



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

NAIC Group Code.....0267.....0267..... NAIC Company Code.....11982..... Employer's ID Number.....42-1610213.....  
(Current) (Prior)  
Organized under the Laws of.....OH.....State of Domicile or Port of Entry.....OH.....  
Country of Domicile.....US.....  
Incorporated/Organized.....04/01/2004.....Commenced Business.....05/21/2004.....  
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 [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  
x [Signature]  
a. Is this an original filing? Yes  
b. If no:  
1. State the amendment number: \_\_\_\_\_  
2. Date filed: \_\_\_\_\_  
3. Number of pages attached: \_\_\_\_\_

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 11982

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	17,937,193	17,966,947		9,091,629	20,815,898	23,793,278	8,504,700	222,123	297,620	200,617	2,226,013	1,018,978
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	39,287	44,424		20,690	540	(282)	1,011		107	434	5,299	2,232
9.2 Pet insurance plans												
10. Financial Guaranty												
11.1 Medical Professional Liability — Occurrence												
11.2 Medical Professional Liability — Claims-Made												
12. Earthquake	2,702	2,908		2,017							371	153
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	39,592	47,976		18,922		(18,544)	50,728		(688)	423	6,760	2,249
17.2 Other Liability—Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability — Occurrence												
18.2 Products Liability — Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	2,098,894	2,225,243		516,545	1,508,632	878,773	1,492,698	65,721	28,590	106,532	346,817	119,234
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	1,088,450	1,153,053		264,083	564,347	506,429	(52,251)	812	532	692	179,352	61,833
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)	21,206,118	21,440,551		9,913,886	22,889,418	25,159,654	9,996,886	288,656	326,161	308,697	2,764,612	1,204,679
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 \$75,289  
(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: 11982

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) .....												

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR 2024

NAIC Group Code: 0267

NAIC Company Code: 11982

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	33,472,474	34,201,417	—	17,687,627	27,777,898	27,121,984	9,356,573	273,656	314,088	382,811	4,627,450	608,495
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	203,464	226,662	—	100,227	28,598	25,717	5,152	100	789	2,210	30,556	3,699
9.2 Pet insurance plans												
10. Financial Guaranty												
11.1 Medical Professional Liability — Occurrence												
11.2 Medical Professional Liability — Claims-Made												
12. Earthquake	125,627	137,333	—	61,651							18,103	2,284
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	243,619	265,602	—	116,328	1,000,000	74,058	427,139		(3,354)	2,309	42,292	4,429
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)	34,045,184	34,831,014	—	17,965,833	28,806,496	27,221,760	9,788,865	273,756	311,523	387,330	4,718,400	618,906
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 \$104,711

(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: 11982

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	10,670,267	11,154,214		5,503,834	7,144,085	6,869,178	2,044,849	118,893	137,680	125,088	1,468,102	153,599
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	88,541	91,007		46,845	20,706	45,819	41,001	1,092	1,445	878	13,132	8,076
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake	153,375	149,124		80,123							22,823	13,990
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	166,134	168,320		90,572	740,000	372,682	173,937		(1,619)	1,449	29,017	15,154
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	1,236,798	1,398,379		474,152	646,703	1,286,168	(26,540)	4,537	36,134	52,347	172,680	112,817
19.2	Other Private Passenger Auto Liability	11,028,026	11,569,643		4,423,250	5,589,262	4,582,257	7,262,467	186,764	(121,815)	794,063	1,539,460	(425,961)
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	7,980,210	8,418,714		3,291,592	4,360,678	4,067,202	(137,503)	11,156	20,502	15,346	1,108,569	727,930
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)	31,323,351	32,949,401		13,910,368	18,501,434	17,223,306	9,358,211	322,442	72,327	989,171	4,353,783	605,606
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 \$193,378

