



ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2024
OF THE CONDITION AND AFFAIRS OF THE
GRANGE INDEMNITY INSURANCE COMPANY

NAIC Group Code.....0267,..... 0267..... NAIC Company Code..... 10322.... Employer's ID Number..... 31-1432675.....
(Current) (Prior)

Organized under the Laws of..... OH..... State of Domicile or Port of Entry..... OH.....
Country of Domicile..... US.....
Incorporated/Organized..... 03/10/1995..... Commenced Business..... 08/03/1995.....
Statutory Home Office..... 671 South High Street..... Columbus, OH, US 43206-1066.....
Main Administrative Office..... 671 South High Street.....
Columbus, OH, US 43206-1066..... 614-445-2900.....
(Telephone)
Mail Address..... 671 South High Street..... Columbus, OH, US 43206-1066.....
Primary Location of Books and
Records..... 671 South High Street.....
Columbus, OH, US 43206-1066..... 614-445-2900.....
(Telephone)
Internet Website Address..... www.grangeinsurance.com.....
Statutory Statement Contact..... William Charles Thorsberg..... 614-445-2900.....
(Telephone)
thorsbergw@grangeinsurance.com.....
(E-Mail) (Fax)

OFFICERS

JOHN (NMN) AMMENDOLA, PRESIDENT & CEO..... BETH WILLIAMS MURPHY, EVP & SECRETARY.....
CHERYL MCRAE LEBENS#, EVP & CFO.....

DIRECTORS OR TRUSTEES

JOHN (NMN) AMMENDOLA..... KATHIE JANE ANDRADE.....
ANNA HOLLIDAY BENSON#..... JAMES MARTIN BENSON.....
MARK LEWIS BOXER..... PHILIP NELSON DAVIS#.....
MICHAEL DESMOND FRAIZER..... ROBERT ENLOW HOYT.....
CHERYL MCRAE LEBENS#..... MARY MARNETTE PERRY.....
THOMAS SIMRALL STEWART..... CHRISTIANNA (NMN) WOOD.....

State of Ohio.....
County of Franklin..... SS

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

x [Signature] x [Signature] x Cheryl [Signature]
JOHN (NMN) AMMENDOLA BETH WILLIAMS MURPHY CHERYL MCRAE LEBENS
PRESIDENT & CEO EVP & SECRETARY EVP & CFO

Subscribed and sworn to before me
this 18 day of February, 2025
a. Is this an original filing? Yes
b. If no:
1. State the amendment number:
2. Date filed:
3. Number of pages attached:

x Teresa J Burchwell



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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)												
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	24,176	21,726		11,611	-	2,715	3,028		101	113	4,036	1,322
2.1	Allied Lines	34,199	31,530		14,472	4,157	6,421	2,779		146	166	5,709	1,871
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril	94	20		74		3	3		1	1	16	5
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)	1,359,350	1,101,434		665,120	914,981	1,129,468	336,372	19,499	21,599	8,745	226,908	74,351
5.2	Commercial Multiple Peril (Liability Portion)	2,212,180	2,004,639		870,713	128,586	790,869	1,997,160	28,720	260,886	898,639	369,098	120,997
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
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	22,629	3,354		19,275		523	523		146	146	1,967	1,238
17.1	Other Liability—Occurrence	97,392	96,912		52,176	50,000	51,793	111,641	12,415	26,609	35,442	16,257	5,327
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence	6,788	4,632		2,209		2,332	2,413		1,430	1,484	1,133	371
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	137,740	148,513		47,454	45,385	48,468	102,120	3,107	(1,271)	9,781	19,080	7,534
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability	6,852,536	6,878,605		3,330,822	4,544,493	4,062,329	10,525,886	516,521	415,903	1,040,209	966,595	374,806
21.1	Private Passenger Auto Physical Damage	85,840	93,226		32,364	37,271	42,933	(2,651)	8,178	8,327	383	12,256	4,695
21.2	Commercial Auto Physical Damage	2,433,624	2,270,967		1,262,846	1,143,048	1,055,303	99,900	1,648	2,592	12,590	354,502	133,109
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)	13,266,547	12,655,559		6,309,137	6,867,919	7,193,159	13,179,173	590,088	736,470	2,007,699	1,977,557	725,626
Details of Write-Ins													
3401.													
3402.													
3403.													
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$23,092
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	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	8,834	7,651		5,926		683	824		34	40	1,475	318
2.1	Allied Lines	9,264	7,732		6,178		695	827		35	40	1,546	333
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	7,432,639	7,086,295		3,991,400	7,923,980	8,398,184	1,325,247	69,801	104,001	78,962	969,436	267,262
5.1	Commercial Multiple Peril (Non-Liability Portion)	463,710	410,389		273,416	170,868	409,342	231,725	6,729	7,815	3,247	77,630	16,674
5.2	Commercial Multiple Peril (Liability Portion)	191,486	195,054		115,363	61,951	86,305	180,496		12,364	94,751	31,935	6,885
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	65,963	73,082		34,220		14,190	16,467		313	715	8,934	2,372
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake	3,260	4,812		1,549							472	117
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	130,803	138,310		65,757		19,990	159,061		3,112	8,413	22,189	4,703
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence	1,178	1,079		513		257	592		142	362	197	42
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	81,298	87,193		25,115	104,659	217,443	266,506	1,445	(283)	5,277	10,757	2,923
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability	3,609,659	3,178,892		2,220,002	2,193,287	1,350,598	2,689,868	62,627	143,627	480,220	459,823	129,796
21.1	Private Passenger Auto Physical Damage	58,436	61,278		13,756	26,068	40,035	(2,264)	85	220	283	7,198	2,101
21.2	Commercial Auto Physical Damage	1,172,328	1,275,131		642,373	558,800	534,064	97,153	1,034	1,089	5,266	138,933	42,155
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)	13,228,857	12,526,899		7,395,568	11,039,613	11,071,785	4,966,502	141,721	272,467	677,575	1,730,525	475,682
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$51,375
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	1,557	1,518		1,310		146	173		7	8	260	32
2.1	Allied Lines	3,068	3,227		2,829		312	369		16	18	512	63
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril	1,763	82		1,681							294	36
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)	541,105	466,561		181,359	10,000	47,855	55,157		823	3,692	90,323	11,156
5.2	Commercial Multiple Peril (Liability Portion)	453,660	398,391		133,617	105,508	388,957	747,229	21,004	49,430	192,925	75,687	9,353
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	768	768		101		68	83		3	4	128	16
9.2	Pet insurance plans												
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	7,747	297		7,450							751	93
17.1	Other Liability—Occurrence	9,233	11,136		1,939		4,325	6,185		2,550	3,772	1,541	190
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence	(213)	(31)				(111)	(6)		(72)	(4)	(36)	(4)
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	581,279	624,941		178,313	292,801	85,500	274,918	15,678	5,334	46,958	85,679	11,984
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability	1,149,994	1,075,378		622,179	411,037	58,328	1,574,203	73,613	112,030	162,699	136,143	23,709
21.1	Private Passenger Auto Physical Damage	475,577	503,743		136,691	200,350	185,584	(1,369)	138	744	1,615	71,369	9,805
21.2	Commercial Auto Physical Damage	462,271	431,559		223,273	316,966	280,663	21,956	(7,160)	(7,291)	1,321	53,789	9,531
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	3,687,809	3,517,572		1,490,741	1,336,662	1,051,628	2,678,899	103,272	163,573	413,007	516,440	75,964
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$33,694

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF IOWA DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	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
	Direct Premiums Written	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												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial Guaranty												
11.1 Medical Professional Liability — Occurrence												
11.2 Medical Professional Liability — Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability—Occurrence												
17.2 Other Liability—Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability — Occurrence												
18.2 Products Liability — Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												
Details of Write-Ins												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF KANSAS DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)												
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	26,354	28,387		16,505		2,818	3,128		139	150	4,399	(18,896)
2.1	Allied Lines	22,097	43,008		13,880		4,500	4,922		221	237	3,689	2,834
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril	4,894	1,074		3,820		45	45		15	15	817	539
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)	329,311	288,964		148,512	25,646	22,650	17,866	160	274	2,249	54,861	35,200
5.2	Commercial Multiple Peril (Liability Portion)	598,371	470,013		197,033	—	208,224	495,753	4,140	65,668	227,014	99,143	32,515
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake	213	3		210							36	27
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	44,543	41,639		21,670		9,476	19,453		5,342	11,895	7,435	2,704
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence	(50)	16		(24)		(2)	16		(2)	10	(8)	(6)
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	18,516	19,493		7,404		(9)	(1,469)		389	411	2,729	2,375
19.2	Other Private Passenger Auto Liability	79,120	82,588		33,009	59,016	(16,169)	11,492		(1,735)	5,916	11,702	(1,167)
19.3	Commercial Auto No-Fault (Personal Injury Protection)	86,104	83,941		41,248	57,017	43,326	30,832		(316)	4,787	9,784	11,045
19.4	Other Commercial Auto Liability	1,640,742	1,534,376		826,089	554,361	362,826	1,152,088	35,043	91,313	237,879	207,839	38,137
21.1	Private Passenger Auto Physical Damage	61,896	64,208		26,366	18,142	21,945	(1,393)		122	237	9,352	7,940
21.2	Commercial Auto Physical Damage	747,776	692,300		363,087	450,319	482,166	78,453	529	1,013	2,796	101,588	95,919
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)	3,659,886	3,350,010		1,698,809	1,164,502	1,141,797	1,811,186	39,871	162,444	493,594	513,365	209,165
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$16,459

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)												
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)												
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)												
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	22,518	44,805		14,024		6,100	6,619		225	244	3,627	356
2.1	Allied Lines	29,507	37,193		17,179	46,989	48,606	2,566		161	197	4,729	466
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril	24,518	3,647		20,871		149	149	4	54	50	4,093	387
4.	Homeowners Multiple Peril	135,664,339	134,019,646		70,478,205	78,571,381	70,005,900	22,981,979	1,103,468	1,618,934	1,489,888	20,213,007	2,143,386
5.1	Commercial Multiple Peril (Non-Liability Portion)	1,343,996	1,073,293		690,450	140,941	96,487	243,497	49,501	51,269	8,195	224,526	21,234
5.2	Commercial Multiple Peril (Liability Portion)	821,403	671,527		363,171	52,033	275,443	683,033	15,092	122,630	304,522	138,163	12,978
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	1,931,408	1,935,202		980,926	421,341	334,156	102,665	1,033	8,377	18,615	303,122	30,515
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake	443,257	427,867		225,476							70,566	7,003
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	2,730,314	2,699,542		1,388,843	317,879	149,227	3,675,338		(24,462)	27,348	467,606	43,137
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence	13	13		4		4	7		3	5	2	—
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	113,223,812	116,151,562		42,661,234	72,640,427	77,352,930	77,608,748	1,934,145	3,067,453	6,264,415	15,951,140	1,788,844
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability	7,569,373	6,897,944		4,195,749	1,880,009	2,782,966	7,130,465	127,655	328,258	1,038,343	912,236	119,590
21.1	Private Passenger Auto Physical Damage	151,683,786	148,940,277		59,798,859	83,697,296	81,102,238	(1,663,337)	67,330	134,103	153,602	21,390,625	2,396,480
21.2	Commercial Auto Physical Damage	3,091,598	2,744,394		1,660,646	1,521,958	1,593,201	233,521	120	153	9,980	375,616	48,845
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)	418,579,840	415,646,913		182,495,637	239,290,252	233,747,408	111,005,251	3,298,349	5,307,157	9,315,403	60,059,057	6,613,219
Details of Write-Ins													
3401.													
3402.													
3403.													
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$4,681,335
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	24,217	28,665		7,519		2,633	3,389		134	163	4,042	735
2.1	Allied Lines	46,769	43,259		15,158		4,047	4,680		201	225	7,807	1,419
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)	472,443	486,531		141,421	286,374	290,292	23,007	225	860	3,874	78,862	14,338
5.2	Commercial Multiple Peril (Liability Portion)	584,846	595,853		161,570	105,545	156,527	718,067	17,571	35,568	274,604	97,572	17,749
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
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	15,351	50,118		24,906	2,835	629,304	780,689		9,414	18,754	2,562	466
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence	2,558	2,609		185		1,528	1,493		935	913	427	78
18.2	Products Liability — Claims-Made									—			
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	8,821	9,204		2,385		1,025	(700)		176	194	1,024	268
19.2	Other Private Passenger Auto Liability	63,665	66,069		17,943	71,544	22,216	16,172		(2,184)	2,352	7,346	1,932
19.3	Commercial Auto No-Fault (Personal Injury Protection)	253,658	213,099		118,712	4,708	10,810	64,714		2,618	12,710	25,274	7,698
19.4	Other Commercial Auto Liability	2,884,047	2,642,037		1,354,360	2,051,670	2,369,826	4,435,406	215,737	293,373	415,391	314,539	87,525
21.1	Private Passenger Auto Physical Damage	38,340	41,621		9,239	41,406	42,953	(1,421)		30	210	4,442	1,164
21.2	Commercial Auto Physical Damage	1,561,328	1,418,826		755,104	650,120	625,231	66,473	1,340	1,183	4,723	179,935	47,383
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)	5,956,042	5,597,891		2,608,503	3,214,203	4,156,390	6,111,968	234,872	342,308	734,113	723,833	180,755
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$38,687

