 | 2,275 | 2,275 | |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | 497 | 497 | 497 | 497 | |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 438 | 438 | 438 | |
| 11. 2023..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 359 | |
| 12. Totals..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 359 | |
| 13. Earned Premiums (Sch P-Pt. 1) | 2,521 | 2,597 | 2,767 | 3,032 | 3,656 | 4,498 | 2,275 | 497 | 438 | 359 | XXX |

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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..... | 245 | 245 | 245 | 245 | 245 | 245 | 245 | 245 | 245 | 245 | |
| 3. 2015..... | XXX | 171 | 171 | 171 | 171 | 171 | 171 | 171 | 171 | 171 | |
| 4. 2016..... | XXX | XXX | 153 | 153 | 153 | 153 | 153 | 153 | 153 | 153 | |
| 5. 2017..... | XXX | XXX | XXX | 140 | 140 | 140 | 140 | 140 | 140 | 140 | |
| 6. 2018..... | XXX | XXX | XXX | XXX | 134 | 134 | 134 | 134 | 134 | 134 | |
| 7. 2019..... | XXX | XXX | XXX | XXX | XXX | 138 | 138 | 138 | 138 | 138 | |
| 8. 2020..... | XXX | XXX | XXX | XXX | XXX | XXX | 143 | 143 | 143 | 143 | |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 461 | 461 | 461 | |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 577 | 577 | |
| 11. 2023..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 710 | 710 |
| 12. Totals..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 710 |
| 13. Earned Premiums (Sch P-Pt. 1) | 245 | 171 | 153 | 140 | 134 | 138 | 143 | 461 | 577 | 710 | XXX |

SECTION 2B

| Years in Which Premiums Were Earned and Losses Were Incurred | CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED) | | | | | | | | | | 11 Current Year Premiums Earned |
|--|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|---------------------------------|
| | 1 2014 | 2 2015 | 3 2016 | 4 2017 | 5 2018 | 6 2019 | 7 2020 | 8 2021 | 9 2022 | 10 2023 | |
| 1. Prior..... | | | | | | | | | | | |
| 2. 2014..... | .86 | .86 | .86 | .86 | .86 | .86 | .86 | .86 | .86 | .86 | |
| 3. 2015..... | XXX | 236 | 236 | 236 | 236 | 236 | 236 | 236 | 236 | 236 | |
| 4. 2016..... | XXX | XXX | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | |
| 5. 2017..... | XXX | XXX | XXX | 5 | 5 | 5 | 5 | 5 | 5 | 5 | |
| 6. 2018..... | XXX | XXX | XXX | XXX | | | | | | | |
| 7. 2019..... | XXX | XXX | XXX | XXX | XXX | 1 | 1 | 1 | 1 | 1 | |
| 8. 2020..... | XXX | XXX | XXX | XXX | XXX | XXX | .9 | .9 | .9 | .9 | |
| 9. 2021..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 47 | 47 | 47 | |
| 10. 2022..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 137 | 137 | |
| 11. 2023..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 265 | |
| 12. Totals..... | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 265 |
| 13. Earned Premiums (Sch P-Pt. 1) | 86 | 236 | 28 | 5 | | 1 | 9 | 47 | 137 | 265 | 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 | 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 | 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 CASUALTY INSURANCE COMPANY

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 3

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 | | | | | | |
| 29. Nevada | N | | | | | |
| 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 CASUALTY INSURANCE COMPANY

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|-----------------------------------|-------------------|------------|--------------|------------|--|---|------------------------|------------------------------------|--|--|--|---|--------------------------------------|---------------|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | 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.... | UDP.... | 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.... | RE.... | Progressive Agency Holdings, Inc. | Ownership..... | 100.000 | The Progressive Corporation | NO.... | 137.... |
| ..... | ..... | 00000 | 34-1576555 | ..... | ..... | ..... | PC Investment Company | .. DE.... | DS.... | 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.... | DS.... | Progressive Casualty Insurance Company | Ownership..... | 100.000 | The Progressive Corporation | YES.... | 13.... |
| .0155 | Progressive Insurance Group | 32786 | 34-1172685 | ..... | ..... | ..... | Progressive Specialty Insurance Company | .. OH.... | DS.... | 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.... | NIA.... | 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 CASUALTY INSURANCE COMPANY

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- ciliary Loca- tion | 10 Rela- tionship to Reporting 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 Per- cen- tage | 14 Ultimate Controlling Entity(ies)/Person(s) | 15 Is an SCA Filing Re- quired? (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..... | IA..... | 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 CASUALTY INSURANCE COMPANY

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 | 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 CASUALTY INSURANCE COMPANY

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 | 35-1864904 | B&L Insurance, LTD | | | | | | 52,045,186 | | | 52,045,186 | 740,569 |
| 26-0327941 | 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 CASUALTY INSURANCE COMPANY

| | | | | | |
|-------|--|--------|-------|---|--------|
| 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 CASUALTY INSURANCE COMPANY

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 CASUALTY INSURANCE COMPANY

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 CASUALTY INSURANCE COMPANY
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.