(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: 11982

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	45,773,970	45,213,694		24,146,287	23,307,971	19,154,857	8,242,479	237,680	364,416	504,610	7,598,993	745,636
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	1,175,041	1,229,925		584,979	373,700	308,405	55,276	7,879	11,745	11,904	199,971	19,141
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake	254,814	262,410		126,801							42,996	4,151
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	797,220	841,462		392,723	(100)	(243,997)	873,750	—	(10,644)	7,281	136,064	12,986
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	16,050,811	16,302,641		3,895,497	8,304,165	8,933,755	10,909,469	299,582	287,895	882,462	2,708,598	261,460
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	18,957,605	19,049,423		4,588,462	9,191,143	8,805,606	(221,447)	7,841	15,218	19,889	3,200,577	308,810
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)	83,009,462	82,899,555		33,734,750	41,176,880	36,958,625	19,859,527	552,983	668,630	1,426,146	13,887,199	1,352,184
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 \$695,278  
(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: 11982

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) .....												

(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: 11982

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) .....	4,916	5,375		2,188	(512)	69			97	340	458	143
19.4	Other Commercial Auto Liability .....	2,689,656	2,742,372		1,303,294	2,662,216	2,103,306	2,391,289	67,260	150,192	447,944	253,083	78,357
21.1	Private Passenger Auto Physical Damage .....												
21.2	Commercial Auto Physical Damage .....	573,805	571,457		263,189	529,524	641,181	103,999	83	(1,189)	649	54,441	16,716
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) .....	3,268,377	3,319,204		1,568,671	3,191,740	2,743,975	2,495,358	67,343	149,101	448,932	307,982	95,216
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 \$36,891  
(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: 11982

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	107,853,904	108,536,273	—	56,429,377	79,045,852	76,939,296	28,148,602	852,352	1,113,804	1,213,126	15,920,558	2,526,707
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	1,506,334	1,592,017	—	752,741	423,545	379,659	102,440	9,071	14,086	15,426	248,957	33,148
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake	536,518	551,775	—	270,592							84,294	20,578
13.1	Comprehensive (hospital and medical) ind (b)											—	—
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	1,246,565	1,323,360	—	618,546	1,739,900	184,200	1,525,554	—	(16,305)	11,461	214,134	34,818
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	1,236,798	1,398,379		474,152	646,703	1,286,168	(26,540)	4,537	36,134	52,347	172,680	112,817
19.2	Other Private Passenger Auto Liability	29,177,731	30,097,527		8,835,292	15,402,060	14,394,785	19,664,634	552,067	194,671	1,783,057	4,594,874	(45,267)
19.3	Commercial Auto No-Fault (Personal Injury Protection)	4,916	5,375		2,188	(512)	69		97	340	458	143	
19.4	Other Commercial Auto Liability	2,689,656	2,742,372		1,303,294	2,662,216	2,103,306	2,391,289	67,260	150,192	447,944	253,083	78,357
21.1	Private Passenger Auto Physical Damage	28,026,265	28,621,189		8,144,137	14,116,168	13,379,237	(411,202)	19,810	36,252	35,927	4,488,497	1,098,573
21.2	Commercial Auto Physical Damage	573,805	571,457		263,189	529,524	641,181	103,999	83	(1,189)	649	54,441	16,716
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)	172,852,492	175,439,725	—	77,093,508	114,565,968	109,307,320	51,498,847	1,505,179	1,527,742	3,560,277	26,031,976	3,876,591
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 \$1,105,547  
(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-9991205		GEORGIA FAIR PLAN	GA	—		3	3			13				
AA-9991222		OHIO FAIR PLAN	OH	104		24	24			72				
AA-9991141		OHIO COMMERCIAL AUTO INS PROCEDURE	OH	12		11	11			5				
1099999 – Pools and Associations, Mandatory Pools, Associations or Other Similar Facilities				116		39	39			91				
1299999 – Total Pools and Associations				116		39	39			91				
9999999 – Totals				116		39	39			91				

