



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2024  
OF THE CONDITION AND AFFAIRS OF THE

Mid-Continent Excess and Surplus Insurance Company

NAIC Group Code	0084 (Current)	0084 (Prior)	NAIC Company Code	13794	Employer's ID Number	38-3803661
Organized under the Laws of	OH			State of Domicile or Port of Entry		OH
Country of Domicile	United States of America					
Incorporated/Organized	07/10/2009			Commenced Business		05/13/2010
Statutory Home Office	301 E. 4th Street (Street and Number)			Cincinnati, OH, US 45202 (City or Town, State, Country and Zip Code)		
Main Administrative Office	1437 S. Boulder Ave. (Street and Number)					
	Tulsa, OK, US 74119 (City or Town, State, Country and Zip Code)			918-587-7221 (Area Code) (Telephone Number)		
Mail Address	P.O. Box 3127 (Street and Number or P.O. Box)			Tulsa, OK, US 74101 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	1437 S. Boulder Ave. (Street and Number)					
	Tulsa, OK, US 74119 (City or Town, State, Country and Zip Code)			918-587-7221 (Area Code) (Telephone Number)		
Internet Website Address	http://www.mcq-ins.com/					
Statutory Statement Contact	Gregory Patrick Jones (Name)			918-587-7221-61250 (Area Code) (Telephone Number)		
	gjonas@mcq-ins.com (E-mail Address)			918-588-1253 (FAX Number)		

OFFICERS

President and COO	Robert Dewayne Martin #	Senior Vice President, CFO & Treasurer	Gregory Patrick Jones
Assistant Secretary	Sharon Lee Anne Hackl		

OTHER

David Lawrence Thompson Jr, Chairman	Michael Eugene Sullivan Jr, Vice Chairman	Raymond Herbert Corley, Senior Vice President
Lynn Marchbank, Vice President	Robert Dewayne Martin, Senior Vice President & Chief Information Officer	Magdalena Franziska Kulik Grossman, Chief Compliance Officer
Matthew David Felvus, Secretary	Stephen Charles Beraha, Assistant Secretary	Matthew John Stevens, Assistant Treasurer
Robert Jude Zbacnik, Assistant Treasurer	Annette Denise Gardner, Assistant Treasurer	

DIRECTORS OR TRUSTEES

David Lawrence Thompson Jr	Michelle Ann Gillis	Michael Eugene Sullivan Jr
Brian Scott Hertzman	Anthony Joseph Mercurio	

State of	Ohio	SS
County of	Hamilton	

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.

Robert Dewayne Martin President and COO	Sharon Lee Anne Hackl Assistant Secretary	Gregory Patrick Jones Senior Vice President, CFO & Treasurer
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Subscribed and sworn to before me this	
13th day of	February, 2025

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

Sonya L. Embry  
Notary Public, State of Oklahoma  
My Commission expires December 28, 2028



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Alabama DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	19,806	19,109	0	10,907	0	0	0	0	0	0	3,960	561
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	10,020	10,654	0	7,568	0	0	0	0	0	0	2,005	284
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	29,826	29,763	0	18,475	0	0	0	0	0	0	5,965	845
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Alaska DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Arizona DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	174,021	137,040	0	137,772	0	1,003	1,003	0	189	189	39,155	219
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	174,021	137,040	0	137,772	0	1,003	1,003	0	189	189	39,155	219
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Arkansas DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	42,003	34,110	0	23,765	0	0	0	0	0	0	6,725	39
17.2	Other Liability - Claims-Made .....	18,530	17,638	0	6,690	0	0	0	0	0	0	3,706	17
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	18,219	13,124	0	11,619	0	0	0	0	0	0	2,807	17
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	78,752	64,872	0	42,074	0	0	0	0	0	0	13,238	73
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF California DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Colorado DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	40,273	51,535	0	7,292	1,922	479	369	0	(516)	0	8,765	507
17.2	Other Liability - Claims-Made .....	32,649	36,470	0	20,654	0	0	0	0	0	0	6,156	411
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	72,922	88,005	0	27,946	1,922	479	369	0	(516)	0	14,921	918
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Connecticut DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	28,933	29,293	0	8,132	0	0	0	0	0	0	6,464	115
17.2	Other Liability - Claims-Made .....	28,209	124,720	0	4,753	0	607	5,706	0	56	254	5,641	112
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	57,142	154,013	0	12,885	0	607	5,706	0	56	254	12,105	227
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0





ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Delaware DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	1,047	1,329	0	292	0	0	0	0	0	0	184	4
17.2	Other Liability - Claims-Made .....	83,568	76,148	0	36,198	0	145	145	753	753	0	16,713	293
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	(47)	50	0	0	0	0	0	0	0	0	(8)	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	84,568	77,527	0	36,490	0	145	145	753	753	0	16,889	296
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF District of Columbia DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	365,347	384,075	0	175,362	841,502	1,018,627	273,220	36,502	29,066	19,702	70,921	117
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	25,808	23,116	0	5,267	0	628	628	929	929	0	4,731	8
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	391,155	407,191	0	180,629	841,502	1,019,255	273,848	37,431	29,995	19,702	75,652	125
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Georgia DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	72,500	90,743	0	36,539	0	3,670	314,922	13,676	(14,778)	58,809	12,696	94
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	30,733	32,235	0	10,972	0	0	0	0	0	0	5,656	40
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	103,233	122,978	0	47,511	0	3,670	314,922	13,676	(14,778)	58,809	18,352	134
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Hawaii DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	0	1,519	0	0	0	0	0	0	0	0	0	1
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	0	1,519	0	0	0	0	0	0	0	0	0	1
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Idaho DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	29,814	37,583	0	6,843	0	0	0	0	0	0	4,843	238
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	20,753	23,694	0	5,916	0	0	0	0	0	0	3,192	166
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	50,567	61,277	0	12,759	0	0	0	0	0	0	8,035	404
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Illinois DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	23,120	23,689	0	6,744	0	(554)	0	0	0	0	5,202	272
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	(859)	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	23,120	23,689	0	6,744	0	(1,413)	0	0	0	0	5,202	272
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Indiana DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	22,361	23,844	0	6,047	0	3,191	12,620	6,083	5,555	2,157	4,984	27
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	22,361	23,844	0	6,047	0	3,191	12,620	6,083	5,555	2,157	4,984	27
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .





ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Iowa DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	15,470	16,379	0	3,222	0	0	0	0	0	0	3,481	18
17.2	Other Liability - Claims-Made .....	554,325	511,581	0	304,228	0	5,706	5,706	0	254	254	110,506	643
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	569,795	527,960	0	307,450	0	5,706	5,706	0	254	254	113,987	661
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Kansas DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	64,863	68,161	0	27,862	0	244	0	0	0	0	11,754	65
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	44,875	35,270	0	21,560	(1,000)	(18,020)	(676)	0	0	0	8,606	45
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	109,538	103,431	0	49,422	(1,000)	(17,776)	(676)	0	0	0	20,360	109
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Kentucky DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Louisiana DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Maine DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	228,619	225,564	0	90,987	760	11,829	14,504	383	2,200	2,690	51,402	268
17.2	Other Liability - Claims-Made .....	5,115	6,706	0	3,729	0	0	0	0	0	0	1,023	6
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	233,734	232,270	0	94,716	760	11,829	14,504	383	2,200	2,690	52,425	274
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Maryland DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	11,522	11,342	0	4,839	0	0	0	0	0	0	2,455	41
17.2	Other Liability - Claims-Made .....	495,166	413,882	0	244,147	0	5,706	5,706	0	254	254	98,939	1,780
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	506,688	425,224	0	248,986	0	5,706	5,706	0	254	254	101,394	1,822
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Massachusetts DURING THE YEAR 2024 NAIC Company Code 13794

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										
	Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4. Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1 Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2 Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29. International .....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a) .....	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Michigan DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	38,137	31,908	0	10,915	0	0	0	0	0	0	8,581	36
17.2	Other Liability - Claims-Made .....	80,408	65,679	0	40,983	0	0	0	0	0	0	16,079	77
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	118,545	97,587	0	51,898	0	0	0	0	0	0	24,660	113
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .





ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Minnesota DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	9,523	19,589	0	3,347	0	0	0	0	0	0	1,904	134
17.2	Other Liability - Claims-Made .....	97,466	80,101	0	49,690	0	0	0	0	0	0	19,494	1,369
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	106,989	99,690	0	53,037	0	0	0	0	0	0	21,398	1,503
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Mississippi DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	503
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	0	0	0	0	0	0	0	0	0	0	0	503
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Missouri DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	7,353	5,183	0	2,645	0	0	0	0	0	0	1,263	8
17.2	Other Liability - Claims-Made .....	41,343	40,877	0	19,114	0	0	0	0	0	0	8,268	45
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	7,298	7,298	0	3,345	0	0	0	0	0	0	1,277	8
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	55,994	53,358	0	25,104	0	0	0	0	0	0	10,808	60
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Montana DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	15,236	13,627	0	5,918	0	0	0	0	0	0	2,557	15
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	526	407	0	255	0	0	0	0	0	0	79	1
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	15,762	14,034	0	6,173	0	0	0	0	0	0	2,636	15
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Nebraska DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	5,037	3,148	0	1,889	0	0	0	0	0	0	756	5
17.2	Other Liability - Claims-Made .....	25,989	24,822	0	12,356	0	0	0	0	0	0	5,197	26
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	1,382	864	0	518	0	0	0	0	0	0	207	1
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	32,408	28,834	0	14,763	0	0	0	0	0	0	6,160	32
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Nevada DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	0	704	0	0	0	(423,065)	0	0	0	0	0	0
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	0	704	0	0	0	(423,065)	0	0	0	0	0	0
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF New Hampshire DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	1,178,229	684,208	0	594,242	4,932	13,299	35,713	1,745	441	6,483	265,093	913
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	1,178,229	684,208	0	594,242	4,932	13,299	35,713	1,745	441	6,483	265,093	913
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF New Jersey DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	357,421	359,605	0	91,999	0	(55,046)	0	0	(4,028)	0	80,328	647
17.2	Other Liability - Claims-Made .....	495,223	1,189,303	0	73,881	882,482	1,507,364	1,705,810	38,080	56,236	68,063	96,532	897
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	852,644	1,548,908	0	165,880	882,482	1,452,318	1,705,810	38,080	52,208	68,063	176,860	1,544
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0





ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF New Mexico DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	11,846	9,677	0	9,150	0	0	0	0	0	0	1,777	12
17.2	Other Liability - Claims-Made .....	84,420	74,122	0	65,318	0	0	0	0	0	0	16,884	84
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	3,502	2,732	0	3,077	0	0	0	0	0	0	525	3
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	99,768	86,531	0	77,545	0	0	0	0	0	0	19,186	99
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF North Carolina DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	19,747	19,612	0	5,661	0	0	0	0	0	0	4,374	18
17.2	Other Liability - Claims-Made .....	344,526	291,929	0	180,829	0	0	0	0	0	0	68,762	322
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	1,061	960	0	126	0	0	0	0	0	0	207	1
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	365,334	312,501	0	186,616	0	0	0	0	0	0	73,343	342
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF North Dakota DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	39,758	28,516	0	18,414	2,250	2,893	643	1,100	1,100	0	6,187	36
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	14,455	6,428	0	8,179	0	0	0	0	0	0	2,264	13
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	54,213	34,944	0	26,593	2,250	2,893	643	1,100	1,100	0	8,451	49
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Ohio DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	17,910	26,256	0	4,986	0	0	0	0	0	0	3,922	356
17.2	Other Liability - Claims-Made .....	88,762	78,382	0	34,724	0	0	0	0	0	0	17,683	1,765
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	1,150	1,150	0	0	0	0	0	0	0	0	173	23
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	107,822	105,788	0	39,710	0	0	0	0	0	0	21,778	2,145
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Oklahoma DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	381,513	316,548	0	178,403	3,773	(40,066)	724	0	(1,839)	0	62,863	970
17.2	Other Liability - Claims-Made .....	27,121	0	0	16,589	0	0	0	0	0	0	5,425	69
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	220,197	179,427	0	100,406	0	100,315	109,950	225	15,763	15,538	35,758	560
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	628,831	520,954	0	295,398	3,773	60,249	110,674	225	13,924	15,538	104,046	1,598
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Oregon DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	65,582	68,273	0	12,636	0	79,952	259,835	35,955	33,080	47,630	14,403	68
17.2	Other Liability - Claims-Made .....	299,014	267,798	0	150,521	0	0	0	0	0	0	59,801	310
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	364,596	336,071	0	163,157	0	79,952	259,835	35,955	33,080	47,630	74,204	378
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Pennsylvania DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	147,908	158,149	0	48,618	5,000	56,116	51,116	0	9,445	9,445	32,030	158
17.2	Other Liability - Claims-Made .....	28,350	0	0	16,364	0	0	0	0	0	0	5,579	30
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	10,026	9,238	0	4,034	152,015	254,804	102,789	0	0	0	2,005	11
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	186,081	193,737	0	69,016	157,015	310,920	153,905	0	9,445	9,445	39,614	199
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Rhode Island DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .





ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF South Carolina DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	4,170	4,347	0	1,356	0	0	0	0	0	0	749	4
17.2	Other Liability - Claims-Made .....	108,884	90,280	0	54,334	0	5,549	5,549	165	411	246	21,753	114
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	132,000	(774,544)	280,046	32,724	(87,267)	23,869	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	113,054	94,627	0	55,690	132,000	(768,995)	285,595	32,889	(86,856)	24,115	22,502	119
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF South Dakota DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	1,100	1,100	0	413	0	0	0	0	0	0	220	1
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	1,100	1,100	0	413	0	0	0	0	0	0	220	1
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Tennessee DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	83,327	78,774	0	18,901	0	0	0	0	0	0	14,351	467
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	28,895	30,158	0	2,155	0	0	0	0	0	0	4,425	162
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	112,222	108,932	0	21,056	0	0	0	0	0	0	18,776	628
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Texas DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	241,044	237,099	0	121,200	1,337	1,594	257	0	0	0	30,225	295
17.2	Other Liability - Claims-Made .....	930,567	1,067,331	0	472,618	257,266	851,633	878,801	18,196	42,642	36,764	168,438	1,137
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	16,968	25,543	0	10,549	0	10,304	0	0	0	0	3,333	21
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	1,188,579	1,329,973	0	604,367	258,603	863,531	879,058	18,196	42,642	36,764	201,996	1,452
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Utah DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	53,992	43,390	0	28,542	2,211	1,331	425	0	0	0	9,367	331
17.2	Other Liability - Claims-Made .....	7,189	0	0	3,420	0	0	0	0	0	0	1,438	44
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	12,719	6,119	0	7,942	227,500	385,095	157,595	5,295	5,321	26	2,149	78
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	73,900	56,523	0	39,904	229,711	386,426	158,020	5,295	5,321	26	12,954	453
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Vermont DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Virginia DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	22,150	140,415	0	5,647	0	(2,647)	102,821	10,827	(74)	18,971	4,719	29
17.2	Other Liability - Claims-Made .....	277,109	248,056	0	144,236	0	0	0	0	0	0	55,420	358
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	112	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	299,259	388,583	0	149,883	0	(2,647)	102,821	10,827	(74)	18,971	60,139	386
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Washington DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	18,170	17,413	0	757	0	0	0	0	0	0	4,088	16
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	18,170	17,413	0	757	0	0	0	0	0	0	4,088	16
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF West Virginia DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	4,019	3,946	0	1,379	0	0	0	0	0	0	750	7
17.2	Other Liability - Claims-Made .....	157,046	152,726	0	100,292	0	0	0	0	0	0	31,347	284
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	331	331	0	152	0	0	0	0	0	0	58	1
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	161,396	157,003	0	101,823	0	0	0	0	0	0	32,155	292
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Wisconsin DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	316,496	302,254	0	14,455	0	0	0	0	0	0	70,901	285
17.2	Other Liability - Claims-Made .....	780,378	602,669	0	441,656	13,900	1,982	73,202	3,140	2,199	3,113	155,449	702
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	1,070	1,068	0	39	0	0	0	0	0	0	214	1
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	1,097,944	905,991	0	456,150	13,900	1,982	73,202	3,140	2,199	3,113	226,564	988
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Wyoming DURING THE YEAR 2024 NAIC Company Code 13794

