



ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2024
OF THE CONDITION AND AFFAIRS OF THE
BRANCH INSURANCE EXCHANGE

NAIC Group Code.....0000.....0000..... NAIC Company Code..... 16825..... Employer's ID Number..... 84-4471638.....
(Current)(Prior)
Organized under the Laws of.....OH..... State of Domicile or Port of Entry..... OH.....
Country of Domicile..... US.....
Incorporated/Organized.....07/23/2020..... Commenced Business.....07/23/2020.....
Statutory Home Office..... 20 E. Broad St., Suite 1200..... Columbus, OH, US 43215.....
Main Administrative Office..... 20 E. Broad St., Suite 1200.....
Columbus, OH, US 43215..... 833-427-2624.....
(Telephone)
Mail Address.....P.O. Box 68..... Portsmouth, NH, US 03802.....
Primary Location of Books and
Records..... 20 E. Broad St., Suite 1200.....
Columbus, OH, US 43215..... 833-427-2624.....
(Telephone)
Internet Website Address.....https://ourbranch.com.....
Statutory Statement Contact..... Susan Colleen Bredemann..... 833-427-2624.....
(Telephone)
susan.bredemann@ourbranch.com.....
(E-Mail) (Fax)

OFFICERS
Joseph Tierney Masters Emison, President..... Joseph Tierney Masters Emison, Secretary.....
Stephen Nicholas Lekas, Chief Executive Officer..... John Kenneth Wilcox Jr., Chief Financial Officer.....
OTHER
Melanie Rose Irvin#, VP, Head of Legal.....

DIRECTORS OR TRUSTEES
Vikas Singhal..... Joseph Tierney Masters Emison.....
Stephen Nicholas Lekas..... Joseph Benjamin Anderson Jr.....
Kyle Austin Beatty.....

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

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

x Joseph Tierney Masters Emison
President
x Joseph Tierney Masters Emison
Secretary
x John Kenneth Wilcox Jr.
Chief Financial Officer

Subscribed and sworn to before me
this 27th day of
FEBRUARY, 2025

x

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





EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ALASKA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												2,365
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)												2,365
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	2,039,399	1,798,441	—	1,068,222	985,542	917,673	697,545	8,820	41,945	56,524	330,812	60,822
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	2,474	3,456	—	1,523	—	—	—	—	—	—	401	74
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	27,772	23,075	—	15,617	—	18,060	59,150	—	118	388	4,505	828
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	908,339	867,714	—	322,748	2,358,179	1,019,430	1,896,071	101,954	211,696	246,588	147,342	27,090
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	947,050	912,409	—	341,936	326,289	261,549	26,587	370	(576)	6,781	153,622	28,244
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	3,925,035	3,605,096	—	1,750,046	3,670,010	2,216,712	2,679,353	111,144	253,183	310,281	636,682	117,059
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$20,229
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	1,415,706	764,204	—	870,301	367,711	253,400	242,924	—	6,743	12,401	229,643	43,950
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	1,153	395	—	758	—	—	—	—	—	—	187	36
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	14,632	9,228	—	8,201	—	7,780	11,400	—	50	74	2,374	454
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	18,556	12,388	—	7,643	4,564	(6,150)	2,006	—	(2)	309	3,010	576
19.2	Other Private Passenger Auto Liability	285,975	217,344	—	113,613	110,810	154,564	131,831	40	5,082	7,167	46,388	8,878
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	259,262	197,873	—	105,096	107,296	106,778	8,603	1,047	986	156	42,055	8,049
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	1,995,285	1,201,433	—	1,105,612	590,381	516,372	396,764	1,087	12,859	20,107	323,656	61,942
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$9,225

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	8,193	8,651	—	2,070	—	(303)	639	—	(3)	3	1,329	1,810
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial Guaranty												
11.1 Medical Professional Liability — Occurrence												
11.2 Medical Professional Liability — Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability—Occurrence												
17.2 Other Liability—Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability — Occurrence												
18.2 Products Liability — Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	(482)	298	—	—	—	(1,151)	100	—	(18)	5	(78)	(107)
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	(1,020)	629	—	—	—	(60)	—	—	—	—	(165)	(225)
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)	6,691	9,578	—	2,070	—	(1,514)	739	—	(21)	8	1,085	1,478
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$(9)
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												2,950
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)												2,950
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	1,052,269	1,079,500	—	277,381	1,537,812	1,457,382	532,792	908	29,738	36,899	170,689	60,927
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	1,434	1,199	—	482	6,897	6,897	—	—	—	—	233	83
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	1,200	1,032	—	416	—	880	1,000	—	—	1	195	70
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	611,412	701,369	—	137,934	1,061,967	1,255,990	812,762	2,863	59,968	72,968	99,178	35,401
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	335,042	377,798	—	73,838	320,000	271,228	17,432	160	86	909	54,347	19,399
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	2,001,357	2,160,898	—	490,051	2,926,676	2,992,377	1,363,986	3,931	89,792	110,777	324,641	115,879
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$9,520
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	2,815,816	2,829,445	—	1,304,562	4,438,737	4,459,363	1,144,442	20,192	90,082	92,619	456,755	61,284
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	4,496	5,356	—	2,412	—	—	—	—	—	—	729	98
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	16,984	24,104	—	7,861	—	20,040	37,760	—	132	248	2,755	370
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	497,297	636,029	—	130,502	518,841	610,061	881,389	21,160	47,949	51,218	80,667	10,823
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	529,905	677,004	—	126,959	506,699	407,740	37,423	30	(238)	1,778	85,956	11,533
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	3,864,498	4,171,938	—	1,572,296	5,464,277	5,497,204	2,101,014	41,382	137,925	145,863	626,863	84,108
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$14,376