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	10,440	9,103		6,455		848	994		42	48	1,743	296
2.1	Allied Lines	21,469	19,321		11,109		1,825	2,109		91	101	3,584	609
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril	4,339	170		4,169							724	123
4.	Homeowners Multiple Peril	20,097,984	19,205,979		10,875,059	10,044,742	8,502,911	1,680,499	154,753	81,105	213,564	2,808,683	570,495
5.1	Commercial Multiple Peril (Non-Liability Portion)	533,444	562,064		213,416	24,205	81,214	67,806	—	879	4,440	88,558	15,142
5.2	Commercial Multiple Peril (Liability Portion)	409,219	313,971		187,367	92,967	170,393	430,664	9,085	49,325	145,524	68,230	11,616
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	180,577	177,313		95,793	17,435	58,761	45,566		755	1,705	27,211	5,126
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake	55,698	51,030		30,824							8,523	1,581
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	359,165	355,663		195,512	(5,189)		365,746		(3,221)	5,330	61,944	10,195
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence						(18,450)			(12,120)			
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	279,172	309,705		99,315	165,157	110,835	110,169	5,743	(8,286)	19,864	38,767	7,925
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability	3,385,192	3,299,652		1,736,222	1,764,835	2,076,157	4,344,000	76,589	152,051	500,599	412,080	96,091
21.1	Private Passenger Auto Physical Damage	178,033	206,550		62,006	130,260	164,897	25,441	—	285	892	24,763	5,054
21.2	Commercial Auto Physical Damage	1,154,866	1,134,945		589,429	884,123	854,153	74,246	495	86	3,818	134,906	32,782
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)	26,669,598	25,645,465		14,106,676	13,123,725	11,998,353	7,147,243	246,665	260,992	895,886	3,679,717	757,035
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$106,087
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF UTAH DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)												
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	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	5,766	5,216		4,919		641	739		24	28	962	166
2.1	Allied Lines	5,443	5,392		4,253	20,772	21,096	439		25	29	909	157
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)	187,290	175,425		83,303	35,962	34,391	7,854	—	(235)	1,327	31,263	5,401
5.2	Commercial Multiple Peril (Liability Portion)	243,652	243,144		88,428	35,932	123,036	530,271	17,356	10,658	113,470	40,667	7,026
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
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	76,859	56,227		34,586		10,664	29,710	120	5,795	18,185	12,797	2,216
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence	(373)	2	—		(265)	28		(175)	17	(62)	(11)	
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	3,621,274	3,470,784		1,778,913	2,873,746	3,381,061	3,056,637	72,980	142,533	435,355	521,924	104,427
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage	576,141	600,256		284,117	438,674	438,930	43,357		1,749	4,612	86,939	16,614
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)	4,716,052	4,556,447		2,278,519	3,405,087	4,009,554	3,669,034	90,456	160,373	573,024	695,400	135,997
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$173
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)												
Details of Write-Ins													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

GRAND TOTAL DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 10322

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	123,862	147,070		68,269	—	16,583	18,893		706	795	20,544	(15,671)
2.1	Allied Lines	171,816	190,662		85,059	71,919	87,503	18,692		894	1,013	28,484	7,753
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril	35,608	4,994		30,614		197	197	4	70	66	5,944	1,091
4.	Homeowners Multiple Peril	163,194,962	160,311,921		85,344,663	96,540,103	86,906,996	25,987,725	1,328,023	1,804,039	1,782,413	23,991,126	2,981,143
5.1	Commercial Multiple Peril (Non-Liability Portion)	5,230,647	4,564,661		2,396,997	1,608,977	2,111,700	983,284	76,114	83,284	35,768	872,932	193,496
5.2	Commercial Multiple Peril (Liability Portion)	5,514,815	4,892,593		2,117,262	582,521	2,199,754	5,782,674	112,967	606,529	2,251,449	920,496	219,119
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	2,178,715	2,186,365		1,111,040	438,776	407,174	164,781	1,033	9,449	21,039	339,395	38,028
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake	502,428	483,712		258,059							79,597	8,729
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	30,376	3,651		26,725		523	523		146	146	2,718	1,330
17.1	Other Liability—Occurrence	3,463,660	3,449,548		1,785,389	370,714	869,590	5,147,822	12,535	25,139	129,141	592,332	68,939
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence	9,901	8,320		2,889		(14,707)	4,544		(9,859)	2,786	1,653	470
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	27,337	28,697		9,790		1,016	(2,169)		566	605	3,753	2,643
19.2	Other Private Passenger Auto Liability	114,446,084	117,470,571		43,062,384	73,378,989	77,821,223	78,390,125	1,960,117	3,059,028	6,354,562	16,124,471	1,819,974
19.3	Commercial Auto No-Fault (Personal Injury Protection)	339,762	297,040		159,961	61,725	54,136	95,546		2,303	17,497	35,058	18,743
19.4	Other Commercial Auto Liability	30,712,817	28,977,668		16,064,336	16,273,438	16,444,091	34,908,554	1,180,765	1,679,087	4,310,697	3,931,178	974,081
21.1	Private Passenger Auto Physical Damage	152,581,907	149,910,903		60,079,282	84,150,792	81,600,586	(1,646,994)	75,731	143,831	157,221	21,520,004	2,427,238
21.2	Commercial Auto Physical Damage	11,199,932	10,568,378		5,780,874	5,964,008	5,863,710	715,058	(1,995)	573	45,104	1,426,209	426,337
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)	489,764,631	483,496,754		218,383,590	279,441,962	274,370,074	150,569,255	4,745,294	7,405,784	15,110,301	69,895,894	9,173,443
Details of Write-Ins													
3401.													
3402.													
3403.													
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$4,950,902

(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 .

SCHEDULE F - PART 1

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

1	2	3	4	5	Reinsurance On			9	10	11	12	13	14	15
					6	7	8							
ID Number	NAIC Company Code	Name of Reinsured	Domiciliary Jurisdiction	Assumed Premium	Paid Losses and Loss Adjustment Expenses	Known Case Losses and LAE	Cols. 6 + 7	Contingent Commissions Payable	Assumed Premiums Receivable	Unearned Premium	Funds Held By or Deposited With Reinsured Companies	Letters of Credit Posted	Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	Amount of Assets Pledged or Collateral Held in Trust
Pools and Associations, Mandatory Pools, Associations or Other Similar Facilities														
AA-9991141		OHIO COMMERCIAL AUTO INS PROCEDURE	OH	245		504	504			125				
AA-9991205		GEORGIA FAIR PLAN	GA	—		1	1			—				
AA-9991206		ILLINOIS FAIR PLAN	IL	1		1	1			1				
AA-9991222		OHIO FAIR PLAN	OH	232		52	52			163				
1099999 – Pools and Associations, Mandatory Pools, Associations or Other Similar Facilities				479		557	557			289				
1299999 – Total Pools and Associations				479		557	557			289				
9999999 – Totals				479		557	557			289				

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effectuated or (Canceled) During Current Year