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

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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		
Total Authorized, Affiliates, U.S. Intercompany Pooling																			
31-4192970	14060	GRANGE INS CO	OH		155,965			32,736		17,497		76,818		127,051				127,051	1,034
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling					155,965			32,736		17,497		76,818		127,051				127,051	1,034
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total																			
0899999 – Total Authorized, Affiliates, Total Authorized - Affiliates					155,965			32,736		17,497		76,818		127,051				127,051	1,034
Total Authorized, Other U.S. Unaffiliated Insurers																			
06-0384680	11452	HARTFORD STEAM BOIL INSPEC & INS CO	CT		515	–		–		–		265		265		–		265	
51-0434766	20370	AXIS REINS CO	NY		146			4		–		–		4		–		4	
42-0234980	21415	EMPLOYERS MUT CAS CO	IA		64	–		1		–		–		1		–		1	
13-2673100	22039	GENERAL REINS CORP	DE		–	–		101	–	–		–		101		–		101	
52-1952955	10357	RENAISSANCE REINS US INC	MD		1	–		–		–		–		–		–		–	
13-1675535	25364	SWISS REINS AMER CORP	NY		842	–		10		–		–		10		–		10	
42-0644327	13021	UNITED FIRE & CAS CO	IA		48	–		–		–		–		–		–		–	
22-2005057	26921	EVEREST REINS CO	DE		125	–		1		–		–		1		–		1	
87-2252307	22225	TRISURA INS CO	OK		51	–		–		–		–		–		–		–	
13-4924125	10227	MUNICH REINS AMER INC	DE		146	–		6		–		–		6		–		6	
13-3138390	42307	NAVIGATORS INS CO	NY		117	–		6		–		–		6		–		6	
23-1641984	10219	QBE REINS CORP	PA		88	–		–		–		–		–		–		–	
13-5616275	19453	TRANSATLANTIC REINS CO	NY		157	–		7		–		–		7		–		7	
04-1543470	23043	LIBERTY MUT INS CO	MA		50	–		–		–		–		–		–		–	
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers					2,350	–		137	–	–		265		402		–		402	
Total Authorized, Pools, Mandatory Pools																			
AA-9991501		INDIANA MINE SUBSIDENCE FUND	IN		3							1		1				1	
AA-9991502		KENTUCKY MINE SUBSIDENCE FUND	KY		2							1		1				1	
AA-9991503		OHIO MINE SUBSIDENCE FUND	OH		9							5		5				5	
1099999 – Total Authorized, Pools, Mandatory Pools					14							7		7				7	
Total Authorized, Other Non-U.S. Insurers																			
AA-1128987		Lloyd's Syndicate Number 2987	GBR		57	–		2		–		–		2		–		2	
AA-1126033		Lloyd's Syndicate Number 33	GBR		79	–		3		–		–		3		–		3	
AA-1126435		Lloyd's Syndicate Number 435	GBR		9	–		1		–		–		1		–		1	
AA-1126623		Lloyd's Syndicate Number 623	GBR		20	–		–		–		–		–		–		–	
AA-1127084		Lloyd's Syndicate Number 1084	GBR		220	–		1		–		–		1		–		1	
AA-1120156		Lloyd's Syndicate Number 1686	GBR		44	–		–		–		–		–		–		–	
AA-1120157		Lloyd's Syndicate Number 1729	GBR		11	–		–		–		–		–		–		–	
AA-1120171		Lloyd's Syndicate Number 1856	GBR		28	–		1		–		–		1		–		1	
AA-1128001		Lloyd's Syndicate Number 2001	GBR		45	–		1		–		–		1		–		1	
AA-1128003		Lloyd's Syndicate Number 2003	GBR		28	–		1		–		–		1		–		1	
AA-1128010		Lloyd's Syndicate Number 2010	GBR		65	–		–		–		–		–		–		–	
AA-1128623		Lloyd's Syndicate Number 2623	GBR		10	–		–		–		–		–		–		–	
AA-1128623		Lloyd's Syndicate Number 2623	GBR		93	–		–		–		–		–		–		–	
AA-1128791		Lloyd's Syndicate Number 2791	GBR		40	–		–		–		–		–		–		–	
AA-1126004		Lloyd's Syndicate Number 4444	GBR		93	–		–		–		–		–		–		–	
AA-3194130		Endurance Specialty Ins Ltd	BMU		136	–		4		–		–		4		–		4	
AA-1840000		Mapfre Re Compania de Reaseguros SA	ESP		243	–		1		–		–		1		–		1	
AA-3190686		Partner Reins Co Ltd	BMU		72	–		–		–		–		–		–		–	
AA-3190870		Validus Reins Ltd	BMU		108	–		–		–		–		–		–		–	
AA-1340125		Hannover Rueck SE	DEU		66	–		1		–		–		1		–		1	
1299999 – Total Authorized, Other Non-U.S. Insurers					1,469	–		16		–		–		16		–		16	
1499999 – Total Authorized Excluding Protected Cells					159,798	–		32,889	–	17,497		77,090		127,476		–		127,476	1,034
Total Unauthorized, Other Non-U.S. Insurers																			