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	1,697,583	1,714,199	—	777,907	1,683,024	1,081,424	841,909	8,565	39,106	53,773	275,366	33,877
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	1,919	1,595	—	1,200	—	—	—	—	—	—	311	38
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	25,541	31,261	—	10,749	—	25,070	58,070	—	154	371	4,143	510
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	542,300	664,877	—	132,512	1,085,751	905,609	957,517	65,900	128,252	106,756	87,967	10,822
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	644,320	808,855	—	154,079	409,139	318,898	614	3,111	1,984	2,859	104,516	12,858
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	2,911,664	3,220,788	—	1,076,447	3,177,914	2,331,001	1,858,111	77,576	169,496	163,758	472,303	58,105
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$20,379
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF IOWA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	844,406	581,549	—	479,737	887,308	1,274,124	546,916	5,670	23,105	21,290	136,972	16,221
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	2,862	2,011	—	1,550	—	—	—	—	—	—	464	55
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	20,638	15,430	—	11,917	—	12,830	23,050	—	81	147	3,348	396
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	178,896	177,628	—	60,595	202,053	249,014	195,992	2,869	26,039	27,149	29,019	3,437
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	314,180	295,151	—	104,684	299,653	280,321	1,435	583	574	513	50,963	6,035
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	1,360,982	1,071,769	—	658,483	1,389,015	1,816,288	767,393	9,122	49,799	49,099	220,766	26,144
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$7,113
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	614,042	492,496	—	305,868	228,821	21,138	61,902	18,584	38,310	18,627	99,604	63,648
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	880	618	—	619	—	—	—	—	—	—	143	91
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	5,952	5,592	—	2,623	—	4,600	7,930	—	26	46	965	617
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	32,077	37,772	—	6,870	33,185	15,319	12,457	—	1,099	2,492	5,203	3,325
19.2	Other Private Passenger Auto Liability	215,700	232,283	—	55,208	252,806	217,709	197,750	16,527	22,322	11,844	34,989	22,358
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	198,538	201,017	—	57,343	96,980	86,991	5,510	3,074	2,994	300	32,205	20,579
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	1,067,189	969,778	—	428,531	611,792	345,756	285,549	38,185	64,750	33,308	173,110	110,618
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$93,097

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	-	875	-	-	-	(147)	20	-	(1)	-	-	(1,612)
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	-	875	-	-	-	(147)	20	-	(1)	-	-	(1,612)
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	801,861	931,024	—	341,050	335,288	(3,059)	256,594	—	9,445	22,614	130,071	19,346
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	839	1,003	—	158	—	—	—	—	—	—	136	20
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	6,350	14,039	—	2,939	—	10,800	35,320	—	69	228	1,030	153
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	46,426	78,862	—	10,216	158,386	136,578	58,199	17,358	28,813	30,215	7,531	1,120
19.2	Other Private Passenger Auto Liability	391,169	674,218	—	91,635	2,307,947	589,132	1,664,046	59,010	119,822	199,265	63,452	9,437
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	431,717	732,467	—	81,370	576,642	425,272	17,681	1,571	138	7,590	70,029	10,416
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	1,678,362	2,431,613	—	527,368	3,378,262	1,158,725	2,031,840	77,939	158,287	259,912	272,248	40,492
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$7,949

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	872,051	544,283	—	538,760	466,708	562,269	196,294	—	7,359	9,344	141,456	59,236
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	1,582	1,032	—	733	—	—	—	—	—	—	257	107
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	23,440	14,353	—	14,482	—	11,840	21,270	—	78	140	3,802	1,592
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	260,273	188,137	—	106,512	213,988	444,039	431,135	24,188	35,754	19,189	42,219	17,680
19.2	Other Private Passenger Auto Liability	322,648	235,136	—	133,026	12,888	100,718	210,918	272	8,765	11,164	52,337	21,917
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	608,367	453,996	—	246,913	358,538	395,589	60,313	70	162	839	98,683	41,324
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	2,088,361	1,436,937	—	1,040,426	1,052,123	1,514,455	919,930	24,530	52,118	40,676	338,754	141,856
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$92,526

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	54,571	50,401	—	20,810	37,942	16,910	6,596	—	352	591	8,852	2,821
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	41,767	41,178	—	11,290	19,601	34,599	24,475	—	989	1,151	6,775	2,159
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	43,790	41,494	—	12,230	11,575	9,480	421	—	1	26	7,103	2,264
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	140,128	133,073	—	44,330	69,118	60,989	31,492	—	1,342	1,768	22,730	7,244
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$1,176
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	3,760,043	3,283,792	—	1,795,471	4,131,711	2,474,281	1,230,191	30,682	83,144	89,169	609,919	93,623
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	7,773	5,063	—	4,410	—	—	—	—	—	—	1,261	194
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	39,535	44,893	—	19,960	—	36,460	78,200	—	238	510	6,413	984
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	1,035,092	1,129,373	—	303,858	1,721,994	1,250,188	1,693,260	47,255	112,630	110,869	167,903	25,773
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	934,654	1,036,125	—	274,161	697,670	596,215	13,973	30	(701)	3,575	151,611	23,272
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	5,777,097	5,499,246	—	2,397,860	6,551,376	4,357,145	3,015,624	77,967	195,311	204,123	937,107	143,846
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$21,745
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MONTANA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	1,512,568	953,012	—	843,967	212,615	320,435	163,351	—	4,198	5,331	245,355	50,653
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	931	384	—	588	—	—	—	—	—	—	151	31
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	36,449	21,598	—	20,629	—	18,500	23,640	—	122	155	5,912	1,221
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	654,152	542,238	—	217,965	222,814	473,036	468,657	728	14,665	18,684	106,110	21,906
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	651,119	536,813	—	216,211	483,651	513,678	46,644	210	526	591	105,619	21,805
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	2,855,219	2,054,045	—	1,299,360	919,080	1,325,649	702,292	938	19,511	24,761	463,147	95,615
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$12,811