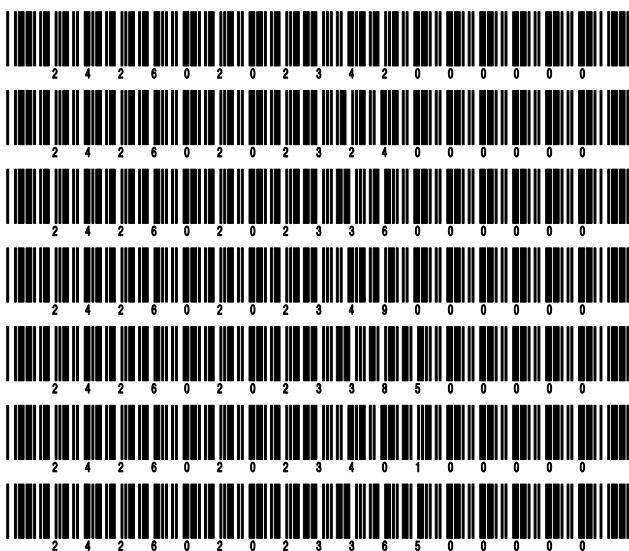
| | |
|--|-----|
| MARCH FILING | |
| 11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? | NO |
| 12. Will the Financial Guaranty Insurance Exhibit be filed by March 1? | NO |
| 13. Will the Medicare Supplement Insurance Experience Exhibit be filed 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? | YES |
| 15. Will the Trusted Surplus Statement be filed with the state of domicile and the NAIC by March 1? | NO |
| 16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1? | NO |
| 17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? | NO |
| 18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | NO |
| 19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)? | YES |
| 20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1? | YES |
| 21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1? | NO |
| 22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1? | NO |
| 23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | YES |
| 24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? | NO |
| 25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? | NO |
| 26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? | NO |
| 27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1? | NO |
| 28. Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1? | YES |
| 29. Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1? | YES |
| APRIL FILING | |
| 30. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? | NO |
| 31. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? | NO |
| 32. Will the Accident and Health Policy Experience Exhibit be filed by April 1? | NO |
| 33. Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1? | NO |
| 34. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1? | YES |
| 35. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? | NO |
| 36. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1? | NO |
| 37. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1? | NO |
| AUGUST FILING | |
| 38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? | YES |

Explanations:

| | |
|-----|--|
| 11. | |
| 12. | |
| 13. | |
| 14. | |
| 15. | |
| 16. | |
| 17. | |
| 18. | |
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| 32. | |
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| 34. | |
| 35. | |
| 36. | |
| 37. | |

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. Trusted Surplus Statement [Document Identifier 490]
15. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]
16. Reinsurance Summary Supplemental Filing [Document Identifier 401]
17. Medicare Part D Coverage Supplement [Document Identifier 365]



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

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



22. Bail Bond Supplement [Document Identifier 500]



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]



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 CASUALTY INSURANCE COMPANY
OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

| | Current Year | | | Prior Year |
|---|--------------|-------------------------|---|------------|
| | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | |
| 2504. MISCELLANEOUS OTHER ASSETS | 40,579,420 | 40,579,420 | | |
| 2505. VIRGINIA UNINSURED MOTORIST REFUND | | | | 408 |
| 2597. Summary of remaining write-ins for Line 25 from overflow page | 40,579,420 | 40,579,420 | | 408 |

Additional Write-ins for Statement of Income Line 14

| | 1 Current Year | 2 Prior Year |
|---|-------------------|-----------------|
| 1404. INTEREST EXPENSE ON INTERCOMPANY BALANCES | (161,441,698) | (52,782,441) |
| 1497. Summary of remaining write-ins for Line 14 from overflow page | (161,441,698) | (52,782,441) |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

Designate the type of health care providers reported on this page:
Other health care facilities