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-3191190		Hamilton Re Ltd	BMU		57	-	-	-	-	-	-	-	-	-	-	-	-	-	-
AA-1340028		DEVK	DEU		22	-	-	-	-	-	-	-	-	-	-	-	-	-	-
AA-1780116		CHAUCER INSURANCE COMPANY	IRL		33	-	-	1	-	-	-	-	-	1	-	-	-	1	-
AA-5420050		KOREAN REINSURANCE COMPANY	KOR		175	-	-	7	-	-	-	-	-	7	-	-	-	7	-
AA-1440060		Lansforsakringar Sak Forsak	SWE		25	-	-	-	-	-	-	-	-	-	-	-	-	-	-
AA-3194122		DaVinci Reins Ltd	BMU		19	-	-	-	-	-	-	-	-	-	-	-	-	-	-
AA-1460019		MS AMLIN AG BERMUDA BRANCH	CHE		55	-	-	1	-	-	-	-	-	1	-	-	-	1	-
AA-1440076		SIRIUS INTL INSURANCE CORP	SWE		41	-	-	1	-	-	-	-	-	1	-	-	-	1	-
AA-5324100		TAIPING REINSURANCE CO LTD	HKG		64	-	-	1	-	-	-	-	-	1	-	-	-	1	-
AA-3191432		Vantage Risk Ltd	BMU		73	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2699999 – Total Unauthorized, Other Non-U.S. Insurers					564	-	-	11	-	-	-	-	-	11	-	-	-	11	-
2899999 – Total Unauthorized Excluding Protected Cells					564	-	-	11	-	-	-	-	-	11	-	-	-	11	-
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																			
RJ-3194126		Arch Reins Ltd	BMU		287	-	-	16	-	-	-	-	-	16	-	-	-	16	-
RJ-3190770		Chubb Tempest Reins Ltd	BMU		11,675	-	-	1,121	-	-	-	94	-	1,215	-	-	-	1,215	-
RJ-3191289		Fidelis Ins Bermuda Ltd	BMU		254	-	-	2	-	-	-	-	-	2	-	-	-	2	-
RJ-1120175		Fidelis Underwriting Ltd	GBR		302	-	-	3	-	-	-	-	-	3	-	-	-	3	-
RJ-3190875		Hiscox Ins Co (Bermuda) Ltd	BMU		87	-	-	3	-	-	-	-	-	3	-	-	-	3	-
5499999 – Total Reciprocal Jurisdiction, Other Non-U.S. Insurers					12,606	-	-	1,146	-	-	-	94	-	1,240	-	-	-	1,240	-
5699999 – Total Reciprocal Jurisdiction Excluding Protected Cells					12,606	-	-	1,146	-	-	-	94	-	1,240	-	-	-	1,240	-
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells					172,968	-	-	34,045	-	17,497	-	77,184	-	128,727	-	-	-	128,727	1,034
9999999 – Totals					172,968	-	-	34,045	-	17,497	-	77,184	-	128,727	-	-	-	128,727	1,034