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	933,683	650,029	—	601,761	585,383	590,353	188,409	—	8,614	11,924	151,453	18,187
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	1,324	974	—	818	—	—	—	—	—	—	215	26
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	10,471	7,067	—	7,226	—	5,770	11,570	—	38	75	1,699	204
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	118,074	125,353	—	38,434	99,067	320	66,601	4,075	6,992	12,836	19,153	2,300
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	120,894	132,374	—	38,162	93,730	84,975	722	—	(135)	538	19,610	2,355
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	1,184,446	915,797	—	686,401	778,180	681,418	267,302	4,075	15,509	25,373	192,130	23,071
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$2,785

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	234,458	166,293	—	121,324	148,234	131,062	25,553	—	2,198	3,327	38,031	10,132
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	1,523	1,313	—	597	—	1,070	1,880	—	7	12	247	66
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	36,817	41,657	—	9,226	10,525	(22,811)	14,520	—	(38)	1,071	5,972	1,591
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	24,722	31,437	—	7,834	25,502	22,265	1,524	20	30	47	4,010	1,068
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	297,519	240,699	—	138,981	184,261	131,586	43,477	20	2,197	4,457	48,261	12,858
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$1,182

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												1,900
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)												1,900
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	33,126	29,884	—	15,617	25,771	19,383	9,469	—	389	642	5,373	958
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	106	1	—	105	—	—	—	—	—	—	17	3
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	1,447	1,398	—	469	—	1,130	2,080	—	10	17	235	42
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	3,464	3,314	—	786	—	70	320	—	8	13	562	100
19.2	Other Private Passenger Auto Liability	17,224	16,750	—	3,954	14,828	14,399	4,255	—	508	777	2,794	498
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	27,515	26,397	—	7,612	39,314	33,690	1,106	—	2	92	4,463	796
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	82,883	77,745	—	28,543	79,914	68,672	17,230	—	917	1,541	13,444	2,396
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$597

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	2,822,829	2,886,115	—	1,337,887	3,433,395	3,168,638	1,448,052	14,805	93,828	128,367	457,893	248,052
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	5,814	6,801	—	3,556	—	—	—	—	—	—	943	511
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	21,784	36,004	—	10,232	—	27,510	87,810	—	182	575	3,533	1,914
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	534,352	689,120	—	119,849	1,078,495	(103,171)	955,898	26,208	61,587	131,706	86,678	46,955
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	494,477	689,531	—	108,944	458,295	387,962	12,781	1,328	14,268	19,946	80,209	43,451
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	3,879,255	4,307,570	—	1,580,468	4,970,185	3,480,938	2,504,540	42,342	169,865	280,593	629,257	340,884
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$20,397

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	1,684,363	2,739,482	—	668,138	2,710,935	1,908,466	636,341	4,972	70,765	110,175	273,222	54,138
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	1,467	3,546	—	223	—	—	—	—	—	—	238	47
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	15,864	40,665	—	5,447	—	31,920	99,310	—	208	648	2,573	510
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	—	—	—	—	9,258	10,000	742	—	—	—	—	—
19.2	Other Private Passenger Auto Liability	413,699	700,742	—	75,438	1,179,018	863,037	857,902	43,391	97,430	101,967	67,107	13,297
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	504,134	835,024	—	89,053	536,764	414,546	6,864	2,053	525	3,592	81,776	16,203
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	2,619,527	4,319,459	—	838,299	4,435,975	3,227,969	1,601,159	50,417	168,928	216,382	424,915	84,195
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$11,882
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OREGON DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	551,126	480,326	—	253,987	248,328	39,805	198,906	—	3,576	7,967	89,399	11,269
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	206	184	—	154	—	—	—	—	—	—	33	4
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	14,184	14,624	—	7,223	—	11,940	23,380	—	77	151	2,301	290
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	49,081	47,079	—	16,087	60,488	60,032	28,896	—	2,587	4,634	7,961	1,004
19.2	Other Private Passenger Auto Liability	295,773	295,090	—	92,583	65,073	247,333	336,196	1,853	14,213	17,069	47,978	6,048
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	240,825	250,188	—	67,848	185,558	169,954	5,875	581	601	454	39,064	4,924
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	1,151,195	1,087,491	—	437,882	559,447	529,065	593,254	2,434	21,054	30,275	186,736	23,539
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$5,995

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	817,034	880,999	—	336,369	977,815	489,824	704,834	4,582	23,531	30,095	132,532	54,307
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	899	841	—	309	—	—	—	—	—	—	146	60
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	8,073	9,011	—	2,868	500,000	7,310	513,970	—	50	6,621	1,310	537
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	54,513	81,472	—	10,656	148,976	139,712	67,515	27,074	35,890	13,535	8,843	3,623
19.2	Other Private Passenger Auto Liability	402,574	583,085	—	86,203	1,267,647	904,096	1,232,483	35,338	76,533	85,882	65,302	26,759
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	654,699	902,652	—	130,313	728,640	512,500	(1,415)	460	14	3,412	106,199	43,517
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	1,937,792	2,458,060	—	566,718	3,623,079	2,053,443	2,517,387	67,453	136,018	139,545	314,331	128,803
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$12,404