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										
	Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4. Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1 Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2 Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence .....	3,309	11,062	0	1,520	0	0	0	0	0	0	496	4
17.2 Other Liability - Claims-Made .....	33,377	32,944	0	24,543	0	0	0	0	0	0	6,676	44
17.3 Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence .....	1,777	3,992	0	567	0	0	0	0	0	0	267	2
18.2 Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29. International .....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a) .....	38,463	47,998	0	26,630	0	0	0	0	0	0	7,439	51
DETAILS OF WRITE-INS												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0084 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2024 NAIC Company Code 13794

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										
		Direct Premiums Written	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 .....	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	4,182,476	3,740,118	0	1,729,598	863,687	672,850	1,068,172	106,271	59,841	166,076	854,895	7,903
17.2	Other Liability - Claims-Made .....	5,124,531	5,552,507	0	2,521,867	1,153,648	2,378,692	2,680,625	60,334	102,805	108,948	1,002,909	10,938
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	471,718	413,970	0	204,246	510,515	(42,277)	650,332	39,173	(65,254)	39,433	79,930	1,444
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
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 .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	9,778,725	9,706,595	0	4,455,711	2,527,850	3,009,265	4,399,129	205,778	97,392	314,457	1,937,734	20,285
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

Schedule F - Part 1 - Assumed Reinsurance

**N O N E**

Schedule F - Part 2 - Premium Portfolio Reinsurance Effected or (Canceled)

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

SCHEDULE F - PART 3

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

1  ID Number	2  NAIC Com- pany Code	3  Name of Reinsurer	4  Domiciliary Jurisdiction	5  Special Code	6  Reinsurance Premiums Ceded	Reinsurance Recoverable On									16  Amount in Dispute included in Column 15	Reinsurance Payable		19  Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20  Funds Held by Company Under Reinsurance Treaties
						7  Paid Losses	8  Paid LAE	9  Known Case Loss Reserves	10  Known Case LAE Reserves	11  IBNR Loss Reserves	12  IBNR LAE Reserves	13  Unearned Premiums	14  Contingent Commis- sions	15  Columns 7 through 14 Totals		17  Ceded Balances Payable	18  Other Amounts Due to Reinsurers		
73-0556513	23418	Mid-Continent Casualty Company	OH		9,779	0	0	2,899	314	1,500	0	4,456	0	9,169	0	0	0	9,169	0
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling					9,779	0	0	2,899	314	1,500	0	4,456	0	9,169	0	0	0	9,169	0
0499999. Total Authorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0899999. Total Authorized - Affiliates					9,779	0	0	2,899	314	1,500	0	4,456	0	9,169	0	0	0	9,169	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					9,779	0	0	2,899	314	1,500	0	4,456	0	9,169	0	0	0	9,169	0
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2299999. Total Unauthorized - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3299999. Total Certified - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3699999. Total Certified - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5099999. Total Reciprocal Jurisdiction - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					9,779	0	0	2,899	314	1,500	0	4,456	0	9,169	0	0	0	9,169	0
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9999999 Totals					9,779	0	0	2,899	314	1,500	0	4,456	0	9,169	0	0	0	9,169	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		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)
73-0556513 ..	Mid-Continent Casualty Company .....	0	0		0	0	9,169	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999.	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	XXX	0	0	9,169	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999.	Total Authorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999.	Total Authorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
0899999.	Total Authorized - Affiliates	0	0	XXX	0	0	9,169	0	0	0	0	0	0	0	XXX	0	0
1499999.	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	0	XXX	0	0	9,169	0	0	0	0	0	0	0	XXX	0	0
1899999.	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999.	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2299999.	Total Unauthorized - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2899999.	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3299999.	Total Certified - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999.	Total Certified - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3699999.	Total Certified - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4299999.	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4699999.	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999.	Total Reciprocal Jurisdiction - Affiliates - Other (Non- U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5099999.	Total Reciprocal Jurisdiction - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5699999.	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5799999.	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	0	0	XXX	0	0	9,169	0	0	0	0	0	0	0	XXX	0	0
5899999.	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999	Totals	0	0	XXX	0	0	9,169	0	0	0	0	0	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44  Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45  Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46  Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47  Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48  Amounts Received Prior 90 Days	49  Percentage Overdue Col. 42/Col. 43	50  Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51  Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52  Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53  Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
		37  Current	Overdue															43  Total Due Cols. 37+42 (In total should equal Cols. 7+8)
			38  1 - 29 Days	39  30 - 90 Days	40  91 - 120 Days	41  Over 120 Days	42  Total Overdue Cols. 38+39 +40+41											
73-0556513 ...	Mid-Continent Casualty Company .....	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
0899999. Total Authorized - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
2299999. Total Unauthorized - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
3299999. Total Certified - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
3699999. Total Certified - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
5099999. Total Reciprocal Jurisdiction - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
9999999 Totals		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance														Complete if Col. 52 = "No"; Otherwise Enter 0		69  Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	63 Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	64 Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	65 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	66 Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)		67 Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	68 20% of Amount in Col. 67	
		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)											
73-0556513	Mid-Continent Casualty Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999	Total Authorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999	Total Authorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999	Total Authorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2299999	Total Unauthorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3299999	Total Certified - Affiliates - U.S. Non-Pool			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
3599999	Total Certified - Affiliates - Other (Non-U.S.)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
3699999	Total Certified - Affiliates			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5099999	Total Reciprocal Jurisdiction - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
9999999	Totals			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70  20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0  20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0  Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75  Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76  Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77  Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78  Total Provision for Reinsurance (Cols. 75 + 76 + 77)
73-0556513	Mid-Continent Casualty Company	0	XXX	XXX	0	0	0	XXX	XXX	0
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	XXX	XXX	0	0	0	XXX	XXX	0
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
0899999	Total Authorized - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	XXX	XXX	0	0	0	XXX	XXX	0
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	XXX	XXX	XXX	0	XXX	0
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	0	XXX	XXX	XXX	0	XXX	0
2299999	Total Unauthorized - Affiliates	0	0	0	XXX	XXX	XXX	0	XXX	0
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	0	XXX	XXX	XXX	0	XXX	0
3299999	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3599999	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3699999	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
5099999	Total Reciprocal Jurisdiction - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	XXX	XXX	0	0	0	XXX	XXX	0
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	0	0	0	0	0	0	0	0	0
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	0	0	0	0	0	0	0
9999999	Totals	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

## SCHEDULE F - PART 4

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

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
			NONE	
Total				

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	1	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1.		0.000	0
2.		0.000	0
3.		0.000	0
4.		0.000	0
5.		0.000	0

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.	Mid-Continent Casualty Company	9,169	9,779	Yes [ X ] No [ ]
7.		0	0	Yes [ ] No [ ]
8.		0	0	Yes [ ] No [ ]
9.		0	0	Yes [ ] No [ ]
10.		0	0	Yes [ ] No [ ]

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12) .....	19,075,817	0	19,075,817
2. Premiums and considerations (Line 15) .....	0	0	0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) .....	0	0	0
4. Funds held by or deposited with reinsured companies (Line 16.2) .....	0	0	0
5. Other assets .....	112,567	0	112,567
6. Net amount recoverable from reinsurers .....	0	9,169,297	9,169,297
7. Protected cell assets (Line 27) .....	0	0	0
8. Totals (Line 28) .....	19,188,384	9,169,297	28,357,681
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	0	4,713,586	4,713,586
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	40,261	0	40,261
11. Unearned premiums (Line 9) .....	0	4,455,711	4,455,711
12. Advance premiums (Line 10) .....	0	0	0
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....	0	0	0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) .....	0	0	0
15. Funds held by company under reinsurance treaties (Line 13) .....	0	0	0
16. Amounts withheld or retained by company for account of others (Line 14) .....	0	0	0
17. Provision for reinsurance (Line 16) .....	0	0	0
18. Other liabilities .....	1,794	0	1,794
19. Total liabilities excluding protected cell business (Line 26) .....	42,055	9,169,297	9,211,352
20. Protected cell liabilities (Line 27) .....	0	0	0
21. Surplus as regards policyholders (Line 37)	19,146,329	XXX	19,146,329
22. Totals (Line 38)	19,188,384	9,169,297	28,357,681

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? ..... Yes [ X ] No [   ]

If yes, give full explanation: Mid-Continent Excess and Surplus Insurance Company participates in a reinsurance pooling agreement with affiliate companies. See footnote 26. ....