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

NONE

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable On									16	Reinsurance Payable		19	20
						7	8	9	10	11	12	13	14	15		17	18		
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Special Code	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commissions	Cols. 7 through 14 Totals	Amount in Dispute Included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable From Reinsurers Cols. 15- [17+18]	Funds Held by Company Under Reinsurance Treaties
Total Authorized, Affiliates, U.S. Intercompany Pooling																			
31-4192970	14060	GRANGE INS CO	OH		444,162			81,650		66,834		216,957		365,441				365,441	510
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling					444,162			81,650		66,834		216,957		365,441				365,441	510
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total																			
0899999 – Total Authorized, Affiliates, Total Authorized - Affiliates					444,162			81,650		66,834		216,957		365,441				365,441	510
Total Authorized, Other U.S. Unaffiliated Insurers																			
06-0384680	11452	HARTFORD STEAM BOIL INSPEC & INS CO	CT		2,666	–	–	8	–	–	–	1,376	–	1,384	–	–	–	1,384	–
51-0434766	20370	AXIS REINS CO	NY		266	–	–	5	–	–	–	–	–	5	–	–	–	5	–
47-0574325	32603	BERKLEY INS CO	DE		29	–	–	–	–	–	–	13	–	13	–	–	–	13	–
42-0234980	21415	EMPLOYERS MUT CAS CO	IA		117	–	–	2	–	–	–	–	–	2	–	–	–	2	–
35-2293075	11551	ENDURANCE ASSUR CORP	DE		–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
13-2673100	22039	GENERAL REINS CORP	DE		118	–	–	5	–	–	–	28	–	33	–	–	–	33	–
52-1952955	10357	RENAISSANCE REINS US INC	MD		124	–	–	–	–	–	–	–	–	–	–	–	–	–	–
47-0698507	23680	ODYSSEY REINS CO	CT		74	–	–	–	–	–	–	–	–	–	–	–	–	–	–
13-1675535	25364	SWISS REINS AMER CORP	NY		1,601	–	–	14	–	–	–	–	–	14	–	–	–	14	–
42-0644327	13021	UNITED FIRE & CAS CO	IA		137	–	–	–	–	–	–	–	–	–	–	–	–	–	–
22-2005057	26921	EVEREST REINS CO	DE		228	–	–	2	–	–	–	–	–	2	–	–	–	2	–
87-2252307	22225	TRISURA INS CO	OK		126	–	–	–	–	–	–	–	–	–	–	–	–	–	–
13-4924125	10227	MUNICH REINS AMER INC	DE		267	–	–	9	–	–	–	–	–	9	–	–	–	9	–
13-3138390	42307	NAVIGATORS INS CO	NY		215	–	–	8	–	–	–	–	–	8	–	–	–	8	–
23-1641984	10219	QBE REINS CORP	PA		161	–	–	–	–	–	–	–	–	–	–	–	–	–	–
13-5616275	19453	TRANSATLANTIC REINS CO	NY		289	–	–	10	–	–	–	–	–	10	–	–	–	10	–
04-1543470	23043	LIBERTY MUT INS CO	MA		92	–	–	–	–	–	–	–	–	–	–	–	–	–	–
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers					6,511	–	–	62	–	–	–	1,417	–	1,479	–	–	–	1,479	–
Total Authorized, Pools, Mandatory Pools																			
AA-9991500		ILLINOIS MINE SUBSIDENCE FUND	IL		11	–	–	–	–	–	–	6	–	6	–	–	–	6	–
AA-9991502		KENTUCKY MINE SUBSIDENCE FUND	KY		1	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-9991503		OHIO MINE SUBSIDENCE FUND	OH		22	–	–	–	–	–	–	11	–	11	–	–	–	11	–
1099999 – Total Authorized, Pools, Mandatory Pools					34	–	–	–	–	–	–	18	–	18	–	–	–	18	–
Total Authorized, Other Non-U.S. Insurers																			
AA-1120198		Lloyd's Syndicate Number 1618	GBR		–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1128987		Lloyd's Syndicate Number 2987	GBR		105	–	–	3	–	–	–	–	–	3	–	–	–	3	–
AA-1126033		Lloyd's Syndicate Number 33	GBR		145	–	–	4	–	–	–	–	–	4	–	–	–	4	–
AA-1126435		Lloyd's Syndicate Number 435	GBR		17	–	–	1	–	–	–	–	–	1	–	–	–	1	–
AA-1126510		Lloyd's Syndicate Number 510	GBR		–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1126623		Lloyd's Syndicate Number 623	GBR		37	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1127084		Lloyd's Syndicate Number 1084	GBR		404	–	–	1	–	–	–	–	–	1	–	–	–	1	–
AA-1120156		Lloyd's Syndicate Number 1686	GBR		80	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1120157		Lloyd's Syndicate Number 1729	GBR		21	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1120171		Lloyd's Syndicate Number 1856	GBR		51	–	–	1	–	–	–	–	–	1	–	–	–	1	–
AA-1128001		Lloyd's Syndicate Number 2001	GBR		82	–	–	1	–	–	–	–	–	1	–	–	–	1	–
AA-1128003		Lloyd's Syndicate Number 2003	GBR		52	–	–	1	–	–	–	–	–	1	–	–	–	1	–
AA-1120179		Lloyd's Syndicate Number 2988	GBR		–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1128010		Lloyd's Syndicate Number 2010	GBR		120	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1128623		Lloyd's Syndicate Number 2623	GBR		19	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1128623		Lloyd's Syndicate Number 2623	GBR		170	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1128791		Lloyd's Syndicate Number 2791	GBR		73	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-1126004		Lloyd's Syndicate Number 4444	GBR		170	–	–	–	–	–	–	–	–	–	–	–	–	–	–
AA-3194130		Endurance Specialty Ins Ltd	BMU		249	–	–	6	–	–	–	–	–	6	–	–	–	6	–
AA-1840000		Mapfre Re Compania de Reaseguros SA	ESP		444	–	–	2	–	–	–	–	–	2	–	–	–	2	–

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable On									16	Reinsurance Payable		19	20
						7	8	9	10	11	12	13	14	15		17	18		
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Special Code	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commissions	Cols. 7 through 14 Totals	Amount in Dispute Included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable From Reinsurers Cols. 15- [17+18]	Funds Held by Company Under Reinsurance Treaties
AA-3190686		Partner Reins Co Ltd	BMU		132	—	—	—	—	—	—	—	—	—	—	—	—	—	—
AA-3190870		Validus Reins Ltd	BMU		198	—	—	—	—	—	—	—	—	—	—	—	—	—	—
AA-1340125		Hannover Rueck SE	DEU		275	—	—	2	—	—	—	—	—	2	—	—	—	2	—
1299999 – Total Authorized, Other Non-U.S. Insurers					2,842	—	—	22	—	—	—	—	—	22	—	—	—	22	—
1499999 – Total Authorized Excluding Protected Cells					453,549	—	—	81,734	—	66,834	—	218,392	—	366,959	—	—	—	366,959	510
Total Unauthorized, Other Non-U.S. Insurers																			
AA-1120191		CONVEX Ins UK	GBR		18	—	—	—	—	—	—	—	—	—	—	—	—	—	—
AA-3191190		Hamilton Re Ltd	BMU		104	—	—	—	—	—	—	—	—	—	—	—	—	—	—
AA-1460080		Helvetia Schweizerische VeriAG	CHE		43	—	—	—	—	—	—	—	—	—	—	—	—	—	—
AA-1340028		DEVK	DEU		40	—	—	—	—	—	—	—	—	—	—	—	—	—	—
AA-1780116		CHAUCER INSURANCE COMPANY	IRL		59	—	—	2	—	—	—	—	—	2	—	—	—	2	—
AA-3191437		Group ARK Ins Ltd Bermuda	BMU			—	—	—	—	—	—	—	—	—	—	—	—	—	—
AA-5420050		KOREAN REINSURANCE COMPANY	KOR		320	—	—	9	—	—	—	—	—	9	—	—	—	9	—
AA-1440060		Lansforsakringar Sak Fors	SWE		46	—	—	—	—	—	—	—	—	—	—	—	—	—	—
AA-3194122		DaVinci Reins Ltd	BMU		35	—	—	—	—	—	—	—	—	—	—	—	—	—	—
AA-1460019		MS AMLIN AG BERMUDA BRANCH	CHE		100	—	—	1	—	—	—	—	—	1	—	—	—	1	—
AA-1440076		SIRIUS INTERNATIONAL INS CORP	SWE		75	—	—	1	—	—	—	—	—	1	—	—	—	1	—
AA-5324100		TAIPING REINSURANCE CO LTD	HKG		118	—	—	2	—	—	—	—	—	2	—	—	—	2	—
AA-3191432		Vantage Risk Ltd	BMU		134	—	—	—	—	—	—	—	—	—	—	—	—	—	—
2699999 – Total Unauthorized, Other Non-U.S. Insurers					1,093	—	—	15	—	—	—	—	—	15	—	—	—	15	—
2899999 – Total Unauthorized Excluding Protected Cells					1,093	—	—	15	—	—	—	—	—	15	—	—	—	15	—
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																			
RJ-3194126		Arch Reins Ltd	BMU		525	—	—	22	—	—	—	—	—	22	—	—	—	22	—
RJ-3190770		Chubb Tempest Reins Ltd	BMU		33,898	—	—	2,630	—	—	—	281	—	2,910	—	—	—	2,910	—
RJ-3191289		Fidelis Ins Bermuda Ltd	BMU		465	—	—	2	—	—	—	—	—	2	—	—	—	2	—
RJ-1120175		Fidelis Underwriting Ltd	GBR		553	—	—	4	—	—	—	—	—	4	—	—	—	4	—
RJ-3190875		Hiscox Ins Co (Bermuda) Ltd	BMU		159	—	—	5	—	—	—	—	—	5	—	—	—	5	—
5499999 – Total Reciprocal Jurisdiction, Other Non-U.S. Insurers					35,601	—	—	2,663	—	—	—	281	—	2,944	—	—	—	2,944	—
5699999 – Total Reciprocal Jurisdiction Excluding Protected Cells					35,601	—	—	2,663	—	—	—	281	—	2,944	—	—	—	2,944	—
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells					490,243	—	—	84,412	—	66,834	—	218,672	—	369,918	—	—	—	369,918	510
9999999 – Totals					490,243	—	—	84,412	—	66,834	—	218,672	—	369,918	—	—	—	369,918	510

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
ID Number From Col. 1	Name of Reinsurer From Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 – 27)	Stressed Recoverable (Col. 28*120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29 – 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 – 32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
Total Authorized, Affiliates, U.S. Intercompany Pooling																	
31-4192970	GRANGE INS CO					510	364,931	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling				XXX		510	364,931	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total				XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999 – Total Authorized, Affiliates, Total Authorized - Affiliates				XXX		510	364,931	–							XXX		
Total Authorized, Other U.S. Unaffiliated Insurers																	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO					–	1,384	–	1,384	1,661	–	1,661		1,661	1		27
51-0434766	AXIS REINS CO					–	5	–	5	6	–	6		6	3		–
47-0574325	BERKLEY INS CO					–	13	–	13	15	–	15		15	2		–
42-0234980	EMPLOYERS MUT CAS CO					–	2	–	2	2	–	2		2	4		–
35-2293075	ENDURANCE ASSUR CORP					–	–	–	–	–	–	–		–	2		–
13-2673100	GENERAL REINS CORP					–	33	–	33	39	–	39		39	1		1
52-1952955	RENAISSANCE REINS US INC					–	–	–	–	–	–	–		–	2		–
47-0698507	ODYSSEY REINS CO					–	–	–	–	–	–	–		–	2		–
13-1675535	SWISS REINS AMER CORP					–	14	–	14	16	–	16		16	2		–
42-0644327	UNITED FIRE & CAS CO					–	–	–	–	–	–	–		–	4		–
22-2005057	EVEREST REINS CO					–	2	–	2	2	–	2		2	2		–
87-2252307	TRISURA INS CO					–	–	–	–	–	–	–		–	4		–
13-4924125	MUNICH REINS AMER INC					–	9	–	9	11	–	11		11	2		–
13-3138390	NAVIGATORS INS CO					–	8	–	8	9	–	9		9	3		–
23-1641984	QBE REINS CORP					–	–	–	–	–	–	–		–	2		–
13-5616275	TRANSATLANTIC REINS CO					–	10	–	10	12	–	12		12	2		–
04-1543470	LIBERTY MUT INS CO					–	–	–	–	–	–	–		–	3		–
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers				XXX		–	1,479	–	1,479	1,774	–	1,774		1,774	XXX		29
Total Authorized, Pools, Mandatory Pools																	
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND						6	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND						–	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991503	OHIO MINE SUBSIDENCE FUND						11	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999 – Total Authorized, Pools, Mandatory Pools				XXX			18	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Total Authorized, Other Non-U.S. Insurers																	
AA-1120198	Lloyd's Syndicate Number 1618					–	–	–	–	–	–	–		–	3		–
AA-1128987	Lloyd's Syndicate Number 2987					–	3	–	3	4	–	4		4	3		–
AA-1126033	Lloyd's Syndicate Number 33					–	4	–	4	5	–	5		5	3		–
AA-1126435	Lloyd's Syndicate Number 435					–	1	–	1	1	–	1		1	3		–
AA-1126510	Lloyd's Syndicate Number 510					–	–	–	–	–	–	–		–	3		–
AA-1126623	Lloyd's Syndicate Number 623					–	–	–	–	–	–	–		–	3		–
AA-1127084	Lloyd's Syndicate Number 1084					–	1	–	1	1	–	1		1	3		–
AA-1120156	Lloyd's Syndicate Number 1686					–	–	–	–	–	–	–		–	3		–
AA-1120157	Lloyd's Syndicate Number 1729					–	–	–	–	–	–	–		–	3		–
AA-1120171	Lloyd's Syndicate Number 1856					–	1	–	1	1	–	1		1	3		–
AA-1128001	Lloyd's Syndicate Number 2001					–	1	–	1	1	–	1		1	3		–