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												904
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)												904
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	22,725,372	34,514,522	—	12,731,431	57,707,511	41,651,832	12,758,701	232,807	1,160,362	1,525,006	3,686,295	626,887
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	16,373	34,883	—	8,500	7,119	7,119	—	—	—	—	2,656	452
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	92,270	280,964	—	45,551	—	216,870	1,673,710	—	1,417	14,452	14,967	2,545
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	180,916	265,832	—	34,373	489,815	378,342	140,309	—	21,872	45,848	29,346	4,991
19.2	Other Private Passenger Auto Liability	3,313,097	5,331,107	—	631,594	13,035,715	9,280,742	11,430,137	470,109	919,324	934,686	537,420	91,393
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	3,842,109	6,274,025	—	662,626	4,025,541	3,057,022	84,183	2,222	(10,247)	39,785	623,231	105,986
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	30,170,138	46,701,334	—	14,114,075	75,265,700	54,591,928	26,087,040	705,138	2,092,728	2,559,777	4,893,916	832,253
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$64,730
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF UTAH DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	526,771	470,957	—	283,199	138,763	64,832	94,566	—	3,590	7,629	85,448	15,879
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	314	123	—	297	—	—	—	—	—	—	51	9
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	7,378	7,674	—	5,236	—	6,040	18,260	—	37	117	1,197	222
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	10,564	13,001	—	3,423	22,222	12,651	9,441	—	1,086	2,586	1,714	318
19.2	Other Private Passenger Auto Liability	212,484	250,806	—	65,879	316,262	57,221	219,543	20	10,613	28,756	34,467	6,405
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	141,147	166,966	—	41,038	111,424	103,151	9,596	30	(223)	846	22,896	4,255
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	898,657	909,526	—	399,072	588,670	243,894	351,406	50	15,104	39,934	145,772	27,088
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$4,530
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	106,998	111,781	—	47,500	64,649	(2,400)	230,241	—	5,575	13,357	17,356	8,812
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine												
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence												
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	45,351	54,785	—	11,008	9,424	16,246	35,284	—	985	2,099	7,357	3,735
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	48,068	55,496	—	12,485	17,450	13,501	1,365	—	(45)	136	7,797	3,959
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	200,417	222,062	—	70,993	91,522	27,347	266,890	—	6,515	15,592	32,510	16,506
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$1,338
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	370,599	377,177	—	177,963	485,042	472,697	154,996	2,675	13,402	10,460	60,115	5,075
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	756	1,033	—	85	—	(5,001)	—	—	—	—	123	10
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	4,611	9,878	—	2,416	—	7,700	21,810	—	52	145	748	63
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability	101,854	149,508	—	21,768	236,220	92,749	150,988	—	7,500	17,633	16,522	1,395
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	114,145	170,765	—	21,404	115,986	106,156	4,126	120	(271)	1,288	18,515	1,563
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	591,965	708,361	—	223,636	837,248	674,301	331,919	2,795	20,683	29,526	96,023	8,106
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$3,085

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



EXHIBIT OF PREMIUMS AND LOSSES

GRAND TOTAL DURING THE YEAR 2024

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril	48,294,869	58,339,439	—	25,201,282	81,839,046	61,369,383	22,372,183	353,263	1,759,352	2,268,133	7,833,940	1,628,419
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland marine	53,602	70,498	—	28,480	14,016	9,015	—	—	—	—	8,695	1,950
9.2	Pet insurance plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability — Occurrence												
11.2	Medical Professional Liability — Claims-Made												
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)												
14.	Credit A&H (Group and Individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability—Occurrence	396,096	613,201	—	202,659	500,000	484,120	2,810,570	—	3,146	25,121	64,251	13,588
17.2	Other Liability—Claims-Made												
17.3	Excess Workers' Compensation												
18.1	Products Liability — Occurrence												
18.2	Products Liability — Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	655,871	727,858	—	196,566	1,140,882	1,190,594	751,020	68,620	127,107	118,821	106,389	32,737
19.2	Other Private Passenger Auto Liability	11,175,565	14,357,689	—	2,866,822	27,187,926	18,209,062	24,438,574	899,571	1,953,807	2,199,309	1,812,797	400,270
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	12,109,659	15,806,486	—	2,982,139	10,532,335	8,579,399	363,364	17,071	10,457	96,052	1,964,316	433,631
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	72,685,661	89,915,170	—	31,477,948	121,214,205	89,841,574	50,735,711	1,338,524	3,853,869	4,707,436	11,790,387	2,510,595
Details of Write-Ins													
3401.	None												
3402.	None												
3403.	None												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$439,059

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

(20) Schedule F - Part 1 (\$000's Omitted)