Annual Statement for the Year 2024 of the GRANGE PROPERTY & CASUALTY INSURANCE COMPANY																	
SCHEDULE F - PART 3 (CONTINUED)																	
Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)																	
(Credit Risk)																	
1	2	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				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					1,034	126,017	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling				XXX		1,034	126,017	–	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		1,034	126,017	–							XXX		
Total Authorized, Other U.S. Unaffiliated Insurers																	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO					–	265	–	265	319	–	319		319	1		5
51-0434766	AXIS REINS CO					–	4	–	4	4	–	4		4	3		–
42-0234980	EMPLOYERS MUT CAS CO					–	1	–	1	2	–	2		2	4		–
13-2673100	GENERAL REINS CORP					–	101	–	101	121	–	121		121	1		2
52-1952955	RENAISSANCE REINS US INC					–	–	–	–	–	–	–		–	2		–
13-1675535	SWISS REINS AMER CORP					–	10	–	10	12	–	12		12	2		–
42-0644327	UNITED FIRE & CAS CO					–	–	–	–	–	–	–		–	4		–
22-2005057	EVEREST REINS CO					–	1	–	1	2	–	2		2	2		–
87-2252307	TRISURA INS CO					–	–	–	–	–	–	–		–	4		–
13-4924125	MUNICH REINS AMER INC					–	6	–	6	8	–	8		8	2		–
13-3138390	NAVIGATORS INS CO					–	6	–	6	7	–	7		7	3		–
23-1641984	QBE REINS CORP					–	–	–	–	–	–	–		–	2		–
13-5616275	TRANSATLANTIC REINS CO					–	7	–	7	9	–	9		9	2		–
04-1543470	LIBERTY MUT INS CO					–	–	–	–	–	–	–		–	3		–
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers				XXX		–	402	–	402	483	–	483		483	XXX		8
Total Authorized, Pools, Mandatory Pools																	
AA-9991501	INDIANA MINE SUBSIDENCE FUND						1	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND						1	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991503	OHIO MINE SUBSIDENCE FUND						5	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999 – Total Authorized, Pools, Mandatory Pools				XXX			7	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Total Authorized, Other Non-U.S. Insurers																	
AA-1128987	Lloyd's Syndicate Number 2987					–	2	–	2	3	–	3		3	3		–
AA-1126033	Lloyd's Syndicate Number 33					–	3	–	3	3	–	3		3	3		–
AA-1126435	Lloyd's Syndicate Number 435					–	1	–	1	1	–	1		1	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		–
AA-1128003	Lloyd's Syndicate Number 2003					–	1	–	1	1	–	1		1	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		–

Annual Statement for the Year 2024 of the GRANGE PROPERTY & CASUALTY INSURANCE COMPANY																	
SCHEDULE F - PART 3 (CONTINUED)																	
Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)																	
(Credit Risk)																	
1	2	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				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-1126004	Lloyd's Syndicate Number 4444					–	–	–	–	–	–	–	–	–	3	–	–
AA-3194130	Endurance Specialty Ins Ltd					–	4	–	4	5	–	5	–	5	2	–	–
AA-1840000	Mapfre Re Compania de Reaseguros SA					–	1	–	1	2	–	2	–	2	2	–	–
AA-3190686	Partner Reins Co Ltd					–	–	–	–	–	–	–	–	–	2	–	–
AA-3190870	Validus Reins Ltd					–	–	–	–	–	–	–	–	–	3	–	–
AA-1340125	Hannover Rueck SE					–	1	–	1	1	–	1	–	1	3	–	–
1299999 – Total Authorized, Other Non-U.S. Insurers				XXX		–	16	–	16	19	–	19	–	19	XXX	–	–
1499999 – Total Authorized Excluding Protected Cells				XXX		1,034	126,442	–	419	502	–	502	–	502	XXX	–	9
Total Unauthorized, Other Non-U.S. Insurers																	
AA-3191190	Hamilton Re Ltd		–	0001		–	–	–	–	–	–	–	–	–	4	–	–
AA-1340028	DEVK					–	–	–	–	–	–	–	–	–	3	–	–
AA-1780116	CHAUCER INSURANCE COMPANY		1	0002		1	–	–	1	2	–	2	1	–	2	–	–
AA-5420050	KOREAN REINSURANCE COMPANY		7	0003		7	–	–	7	8	–	8	7	1	3	–	–
AA-1440060	Lansforsakringar Sak Forsak					–	–	–	–	–	–	–	–	–	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 INTL INSURANCE CORP				1	1	–	–	1	1	–	1	1	–	4	–	–
AA-5324100	TAIPING REINSURANCE CO LTD		1	0005		1	–	–	1	2	–	2	1	–	3	–	–
AA-3191432	Vantage Risk Ltd					–	–	–	–	–	–	–	–	–	4	–	–
2699999 – Total Unauthorized, Other Non-U.S. Insurers			10	XXX	1	11	–	–	11	13	–	13	11	2	XXX	–	–
2899999 – Total Unauthorized Excluding Protected Cells			10	XXX	1	11	–	–	11	13	–	13	11	2	XXX	–	–
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																	
RJ-3194126	Arch Reins Ltd					–	16	–	16	19	–	19	–	19	2	–	–
RJ-3190770	Chubb Tempest Reins Ltd					–	1,215	–	1,215	1,458	–	1,458	–	1,458	2	–	31
RJ-3191289	Fidelis Ins Bermuda Ltd					–	2	–	2	2	–	2	–	2	3	–	–
RJ-1120175	Fidelis Underwriting Ltd					–	3	–	3	4	–	4	–	4	3	–	–
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd					–	3	–	3	4	–	4	–	4	2	–	–
5499999 – Total Reciprocal Jurisdiction, Other Non-U.S. Insurers				XXX		–	1,240	–	1,240	1,487	–	1,487	–	1,487	XXX	–	31
5699999 – Total Reciprocal Jurisdiction Excluding Protected Cells				XXX		–	1,240	–	1,240	1,487	–	1,487	–	1,487	XXX	–	31
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells			10	XXX	1	1,045	127,682	–	1,669	2,003	–	2,003	11	1,992	XXX	–	40
9999999 – Totals			10	XXX	1	1,045	127,682	–	1,669	2,003	–	2,003	11	1,992	XXX	–	40