Schedule H - Part 1 - Analysis of Underwriting Operations

**N O N E**

Schedule H - Part 2 - Reserves and Liabilities

**N O N E**

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

**N O N E**

Schedule H - Part 4 - Reinsurance

**N O N E**

Schedule H - Part 5 - Health Claims

**N O N E**

Schedule P - Part 1A - Homeowners/Farmowners

**NONE**

Schedule P - Part 1B - Private Passenger Auto Liability/Medical

**NONE**

Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical

**NONE**

Schedule P - Part 1D - Workers' Compensation (Excluding Excess Workers' Compensation)

**NONE**

Schedule P - Part 1E - Commercial Multiple Peril

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

Schedule P - Part 1H - Section 1 - Other Liability - Occurrence

**NONE**

Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made

**NONE**

Schedule P - Part 1I - Special Property (Fire, Allied Lines...)

**NONE**

Schedule P - Part 1J - Auto Physical Damage

**NONE**

Schedule P - Part 1K - Fidelity/Surety

**NONE**

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

**NONE**

Schedule P - Part 1M - International

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 1T - Warranty

**N O N E**

Schedule P - Part 1U - Pet Insurance Plans

**N O N E**

Schedule P - Part 2A - Homeowners/Farmowners

**N O N E**

Schedule P - Part 2B - Private Passenger Auto Liability/Medical

**N O N E**

Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical

**N O N E**

Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation)

**N O N E**

Schedule P - Part 2E - Commercial Multiple Peril

**N O N E**



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

**N O N E**

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

**N O N E**

Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

**N O N E**

Schedule P - Part 2H - Section 1 - Other Liability - Occurrence

**N O N E**

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

**N O N E**

Schedule P - Part 2I - Special Property

**N O N E**

Schedule P - Part 2J - Auto Physical Damage

**N O N E**

Schedule P - Part 2K - Fidelity/Surety

**N O N E**

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

**N O N E**

Schedule P - Part 2M - International

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 2T - Warranty

**N O N E**

Schedule P - Part 2U - Pet Insurance Plans

**N O N E**

Schedule P - Part 3A - Homeowners/Farmowners

**N O N E**

Schedule P - Part 3B - Private Passenger Auto Liability/Medical

**N O N E**

Schedule P - Part 3C - Commercial Auto/Truck Liability/Medical

**N O N E**

Schedule P - Part 3D - Workers' Compensation (Excluding Excess Workers' Compensation)

**N O N E**

Schedule P - Part 3E - Commercial Multiple Peril

**N O N E**

Schedule P - Part 3F - Section 1 - Medical Professional Liability - Occurrence

**N O N E**

Schedule P - Part 3F - Section 2 - Medical Professional Liability - Claims-Made

**N O N E**

Schedule P - Part 3G - Special Liability

**N O N E**

Schedule P - Part 3H - Section 1 - Other Liability - Occurrence

**N O N E**

Schedule P - Part 3H - Section 2 - Other Liability - Claims-Made

**N O N E**

Schedule P - Part 3I - Special Property

**N O N E**

Schedule P - Part 3J - Auto Physical Damage

**N O N E**

Schedule P - Part 3K - Fidelity/Surety

**N O N E**

Schedule P - Part 3L - Other (Including Credit, Accident and Health)

**N O N E**

Schedule P - Part 3M - International

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 3T - Warranty

**N O N E**

Schedule P - Part 3U - Pet Insurance Plans

**N O N E**

Schedule P - Part 4A - Homeowners/Farmowners

**N O N E**

Schedule P - Part 4B - Private Passenger Auto Liability/Medical

**N O N E**

Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical

**N O N E**

Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)

**N O N E**

Schedule P - Part 4E - Commercial Multiple Peril

**N O N E**

Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence

**N O N E**

Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made

**N O N E**

Schedule P - Part 4G - Special Liability

**N O N E**

Schedule P - Part 4H - Section 1 - Other Liability - Occurrence

**N O N E**

Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made

**N O N E**

Schedule P - Part 4I - Special Property

**N O N E**

Schedule P - Part 4J - Auto Physical Damage

**N O N E**

Schedule P - Part 4K - Fidelity/Surety

**N O N E**

Schedule P - Part 4L - Other (Including Credit, Accident and Health)

**N O N E**

Schedule P - Part 4M - International

**N O N E**

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 4T - Warranty

**N O N E**

Schedule P - Part 4U - Pet Insurance Plans

**N O N E**

Schedule P - Part 5A - Homeowners/Farmowners - Section 1

**N O N E**

Schedule P - Part 5A - Homeowners/Farmowners - Section 2

**N O N E**

Schedule P - Part 5A - Homeowners/Farmowners - Section 3

**N O N E**

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 1

**N O N E**

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 2

**N O N E**

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 3

**N O N E**

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1

**N O N E**

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2

**N O N E**

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3

**N O N E**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

**N O N E**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

**N O N E**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 3

**N O N E**

Schedule P - Part 5E - Commercial Multiple Peril - Section 1

**N O N E**

Schedule P - Part 5E - Commercial Multiple Peril - Section 2

**N O N E**

Schedule P - Part 5E - Commercial Multiple Peril - Section 3

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 5H - Other Liability - Occurrence - Section 1A

**N O N E**

Schedule P - Part 5H - Other Liability - Occurrence - Section 2A

**N O N E**

Schedule P - Part 5H - Other Liability - Occurrence - Section 3A

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 5T - Warranty - Section 1

**N O N E**

Schedule P - Part 5T - Warranty - Section 2

**N O N E**

Schedule P - Part 5T - Warranty - Section 3

**N O N E**

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1

**N O N E**

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2

**N O N E**

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

**N O N E**

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

**N O N E**

Schedule P - Part 6E - Commercial Multiple Peril - Section 1

**N O N E**

Schedule P - Part 6E - Commercial Multiple Peril - Section 2

**N O N E**

Schedule P - Part 6H - Other Liability - Occurrence - Section 1A

**N O N E**

Schedule P - Part 6H - Other Liability - Occurrence - Section 2A

**N O N E**

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B

**N O N E**

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B

**N O N E**

Schedule P - Part 6M - International - Section 1

**N O N E**

Schedule P - Part 6M - International - Section 2

**N O N E**



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

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

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

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

Schedule P - Part 6R - Products Liability - Occurrence - Section 1A  
**N O N E**

Schedule P - Part 6R - Products Liability - Occurrence - Section 2A  
**N O N E**

Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B  
**N O N E**

Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B  
**N O N E**

Schedule P - Part 7A - Section 1 - Primary Loss Sensitive Contracts  
**N O N E**

Schedule P - Part 7A - Section 2 - Primary Loss Sensitive Contracts  
**N O N E**

Schedule P - Part 7A - Section 3 - Primary Loss Sensitive Contracts  
**N O N E**

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts  
**N O N E**

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts  
**N O N E**

Schedule P - Part 7B - Section 1 - Reinsurance Loss Sensitive Contracts  
**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or “ERE”) benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? ..... Yes [ ] No [ X ]  
If the answer to question 1.1 is “no”, leave the following questions blank. If the answer to question 1.1 is “yes”, please answer the following questions:
- 1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? .....\$ .....0
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? ..... Yes [ ] No [ X ]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? ..... Yes [ ] No [ X ]
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? ..... Yes [ ] No [ ] N/A [ X ]
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior .....	0	0
1.602	2015 .....	0	0
1.603	2016 .....	0	0
1.604	2017 .....	0	0
1.605	2018 .....	0	0
1.606	2019 .....	0	0
1.607	2020 .....	0	0
1.608	2021 .....	0	0
1.609	2022 .....	0	0
1.610	2023 .....	0	0
1.611	2024 .....	0	0
1.612	Totals	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as “Defense and Cost Containment” and “Adjusting and Other” ) reported in compliance with these definitions in this statement? ..... Yes [ X ] No [ ]
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? ..... Yes [ X ] No [ ]
4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? ..... Yes [ ] No [ X ]
- If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.  
Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for:  
(in thousands of dollars)

5.1 Fidelity .....0  
5.2 Surety .....0
6. Claim count information is reported per claim or per claimant (Indicate which). ..... per claim.....  
If not the same in all years, explain in Interrogatory 7.
- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? ..... Yes [ ] No [ X ]
- 7.2 (An extended statement may be attached.)  
.....