NONE

(21) Schedule F - Part 2

NONE

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable On									16	Reinsurance Payable		19	20
						7	8	9	10	11	12	13	14	15		17	18		
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Special Code	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commissions	Cols. 7 through 14 Totals	Amount in Dispute Included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable From Reinsurers Cols. 15- [17+18]	Funds Held by Company Under Reinsurance Treaties
Total Authorized, Other U.S. Unaffiliated Insurers																			
87-2252307	22225	TRISURA INSURANCE COMPANY	OK		57							15		15				15	
36-2661954	10103	AMERICAN AGRICULTURAL INS CO	IN		154							26		26				26	
75-1444207	30058	SCOR REINS CO	NY		(634)	3,188	332	4,938	306	4,913	1,566			15,243		363		14,880	
13-2673100	22039	GENERAL REINS CORP	DE		14,647	2,861	204	1,929	54	2,515	232	7,504		15,299		8,864		6,435	
04-1543470	23043	LIBERTY MUT INS CO	MA		622	15		17		10	5	323		370		35		335	
47-0698507	23680	ODYSSEY REINS CO	CT		(11)							13		13				13	
47-0574325	32603	BERKLEY INS CO	DE		3,244	1,285	136	182	6	266	33	908		2,816		(151)		2,967	
13-1675535	25364	SWISS REINS AMER CORP	NY		2,407	126	20	108	2	143	9	1,755		2,163		1,801		362	
95-2769232	27847	INSURANCE CO OF THE WEST	CA		10,209	2,798	230	892	26	1,351	88	4,004		9,389		1,151		8,238	
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers					30,695	10,273	922	8,066	394	9,198	1,933	14,548		45,334		12,063		33,271	
Total Authorized, Pools, Mandatory Pools																			
AA-9991500		ILLINOIS MINE SUBSIDENCE FUND	IL		4														
AA-9991506		WEST VIRGINIA MINE SUBSIDENCE FUND	WV		1														
AA-9991159		MICHIGAN CATASTROPHIC CLAIMS ASSN	MI		49							20		20				20	
1099999 – Total Authorized, Pools, Mandatory Pools					54							20		20				20	
Total Authorized, Other Non-U.S. Insurers																			
AA-1120157		Lloyd's Syndicate Number 1729	GBR		145							24		24				24	
AA-1128001		Lloyd's Syndicate Number 2001	GBR		254							71		71				71	
AA-1120084		Lloyd's Syndicate Number 1955	GBR		139	16	13	3			16			48		17		31	
AA-1126609		Lloyd's Syndicate Number 609	GBR		4		10	1			2			13		4		9	
AA-1127084		Lloyd's Syndicate Number 1084	GBR		394							76		76				76	
AA-3194122		DaVinci Reins Ltd	BMU		337							56		56				56	
AA-1126033		Lloyd's Syndicate Number 33	GBR		65							17		17				17	
AA-1128791		Lloyd's Syndicate Number 2791	GBR		224							59		59				59	
AA-3190339		RENAISSANCE REINS LTD	BMU		337							56		56				56	
AA-1340125		Hannover Rueck SE	DEU		5,997	1,811	174	1,485	43	1,487	242	2,883		8,125		2,823		5,302	
1299999 – Total Authorized, Other Non-U.S. Insurers					7,896	1,827	197	1,489	43	1,487	260	3,242		8,545		2,844		5,701	
1499999 – Total Authorized Excluding Protected Cells					38,645	12,100	1,119	9,555	437	10,685	2,193	17,810		53,899		14,907		38,992	
Total Unauthorized, Other Non-U.S. Insurers																			
AA-3191314		Prospero Re Ltd	BMU		1,000														
AA-1360015		ASSICURAZIONI GEN S P A	ITA		6,250														
AA-3770492		Topsail Reins Spc Ltd	CYM		7,184	1,645	134	283	5	345	26	3,115		5,553		2,632		2,921	
AA-3770540		NORTHERN REINS SPC LTD	CYM		5,407	2,935	289	196	4	231	19	1,711		5,385		2,379		3,006	
2699999 – Total Unauthorized, Other Non-U.S. Insurers					19,841	4,580	423	479	9	576	45	4,826		10,938		5,011		5,927	
2899999 – Total Unauthorized Excluding Protected Cells					19,841	4,580	423	479	9	576	45	4,826		10,938		5,011		5,927	
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																			
RJ-3190875		Hiscox Ins Co (Bermuda) Ltd	BMU		65							17		17				17	
RJ-3194126		Arch Reins Ltd	BMU		707	43	45	10	1	7	47			153		52		101	
5499999 – Total Reciprocal Jurisdiction, Other Non-U.S. Insurers					772	43	45	10	1	7	47			170		52		118	
5699999 – Total Reciprocal Jurisdiction Excluding Protected Cells					772	43	45	10	1	7	47			170		52		118	
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells					59,258	16,723	1,587	10,044	447	11,268	2,285	22,653		65,007		19,970		45,037	
9999999 – Totals					59,258	16,723	1,587	10,044	447	11,268	2,285	22,653		65,007		19,970		45,037	