Annual Statement for the Year 2024 of the GRANGE PROPERTY & CASUALTY INSURANCE COMPANY																		
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	–
42-0234980	EMPLOYERS MUT CAS CO							–			–	–					YES	–
13-2673100	GENERAL REINS CORP	–						–			–	–				–	YES	–
52-1952955	RENAISSANCE REINS US INC	–						–			–	–				–	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-9991501	INDIANA 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-1128987	Lloyd's Syndicate Number 2987											–				–	YES	–
AA-1126033	Lloyd's Syndicate Number 33											–				–	YES	–
AA-1126435	Lloyd's Syndicate Number 435											–				–	YES	–
AA-1126623	Lloyd's Syndicate Number 623											–				–	YES	–
AA-1127084	Lloyd's Syndicate Number 1084											–				–	YES	–
AA-1120156	Lloyd's Syndicate Number 1686											–				–	YES	–
AA-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-1128010	Lloyd's Syndicate Number 2010											–				–	YES	–
AA-1128623	Lloyd's Syndicate Number 2623											–				–	YES	–
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	–



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-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-3191190	Hamilton Re Ltd											–				–	YES	–
AA-1340028	DEVK											–				–	YES	–
AA-1780116	CHAUCER INSURANCE COMPANY											–				–	YES	–
AA-5420050	KOREAN REINSURANCE COMPANY											–				–	YES	–
AA-1440060	Lansforsakringar Sak Forsak											–				–	YES	–
AA-3194122	DaVinci Reins Ltd											–				–	YES	–
AA-1460019	MS AMLIN AG BERMUDA BRANCH											–				–	YES	–
AA-1440076	SIRIUS INTL INSURANCE 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															
		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-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-3191190	Hamilton Re Ltd	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-5420050	KOREAN REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1440060	Lansforsakringar Sak Forsak	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 INTL INSURANCE 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
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	Complete if Col. 52 = "No"; Otherwise Enter 0	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)
					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%])	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%)				
Total Authorized, Affiliates, U.S. Intercompany Pooling										
31-4192970	GRANGE INS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling		-	XXX	XXX	-	-	-	XXX	XXX	-
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	-
42-0234980	EMPLOYERS MUT CAS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
13-2673100	GENERAL REINS CORP	-	XXX	XXX	-	-	-	XXX	XXX	-
52-1952955	RENAISSANCE REINS US INC	-	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		-	XXX	XXX	-	-	-	XXX	XXX	-
Total Authorized, Pools, Mandatory Pools										
AA-9991501	INDIANA 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		-	XXX	XXX	-	-	-	XXX	XXX	-
Total Authorized, Other Non-U.S. Insurers										
AA-1128987	Lloyd's Syndicate Number 2987	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1126033	Lloyd's Syndicate Number 33	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1126435	Lloyd's Syndicate Number 435	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1126623	Lloyd's Syndicate Number 623	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1127084	Lloyd's Syndicate Number 1084	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1120156	Lloyd's Syndicate Number 1686	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-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-1128010	Lloyd's Syndicate Number 2010	-	XXX	XXX	-	-	-	XXX	XXX	-
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	-