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

1	2	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
ID Number From Col. 1	Name of Reinsurer From Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 – 27)	Stressed Recoverable (Col. 28*120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29 – 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 – 32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-1128003	Lloyd's Syndicate Number 2003					–	1	–	1	2	–	2		2	3		–
AA-1120179	Lloyd's Syndicate Number 2988					–	–	–	–	–	–	–	–	–	3		–
AA-1128010	Lloyd's Syndicate Number 2010					–	–	–	–	–	–	–	–	–	3		–
AA-1128623	Lloyd's Syndicate Number 2623					–	–	–	–	–	–	–	–	–	3		–
AA-1128623	Lloyd's Syndicate Number 2623					–	–	–	–	–	–	–	–	–	3		–
AA-1128791	Lloyd's Syndicate Number 2791					–	–	–	–	–	–	–	–	–	3		–
AA-1126004	Lloyd's Syndicate Number 4444					–	–	–	–	–	–	–	–	–	3		–
AA-3194130	Endurance Specialty Ins Ltd					–	6	–	6	7	–	7		7	2		–
AA-1840000	Mapfre Re Compania de Reaseguros SA					–	2	–	2	2	–	2		2	2		–
AA-3190686	Partner Reins Co Ltd					–	–	–	–	–	–	–		–	2		–
AA-3190870	Validus Reins Ltd					–	–	–	–	–	–	–		–	3		–
AA-1340125	Hannover Rueck SE					–	2	–	2	2	–	2		2	3		–
1299999 – Total Authorized, Other Non-U.S. Insurers				XXX		–	22	–	22	27	–	27		27	XXX		1
1499999 – Total Authorized Excluding Protected Cells				XXX		510	366,449	–	1,501	1,801	–	1,801		1,801	XXX		30
Total Unauthorized, Other Non-U.S. Insurers																	
AA-1120191	CONVEX Ins UK					–	–	–	–	–	–	–	–	–	3		–
AA-3191190	Hamilton Re Ltd		–	0001		–	–	–	–	–	–	–	–	–	4	–	–
AA-1460080	Helvetia Schweizerische VeriAG					–	–	–	–	–	–	–		–	2		–
AA-1340028	DEVK					–	–	–	–	–	–	–		–	3		–
AA-1780116	CHAUCER INSURANCE COMPANY		2	0002		2	–	–	2	2	–	2	2	–	2	–	–
AA-3191437	Group ARK Ins Ltd Bermuda					–	–	–	–	–	–	–		–	3		–
AA-5420050	KOREAN REINSURANCE COMPANY		9	0003		9	–	–	9	11	–	11	9	2	3	–	–
AA-1440060	Lansforsakringar Sak Fors					–	–	–	–	–	–	–		–	3		–
AA-3194122	DaVinci Reins Ltd					–	–	–	–	–	–	–		–	2		–
AA-1460019	MS AMLIN AG BERMUDA BRANCH		1	0004		1	–	–	1	1	–	1	1	–	3	–	–
AA-1440076	SIRIUS INTERNATIONAL INS CORP				1	1	–	–	1	1	–	1	1	–	4	–	–
AA-5324100	TAIPING REINSURANCE CO LTD		2	0005		2	–	–	2	2	–	2	2	–	3	–	–
AA-3191432	Vantage Risk Ltd					–	–	–	–	–	–	–		–	4		–
2699999 – Total Unauthorized, Other Non-U.S. Insurers			14	XXX	1	15	–	–	15	18	–	18	15	3	XXX	–	–
2899999 – Total Unauthorized Excluding Protected Cells			14	XXX	1	15	–	–	15	18	–	18	15	3	XXX	–	–
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																	
RJ-3194126	Arch Reins Ltd						22	–	22	27		27		27	2		1
RJ-3190770	Chubb Tempest Reins Ltd					2,910	–	–	2,910	3,493		3,493		3,493	2		73
RJ-3191289	Fidelis Ins Bermuda Ltd					2	–	–	2	3		3		3	3		–
RJ-1120175	Fidelis Underwriting Ltd					4	–	–	4	5		5		5	3		–
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd					5	–	–	5	6		6		6	2		–
5499999 – Total Reciprocal Jurisdiction, Other Non-U.S. Insurers				XXX			2,944	–	2,944	3,533		3,533		3,533	XXX		74
5699999 – Total Reciprocal Jurisdiction Excluding Protected Cells				XXX			2,944	–	2,944	3,533		3,533		3,533	XXX		74
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells			14	XXX	1	525	369,393	–	4,460	5,352	–	5,352	15	5,337	XXX	–	104
9999999 – Totals			14	XXX	1	525	369,393	–	4,460	5,352	–	5,352	15	5,337	XXX	–	104

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44	45	46	47	48	49	50	51	52	53
		37	38	39	40	41	42	43										
ID Number From Col. 1	Name of Reinsurer From Col. 3	Current	Overdue 1 - 29 Days	Overdue 30 - 90 Days	Overdue 91 - 120 Days	Overdue Over 120 Days	Overdue Total Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43 – 44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
Total Authorized, Affiliates, U.S. Intercompany Pooling																		
31-4192970	GRANGE INS CO											–				–	YES	–
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling												–		–	–	–	XXX	–
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total														–	–	–	XXX	
Total Authorized, Other U.S. Unaffiliated Insurers																		
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	–						–			–	–				–	YES	–
51-0434766	AXIS REINS CO	–						–			–	–				–	YES	–
47-0574325	BERKLEY INS CO							–			–	–				–	YES	–
42-0234980	EMPLOYERS MUT CAS CO	–						–			–	–				–	YES	–
35-2293075	ENDURANCE ASSUR CORP	–						–			–	–				–	YES	–
13-2673100	GENERAL REINS CORP							–			–	–				–	YES	–
52-1952955	RENAISSANCE REINS US INC	–						–			–	–				–	YES	–
47-0698507	ODYSSEY REINS CO	–						–			–	–				–	YES	–
13-1675535	SWISS REINS AMER CORP	–						–			–	–				–	YES	–
42-0644327	UNITED FIRE & CAS CO							–			–	–				–	YES	–
22-2005057	EVEREST REINS CO	–						–			–	–				–	YES	–
87-2252307	TRISURA INS CO	–						–			–	–				–	YES	–
13-4924125	MUNICH REINS AMER INC	–						–			–	–				–	YES	–
13-3138390	NAVIGATORS INS CO	–						–			–	–				–	YES	–
23-1641984	QBE REINS CORP	–						–			–	–				–	YES	–
13-5616275	TRANSATLANTIC REINS CO	–						–			–	–				–	YES	–
04-1543470	LIBERTY MUT INS CO	–						–			–	–				–	YES	–
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers		–						–			–	–		–	–	–	XXX	–
Total Authorized, Pools, Mandatory Pools																		
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND											–				–	YES	–
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND											–				–	YES	–
AA-9991503	OHIO MINE SUBSIDENCE FUND											–				–	YES	–
1099999 – Total Authorized, Pools, Mandatory Pools												–		–	–	–	XXX	–
Total Authorized, Other Non-U.S. Insurers																		
AA-1120198	Lloyd's Syndicate Number 1618											–				–	YES	–
AA-1128987	Lloyd's Syndicate Number 2987											–				–	YES	–
AA-1126033	Lloyd's Syndicate Number 33											–				–	YES	–
AA-1126435	Lloyd's Syndicate Number 435											–				–	YES	–
AA-1126510	Lloyd's Syndicate Number 510											–				–	YES	–
AA-1126623	Lloyd's Syndicate Number 623											–				–	YES	–
AA-1127084	Lloyd's Syndicate Number 1084											–				–	YES	–
AA-1120156	Lloyd's Syndicate Number 1686											–				–	YES	–
AA-1120157	Lloyd's Syndicate Number 1729											–				–	YES	–
AA-1120171	Lloyd's Syndicate Number 1856											–				–	YES	–
AA-1128001	Lloyd's Syndicate Number 2001											–				–	YES	–
AA-1128003	Lloyd's Syndicate Number 2003											–				–	YES	–
AA-1120179	Lloyd's Syndicate Number 2988											–				–	YES	–
AA-1128010	Lloyd's Syndicate Number 2010											–				–	YES	–
AA-1128623	Lloyd's Syndicate Number 2623											–				–	YES	–

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44	45	46	47	48	49	50	51	52	53
		37	38	39	40	41	42	43										
ID Number From Col. 1	Name of Reinsurer From Col. 3	Current	Overdue 1 - 29 Days	Overdue 30 - 90 Days	Overdue 91 - 120 Days	Overdue Over 120 Days	Overdue Total Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43 – 44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
AA-1128623	Lloyd's Syndicate Number 2623											–				–	YES	–
AA-1128791	Lloyd's Syndicate Number 2791											–				–	YES	–
AA-1126004	Lloyd's Syndicate Number 4444											–				–	YES	–
AA-3194130	Endurance Specialty Ins Ltd											–				–	YES	–
AA-1840000	Mapfre Re Compania de Reaseguros SA											–				–	YES	–
AA-3190686	Partner Reins Co Ltd											–				–	YES	–
AA-3190870	Validus Reins Ltd											–				–	YES	–
AA-1340125	Hannover Rueck SE											–				–	YES	–
1299999 – Total Authorized, Other Non-U.S. Insurers												–		–	–	–	XXX	–
1499999 – Total Authorized Excluding Protected Cells		–						–			–	–		–	–	–	XXX	–
Total Unauthorized, Other Non-U.S. Insurers																		
AA-1120191	CONVEX Ins UK											–				–	YES	–
AA-3191190	Hamilton Re Ltd											–				–	YES	–
AA-1460080	Helvetia Schweizerische VeriAG											–				–	YES	–
AA-1340028	DEVK											–				–	YES	–
AA-1780116	CHAUCER INSURANCE COMPANY											–				–	YES	–
AA-3191437	Group ARK Ins Ltd Bermuda											–				–	YES	–
AA-5420050	KOREAN REINSURANCE COMPANY											–				–	YES	–
AA-1440060	Lansforsakringar Sak Fors											–				–	YES	–
AA-3194122	DaVinci Reins Ltd											–				–	YES	–
AA-1460019	MS AMLIN AG BERMUDA BRANCH											–				–	YES	–
AA-1440076	SIRIUS INTERNATIONAL INS CORP											–				–	YES	–
AA-5324100	TAIPING REINSURANCE CO LTD											–				–	YES	–
AA-3191432	Vantage Risk Ltd											–				–	YES	–
2699999 – Total Unauthorized, Other Non-U.S. Insurers												–		–	–	–	XXX	–
2899999 – Total Unauthorized Excluding Protected Cells												–		–	–	–	XXX	–
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																		
RJ-3194126	Arch Reins Ltd											–		–	–	–	YES	–
RJ-3190770	Chubb Tempest Reins Ltd											–		–	–	–	YES	–
RJ-3191289	Fidelis Ins Bermuda Ltd											–		–	–	–	YES	–
RJ-1120175	Fidelis Underwriting Ltd											–		–	–	–	YES	–
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd											–		–	–	–	YES	–
5499999 – Total Reciprocal Jurisdiction, Other Non-U.S. Insurers												–		–	–	–	XXX	–
5699999 – Total Reciprocal Jurisdiction Excluding Protected Cells												–		–	–	–	XXX	–
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		–						–			–	–		–	–	–	XXX	–
9999999 – Totals		–						–			–	–		–	–	–	XXX	–