SUPPLEMENT "A" TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

| States, etc. | 1 Direct Premiums Written | 2 Direct Premiums Earned | Direct Losses Paid | | 5 Direct Losses Incurred | Direct Losses Unpaid | | 8 Direct Losses Incurred But Not Reported |
|--|------------------------------|-----------------------------|--------------------|-----------------------|-----------------------------|----------------------|-----------------------|--|
| | | | 3 Amount | 4 Number of Claims | | 6 Amount Reported | 7 Number of Claims | |
| 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 | 34,425 | 34,429 | | | 1,911 | | |
| 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 | | 34,425 | 34,429 | | | 1,911 | | |
| DETAILS OF WRITE-INS | | | | | | | | |
| 58001. | | | | | | | | |
| 58002. | | | | | | | | |
| 58003. | | | | | | | | |
| 58998. Summary of remaining write-ins for Line 58 from overflow page | | | | | | | | |
| 58999. Totals (Lines 58001 thru 58003 plus 58998)(Line 58 above) | | | | | | | | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

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

NAIC Group Code 0155

NAIC Company Code 24260

Company Name PROGRESSIVE CASUALTY INSURANCE COMPANY

If the reporting entity writes any director and officer (D&O) business, please provide the following:

1. Monoline Policies

| Direct Premiums | | Direct Losses | | Direct Defense and Cost Containment | | Percentage of In Force Policies | |
|-----------------|-------------|-------------------|-------------------|-------------------------------------|----------------|---------------------------------|-----------------|
| 1 Written | 2 Earned | 3 Paid | 4 Incurred | 5 Paid | 6 Incurred | 7 Claims Made | 8 Occurrence |
| \$ | \$ | \$1,279,558 | \$1,486,695 | \$73,868 | \$73,868 |% |% |

2. Commercial Multiple Peril (CMP) Packaged Policies

2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy? Yes [] No [X]

2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated? Yes [] No [X]

2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&O liability coverage in CMP packaged policies

2.31 Amount quantified:.....\$

2.32 Amount estimated using reasonable assumptions:.....\$

2.4 If the answer to question 2.1 is yes, please provide the following:

| Direct Losses | | Direct Defense and Cost Containment | | Percentage of In Force Policies | |
|---------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------|--------|
| 1 Paid | 2 Paid + Change in Case Reserves | 3 Paid | 4 Paid + Change in Case Reserves | 5 | 6 |
| \$ | \$ | \$ | \$ |% |% |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY

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 24260

| | 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) | 921,792 | 938,194 | 29,310,365 | 190,820 |
| 3. Directors & officers (D&O) | | | 1,279,558 | 853,221 |
| 4. Environmental liability | 47,621 | 165,042 | | |
| 5. Excess workers' compensation | | | | |
| 6. Commercial excess & umbrella | | | | |
| 7. Personal umbrella | 2,609,463 | 2,166,858 | 3,563,426 | 3,086,070 |
| 8. Employment liability | 18,065 | 26,136 | | |
| 9. Aggregate write-ins for facilities & premises (CGL) | 15,538,750 | 15,916,672 | 4,669,698 | 4,598,509 |
| 10. Internet & cyber liability | 55,302 | 83,978 | | |
| 11. Aggregate write-ins for other | 2,658,028 | 2,874,774 | 340,000 | 69,621 |
| 12. Total ASL 17 - other liability (sum of Lines 1 through 11) | 21,849,021 | 22,171,653 | 39,163,046 | 8,798,241 |
| DETAILS OF WRITE-INS | | | | |
| 0901. Comprehensive Personal Liability | 2,835,363 | 2,317,409 | 89,896 | 378,974 |
| 0902. Premises and Operations Liability | 1,504,764 | 1,703,549 | 128,250 | 175,771 |
| 0903. Commercial General Liability | 11,198,623 | 11,895,714 | 4,451,553 | 4,043,763 |
| 0998. Summary of remaining write-ins for Line 9 from overflow page | | | | |
| 0999. Totals (Lines 0901 thru 0903 plus 0998)(Line 9 above) | 15,538,750 | 15,916,672 | 4,669,698 | 4,598,509 |
| 1101. Boaters | 2,541,634 | 2,751,592 | 340,000 | 69,621 |
| 1102. Motorist | 113,121 | 119,881 | | |
| 1103. Other | 3,273 | 3,301 | | |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | | | | |
| 1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) | 2,658,028 | 2,874,774 | 340,000 | 69,621 |

SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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 CASUALTY INSURANCE COMPANY
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: Alabama

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: Alaska

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



4 2 6 0 2 0 2 3 6 0 0 0 3 0 0 0

SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: Arizona

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



**SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: Arkansas

NAIC Group Code 0155

NAIC Company Code 24260

| 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 CASUALTY INSURANCE COMPANY
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: California

NAIC Group Code 0155

NAIC Company Code 24260

| 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 CASUALTY INSURANCE COMPANY
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: Colorado