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	1
0003	1	026004226	Societe Generale	7
0004	1	026002574	Barclays	1
0005	1	021000089	Citibank Europe	1
9999999 – Totals				10

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	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1. ....	GRANGE INS CO.....		155,965
2. ....	Chubb Tempest Reins Ltd.....		11,675
3. ....	SWISS REINS AMER CORP.....		842
4. ....	HARTFORD STEAM BOIL INSPEC & INS CO.....		515
5. ....	Fidelis Underwriting Ltd.....		302

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	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
6. ....	GRANGE INS CO.....	127,051	155,965	YES
7. ....	Chubb Tempest Reins Ltd.....	1,215	11,675	NO
8. ....	HARTFORD STEAM BOIL INSPEC & INS CO.....	265	515	NO
9. ....	GENERAL REINS CORP.....	101	—	NO
10.....	OHIO MINE SUBSIDENCE FUND.....	94	9	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)	42,048,661		42,048,661
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	350,288		350,288
6. Net amount recoverable from reinsurers		(1,033,758)	(1,033,758)
7. Protected cell assets (Line 27)		133,901,847	133,901,847
8. Totals (Line 28)	42,398,949	132,868,089	175,267,038
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	—	56,818,445	56,818,445
10. Taxes, expenses, and other obligations (Lines 4 through 8)	242,463		242,463
11. Unearned premiums (Line 9)		77,083,402	77,083,402
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)	1,033,758	(1,033,758)	—
16. Amounts withheld or retained by company for account of others (Line 14)			
17. Provision for reinsurance (Line 16)			
18. Other liabilities	67,431		67,431
19. Total liabilities excluding protected cell business (Line 26)	1,343,652	132,868,089	134,211,741
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	41,055,297	XXX	41,055,297
22. Totals (Line 38)	42,398,949	132,868,089	175,267,038

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

(90) Schedule P - Part 7A - Primary Loss Sensitive Contracts - Section 1 (\$000's Omitted)

NONE

(90) Schedule P - Part 7A - Primary Loss Sensitive Contracts - Section 2 (\$000's Omitted)

NONE

(90) Schedule P - Part 7A - Primary Loss Sensitive Contracts - Section 3 (\$000's Omitted)

NONE

(91) Schedule P - Part 7A - Primary Loss Sensitive Contracts - Section 4 (\$000's Omitted)

NONE

(91) Schedule P - Part 7A - Primary Loss Sensitive Contracts - Section 5 (\$000's Omitted)

NONE

(92) Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Section 1 (\$000's Omitted)

NONE

(92) Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Section 2 (\$000's Omitted)

NONE

(92) Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Section 3 (\$000's Omitted)

NONE

(93) Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Section 4 (\$000's Omitted)

NONE

(93) Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Section 5 (\$000's Omitted)

NONE

(93) Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Section 6 (\$000's Omitted)

NONE

(93) Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts - Section 7 (\$000's Omitted)

NONE

SCHEDULE P INTERROGATORIES

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

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 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	6
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	NONE					
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	IA	GRANGE INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	40118	41-1405571				TRUSTGARD INSURANCE COMPANY	OH	IA	GRANGE INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	11136	31-1769414				GRANGE INSURANCE COMPANY OF MICHIGAN	OH	IA	GRANGE INSURANCE COMPANY	OWNERSHIP	100.000	GRANGE MUTUAL HOLDING COMPANY	NO	
0267	GRANGE INSURANCE POOL	11982	42-1610213				GRANGE PROPERTY & CASUALTY INSURANCE COMPANY	OH	RE	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.






