SCHEDULE T - PART 2  
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0000...		00000...	31-1544320	0	0001042046	NYSE	American Financial Group, Inc.	..OH....	UIP.....		Ownership.....	0.000		...NO....	0
.0000...		00000...	86-3438529	0	0		AFG Real Estate Holding Company, LLC	..OH....	NIA.....	American Financial Group, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	84-4395026	0	0		Bay Bridge Holding Company, LLC	..MD....	NIA.....	AFG Real Estate Holding Company, LLC	Ownership.....	65.000	American Financial Group, Inc.	...NO....	1
.0000...		00000...	84-4395026	0	0		Bay Bridge Holding Company, LLC	..MD....	NIA.....	Great American Insurance Company	Ownership.....	35.000	American Financial Group, Inc.	...NO....	1
							Bay Bridge Marina Hemingway's Restaurant, LLC								
.0000...		00000...	27-4078277	0	0			..MD....	NIA.....	Bay Bridge Holding Company, LLC	Ownership.....	85.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	27-0513333	0	0		Bay Bridge Marina Management, LLC	..MD....	NIA.....	Bay Bridge Holding Company, LLC	Ownership.....	85.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	20-4604276	0	0		GALIC – Bay Bridge Marina, LLC	..MD....	NIA.....	Bay Bridge Marina Management, LLC	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	84-3355051	0	0		Charleston Harbor Holding Company, LLC	..SC....	NIA.....	AFG Real Estate Holding Company, LLC	Ownership.....	50.000	American Financial Group, Inc.	...NO....	1
.0000...		00000...	84-3355051	0	0		Charleston Harbor Holding Company, LLC	..SC....	NIA.....	Great American Insurance Company	Ownership.....	50.000	American Financial Group, Inc.	...NO....	1
.0000...		00000...	81-3737639	0	0		Charleston Harbor Fishing, LLC	..SC....	NIA.....	Charleston Harbor Holding Company, LLC	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	84-4574243	0	0		Mountain View Grand Holding Company, LLC	..NH....	NIA.....	AFG Real Estate Holding Company, LLC	Ownership.....	65.000	American Financial Group, Inc.	...NO....	1
.0000...		00000...	84-4574243	0	0		Mountain View Grand Holding Company, LLC	..NH....	NIA.....	Great American Insurance Company	Ownership.....	35.000	American Financial Group, Inc.	...NO....	1
.0000...		00000...	86-3225970	0	0		Sailfish Holding Company, LLC	..FL....	NIA.....	AFG Real Estate Holding Company, LLC	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	84-2654660	0	0		Skipjack Holding Company, LLC	..MD....	NIA.....	AFG Real Estate Holding Company, LLC	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	52-2179330	0	0		Skipjack Marina Corp.	..MD....	NIA.....	Skipjack Holding Company, LLC	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	31-0996797	0	0		American Financial Enterprises, Inc.	..CT....	NIA.....	American Financial Group, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	31-0828578	0	0		American Money Management Corporation	..OH....	NIA.....	American Financial Group, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	27-1577326	0	0		American Real Estate Capital Company, LLC	..OH....	NIA.....	American Money Management Corporation	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	27-2829629	0	0		Mid-Market Capital Partners, LLC	..DE....	NIA.....	American Money Management Corporation	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	41-2112001	0	0		APU Holding Company	..OH....	NIA.....	American Financial Group, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	23-6000765	0	0		APU Consolidated, Inc.	..PA....	NIA.....	APU Holding Company	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	13-6400464	0	0		Lehigh Valley Railroad Company	..PA....	NIA.....	American Premier Underwriters, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	46-1665396	0	0		Pennsylvania Lehigh Oil & Gas Holdings LLC	..PA....	NIA.....	Lehigh Valley Railroad Company	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	20-1548213	0	0		Magnolia Alabama Holdings, Inc.	..DE....	NIA.....	American Premier Underwriters, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	20-1574094	0	0		Magnolia Alabama Holdings LLC	..AL....	NIA.....	Magnolia Alabama Holdings, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	46-1852532	0	0		Michigan Oil & Gas Holdings, LLC	..MI....	NIA.....	American Premier Underwriters, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	46-1480078	0	0		Ohio Oil & Gas Holdings, LLC	..OH....	NIA.....	American Premier Underwriters, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	13-6021353	0	0		The Owasco River Railway, Inc.	..NY....	NIA.....	American Premier Underwriters, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	76-0080537	0	0		PCC Technical Industries, Inc.	..DE....	NIA.....	American Premier Underwriters, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	46-3246684	0	0		Pennsylvania Oil & Gas Holdings, LLC	..PA....	NIA.....	American Premier Underwriters, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	23-6000766	0	0		Pennsylvania-Reading Seashore Lines	..NJ....	NIA.....	American Premier Underwriters, Inc.	Ownership.....	66.670	American Financial Group, Inc.	...NO....	0
.0000...		00000...	98-1073776	0	0		GAI Insurance Company, Ltd.	..BMU...	IA.....	APU Holding Company	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	31-1446308	0	0		Hangar Acquisition Corp.	..OH....	NIA.....	APU Holding Company	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	91-1242743	0	0		Premier Lease & Loan Services Insurance Agency, Inc.	..WA....	NIA.....	APU Holding Company	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
							Premier Lease & Loan Services of Canada, Inc.								
.0000...		00000...	91-1508644	0	0			..WA....	NIA.....	APU Holding Company	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	31-0823725	0	0		Dixie Terminal Corporation	..OH....	NIA.....	American Financial Group, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	06-1356481	0	0		Great American Financial Resources, Inc.	..DE....	NIA.....	American Financial Group, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	34-1017531	0	0		Ceres Group, Inc.	..DE....	NIA.....	Great American Financial Resources, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	47-0717079	0	0		Continental General Corporation	..NE....	NIA.....	Ceres Group, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	34-1947042	0	0		QQAAgency of Texas, Inc.	..TX....	NIA.....	Ceres Group, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	20-1246122	0	0		Brothers Management, LLC	..FL....	NIA.....	Great American Financial Resources, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	31-1391777	0	0		GALIC Brothers, Inc.	..OH....	NIA.....	Great American Financial Resources, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...		0	0		Helium Holdings Limited	..BMU...	NIA.....	American Financial Group, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	31-0686194	0	0		One East Fourth, Inc.	..OH....	NIA.....	American Financial Group, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	31-1119320	0	0		TEJ Holdings, Inc.	..OH....	NIA.....	American Financial Group, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0
.0000...		00000...	31-0728327	0	0		Three East Fourth, Inc.	..OH....	NIA.....	American Financial Group, Inc.	Ownership.....	100.000	American Financial Group, Inc.	...NO....	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0000 ...		00000 ...	81-4361220 ..	0 .....	0 .....		Verikai Inc. ....	..DE.....	..NIA.....	American Financial Group, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	42-1575938 ..	0 .....	0 .....		Great American Holding, Inc. ....	..OH.....	..UIP.....	American Financial Group, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	80-0333563 ..	0 .....	0 .....		ABA Insurance Services, Inc. ....	..OH.....	..NIA.....	Great American Holding, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	99-3256614 ..	0 .....	0 .....		Invictus Analytics, LLC .....	..OH.....	..NIA.....	ABA Insurance Services, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	27-3062314 ..	0 .....	0 .....		Agricultural Services, LLC .....	..OH.....	..NIA.....	Great American Holding, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	39-1404033 ..	0 .....	0 .....		Farmers Crop Insurance Alliance, Inc. ....	..KS.....	..NIA.....	Great American Holding, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	37-1122370 ..	0 .....	0 .....		Crop Risk Services, Inc. ....	..IL.....	..NIA.....	Farmers Crop Insurance Alliance, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	10646 ...	36-4079497 ..	0 .....	0 .....		Great American Contemporary Insurance Company .....	..OH.....	..IA.....	Great American Holding, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	10335 ...	59-3269531 ..	0 .....	0 .....		Bridgefield Casualty Insurance Company .....	..FL.....	..IA.....	Great American Contemporary Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	10701 ...	59-1835212 ..	0 .....	0 .....		Bridgefield Employers Insurance Company .....	..FL.....	..IA.....	Great American Contemporary Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	16618 ...	83-1694393 ..	0 .....	0 .....		Bridgefield Indemnity Insurance Company .....	..OH.....	..IA.....	Great American Contemporary Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	22179 ...	95-2801326 ..	0 .....	0 .....		Republic Indemnity Company of America .....	..CA.....	..IA.....	Great American Contemporary Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	43753 ...	31-1054123 ..	0 .....	0 .....		Republic Indemnity Company of California .....	..CA.....	..IA.....	Republic Indemnity Company of America ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...		0 .....	0 .....		Great American Holding (Europe) Limited .....	..GBR.....	..NIA.....	Great American Holding, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...		0 .....	0 .....		Great American Europe Limited .....	..GBR.....	..NIA.....	Great American Holding (Europe) Limited ..	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	AA-1784136 ..	