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Provision for Certified Reinsurance														Complete if Col. 52 = "No"; Otherwise Enter 0			69
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68			
														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 Past Due Amounts in Dispute (Col. 45 * 20%)	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. 47 * 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
ID Number From Col. 1	Name of Reinsurer From Col. 3	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col.24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	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. 47 * 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	Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)		
Total Authorized, Affiliates, U.S. Intercompany Pooling																			
31-4192970	GRANGE INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
Total Authorized, Other U.S. Unaffiliated Insurers																			
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
51-0434766	AXIS REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
47-0574325	BERKLEY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
42-0234980	EMPLOYERS MUT CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
35-2293075	ENDURANCE ASSUR CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-2673100	GENERAL REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
52-1952955	RENAISSANCE REINS US INC.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
47-0698507	ODYSSEY REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-1675535	SWISS REINS AMER CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
42-0644327	UNITED FIRE & CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
22-2005057	EVEREST REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
87-2252307	TRISURA INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-4924125	MUNICH REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-3138390	NAVIGATORS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
23-1641984	QBE REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-5616275	TRANSATLANTIC REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
04-1543470	LIBERTY MUT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
Total Authorized, Pools, Mandatory Pools																			
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-9991503	OHIO MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1099999 – Total Authorized, Pools, Mandatory Pools		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
Total Authorized, Other Non-U.S. Insurers																			
AA-1120198	Lloyd's Syndicate Number 1618	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1128987	Lloyd's Syndicate Number 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1126033	Lloyd's Syndicate Number 33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1126435	Lloyd's Syndicate Number 435	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1126510	Lloyd's Syndicate Number 510	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1126623	Lloyd's Syndicate Number 623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1127084	Lloyd's Syndicate Number 1084	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120156	Lloyd's Syndicate Number 1686	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120157	Lloyd's Syndicate Number 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120171	Lloyd's Syndicate Number 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1128001	Lloyd's Syndicate Number 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1128003	Lloyd's Syndicate Number 2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120179	Lloyd's Syndicate Number 2988	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Provision for Certified Reinsurance															
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0			69
		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 Past Due Amounts in Dispute (Col. 45 * 20%)	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. 47 * 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	Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
ID Number From Col. 1	Name of Reinsurer From Col. 3																
AA-1128010	Lloyd's Syndicate Number 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128623	Lloyd's Syndicate Number 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128623	Lloyd's Syndicate Number 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128791	Lloyd's Syndicate Number 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126004	Lloyd's Syndicate Number 4444	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194130	Endurance Specialty Ins Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1840000	Mapfre Re Compania de Reaseguros SA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190686	Partner Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190870	Validus Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1340125	Hannover Rueck SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1299999 – Total Authorized, Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1499999 – Total Authorized Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Total Unauthorized, Other Non-U.S. Insurers																	
AA-1120191	CONVEX Ins UK	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191190	Hamilton Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1460080	Helvetia Schweizerische VeriAG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1340028	DEVK	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1780116	CHAUCER INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191437	Group ARK Ins Ltd Bermuda	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-5420050	KOREAN REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1440060	Lansforsakringar Sak Fors	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194122	DaVinci Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1460019	MS AMLIN AG BERMUDA BRANCH	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1440076	SIRIUS INTERNATIONAL INS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-5324100	TAIPING REINSURANCE CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191432	Vantage Risk Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2699999 – Total Unauthorized, Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2899999 – Total Unauthorized Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																	
RJ-3194126	Arch Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3190770	Chubb Tempest Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3191289	Fidelis Ins Bermuda Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1120175	Fidelis Underwriting Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5499999 – Total Reciprocal Jurisdiction, Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5699999 – Total Reciprocal Jurisdiction Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		XXX	XXX	XXX				XXX	XXX								
9999999 – Totals		XXX	XXX	XXX				XXX	XXX								

SCHEDULE F - PART 3 (CONTINUED)
Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Total Provision for Reinsurance)

1	2	70	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73	74	75	76	77	78
		20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col 26 * 20% or [Cols. 40 + 41] * 20%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
ID Number From Col. 1	Name of Reinsurer From Col. 3									
Total Authorized, Affiliates, U.S. Intercompany Pooling										
31-4192970	GRANGE INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling										
Total Authorized, Other U.S. Unaffiliated Insurers										
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
51-0434766	AXIS REINS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
47-0574325	BERKLEY INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
42-0234980	EMPLOYERS MUT CAS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
35-2293075	ENDURANCE ASSUR CORP	—	XXX	XXX	—	—	—	XXX	XXX	—
13-2673100	GENERAL REINS CORP	—	XXX	XXX	—	—	—	XXX	XXX	—
52-1952955	RENAISSANCE REINS US INC	—	XXX	XXX	—	—	—	XXX	XXX	—
47-0698507	ODYSSEY REINS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
13-1675535	SWISS REINS AMER CORP	—	XXX	XXX	—	—	—	XXX	XXX	—
42-0644327	UNITED FIRE & CAS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
22-2005057	EVEREST REINS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
87-2252307	TRISURA INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
13-4924125	MUNICH REINS AMER INC	—	XXX	XXX	—	—	—	XXX	XXX	—
13-3138390	NAVIGATORS INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
23-1641984	QBE REINS CORP	—	XXX	XXX	—	—	—	XXX	XXX	—
13-5616275	TRANSATLANTIC REINS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
04-1543470	LIBERTY MUT INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers										
Total Authorized, Pools, Mandatory Pools										
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-9991503	OHIO MINE SUBSIDENCE FUND	—	XXX	XXX	—	—	—	XXX	XXX	—
1099999 – Total Authorized, Pools, Mandatory Pools										
Total Authorized, Other Non-U.S. Insurers										
AA-1120198	Lloyd's Syndicate Number 1618	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1128987	Lloyd's Syndicate Number 2987	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1126033	Lloyd's Syndicate Number 33	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1126435	Lloyd's Syndicate Number 435	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1126510	Lloyd's Syndicate Number 510	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1126623	Lloyd's Syndicate Number 623	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1127084	Lloyd's Syndicate Number 1084	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1120156	Lloyd's Syndicate Number 1686	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1120157	Lloyd's Syndicate Number 1729	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1120171	Lloyd's Syndicate Number 1856	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1128001	Lloyd's Syndicate Number 2001	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1128003	Lloyd's Syndicate Number 2003	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1120179	Lloyd's Syndicate Number 2988	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1128010	Lloyd's Syndicate Number 2010	—	XXX	XXX	—	—	—	XXX	XXX	—

SCHEDULE F - PART 3 (CONTINUED)
Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Total Provision for Reinsurance)

1	2	70	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73	74	75	76	77	78
ID Number From Col. 1	Name of Reinsurer From Col. 3	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col 26 * 20% or [Cols. 40 + 41] * 20%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
AA-1128623	Lloyd's Syndicate Number 2623	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1128623	Lloyd's Syndicate Number 2623	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1128791	Lloyd's Syndicate Number 2791	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1126004	Lloyd's Syndicate Number 4444	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-3194130	Endurance Specialty Ins Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1840000	Mapfre Re Compania de Reaseguros SA	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-3190686	Partner Reins Co Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-3190870	Validus Reins Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1340125	Hannover Rueck SE	-	XXX	XXX	-	-	-	XXX	XXX	-
1299999 – Total Authorized, Other Non-U.S. Insurers		-	XXX	XXX	-	-	-	XXX	XXX	-
1499999 – Total Authorized Excluding Protected Cells		-	XXX	XXX	-	-	-	XXX	XXX	-
Total Unauthorized, Other Non-U.S. Insurers										
AA-1120191	CONVEX Ins UK	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-3191190	Hamilton Re Ltd	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1460080	Helvetia Schweizerische VeriAG	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1340028	DEVK	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1780116	CHAUCER INSURANCE COMPANY	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-3191437	Group ARK Ins Ltd Bermuda	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-5420050	KOREAN REINSURANCE COMPANY	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1440060	Lansforsakringar Sak Fors	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-3194122	DaVinci Reins Ltd	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1460019	MS AMLIN AG BERMUDA BRANCH	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-1440076	SIRIUS INTERNATIONAL INS CORP	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-5324100	TAIPING REINSURANCE CO LTD	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-3191432	Vantage Risk Ltd	-	-	-	XXX	XXX	XXX	-	XXX	-
2699999 – Total Unauthorized, Other Non-U.S. Insurers		-	-	-	XXX	XXX	XXX	-	XXX	-
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers										
RJ-3194126	Arch Reins Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-
RJ-3190770	Chubb Tempest Reins Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-
RJ-3191289	Fidelis Ins Bermuda Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-
RJ-1120175	Fidelis Underwriting Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-
5499999 – Total Reciprocal Jurisdiction, Other Non-U.S. Insurers		-	XXX	XXX	-	-	-	XXX	XXX	-
5699999 – Total Reciprocal Jurisdiction Excluding Protected Cells		-	XXX	XXX	-	-	-	XXX	XXX	-
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		-	-	-	-	-	-	-	-	-
9999999 – Totals		-	-	-	-	-	-	-	-	-

SCHEDULE F - PART 4

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

1	2	3	4	5
Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
0001	1	073000228	Wells Fargo	—
0002	1	183098200	Australia and New Zealand Bank	2
0003	1	026004226	Societe Generale	9
0004	1	026002574	Barclays	1
0005	1	021000089	Citibank Europe	2
9999999 – Totals				14

SCHEDULE F - PART 5
Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	1 Name of Reinsurer	2 Commission Rate	3 Ceded Premium
1.	GRANGE INS CO.....		444,162
2.	Chubb Tempest Reins Ltd.....		33,898
3.	HARTFORD STEAM BOIL INSPEC & INS CO.....		2,666
4.	SWISS REINS AMER CORP.....		1,601
5.	Fidelis Underwriting Ltd.....		553

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

	1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated
6.	GRANGE INS CO.....	365,441	444,162	YES
7.	Chubb Tempest Reins Ltd.....	2,910	33,898	NO
8.	HARTFORD STEAM BOIL INSPEC & INS CO.....	1,384	2,666	NO
9.	GENERAL REINS CORP.....	33	118	NO
10.....	Arch Reins Ltd.....	22	525	NO

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1	2	3
	As Reported (Net of Ceded)	Restatement Adjustments	Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	52,963,719		52,963,719
2. Premiums and considerations (Line 15)			
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)		—	—
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	441,107		441,107
6. Net amount recoverable from reinsurers		(509,697)	(509,697)
7. Protected cell assets (Line 27)		385,714,657	385,714,657
8. Totals (Line 28)	53,404,826	385,204,960	438,609,787
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	—	167,060,233	167,060,233
10. Taxes, expenses, and other obligations (Lines 4 through 8)	332,272		332,272
11. Unearned premiums (Line 9)		218,654,424	218,654,424
12. Advance premiums (Line 10)			
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)		—	—
15. Funds held by company under reinsurance treaties (Line 13)	509,697	(509,697)	—
16. Amounts withheld or retained by company for account of others (Line 14)			
17. Provision for reinsurance (Line 16)			
18. Other liabilities	84,936		84,936
19. Total liabilities excluding protected cell business (Line 26)	926,904	385,204,960	386,131,865
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	52,477,922	XXX	52,477,922
22. Totals (Line 38)	53,404,826	385,204,960	438,609,787

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

(30) Schedule H - Part 1

NONE

(30) Write-Ins for Line 11 - Deductions

NONE

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

NONE

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

NONE

(31) Schedule H - Part 4 - Reinsurance

NONE

(32) Schedule H - Part 5

NONE

(35) Schedule P - Part 1A - Columns 1 to 12 (\$000's Omitted)

NONE

(35) Schedule P - Part 1A - Columns 13 to 25 (\$000's Omitted)

NONE

(35) Schedule P - Part 1A - Columns 26 to 36 (\$000's Omitted)