NAIC Group Code 0155

NAIC Company Code 24260

| 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 CASUALTY INSURANCE COMPANY
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: Connecticut

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | YES..... |
| 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 CASUALTY INSURANCE COMPANY
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: Delaware

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | NONE | MCAS Reportable Premium/Considerations (Yes/No) |
|--|------|---|
| 1. Disability Income | | |
| 2. Health | | |
| 3. Homeowners | | |
| 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 | | |
| 11. Short-Term Limited Duration Health Plans | | |
| 12. Travel | | |



**SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: District of Columbia

NAIC Group Code 0155

NAIC Company Code 24260

| 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 | |



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

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

FOR THE STATE OF: Florida

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



**SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: Hawaii

NAIC Group Code 0155

NAIC Company Code 24260

| 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 CASUALTY INSURANCE COMPANY
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: Idaho

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |

NONE



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

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

FOR THE STATE OF: Illinois

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



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

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

FOR THE STATE OF: Indiana

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



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

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

FOR THE STATE OF: Iowa

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | NONE | MCAS Reportable Premium/Considerations (Yes/No) |
|--|------|---|
| 1. Disability Income | | |
| 2. Health | | |
| 3. Homeowners | | |
| 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 | | |
| 11. Short-Term Limited Duration Health Plans | | |
| 12. Travel | | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: Kansas

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



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

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

FOR THE STATE OF: Kentucky

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | YES..... |
| 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 CASUALTY INSURANCE COMPANY
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: Louisiana

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



**SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: Maine

NAIC Group Code 0155

NAIC Company Code 24260

| 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 CASUALTY INSURANCE COMPANY
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: Maryland

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



**SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: Massachusetts

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | YES..... |
| 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 CASUALTY INSURANCE COMPANY
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For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Michigan

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



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

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

FOR THE STATE OF: Minnesota

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: Mississippi

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



**SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: Missouri

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | YES..... |
| 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 CASUALTY INSURANCE COMPANY
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For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Montana

NAIC Group Code 0155

NAIC Company Code 24260

| 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 CASUALTY INSURANCE COMPANY
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: Nebraska

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Nevada

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: New Hampshire

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | NONE | MCAS Reportable Premium/Considerations (Yes/No) |
|--|------|---|
| 1. Disability Income | | |
| 2. Health | | |
| 3. Homeowners | | |
| 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 | | |
| 11. Short-Term Limited Duration Health Plans | | |
| 12. Travel | | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: New Jersey

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



**SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: New Mexico

NAIC Group Code 0155

NAIC Company Code 24260

| 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 | YES..... |
| 10. Private Passenger Auto | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: New York

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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 Dakota

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



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

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

FOR THE STATE OF: Ohio

NAIC Group Code 0155

NAIC Company Code 24260

| 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 CASUALTY INSURANCE COMPANY
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: Oklahoma

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: Oregon

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



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

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

FOR THE STATE OF: Pennsylvania

NAIC Group Code 0155

NAIC Company Code 24260

| 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 CASUALTY INSURANCE COMPANY
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: Rhode Island

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income ..... | ..... |
| 2. Health ..... | ..... |
| 3. Homeowners | YES..... |
| 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 ..... | ..... |
| 11. Short-Term Limited Duration Health Plans | YES..... |
| 12. Travel | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: South Carolina

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: South Dakota

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



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

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

FOR THE STATE OF: Tennessee

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | YES. |
| 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 CASUALTY INSURANCE COMPANY
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: Texas

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | YES..... |
| 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 | NO..... |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



**SUPPLEMENT FOR THE YEAR 2023 OF THE PROGRESSIVE CASUALTY INSURANCE COMPANY
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: Utah

NAIC Group Code 0155

NAIC Company Code 24260

| 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 CASUALTY INSURANCE COMPANY
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: Vermont

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



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

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

FOR THE STATE OF: Virginia

NAIC Group Code 0155

NAIC Company Code 24260

| 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 CASUALTY INSURANCE COMPANY
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: Washington

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | YES. |
| 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 CASUALTY INSURANCE COMPANY
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: West Virginia

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |



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

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

FOR THE STATE OF: Wisconsin

NAIC Group Code 0155

NAIC Company Code 24260

| 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 CASUALTY INSURANCE COMPANY
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: Wyoming

NAIC Group Code 0155

NAIC Company Code 24260

| MCAS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
|--|---|
| 1. Disability Income | |
| 2. Health | |
| 3. Homeowners | |
| 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 | |
| 11. Short-Term Limited Duration Health Plans | |
| 12. Travel | |