0 .....	0 .....		Great American International Insurance (EU) Designated Activity Company .....	..IRL.....	..IA.....	Great American Europe Limited .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	AA-1120817 ..	0 .....	0 .....		Great American International Insurance (UK) Limited .....	..GBR.....	..IA.....	Great American Europe Limited .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	23418 ...	73-0556513 ..	0 .....	0 .....		Mid-Continent Casualty Company .....	..OH.....	..UDP.....	Great American Holding, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	15380 ...	73-1406844 ..	0 .....	0 .....		Mid-Continent Assurance Company .....	..OH.....	..IA.....	Mid-Continent Casualty Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	13794 ...	38-3803661 ..	0 .....	0 .....		Mid-Continent Excess and Surplus Insurance Company .....	..OH.....	..RE.....	Mid-Continent Casualty Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	30-0571535 ..	0 .....	0 .....		Mid-Continent Specialty Insurance Services, Inc. ....	..OK.....	..NIA.....	Mid-Continent Casualty Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	23426 ...	73-0773259 ..	0 .....	0 .....		Oklahoma Surety Company .....	..OH.....	..IA.....	Mid-Continent Casualty Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	34-1607394 ..	0 .....	0 .....		National Interstate Corporation .....	..OH.....	..NIA.....	Great American Holding, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	34-1899058 ..	0 .....	0 .....		American Highways Insurance Agency, Inc. ....	..OH.....	..NIA.....	National Interstate Corporation .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	31-1548235 ..	0 .....	0 .....		Explorer RV Insurance Agency, Inc. ....	..OH.....	..NIA.....	National Interstate Corporation .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	98-0191335 ..	0 .....	0 .....		Hudson Indemnity, Ltd. ....	..CYM.....	..IA.....	National Interstate Corporation .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	34-1607396 ..	0 .....	0 .....		National Interstate Insurance Agency, Inc. ....	..OH.....	..NIA.....	National Interstate Corporation .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	36-4670968 ..	0 .....	0 .....		Commercial For Hire Transportation Purchasing Group .....	..SC.....	..NIA.....	National Interstate Insurance Agency, Inc. ....	Management.....	0.000 ...	American Financial Group, Inc. ....	...NO.....	...2 .....
.0084 ...	American Financial Group, Inc. ....	32620 ...	34-1607395 ..	0 .....	0 .....		National Interstate Insurance Company .....	..OH.....	..IA.....	National Interstate Corporation .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	11051 ...	99-0345306 ..	0 .....	0 .....		National Interstate Insurance Company of Hawaii, Inc. ....	..OH.....	..IA.....	National Interstate Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	43-1254631 ..	0 .....	0 .....		TransProtection Service Company .....	..MO.....	..NIA.....	National Interstate Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	41106 ...	95-3623282 ..	0 .....	0 .....		Triumphe Casualty Company .....	..OH.....	..IA.....	National Interstate Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	21172 ...	86-0114294 ..	0 .....	0 .....		Vanliner Insurance Company .....	..OH.....	..IA.....	National Interstate Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	20-5548054 ..	0 .....	0 .....		Safety Claims & Litigation Services, LLC ....	..MT.....	..NIA.....	National Interstate Corporation .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	46-4570914 ..	0 .....	0 .....		Safety, Claims and Litigation Services, LLC .....	..OH.....	..NIA.....	National Interstate Corporation .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	87-1038842 ..	0 .....	0 .....		Radion Insurance Holdings, LLC .....	..DE.....	..NIA.....	Great American Holding, Inc. ....	Ownership.....	32.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	87-1053786 ..	0 .....	0 .....		Radion Health, Inc. ....	..DE.....	..NIA.....	Radion Insurance Holdings, LLC .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...		0 .....	0 .....		Radion Re, Inc. ....	..CYM.....	..IA.....	Radion Insurance Holdings, LLC .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	59-1683711 ..	0 .....	0 .....		Summit Consulting, LLC .....	..FL.....	..NIA.....	Great American Holding, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...		00000 ...	59-3385208 ..	0 .....	0 .....		Heritage Summit Healthcare, LLC .....	..FL.....	..NIA.....	Summit Consulting, LLC .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0084 ...	American Financial Group, Inc. ....	.....16691 ....	31-0501234 ..	0 .....	0 .....	.....	Great American Insurance Company .....	..OH.....	.....UIP.....	American Financial Group, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	.....37990 ....	31-0973761 ..	0 .....	0 .....	.....	American Empire Insurance Company .....	..OH.....	.....IA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	31-1463075 ..	0 .....	0 .....	.....	American Signature Underwriters, Inc. ....	..OH.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	59-2840291 ..	0 .....	0 .....	.....	Brothers Property Corporation .....	..OH.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	59-2840294 ..	0 .....	0 .....	.....	Brothers Property Management Corporation ...	..OH.....	.....NIA.....	Brothers Property Corporation .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	31-1277904 ..	0 .....	0 .....	.....	Crop Managers Insurance Agency, Inc. ....	..KS.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	83-1767590 ..	0 .....	0 .....	.....	CropSurance Agency, LLC .....	..OH.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	31-0589001 ..	0 .....	0 .....	.....	Dempsey & Siders Agency, Inc. ....	..OH.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	84-2358400 ..	0 .....	0 .....	.....	Human and Social Services Risk Purchasing Group, LLC .....	..OH.....	.....NIA.....	Dempsey & Siders Agency, Inc. ....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	31-1341668 ..	0 .....	0 .....	.....	Eden Park Insurance Brokers, Inc. ....	..CA.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	.....	0 .....	0 .....	.....	El Aguila, Compañía de Seguros, S.A. de C.V. ....	..MEX.....	.....IA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...YES.....	...0 .....
.0000 ...	.....	.....00000 ....	.....	0 .....	0 .....	.....	Foreign Credit Insurance Association .....	..NY.....	.....OTH.....	Great American Insurance Company .....	Management.....	0.000 ...	American Financial Group, Inc. ....	...NO.....	...2 .....
.0000 ...	.....	.....00000 ....	81-0814136 ..	0 .....	0 .....	.....	GAI Mexico Holdings, LLC .....	..DE.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	31-1753938 ..	0 .....	0 .....	.....	GAI Warranty Company .....	..OH.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	31-1765544 ..	0 .....	0 .....	.....	GAI Warranty Company of Florida .....	..FL.....	.....NIA.....	GAI Warranty Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	61-1329718 ..	0 .....	0 .....	.....	Global Premier Finance Company .....	..OH.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	.....26832 ....	95-1542353 ..	0 .....	0 .....	.....	Great American Alliance Insurance Company ...	..OH.....	.....IA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	.....26344 ....	15-6020948 ..	0 .....	0 .....	.....	Great American Assurance Company .....	..OH.....	.....IA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	.....39896 ....	61-0983091 ..	0 .....	0 .....	.....	Great American Casualty Insurance Company ..	..OH.....	.....IA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	.....37532 ....	31-0954439 ..	0 .....	0 .....	.....	Great American E & S Insurance Company .....	..OH.....	.....IA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	.....41858 ....	31-1036473 ..	0 .....	0 .....	.....	Great American Fidelity Insurance Company ...	..OH.....	.....IA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	31-1652643 ..	0 .....	0 .....	.....	Great American Insurance Agency, Inc. ....	..OH.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	.....22136 ....	13-5539046 ..	0 .....	0 .....	.....	Great American Insurance Company of New York .....	..NY.....	.....IA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	31-0856644 ..	0 .....	0 .....	.....	Great American Management Services, Inc. ....	..OH.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	.....38580 ....	31-1288778 ..	0 .....	0 .....	.....	Great American Protection Insurance Company ..	..OH.....	.....IA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	31-0918893 ..	0 .....	0 .....	.....	Great American Re Inc. ....	..DE.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	.....35351 ....	31-0912199 ..	0 .....	0 .....	.....	Great American Risk Solutions Surplus Lines Insurance Company .....	..OH.....	.....IA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	.....31135 ....	31-1209419 ..	0 .....	0 .....	.....	Great American Security Insurance Company ...	..OH.....	.....IA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0084 ...	American Financial Group, Inc. ....	.....33723 ....	31-1237970 ..	0 .....	0 .....	.....	Great American Spirit Insurance Company .....	..OH.....	.....IA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	31-1293064 ..	0 .....	0 .....	.....	Professional Risk Brokers, Inc. ....	..IL.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	.....	0 .....	0 .....	.....	Shelter Rock Holdings, LLC .....	..OH.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	88-1379846 ..	0 .....	0 .....	.....	Trusted Coverage Professionals Agency, LLC ..	..OH.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....
.0000 ...	.....	.....00000 ....	.....	0 .....	0 .....	.....	Westline Industrial, LLC .....	..OH.....	.....NIA.....	Great American Insurance Company .....	Ownership.....	100.000 ...	American Financial Group, Inc. ....	...NO.....	...0 .....