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
ID Number From Col. 1	Name of Reinsurer From Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 – 27)	Stressed Recoverable (Col. 28*120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29 – 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 – 32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
Total Authorized, Other U.S. Unaffiliated Insurers																	
87-2252307	TRISURA INSURANCE COMPANY						15	–	15	18		18		18	4		1
36-2661954	AMERICAN AGRICULTURAL INS CO						26	–	26	31		31		31	3		1
75-1444207	SCOR REINS CO					363	14,880	–	15,243	18,292	363	17,929		17,929	3		502
13-2673100	GENERAL REINS CORP					8,864	6,435	–	15,299	18,359	8,864	9,495		9,495	1		152
04-1543470	LIBERTY MUT INS CO					35	335	–	370	444	35	409		409	3		11
47-0698507	ODYSSEY REINS CO						13	–	13	16		16		16	2		–
47-0574325	BERKLEY INS CO					(151)	2,967	–	2,816	3,379	(151)	3,530		3,530	2		74
13-1675535	SWISS REINS AMER CORP					1,801	362	–	2,163	2,596	1,801	795		795	2		17
95-2769232	INSURANCE CO OF THE WEST					1,151	8,238	–	9,389	11,267	1,151	10,116		10,116	3		283
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers				XXX		12,063	33,271	–	45,334	54,401	12,063	42,338		42,338	XXX		1,041
Total Authorized, Pools, Mandatory Pools																	
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND							–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991506	WEST VIRGINIA MINE SUBSIDENCE FUND							–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN						20	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999 – Total Authorized, Pools, Mandatory Pools				XXX			20	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Total Authorized, Other Non-U.S. Insurers																	
AA-1120157	Lloyd's Syndicate Number 1729						24	–	24	29		29		29	2		1
AA-1128001	Lloyd's Syndicate Number 2001						71	–	71	85		85		85	2		2
AA-1120084	Lloyd's Syndicate Number 1955					17	31	–	48	58	17	41		41	2		1
AA-1126609	Lloyd's Syndicate Number 609					4	9	–	13	16	4	12		12	2		–
AA-1127084	Lloyd's Syndicate Number 1084						76	–	76	91		91		91	2		2
AA-3194122	DaVinci Reins Ltd						56	–	56	67		67		67	3		2
AA-1126033	Lloyd's Syndicate Number 33						17	–	17	20		20		20	2		–
AA-1128791	Lloyd's Syndicate Number 2791						59	–	59	71		71		71	2		1
AA-3190339	RENAISSANCE REINS LTD						56	–	56	67		67		67	2		1
AA-1340125	Hannover Rueck SE					2,823	5,302	–	8,125	9,750	2,823	6,927		6,927	2		145
1299999 – Total Authorized, Other Non-U.S. Insurers				XXX		2,844	5,701	–	8,545	10,254	2,844	7,410		7,410	XXX		156
1499999 – Total Authorized Excluding Protected Cells				XXX		14,907	38,992	–	53,879	64,655	14,907	49,748		49,748	XXX		1,197
Total Unauthorized, Other Non-U.S. Insurers																	
AA-3191314	Prospero Re Ltd							–	–	–		–		–	6		–
AA-1360015	ASSICURAZIONI GEN S P A							–	–	–		–		–	2		–
AA-3770492	Topsail Reins Spc Ltd		2,921	0001		5,553	–	–	5,553	6,664	2,632	4,032	2,921	1,111	6	88	133
AA-3770540	NORTHERN REINS SPC LTD				4,442	5,385	–	–	5,385	6,462	2,379	4,083	4,083	–	6	122	–
2699999 – Total Unauthorized, Other Non-U.S. Insurers			2,921	XXX	4,442	10,938	–	–	10,938	13,126	5,011	8,115	7,004	1,111	XXX	210	133
2899999 – Total Unauthorized Excluding Protected Cells			2,921	XXX	4,442	10,938	–	–	10,938	13,126	5,011	8,115	7,004	1,111	XXX	210	133
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																	
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd						17	–	17	20		20		20	3		1
RJ-3194126	Arch Reins Ltd					52	101	–	153	184	52	132		132	2		3
5499999 – Total Reciprocal Jurisdiction, Other Non-U.S. Insurers				XXX		52	118	–	170	204	52	152		152	XXX		3
5699999 – Total Reciprocal Jurisdiction Excluding Protected Cells				XXX		52	118	–	170	204	52	152		152	XXX		3

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
ID Number From Col. 1	Name of Reinsurer From Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 – 27)	Stressed Recoverable (Col. 28*120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29 – 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 – 32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells			2,921	XXX	4,442	25,897	39,110	–	64,987	77,984	19,970	58,014	7,004	51,010	XXX	210	1,334
9999999 – Totals			2,921	XXX	4,442	25,897	39,110	–	64,987	77,984	19,970	58,014	7,004	51,010	XXX	210	1,334

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44	45	46	47	48	49	50	51	52	53
		37	38	39	40	41	42	43										
ID Number From Col. 1	Name of Reinsurer From Col. 3	Current	Overdue 1 - 29 Days	Overdue 30 - 90 Days	Overdue 91 - 120 Days	Overdue Over 120 Days	Overdue Total Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43 – 44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
Total Authorized, Other U.S. Unaffiliated Insurers																		
87-2252307	TRISURA INSURANCE COMPANY											–				–	YES	–
36-2661954	AMERICAN AGRICULTURAL INS CO											–				–	YES	–
75-1444207	SCOR REINS CO	3,520						3,520			3,520	–			–		YES	–
13-2673100	GENERAL REINS CORP	1,092	1,973				1,973	3,065			3,065	–		64.372	–		YES	–
04-1543470	LIBERTY MUT INS CO	15						15			15	–			–		YES	–
47-0698507	ODYSSEY REINS CO											–				–	YES	–
47-0574325	BERKLEY INS CO	480	941				941	1,421			1,421	–		66.221	–		YES	–
13-1675535	SWISS REINS AMER CORP	49	97				97	146			146	–		66.438	–		YES	–
95-2769232	INSURANCE CO OF THE WEST	1,016	2,012				2,012	3,028			3,028	–		66.446	–		YES	–
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers		6,172	5,023				5,023	11,195			11,195	–		44.868	–		XXX	–
Total Authorized, Pools, Mandatory Pools																		
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND											–				–	YES	–
AA-9991506	WEST VIRGINIA MINE SUBSIDENCE FUND											–				–	YES	–
	MICHIGAN CATASTROPHIC CLAIMS ASSN											–				–	YES	–
1099999 – Total Authorized, Pools, Mandatory Pools												–		–	–	–	XXX	–
Total Authorized, Other Non-U.S. Insurers																		
AA-1120157	Lloyd's Syndicate Number 1729											–				–	YES	–
AA-1128001	Lloyd's Syndicate Number 2001											–				–	YES	–
AA-1120084	Lloyd's Syndicate Number 1955	29						29			29	–			–		YES	–
AA-1126609	Lloyd's Syndicate Number 609	10						10			10	–			–		YES	–
AA-1127084	Lloyd's Syndicate Number 1084											–				–	YES	–
AA-3194122	DaVinci Reins Ltd											–				–	YES	–
AA-1126033	Lloyd's Syndicate Number 33											–				–	YES	–
AA-1128791	Lloyd's Syndicate Number 2791											–				–	YES	–
AA-3190339	RENAISSANCE REINS LTD											–				–	YES	–
AA-1340125	Hannover Rueck SE	812	1,173				1,173	1,985			1,985	–		59.093	–		YES	–
1299999 – Total Authorized, Other Non-U.S. Insurers		851	1,173				1,173	2,024			2,024	–		57.955	–		XXX	–
1499999 – Total Authorized Excluding Protected Cells		7,023	6,196				6,196	13,219			13,219	–		46.872	–		XXX	–
Total Unauthorized, Other Non-U.S. Insurers																		
AA-3191314	Prospero Re Ltd											–				–	YES	–
AA-1360015	ASSICURAZIONI GEN S P A											–				–	YES	–
AA-3770492	Topsail Reins Spc Ltd	599	1,180				1,180	1,779			1,779	–		66.329	–		YES	–
AA-3770540	NORTHERN REINS SPC LTD	620	1,230	1,374			2,604	3,224			3,224	–		80.769	–		YES	–
2699999 – Total Unauthorized, Other Non-U.S. Insurers		1,219	2,410	1,374			3,784	5,003			5,003	–		75.635	–		XXX	–
2899999 – Total Unauthorized Excluding Protected Cells		1,219	2,410	1,374			3,784	5,003			5,003	–		75.635	–		XXX	–
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																		
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd											–		–		–	YES	–
RJ-3194126	Arch Reins Ltd	88						88			88	–				–	YES	–
5499999 – Total Reciprocal Jurisdiction, Other Non-U.S. Insurers		88						88			88	–				–	XXX	–
5699999 – Total Reciprocal Jurisdiction Excluding Protected Cells		88						88			88	–				–	XXX	–