NONE

(36) Schedule P - Part 1B - Columns 1 to 12 (\$000's Omitted)

NONE

(36) Schedule P - Part 1B - Columns 13 to 25 (\$000's Omitted)

NONE

(36) Schedule P - Part 1B - Columns 26 to 36 (\$000's Omitted)

NONE

(37) Schedule P - Part 1C - Columns 1 to 12 (\$000's Omitted)

NONE

(37) Schedule P - Part 1C - Columns 13 to 25 (\$000's Omitted)

NONE

(37) Schedule P - Part 1C - Columns 26 to 36 (\$000's Omitted)

NONE

(38) Schedule P - Part 1D - Columns 1 to 12 (\$000's Omitted)

NONE

(38) Schedule P - Part 1D - Columns 13 to 25 (\$000's Omitted)

NONE

(38) Schedule P - Part 1D - Columns 26 to 36 (\$000's Omitted)

NONE

(39) Schedule P - Part 1E - Columns 1 to 12 (\$000's Omitted)

NONE

(39) Schedule P - Part 1E - Columns 13 to 25 (\$000's Omitted)

NONE

(39) Schedule P - Part 1E - Columns 26 to 36 (\$000's Omitted)

NONE

(40) Schedule P - Part 1F - Section 1 - Columns 1 to 12 (\$000's Omitted)

NONE

(40) Schedule P - Part 1F - Section 1 - Columns 13 to 25 (\$000's Omitted)

NONE

(40) Schedule P - Part 1F - Section 1 - Columns 26 to 36 (\$000's Omitted)

NONE

(41) Schedule P - Part 1F - Section 2 - Columns 1 to 12 (\$000's Omitted)

NONE

(41) Schedule P - Part 1F - Section 2 - Columns 13 to 25 (\$000's Omitted)

NONE

(41) Schedule P - Part 1F - Section 2 - Columns 26 to 36 (\$000's Omitted)

NONE

(42) Schedule P - Part 1G - Columns 1 to 12 (\$000's Omitted)

NONE

(42) Schedule P - Part 1G - Columns 13 to 25 (\$000's Omitted)

NONE

(42) Schedule P - Part 1G - Columns 26 to 36 (\$000's Omitted)

NONE

(43) Schedule P - Part 1H - Section 1 - Columns 1 to 12 (\$000's Omitted)

NONE

(43) Schedule P - Part 1H - Section 1 - Columns 13 to 25 (\$000's Omitted)

NONE

(43) Schedule P - Part 1H - Section 1 - Columns 26 to 36 (\$000's Omitted)

NONE

(44) Schedule P - Part 1H - Section 2 - Columns 1 to 12 (\$000's Omitted)

NONE

(44) Schedule P - Part 1H - Section 2 - Columns 13 to 25 (\$000's Omitted)

NONE

(44) Schedule P - Part 1H - Section 2 - Columns 26 to 36 (\$000's Omitted)

NONE

(45) Schedule P - Part 1I - Columns 1 to 12 (\$000's Omitted)

NONE

(45) Schedule P - Part 1I - Columns 13 to 25 (\$000's Omitted)

NONE

(45) Schedule P - Part 1I - Columns 26 to 36 (\$000's Omitted)

NONE

(46) Schedule P - Part 1J - Columns 1 to 12 (\$000's Omitted)

NONE

(46) Schedule P - Part 1J - Columns 13 to 25 (\$000's Omitted)

NONE

(46) Schedule P - Part 1J - Columns 26 to 36 (\$000's Omitted)

NONE

(47) Schedule P - Part 1K - Columns 1 to 12 (\$000's Omitted)

NONE

(47) Schedule P - Part 1K - Columns 13 to 25 (\$000's Omitted)

NONE

(47) Schedule P - Part 1K - Columns 26 to 36 (\$000's Omitted)

NONE

(48) Schedule P - Part 1L - Columns 1 to 12 (\$000's Omitted)

NONE

(48) Schedule P - Part 1L - Columns 13 to 25 (\$000's Omitted)

NONE

(48) Schedule P - Part 1L - Columns 26 to 36 (\$000's Omitted)

NONE

(49) Schedule P - Part 1M - Columns 1 to 12 (\$000's Omitted)

NONE

(49) Schedule P - Part 1M - Columns 13 to 25 (\$000's Omitted)

NONE

(49) Schedule P - Part 1M - Columns 26 to 36 (\$000's Omitted)

NONE

(50) Schedule P - Part 1N - Columns 1 to 12 (\$000's Omitted)

NONE

(50) Schedule P - Part 1N - Columns 13 to 25 (\$000's Omitted)

NONE

(50) Schedule P - Part 1N - Columns 26 to 36 (\$000's Omitted)

NONE

(51) Schedule P - Part 1O - Columns 1 to 12 (\$000's Omitted)

NONE

(51) Schedule P - Part 1O - Columns 13 to 25 (\$000's Omitted)

NONE

(51) Schedule P - Part 1O - Columns 26 to 36 (\$000's Omitted)

NONE

(52) Schedule P - Part 1P - Columns 1 to 12 (\$000's Omitted)

NONE

(52) Schedule P - Part 1P - Columns 13 to 25 (\$000's Omitted)

NONE

(52) Schedule P - Part 1P - Columns 26 to 36 (\$000's Omitted)

NONE

(53) Schedule P - Part 1R - Section 1 - Columns 1 to 12 (\$000's Omitted)
NONE

(53) Schedule P - Part 1R - Section 1 - Columns 13 to 25 (\$000's Omitted)
NONE

(53) Schedule P - Part 1R - Section 1 - Columns 26 to 36 (\$000's Omitted)
NONE

(54) Schedule P - Part 1R - Section 2 - Columns 1 to 12 (\$000's Omitted)
NONE

(54) Schedule P - Part 1R - Section 2 - Columns 13 to 25 (\$000's Omitted)
NONE

(54) Schedule P - Part 1R - Section 2 - Columns 26 to 36 (\$000's Omitted)
NONE

(55) Schedule P - Part 1S - Columns 1 to 12 (\$000's Omitted)
NONE

(55) Schedule P - Part 1S - Columns 13 to 25 (\$000's Omitted)
NONE

(55) Schedule P - Part 1S - Columns 26 to 36 (\$000's Omitted)
NONE

(56) Schedule P - Part 1T - Columns 1 to 12 (\$000's Omitted)
NONE

(56) Schedule P - Part 1T - Columns 13 to 25 (\$000's Omitted)
NONE

(56) Schedule P - Part 1T - Columns 26 to 36 (\$000's Omitted)
NONE

(57) Schedule P - Part 1U - Columns 1 to 12 (\$000's Omitted)
NONE

(57) Schedule P - Part 1U - Columns 13 to 25 (\$000's Omitted)
NONE

(57) Schedule P - Part 1U - Columns 26 to 36 (\$000's Omitted)
NONE

(58) Schedule P - Part 2A - Homeowners/Farmowners (\$000's Omitted)

NONE

(58) Schedule P - Part 2B - Private Passenger Auto Liability/Medical (\$000's Omitted)

NONE

(58) Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical (\$000's Omitted)

NONE

(58) Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation) (\$000's Omitted)

NONE

(58) Schedule P - Part 2E - Commercial Multiple Peril (\$000's Omitted)

NONE

(59) Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence (\$000's Omitted)

NONE

(59) Schedule P - Part 2F - Section 2 - Medical Professional Liability - Claims-Made (\$000's Omitted)

NONE

(59) Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery) (\$000's Omitted)

NONE

(59) Schedule P - Part 2H - Section 1 - Other Liability - Occurrence (\$000's Omitted)

NONE

(59) Schedule P - Part 2H - Section 2 - Other Liability - Claims-Made (\$000's Omitted)

NONE

(60) Schedule P - Part 2I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) (\$000's Omitted)

NONE

(60) Schedule P - Part 2J - Auto Physical Damage (\$000's Omitted)

NONE

(60) Schedule P - Part 2K - Fidelity, Surety (\$000's Omitted)

NONE

(60) Schedule P - Part 2L - Other (Including Credit, Accident and Health) (\$000's Omitted)

NONE

(60) Schedule P - Part 2M - International (\$000's Omitted)

NONE

(61) Schedule P - Part 2N - Reinsurance - Non Proportional Assumed Property (\$000's Omitted)

NONE

(61) Schedule P - Part 2O - Reinsurance - Non Proportional Assumed Liability (\$000's Omitted)

NONE

(61) Schedule P - Part 2P - Reinsurance - Non Proportional Assumed Financial Lines (\$000's Omitted)

NONE

(62) Schedule P - Part 2R - Section 1 - Products Liability - Occurrence (\$000's Omitted)

NONE

(62) Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made (\$000's Omitted)

NONE

(62) Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty (\$000's Omitted)

NONE

(62) Schedule P - Part 2T - Warranty (\$000's Omitted)

NONE

(62) Schedule P - Part 2U - Pet Insurance Plans (\$000's Omitted)

NONE

(63) Schedule P - Part 3A - Homeowners/Farmowners (\$000's Omitted)

NONE

(63) Schedule P - Part 3B - Private Passenger Auto Liability/Medical (\$000's Omitted)

NONE

(63) Schedule P - Part 3C - Commercial Auto/Truck Liability/Medical (\$000's Omitted)

NONE

(63) Schedule P - Part 3D - Workers' Compensation (Excluding Excess Workers' Compensation) (\$000's Omitted)

NONE

(63) Schedule P - Part 3E - Commercial Multiple Peril (\$000's Omitted)

NONE

(64) Schedule P - Part 3F - Section 1 - Medical Professional Liability - Occurrence (\$000's Omitted)

NONE

(64) Schedule P - Part 3F - Section 2 - Medical Professional Liability - Claims-Made (\$000's Omitted)

NONE

(64) Schedule P - Part 3G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery) (\$000's Omitted)

NONE

(64) Schedule P - Part 3H - Section 1 - Other Liability - Occurrence (\$000's Omitted)

NONE

(64) Schedule P - Part 3H - Section 2 - Other Liability - Claims-Made (\$000's Omitted)

NONE

(65) Schedule P - Part 3I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) (\$000's Omitted)

NONE

(65) Schedule P - Part 3J - Auto Physical Damage (\$000's Omitted)

NONE

(65) Schedule P - Part 3K - Fidelity/Surety (\$000's Omitted)

NONE

(65) Schedule P - Part 3L - Other (Including Credit, Accident and Health) (\$000's Omitted)

NONE

(65) Schedule P - Part 3M - International (\$000's Omitted)

NONE

(66) Schedule P - Part 3N - Reinsurance - Non Proportional Assumed Property (\$000's Omitted)

NONE

(66) Schedule P - Part 3O - Reinsurance - Non Proportional Assumed Liability (\$000's Omitted)

NONE

(66) Schedule P - Part 3P - Reinsurance - Non Proportional Assumed Financial Lines (\$000's Omitted)

NONE

(67) Schedule P - Part 3R - Section 1 - Products Liability - Occurrence (\$000's Omitted)

NONE

(67) Schedule P - Part 3R - Section 2 - Products Liability - Claims-Made (\$000's Omitted)

NONE

(67) Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty (\$000's Omitted)

NONE

(67) Schedule P - Part 3T - Warranty (\$000's Omitted)

NONE

(67) Schedule P - Part 3U - Pet Insurance Plans (\$000's Omitted)

NONE

(68) Schedule P - Part 4A - Homeowners/Farmowners (\$000's Omitted)

NONE

(68) Schedule P - Part 4B - Private Passenger Auto Liability/Medical (\$000's Omitted)