Asterisk	Explanation
1 .....	The entity is owned by more than one company within the AFG Group. ....
2 .....	Entity is affiliated but not owned. ....

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)
.....00000	31-1544320	American Financial Group, Inc. ....	.....640,000,000	.....0	.....0	.....0	.....187,986,279	.....0	.....	.....0	.....827,986,279	.....0
.....00000	41-2112001	APU Holding Company .....	.....3,500,000	.....0	.....0	.....0	.....0	.....0	.....	.....0	.....3,500,000	.....0
.....10335	59-3269531	Bridgefield Casualty Insurance Company ....	.....0	.....10,000,000	.....0	.....0	.....0	.....0	.....*	.....0	.....10,000,000	.....(6,213,000)
.....10701	59-1835212	Bridgefield Employers Insurance Company ..	.....(55,000,000)	.....(30,000,000)	.....0	.....0	.....0	.....0	.....*	.....0	.....(85,000,000)	.....0
.....00000		El Aguila, Compañía de Seguros, S.A. de C.V. ....	.....0	.....1,878,965	.....0	.....0	.....0	.....0	.....	.....0	.....1,878,965	.....0
.....00000	98-1073776	GAI Insurance Company, Ltd. ....	.....(3,500,000)	.....0	.....0	.....0	.....0	.....0	.....	.....0	.....(3,500,000)	.....(3,334,000)
.....00000	31-1765544	GAI Warranty Company of Florida .....	.....0	.....0	.....0	.....0	.....0	.....0	.....	.....0	.....0	.....20,000
.....00000	61-1329718	Global Premier Finance Company .....	.....(1,150,000)	.....0	.....0	.....0	.....0	.....0	.....	.....0	.....(1,150,000)	.....0
.....10646	36-4079497	Great American Contemporary Insurance Company .....	.....(55,000,000)	.....20,000,000	.....0	.....0	.....0	.....0	.....*	.....0	.....(35,000,000)	.....1,860,000
.....00000	42-1575938	Great American Holding, Inc. ....	.....110,000,000	.....0	.....0	.....0	.....0	.....0	.....	.....0	.....110,000,000	.....0
.....16691	31-0501234	Great American Insurance Company .....	.....(614,350,000)	.....(9,513,365)	.....0	.....0	.....(187,986,279)	.....0	.....*	.....0	.....(811,849,644)	.....(64,940,000)
.....00000	AA-1784136	Great American International Insurance (EU) Designated Activity Company .....	.....0	.....0	.....0	.....0	.....0	.....0	.....	.....0	.....0	.....49,051,000
.....00000	AA-1120817	Great American International Insurance (UK) Limited .....	.....0	.....0	.....0	.....0	.....0	.....0	.....	.....0	.....0	.....32,543,000
.....00000	98-0191335	Hudson Indemnity, Ltd. ....	.....0	.....0	.....0	.....0	.....0	.....0	.....	.....0	.....0	.....(475,933,000)
.....23418	73-0556513	Mid-Continent Casualty Company .....	.....0	.....0	.....0	.....0	.....0	.....0	.....*	.....0	.....0	.....(7,879,000)
.....00000	34-1607394	National Interstate Corporation .....	.....55,000,000	.....0	.....0	.....0	.....0	.....0	.....	.....0	.....55,000,000	.....0
.....32620	34-1607395	National Interstate Insurance Company ....	.....(55,000,000)	.....0	.....0	.....0	.....0	.....0	.....*	.....0	.....(55,000,000)	.....309,972,000
.....11051	99-0345306	National Interstate Insurance Company of Hawaii, Inc. ....	.....0	.....0	.....0	.....0	.....0	.....0	.....*	.....0	.....0	.....15,965,000
.....00000	31-1293064	Professional Risk Brokers, Inc. ....	.....(23,500,000)	.....0	.....0	.....0	.....0	.....0	.....	.....0	.....(23,500,000)	.....0
.....00000		Radion Re .....	.....0	.....0	.....0	.....0	.....0	.....0	.....	.....0	.....0	.....(4,259,000)
.....22179	95-2801326	Republic Indemnity Company of America .....	.....0	.....0	.....0	.....0	.....0	.....0	.....*	.....0	.....0	.....(29,683,000)
.....41106	95-3623282	Triumphe Casualty Company .....	.....0	.....0	.....0	.....0	.....0	.....0	.....*	.....0	.....0	.....34,718,000
.....	88-1379846	Trusted Coverage Professionals Agency, LLC	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....21172	86-0114294	Vanliner Insurance Company .....	.....(1,000,000)	.....7,634,400	.....0	.....0	.....0	.....0	.....	.....0	.....6,634,400	.....0
.....			.....0	.....0	.....0	.....0	.....0	.....0	.....*	.....0	.....0	.....140,585,000
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	(7,527,000)



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8
		Ownership Percentage Column 2 of Column 1	Granted Disclaimer of Control\ Affiliation of Column 2 Over Column 1 (Yes/No)		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)
Insurers in Holding Company	Owners with Greater Than 10% Ownership			Ultimate Controlling Party			
American Empire Insurance Company .....	Great American Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Bridgefield Casualty Insurance Company .....	Great American Contemporary Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Bridgefield Employers Insurance Company .....	Great American Contemporary Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Bridgefield Indemnity Insurance Company .....	Great American Contemporary Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Great American Alliance Insurance Company .....	Great American Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Great American Assurance Company .....	Great American Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Great American Casualty Insurance Company .....	Great American Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Great American Contemporary Insurance Company .....	Great American Holding, Inc. ....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Great American E&S Insurance Company .....	Great American Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Great American Fidelity Insurance Company .....	Great American Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Great American Insurance Company .....	American Financial Group, Inc. ....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Great American Insurance Company of New York .....	Great American Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Great American Protection Insurance Company .....	Great American Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Great American Risk Solutions Surplus Lines Insurance Company .....	Great American Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Great American Security Insurance Company .....	Great American Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Great American Spirit Insurance Company .....	Great American Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Mid-Continent Assurance Company .....	Mid-Continent Casualty Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Mid-Continent Casualty Company .....	Great American Holding, Inc. ....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Mid-Continent Excess and Surplus Insurance Company	Mid-Continent Casualty Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
National Interstate Insurance Company .....	National Interstate Corporation .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
National Interstate Insurance Company of Hawaii, Inc. ....	National Interstate Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Oklahoma Surety Company .....	Mid-Continent Casualty Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Republic Indemnity Company of America .....	Great American Contemporary Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Republic Indemnity Company of California .....	Republic Indemnity Company of America .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Triumphe Casualty Company .....	National Interstate Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....NO.....
Vanliner Insurance Company .....	National Interstate Insurance Company .....	100.000	.....NO.....	American Financial Group, Inc. ....	N/A .....	.....0.000	.....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.