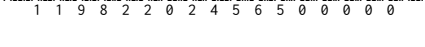
	Response
March Filing	
1. Will an actuarial opinion be filed by March 1?	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4. Will the confidential Risk-based 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 1 9 8 2 2 0 2 4 4 2 0 0 0 0 0 0
12.	No business written.	 1 1 9 8 2 2 0 2 4 2 4 0 0 0 0 0 0
13.	No business written.	 1 1 9 8 2 2 0 2 4 3 6 0 0 0 0 0 0
14.	No business written.	 1 1 9 8 2 2 0 2 4 4 5 5 0 0 0 0 0
15.	No business written.	 1 1 9 8 2 2 0 2 4 4 9 0 0 0 0 0 0
16.	No business written.	 1 1 9 8 2 2 0 2 4 3 8 5 0 0 0 0 0
17.	No business written.	 1 1 9 8 2 2 0 2 4 4 0 1 0 0 0 0 0
18.	No business written.	 1 1 9 8 2 2 0 2 4 3 6 5 0 0 0 0 0
19.		
20.		
21.	Reinsurance attestation supplement filed	 1 1 9 8 2 2 0 2 4 4 0 0 0 0 0 0 0
22.	No business written.	 1 1 9 8 2 2 0 2 4 5 0 0 0 0 0 0 0
23.	No business written.	 1 1 9 8 2 2 0 2 4 5 0 5 0 0 0 0 0
24.	No business written.	 1 1 9 8 2 2 0 2 4 2 2 4 0 0 0 0 0
25.	No business written.	 1 1 9 8 2 2 0 2 4 2 2 5 0 0 0 0 0
26.	No business written.	 1 1 9 8 2 2 0 2 4 2 2 6 0 0 0 0 0
27.	No business written.	 1 1 9 8 2 2 0 2 4 5 5 5 0 0 0 0 0
28.		
29.		
30.	No business written.	 1 1 9 8 2 2 0 2 4 2 3 0 0 0 0 0 0
31.	No business written.	 1 1 9 8 2 2 0 2 4 3 0 6 0 0 0 0 0
32.	No business written.	 1 1 9 8 2 2 0 2 4 2 1 0 0 0 0 0 0
33.	No business written.	 1 1 9 8 2 2 0 2 4 2 1 6 0 0 0 0 0
34.		
35.	No business written	 1 1 9 8 2 2 0 2 4 2 9 0 0 0 0 0 0
36.	No business written.	 1 1 9 8 2 2 0 2 4 5 6 0 0 0 0 0 0
37.	No business written	 1 1 9 8 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.....			1,826	1,826
2405. Investment Banking Fees.....			34,492	34,492
2497. Summary of remaining write-ins for Line 24 from overflow page.....			36,318	36,318

**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: 11982

	Direct Business Only			
	Prior Year	Current Year		
	1	2	3	4
	Written Premium	Written Premium	Losses Paid (deducting salvage)	Losses Unpaid (Case Base)
1. Completed operations.....				
2. Errors & omissions (E&O).....				
3. Directors & officers (D&O).....				
4. Environmental liability.....				
5. Excess workers' compensation.....				
6. Commercial excess & umbrella.....				
7. Personal umbrella.....	1,401,171	1,246,565	1,739,900	150,000
8. Employment liability.....				
9. Aggregate write-ins for facilities and premises (CGL).....				
10. Internet & cyber liability.....				
11. Aggregate write-ins for other.....				
12. Total ASL 17 - other liability (sum of lines 1 through 11).....	1,401,171	1,246,565	1,739,900	150,000
Details of Write-Ins				
0901.....				
0902.....				
0903.....				
0998. Summary of remaining write-ins for Line 09 from overflow page.....				
0999. Summary of remaining write-ins for Line 09 from overflow page.....				
1101.....				
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: 11982

		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: 11982

		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.....	NO
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: 11982

		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 Ohio

NAIC Group Code: 0267

NAIC Company Code: 11982

		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: 11982

		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