NONE

(68) Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical (\$000's Omitted)

NONE

(68) Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation) (\$000's Omitted)

NONE

(68) Schedule P - Part 4E - Commercial Multiple Peril (\$000's Omitted)

NONE

(69) Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence (\$000's Omitted)

NONE

(69) Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made (\$000's Omitted)

NONE

(69) Schedule P - Part 4G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery) (\$000's Omitted)

NONE

(69) Schedule P - Part 4H - Section 1 - Other Liability - Occurrence (\$000's Omitted)

NONE

(69) Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made (\$000's Omitted)

NONE

(70) Schedule P - Part 4I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft) (\$000's Omitted)

NONE

(70) Schedule P - Part 4J - Auto Physical Damage (\$000's Omitted)

NONE

(70) Schedule P - Part 4K - Fidelity/Surety (\$000's Omitted)

NONE

(70) Schedule P - Part 4L - Other (Including Credit, Accident and Health) (\$000's Omitted)

NONE

(70) Schedule P - Part 4M - International (\$000's Omitted)

NONE

(71) Schedule P - Part 4N - Reinsurance - Non Proportional Assumed Property (\$000's Omitted)

NONE

(71) Schedule P - Part 4O - Reinsurance - Non Proportional Assumed Liability (\$000's Omitted)

NONE

(71) Schedule P - Part 4P - Reinsurance - Non Proportional Assumed Financial Lines (\$000's Omitted)

NONE

(72) Schedule P - Part 4R - Section 1 - Products Liability - Occurrence (\$000's Omitted)

NONE

(72) Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made (\$000's Omitted)

NONE

(72) Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty (\$000's Omitted)

NONE

(72) Schedule P - Part 4T - Warranty (\$000's Omitted)

NONE

(72) Schedule P - Part 4U - Pet Insurance Plans (\$000's Omitted)

NONE

(73) Schedule P - Part 5A - Section 1
NONE

(73) Schedule P - Part 5A - Section 2
NONE

(73) Schedule P - Part 5A - Section 3
NONE

(74) Schedule P - Part 5B - Section 1
NONE

(74) Schedule P - Part 5B - Section 2
NONE

(74) Schedule P - Part 5B - Section 3
NONE

(75) Schedule P - Part 5C - Section 1
NONE

(75) Schedule P - Part 5C - Section 2
NONE

(75) Schedule P - Part 5C - Section 3
NONE

(76) Schedule P - Part 5D - Section 1
NONE

(76) Schedule P - Part 5D - Section 2
NONE

(76) Schedule P - Part 5D - Section 3
NONE

(77) Schedule P - Part 5E - Section 1
NONE

(77) Schedule P - Part 5E - Section 2
NONE

(77) Schedule P - Part 5E - Section 3
NONE

(78) Schedule P - Part 5F - Section 1A
NONE

(78) Schedule P - Part 5F - Section 2A
NONE

(78) Schedule P - Part 5F - Section 3A
NONE

(79) Schedule P - Part 5F - Section 1B
NONE

(79) Schedule P - Part 5F - Section 2B
NONE

(79) Schedule P - Part 5F - Section 3B
NONE

(80) Schedule P - Part 5H - Section 1A
NONE

(80) Schedule P - Part 5H - Section 2A
NONE

(80) Schedule P - Part 5H - Section 3A
NONE

(81) Schedule P - Part 5H - Section 1B
NONE

(81) Schedule P - Part 5H - Section 2B
NONE

(81) Schedule P - Part 5H - Section 3B
NONE

(82) Schedule P - Part 5R - Section 1A
NONE

(82) Schedule P - Part 5R - Section 2A
NONE

(82) Schedule P - Part 5R - Section 3A
NONE

(83) Schedule P - Part 5R - Section 1B
NONE

(83) Schedule P - Part 5R - Section 2B
NONE

(83) Schedule P - Part 5R - Section 3B
NONE

(84) Schedule P - Part 5T - Section 1
NONE

(84) Schedule P - Part 5T - Section 2
NONE

(84) Schedule P - Part 5T - Section 3
NONE

(85) Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1 (\$000's Omitted)

NONE

(85) Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2 (\$000's Omitted)

NONE

(85) Schedule P - Part 6D - Workers' Compensation (Excluding Excess Workers' Compensation) - Section 1 (\$000's Omitted)

NONE

(85) Schedule P - Part 6D - Workers' Compensation (Excluding Excess Workers' Compensation) - Section 2 (\$000's Omitted)

NONE

(86) Schedule P - Part 6E - Commercial Multiple Peril - Section 1 (\$000's Omitted)

NONE

(86) Schedule P - Part 6E - Commercial Multiple Peril - Section 2 (\$000's Omitted)

NONE

(86) Schedule P - Part 6H - Other Liability - Occurrence - Section 1A (\$000's Omitted)

NONE

(86) Schedule P - Part 6H - Other Liability - Occurrence - Section 2A (\$000's Omitted)

NONE

(87) Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B (\$000's Omitted)

NONE

(87) Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B (\$000's Omitted)

NONE

(87) Schedule P - Part 6M - International - Section 1 (\$000's Omitted)

NONE

(87) Schedule P - Part 6M - International - Section 2 (\$000's Omitted)

NONE

(88) Schedule P - Part 6N - Reinsurance Non Proportional Assumed Property - Section 1 (\$000's Omitted)

NONE

(88) Schedule P - Part 6N - Reinsurance Non Proportional Assumed Property - Section 2 (\$000's Omitted)

NONE

(88) Schedule P - Part 6O - Reinsurance Non Proportional Assumed Liability - Section 1 (\$000's Omitted)

NONE

(88) Schedule P - Part 6O - Reinsurance Non Proportional Assumed Liability - Section 2 (\$000's Omitted)

NONE

(89) Schedule P - Part 6R - Products Liability - Occurrence - Section 1A (\$000's Omitted)

NONE

(89) Schedule P - Part 6R - Products Liability - Occurrence - Section 2A (\$000's Omitted)

NONE

(89) Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B (\$000's Omitted)

NONE

(89) Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B (\$000's Omitted)

NONE

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 OMITTED)

SECTION 1

		1	2	3	4	5	6
		Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P – Part 1							
1.	Homeowners/Farmowners.....				–		
2.	Private Passenger Auto Liability/Medical.....				–		
3.	Commercial Auto/Truck Liability/Medical.....				–		
4.	Workers' Compensation.....				–		
5.	Commercial Multiple Peril.....				–		
6.	Medical Professional Liability—Occurrence.....						
7.	Medical Professional Liability—Claims-made.....						
8.	Special Liability.....						
9.	Other Liability—Occurrence.....				–		
10.	Other Liabilities—Claims-made.....						
11.	Special Property.....				–		
12.	Auto Physical Damage.....				–		
13.	Fidelity/ Surety.....						
14.	Other.....						
15.	International.....						
16.	Reinsurance-Nonproportional Assumed Property.....	XXX	XXX	XXX	XXX	XXX	XXX
17.	Reinsurance-Nonproportional Assumed Liability.....	XXX	XXX	XXX	XXX	XXX	XXX
18.	Reinsurance-Nonproportional Assumed Financial Lines.....	XXX	XXX	XXX	XXX	XXX	XXX
19.	Products Liability—Occurrence.....				–		
20.	Products Liability—Claims-made.....						
21.	Financial Guaranty/Mortgage Guaranty.....						
22.	Warranty.....						
23.	Pet Insurance Plans.....						
24.	Totals.....				–		

SECTION 2

		INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
Years in Which Policies Were Issued		1	2	3	4	5	6	7	8	9	10
		2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior.....										
2.	2015.....										
3.	2016.....	XXX									
4.	2017.....	XXX	XXX								
5.	2018.....	XXX	XXX	XXX							
6.	2019.....	XXX	XXX	XXX	XXX						
7.	2020.....	XXX	XXX	XXX	XXX	XXX					
8.	2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

		BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR-END (\$000 OMITTED)									
Years in Which Policies Were Issued		1	2	3	4	5	6	7	8	9	10
		2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior.....										
2.	2015.....										
3.	2016.....	XXX									
4.	2017.....	XXX	XXX								
5.	2018.....	XXX	XXX	XXX							
6.	2019.....	XXX	XXX	XXX	XXX						
7.	2020.....	XXX	XXX	XXX	XXX	XXX					
8.	2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

SECTION 4											
Years in Which Policies Were Issued		NET EARNED PREMIUMS REPORTED AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
		2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior										
2.	2015										
3.	2016	XXX									
4.	2017	XXX	XXX								
5.	2018	XXX	XXX	XXX							
6.	2019	XXX	XXX	XXX	XX						
7.	2020	XXX	XXX	XXX	XXX						
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5											
Years in Which Policies Were Issued		NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
		2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior										
2.	2015										
3.	2016	XXX									
4.	2017	XXX	XXX								
5.	2018	XXX	XXX	XXX							
6.	2019	XXX	XXX	XXX	XX						
7.	2020	XXX	XXX	XXX	XXX						
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS

(\$000 OMITTED)

SECTION 1

		1	2	3	4	5	6
		Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P – Part 1							
1.	Homeowners/Farmowners.....				–		
2.	Private Passenger Auto Liability/Medical.....				–		
3.	Commercial Auto/Truck Liability/Medical.....				–		
4.	Workers' Compensation.....				–		
5.	Commercial Multiple Peril.....				–		
6.	Medical Professional Liability—Occurrence.....						
7.	Medical Professional Liability—Claims-made.....						
8.	Special Liability.....						
9.	Other Liability—Occurrence.....				–		
10.	Other Liabilities—Claims-made.....						
11.	Special Property.....				–		
12.	Auto Physical Damage.....				–		
13.	Fidelity/ Surety.....						
14.	Other.....						
15.	International.....						
16.	Reinsurance-Nonproportional Assumed Property.....						
17.	Reinsurance-Nonproportional Assumed Liability.....						
18.	Reinsurance-Nonproportional Assumed Financial Lines.....						
19.	Products Liability—Occurrence.....				–		
20.	Products Liability—Claims-made.....						
21.	Financial Guaranty/Mortgage Guaranty.....						
22.	Warranty.....						
23.	Pet Insurance Plans.....						
24.	Totals.....				–		

SECTION 2

		INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
Years in Which Policies Were Issued		2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior.....										
2.	2015.....										
3.	2016.....	XXX									
4.	2017.....	XXX	XXX								
5.	2018.....	XXX	XXX	XXX							
6.	2019.....	XXX	XXX	XXX	XX						
7.	2020.....	XXX	XXX	XXX	XXX	XX					
8.	2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

		BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
Years in Which Policies Were Issued		2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior.....										
2.	2015.....										
3.	2016.....	XXX									
4.	2017.....	XXX	XXX								
5.	2018.....	XXX	XXX	XXX							
6.	2019.....	XXX	XXX	XXX	XX						
7.	2020.....	XXX	XXX	XXX	XXX	XX					
8.	2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P – PART 7B – REINSURANCE LOSS SENSITIVE CONTRACTS (CONTINUED)

SECTION 4										
Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR-END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XX						
7. 2020	XXX	XXX	XXX	XXX	XX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5										
Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR-END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XX						
7. 2020	XXX	XXX	XXX	XXX	XX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 6										
Years in Which Policies Were Issued	INCURRED ADJUSTABLE COMMISSIONS REPORTED AT YEAR-END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XX						
7. 2020	XXX	XXX	XXX	XXX	XX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 7										
Years in Which Policies Were Issued	RESERVES FOR COMMISSION ADJUSTMENTS AT YEAR-END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XX						
7. 2020	XXX	XXX	XXX	XXX	XX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P INTERROGATORIES

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

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601. Prior.....		
1.602. 2015.....		
1.603. 2016.....		
1.604. 2017.....		
1.605. 2018.....		
1.606. 2019.....		
1.607. 2020.....		
1.608. 2021.....		
1.609. 2022.....		
1.610. 2023.....		
1.611. 2024.....		
1.612. Totals.....		