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

SUPPLEMENTAL FILINGS

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

MARCH FILING	
11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? .....	NO
12. Will the Financial Guaranty Insurance Exhibit be filed by March 1?.....	NO
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?.....	NO
14. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1? .....	NO
15. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? .....	NO
16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1? .....	NO
17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? ...	NO
18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?..	YES
20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1? .....	NO
22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1? .....	YES
24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? .....	NO
25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? .....	NO
26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?.....	NO
27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?.....	NO
28. Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?.....	YES
29. Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?.....	NO
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 Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1? .....	NO
35. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? .....	NO
36. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1? .....	NO
37. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1? .....	NO
AUGUST FILING	
38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? .....	YES
Explanations:	
11. The data for this supplement is not required to be filed.	
12. The data for this supplement is not required to be filed.	
13. The data for this supplement is not required to be filed.	
14. The data for this supplement is not required to be filed.	
15. The data for this supplement is not required to be filed.	
16. The data for this supplement is not required to be filed.	
17. The data for this supplement is not required to be filed.	
18. The data for this supplement is not required to be filed.	
20. The data for this supplement is not required to be filed.	
21. The data for this supplement is not required to be filed.	
22. The data for this supplement is not required to be filed.	
24. The data for this supplement is not required to be filed.	
25. The data for this supplement is not required to be filed.	
26. The data for this supplement is not required to be filed.	
27. The data for this supplement is not required to be filed.	
29. The Company does not write any of the lines of business required to be filed.	
30. The data for this supplement is not required to be filed.	
31. The data for this supplement is not required to be filed.	
32. The data for this supplement is not required to be filed.	
33. The data for this supplement is not required to be filed.	
34. The data for this supplement is not required to be filed.	
35. The data for this supplement is not required to be filed.	
36. The data for this supplement is not required to be filed.	
37. The data for this supplement is not required to be filed.	
Bar Codes:	
11. SIS Stockholder Information Supplement [Document Identifier 420]	
12. Financial Guaranty Insurance Exhibit [Document Identifier 240]	
13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
14. Supplement A to Schedule T [Document Identifier 455]	
15. Trusteed Surplus Statement [Document Identifier 490]	
16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]	

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

17.	Reinsurance Summary Supplemental Filing [Document Identifier 401]	 1 3 7 9 4 2 0 2 4 4 0 1 0 0 0 0 0
18.	Medicare Part D Coverage Supplement [Document Identifier 365]	 1 3 7 9 4 2 0 2 4 3 6 5 0 0 0 0 0
20.	Reinsurance Attestation Supplement [Document Identifier 399]	 1 3 7 9 4 2 0 2 4 3 9 9 0 0 0 0 0
21.	Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]	 1 3 7 9 4 2 0 2 4 4 0 0 0 0 0 0 0
22.	Bail Bond Supplement [Document Identifier 500]	 1 3 7 9 4 2 0 2 4 5 0 0 0 0 0 0 0
24.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 1 3 7 9 4 2 0 2 4 2 2 4 0 0 0 0 0
25.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 1 3 7 9 4 2 0 2 4 2 2 5 0 0 0 0 0
26.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 1 3 7 9 4 2 0 2 4 2 2 6 0 0 0 0 0
27.	Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]	 1 3 7 9 4 2 0 2 4 5 5 5 0 0 0 0 0
29.	Market Conduct Annual Statement (MCAS) Premium Exhibit [Document Identifier 600]	 1 3 7 9 4 2 0 2 4 6 0 0 0 0 0 0 0
30.	Credit Insurance Experience Exhibit [Document Identifier 230]	 1 3 7 9 4 2 0 2 4 2 3 0 0 0 0 0 0
31.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 1 3 7 9 4 2 0 2 4 3 0 6 0 0 0 0 0
32.	Accident and Health Policy Experience Exhibit [Document Identifier 210]	 1 3 7 9 4 2 0 2 4 2 1 0 0 0 0 0 0
33.	Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]	 1 3 7 9 4 2 0 2 4 2 1 6 0 0 0 0 0
34.	Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]	 1 3 7 9 4 2 0 2 4 5 5 0 0 0 0 0 0
35.	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]	 1 3 7 9 4 2 0 2 4 2 9 0 0 0 0 0 0
36.	Private Flood Insurance Supplement [Document Identifier 560]	 1 3 7 9 4 2 0 2 4 5 6 0 0 0 0 0 0
37.	Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]	 1 3 7 9 4 2 0 2 4 5 6 5 0 0 0 0 0

**OVERFLOW PAGE FOR WRITE-INS**

**NONE**



1 3 7 9 4 2 0 2 4 5 0 5 0 0 1 0 0

SUPPLEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

For The Year Ended December 31, 2024  
(To Be Filed by March 1)

NAIC Group Code 0084 NAIC Company Code 13794

Company Name MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

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

1. Monoline Policies

Direct Premiums		Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Written	2 Earned	3 Paid	4 Incurred	5 Paid	6 Incurred	7 Claims Made	8 Occurrence
\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0.0 %	0.0 %

2. Commercial Multiple Peril (CMP) Packaged Policies

- 2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy? Yes [ ] No [ X ]
- 2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated? Yes [ ] No [ X ]
- 2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&O liability coverage in CMP packaged policies

2.31 Amount quantified:\$ 0

2.32 Amount estimated using reasonable assumptions:\$ 0

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

Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Paid	2 Paid + Change in Case Reserves	3 Paid	4 Paid + Change in Case Reserves	5 Claims Made	6 Occurrence
\$ 0	\$ 0	\$ 0	\$ 0	0.0 %	0.0 %



SUPPLEMENT FOR THE YEAR 2024 OF THE MID-CONTINENT EXCESS AND SURPLUS INSURANCE COMPANY

EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS  
AS REPORTED ON LINE 17 OF THE EXHIBIT OF PREMIUMS AND LOSSES  
(To Be Filed by March 1)

NAIC Group Code 0084

NAIC Company Code 13794

	Direct Business Only			
	Prior Year	Current Year		
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
1. Completed operations .....	0	0	0	0
2. Errors & omissions (E&O) .....	0	0	0	0
3. Directors & officers (D&O) .....	0	0	0	0
4. Environmental liability .....	5,588,676	5,124,531	1,153,648	2,035,698
5. Excess workers' compensation .....	0	0	0	0
6. Commercial excess & umbrella .....	0	0	0	0
7. Personal umbrella .....	0	0	0	0
8. Employment liability .....	0	0	0	0
9. Aggregate write-ins for facilities & premises (CGL) .....	3,160,688	4,182,476	863,687	713,099
10. Internet & cyber liability .....	0	0	0	0
11. Aggregate write-ins for other .....	0	0	0	0
12. Total ASL 17 - other liability (sum of lines 1 through 11)	8,749,364	9,307,007	2,017,335	2,748,797
DETAILS OF WRITE-INS				
0901. Commercial General Liability (CGL) .....	3,160,688	4,182,476	863,687	713,099
0902. ....				
0903. ....				
0998. Summary of remaining write-ins for Line 9 from overflow page .....	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998)(Line 9 above)	3,160,688	4,182,476	863,687	713,099
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0