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44	45	46	47	48	49	50	51	52	53
		37	38	39	40	41	42	43	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43 – 44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
ID Number From Col. 1	Name of Reinsurer From Col. 3	Current	Overdue 1 - 29 Days	Overdue 30 - 90 Days	Overdue 91 - 120 Days	Overdue Over 120 Days	Overdue Total Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)										
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		8,330	8,606	1,374			9,980	18,310			18,310	–		54.506	–		.XXX	–
9999999 – Totals		8,330	8,606	1,374			9,980	18,310			18,310	–		54.506	–		.XXX	–

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Provision for Certified Reinsurance														Complete if Col. 52 = "No"; Otherwise Enter 0			69
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68			
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col.24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 +[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col.24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 -Col. 66)	20% of Amount in Col. 67			
ID Number From Col. 1	Name of Reinsurer From Col. 3																		
Total Authorized, Other U.S. Unaffiliated Insurers																			
87-2252307	TRISURA INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
36-2661954	AMERICAN AGRICULTURAL INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
75-1444207	SCOR REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-2673100	GENERAL REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
04-1543470	LIBERTY MUT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
47-0698507	ODYSSEY REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
47-0574325	BERKLEY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-1675535	SWISS REINS AMER CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
95-2769232	INSURANCE CO OF THE WEST	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
Total Authorized, Pools, Mandatory Pools																			
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-9991506	WEST VIRGINIA MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1099999 – Total Authorized, Pools, Mandatory Pools		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
Total Authorized, Other Non-U.S. Insurers																			
AA-1120157	Lloyd's Syndicate Number 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1128001	Lloyd's Syndicate Number 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120084	Lloyd's Syndicate Number 1955	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1126609	Lloyd's Syndicate Number 609	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1127084	Lloyd's Syndicate Number 1084	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3194122	DaVinci Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1126033	Lloyd's Syndicate Number 33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1128791	Lloyd's Syndicate Number 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3190339	RENAISSANCE REINS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1340125	Hannover Rueck SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1299999 – Total Authorized, Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1499999 – Total Authorized Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
Total Unauthorized, Other Non-U.S. Insurers																			
AA-3191314	Prospero Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1360015	ASSICURAZIONI GEN S P A	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3770492	Topsail Reins Spc Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3770540	NORTHERN REINS SPC LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2699999 – Total Unauthorized, Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2899999 – Total Unauthorized Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																			
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
RJ-3194126	Arch Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
5499999 – Total Reciprocal Jurisdiction, Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
5699999 – Total Reciprocal Jurisdiction Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Provision for Certified Reinsurance															
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0			69
														66	67	68	
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements [(Col. 20 + Col. 21 + Col. 22 + Col.24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 +[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col.24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	20% of Amount in Col. 67	Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
ID Number From Col. 1	Name of Reinsurer From Col. 3																
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		XXX	XXX	XXX				XXX	XXX								
9999999 – Totals		XXX	XXX	XXX				XXX	XXX								