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

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

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

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.
5. What were the net premiums (in thousands of dollars) in force at the end of the year for:
5.1. Fidelity.....\$.....
5.2. Surety.....\$.....
6. Claim count information is reported per claim or per claimant (indicate which).....CLAIMANT.....
If not the same in all years, explain in Interrogatory 7.
- 7.1. The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses?.....YES.....
- 7.2. An extended statement may be attached.....
As of 1/1/2017, the intercompany pooling agreement was amended. The intercompany pooling agreement now cedes underwriting results back only to the two parent companies, Grange Insurance Company and Integrity Insurance Company, with their respective stock subsidiary companies receiving 0% from the pool. Grange Insurance Company remains the lead company.

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

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

NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership, Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No)	*
0267	GRANGE INSURANCE POOL	14060	31-4192970				GRANGE INSURANCE COMPANY	OH	UDP	GRANGE HOLDINGS, INC.	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	10322	31-1432675				GRANGE INDEMNITY INSURANCE COMPANY	OH	RE	GRANGE INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	40118	41-1405571				TRUSTGARD INSURANCE COMPANY	OH	IA	GRANGE INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	11136	31-1769414				GRANGE INSURANCE COMPANY OF MICHIGAN	OH	IA	GRANGE INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	11982	42-1610213				GRANGE PROPERTY & CASUALTY INSURANCE COMPANY	OH	IA	GRANGE INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	14303	39-0367560				INTEGRITY INSURANCE COMPANY	OH	IA	GRANGE HOLDINGS, INC.	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	10288	81-3455935				INTEGRITY SELECT INSURANCE COMPANY	OH	IA	INTEGRITY INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	12986	41-2236417				INTEGRITY PROPERTY & CASUALTY INSURANCE COMPANY	OH	IA	INTEGRITY INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
			31-1145043				GRANGEAMERICA	OH	NIA	GRANGE HOLDINGS, INC.	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
			31-1193707				NORTHVIEW INSURANCE AGENCY	OH	NIA	GRANGE HOLDINGS, INC.	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
			83-2982350				GRANGE MUTUAL HOLDING COMPANY	OH	UIP	GRANGE MUTUAL HOLDING COMPANY	Board of Directors		GRANGE MUTUAL HOLDING COMPANY	NO	
			83-2949300				GRANGE HOLDINGS, INC.	OH	UIP	GRANGE MUTUAL HOLDING COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	

Asterisk	Explanation

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
14060	31-4192970	GRANGE INSURANCE COMPANY	55,000,000	15,000,000			50,621,664		*		120,621,664	(955,299,661)
10322	31-1432675	GRANGE INDEMNITY INSURANCE COMPANY	(15,000,000)						*		(15,000,000)	365,440,611
40118	41-1405571	TRUSTGARD INSURANCE COMPANY	(20,000,000)						*		(20,000,000)	183,615,595
11136	31-1769414	GRANGE INSURANCE COMPANY OF MICHIGAN	(10,000,000)						*		(10,000,000)	33,382,877
11982	42-1610213	GRANGE PROPERTY & CASUALTY INSURANCE CO.	(10,000,000)						*		(10,000,000)	127,050,766
14303	39-0367560	INTEGRITY INSURANCE COMPANY	(5,000,000)				(50,903,657)		*		(55,903,657)	130,490,804
12986	41-2236417	INTEGRITY PROPERTY & CASUALTY INS. CO.	(10,000,000)						*		(10,000,000)	79,016,662
10288	81-3455935	INTEGRITY SELECT INSURANCE COMPANY	—						*		—	36,302,346
00000	31-1145043	GRANGEAMERICA					788,469				788,469	
00000	31-1193707	NORTHVIEW INSURANCE AGENCY					368,469				368,469	
00000	83-2982350	GRANGE MUTUAL HOLDING COMPANY										
00000	83-2949300	GRANGE HOLDINGS, INC.	15,000,000	(15,000,000)			(874,945)				(874,945)	
9999999 – Control Totals			—	—			—		XXX		—	—

SCHEDULE Y

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

1	2	3	4	5	6	7	8
Insurers in Holding Company	Owners with Greater than 10% Ownership	Ownership Percentage Column 2 of Column 1	Granted Disclaimer of Control / Affiliation of Column 2 Over Column 1 (Yes/No)	Ultimate Controlling Party	U.S. Insurance Groups or Entities Controlled by Column 5	Ownership Percentage (Column 5 of Column 6)	Granted Disclaimer of Control / Affiliation of Column 5 Over Column 6 (Yes/No)
GRANGE INSURANCE COMPANY	GRANGE HOLDINGS, INC.	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL	100.000 %	NO
GRANGE INDEMNITY INSURANCE COMPANY	GRANGE INSURANCE COMPANY	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL	100.000 %	NO
TRUSTGARD INSURANCE COMPANY	GRANGE INSURANCE COMPANY	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL	100.000 %	NO
GRANGE INSURANCE COMPANY OF MICHIGAN	GRANGE INSURANCE COMPANY	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL	100.000 %	NO
GRANGE PROPERTY & CASUALTY INSURANCE COMPANY	GRANGE INSURANCE COMPANY	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL	100.000 %	NO
INTEGRITY INSURANCE COMPANY	GRANGE HOLDINGS, INC.	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL	100.000 %	NO
INTEGRITY SELECT INSURANCE COMPANY	INTEGRITY INSURANCE COMPANY	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL	100.000 %	NO
INTEGRITY PROPERTY & CASUALTY INSURANCE COMPANY	INTEGRITY INSURANCE COMPANY	100.000 %	NO	GRANGE MUTUAL HOLDING COMPANY	GRANGE INSURANCE POOL	100.000 %	NO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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






















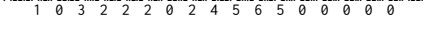
	Response
March Filing	
1. Will an actuarial opinion be filed by March 1?	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4. Will the confidential Risk-based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

SUPPLEMENTAL FILINGS

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

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Explanation		Barcode
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.	No business written.	 1 0 3 2 2 2 0 2 4 4 2 0 0 0 0 0 0
12.	No business written.	 1 0 3 2 2 2 0 2 4 2 4 0 0 0 0 0 0
13.	No business written.	 1 0 3 2 2 2 0 2 4 3 6 0 0 0 0 0 0
14.	No business written.	 1 0 3 2 2 2 0 2 4 4 5 5 0 0 0 0 0
15.	No business written.	 1 0 3 2 2 2 0 2 4 4 9 0 0 0 0 0 0
16.	No business written.	 1 0 3 2 2 2 0 2 4 3 8 5 0 0 0 0 0
17.	No business written.	 1 0 3 2 2 2 0 2 4 4 0 1 0 0 0 0 0
18.	No business written.	 1 0 3 2 2 2 0 2 4 3 6 5 0 0 0 0 0
19.		
20.		
21.	Reinsurance attestation supplement filed	 1 0 3 2 2 2 0 2 4 4 0 0 0 0 0 0 0
22.	No business written.	 1 0 3 2 2 2 0 2 4 5 0 0 0 0 0 0 0
23.	No business written.	 1 0 3 2 2 2 0 2 4 5 0 5 0 0 0 0 0
24.	No business written.	 1 0 3 2 2 2 0 2 4 2 2 4 0 0 0 0 0
25.	No business written.	 1 0 3 2 2 2 0 2 4 2 2 5 0 0 0 0 0
26.	No business written.	 1 0 3 2 2 2 0 2 4 2 2 6 0 0 0 0 0
27.	No business written.	 1 0 3 2 2 2 0 2 4 5 5 5 0 0 0 0 0
28.		
29.		
30.	No business written.	 1 0 3 2 2 2 0 2 4 2 3 0 0 0 0 0 0
31.	No business written.	 1 0 3 2 2 2 0 2 4 3 0 6 0 0 0 0 0
32.	No business written.	 1 0 3 2 2 2 0 2 4 2 1 0 0 0 0 0 0
33.	No business written.	 1 0 3 2 2 2 0 2 4 2 1 6 0 0 0 0 0
34.		
35.	No business written	 1 0 3 2 2 2 0 2 4 2 9 0 0 0 0 0 0
36.	No business written.	 1 0 3 2 2 2 0 2 4 5 6 0 0 0 0 0 0
37.	No business written	 1 0 3 2 2 2 0 2 4 5 6 5 0 0 0 0 0
38.		

OVERFLOW PAGE FOR WRITE-INS

UNDERWRITING AND INVESTMENT EXHIBIT – PART 3 – EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
2404. Deferred Compensation.....			2,300	2,300
2405. Investment Banking Fees.....			43,446	43,446
2497. Summary of remaining write-ins for Line 24 from overflow page.....			45,746	45,746

OVERFLOW PAGE FOR WRITE-INS



EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS

AS REPORTED ON LINE 17 OF THE EXHIBIT OF PREMIUMS AND LOSSES
To Be Filed by March 1

NAIC Group Code: 0267

NAIC Company Code: 10322

	Direct Business Only			
	Prior Year	Current Year		
	1	2	3	4
	Written Premium	Written Premium	Losses Paid (deducting salvage)	Losses Unpaid (Case Base)
1. Completed operations.....				
2. Errors & omissions (E&O).....				
3. Directors & officers (D&O).....				
4. Environmental liability.....				
5. Excess workers' compensation.....				
6. Commercial excess & umbrella.....	299,878	277,937	55,714	829,001
7. Personal umbrella.....	3,149,876	3,177,992	315,000	900,000
8. Employment liability.....	7,311	7,731	—	—
9. Aggregate write-ins for facilities and premises (CGL).....				
10. Internet & cyber liability.....				
11. Aggregate write-ins for other.....				
12. Total ASL 17 - other liability (sum of lines 1 through 11).....	3,457,065	3,463,660	370,714	1,729,001
Details of Write-Ins				
0901. Commercial General Liability.....				
0902.....				
0903.....				
0998. Summary of remaining write-ins for Line 09 from overflow page.....				
0999. Summary of remaining write-ins for Line 09 from overflow page.....				
1101.....				
1102.....				
1103.....				
1198. Summary of remaining write-ins for Line 11 from overflow page.....				
1199. Summary of remaining write-ins for Line 11 from overflow page.....				

OVERFLOW PAGE FOR WRITE-INS



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)
FOR THE STATE OF Georgia

NAIC Group Code: 0267

NAIC Company Code: 10322

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)
FOR THE STATE OF Illinois

NAIC Group Code: 0267

NAIC Company Code: 10322

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)
FOR THE STATE OF Indiana

NAIC Group Code: 0267

NAIC Company Code: 10322

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)
FOR THE STATE OF Kentucky

NAIC Group Code: 0267

NAIC Company Code: 10322

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)
FOR THE STATE OF Ohio

NAIC Group Code: 0267

NAIC Company Code: 10322

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)
FOR THE STATE OF Pennsylvania

NAIC Group Code: 0267

NAIC Company Code: 10322

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)
FOR THE STATE OF Tennessee

NAIC Group Code: 0267

NAIC Company Code: 10322

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed By March 1)
FOR THE STATE OF Virginia

NAIC Group Code: 0267

NAIC Company Code: 10322

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