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	70	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73	74	75	76	77	78
		20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col 26 * 20% or [Cols. 40 + 41] * 20%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
ID Number From Col. 1	Name of Reinsurer From Col. 3									
Total Authorized, Other U.S. Unaffiliated Insurers										
87-2252307	TRISURA INSURANCE COMPANY	—	XXX	XXX	—	—	—	XXX	XXX	—
36-2661954	AMERICAN AGRICULTURAL INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
75-1444207	SCOR REINS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
13-2673100	GENERAL REINS CORP	—	XXX	XXX	—	—	—	XXX	XXX	—
04-1543470	LIBERTY MUT INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
47-0698507	ODYSSEY REINS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
47-0574325	BERKLEY INS CO	—	XXX	XXX	—	—	—	XXX	XXX	—
13-1675535	SWISS REINS AMER CORP	—	XXX	XXX	—	—	—	XXX	XXX	—
95-2769232	INSURANCE CO OF THE WEST	—	XXX	XXX	—	—	—	XXX	XXX	—
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers		—	XXX	XXX	—	—	—	XXX	XXX	—
Total Authorized, Pools, Mandatory Pools										
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-9991506	WEST VIRGINIA MINE SUBSIDENCE FUND	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN	—	XXX	XXX	—	—	—	XXX	XXX	—
1099999 – Total Authorized, Pools, Mandatory Pools		—	XXX	XXX	—	—	—	XXX	XXX	—
Total Authorized, Other Non-U.S. Insurers										
AA-1120157	Lloyd's Syndicate Number 1729	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1128001	Lloyd's Syndicate Number 2001	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1120084	Lloyd's Syndicate Number 1955	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1126609	Lloyd's Syndicate Number 609	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1127084	Lloyd's Syndicate Number 1084	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-3194122	DaVinci Reins Ltd	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1126033	Lloyd's Syndicate Number 33	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1128791	Lloyd's Syndicate Number 2791	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-3190339	RENAISSANCE REINS LTD	—	XXX	XXX	—	—	—	XXX	XXX	—
AA-1340125	Hannover Rueck SE	—	XXX	XXX	—	—	—	XXX	XXX	—
1299999 – Total Authorized, Other Non-U.S. Insurers		—	XXX	XXX	—	—	—	XXX	XXX	—
1499999 – Total Authorized Excluding Protected Cells		—	XXX	XXX	—	—	—	XXX	XXX	—
Total Unauthorized, Other Non-U.S. Insurers										
AA-3191314	Prospero Re Ltd	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-1360015	ASSICURAZIONI GEN S P A	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-3770492	Topsail Reins Spc Ltd	—	—	—	XXX	XXX	XXX	—	XXX	—
AA-3770540	NORTHERN REINS SPC LTD	—	—	—	XXX	XXX	XXX	—	XXX	—
2699999 – Total Unauthorized, Other Non-U.S. Insurers		—	—	—	XXX	XXX	XXX	—	XXX	—
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers										
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd	—	XXX	XXX	—	—	—	XXX	XXX	—
RJ-3194126	Arch Reins Ltd	—	XXX	XXX	—	—	—	XXX	XXX	—
5499999 – Total Reciprocal Jurisdiction, Other Non-U.S. Insurers		—	XXX	XXX	—	—	—	XXX	XXX	—
5699999 – Total Reciprocal Jurisdiction Excluding Protected Cells		—	XXX	XXX	—	—	—	XXX	XXX	—
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		—	—	—	—	—	—	—	—	—

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

1	2	70	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73	74	75	76	77	78
					Complete if Col. 52 = "Yes"; Otherwise Enter 0	Complete if Col. 52 = "No"; Otherwise Enter 0				
		20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col 26 * 20% or [Cols. 40 + 41] * 20%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
ID Number From Col. 1	Name of Reinsurer From Col. 3									
9999999 – Totals		—	—	—	—	—	—	—	—	—

SCHEDULE F - PART 4

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

1	2	3	4	5
Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
.....0001 1026009593.....	BANK OF AMERICA N.A..... 2,921
9999999 – Totals.....			 2,921

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.	LIBERTY MUTUAL INSURANCE CO.....	35.000	622
2.	GENERAL REINS CORP.....	24.500	14,647
3.	INSURANCE COMPANY OF THE WEST.....	24.500	10,209
4.	TOPSAIL.....	24.500	7,184
5.	HANNOVER RUECK SE.....	24.500	5,997

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.	GENERAL REINS CORP.....	15,299	(634)	NO
7.	SCOR REINS CO.....	15,243	14,647	NO
8.	INSURANCE CO OF THE WEST.....	9,389	10,209	NO
9.	HANNOVER RUECK SE.....	8,125	5,997	NO
10.....	TOPSAIL REINS SPC LTD.....	5,553	7,184	NO

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1	2	3
	As Reported (Net of Ceded)	Restatement Adjustments	Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	70,707,850		70,707,850
2. Premiums and considerations (Line 15)	4,225,445		4,225,445
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	18,309,909	(18,309,909)	–
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	9,027,677		9,027,677
6. Net amount recoverable from reinsurers		45,038,233	45,038,233
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	102,270,881	26,728,324	128,999,205
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	33,035,609	24,045,939	57,081,548
10. Taxes, expenses, and other obligations (Lines 4 through 8)	1,077,140		1,077,140
11. Unearned premiums (Line 9)	8,824,922	22,653,026	31,477,948
12. Advance premiums (Line 10)			
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)	19,970,641	(19,970,641)	–
15. Funds held by company under reinsurance treaties (Line 13)			
16. Amounts withheld or retained by company for account of others (Line 14)			
17. Provision for reinsurance (Line 16)			
18. Other liabilities	6,639,168		6,639,168
19. Total liabilities excluding protected cell business (Line 26)	69,547,480	26,728,324	96,275,804
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	32,723,401	XXX	32,723,401
22. Totals (Line 38)	102,270,881	26,728,324	128,999,205

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? NO
If yes, give full explanation:

(30) Schedule H - Part 1

NONE

(30) Write-Ins for Line 11 - Deductions

NONE

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

NONE

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

NONE

(31) Schedule H - Part 4 - Reinsurance

NONE

(32) Schedule H - Part 5

NONE

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)	12 Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2015												
3. 2016												
4. 2017												
5. 2018												
6. 2019												
7. 2020	37	30	7					3	2		1	3
8. 2021	2,374	2,081	293	1,286	1,125			211	182		189	185
9. 2022	32,937	29,589	3,348	35,487	29,471	276	247	4,182	3,589	26	6,638	2,595
10. 2023	76,103	70,694	5,409	122,950	76,153	212	456	10,250	6,108	138	50,696	7,126
11. 2024	58,339	64,708	(6,368)	45,700	30,358	23	17	4,201	2,374	73	17,176	3,033
12. Totals	XXX	XXX	XXX	205,423	137,107	512	720	18,847	12,255	237	74,700	XXX

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded					
1. Prior													
2. 2015													
3. 2016													
4. 2017													
5. 2018													
6. 2019													
7. 2020													
8. 2021			7	6			14	12				3	
9. 2022	285	185	633	480	23	21	279	207	2	1		328	15
10. 2023	2,013	975	3,314	1,538	92	42	1,201	608	123	45		3,536	150
11. 2024	7,496	3,374	8,623	4,522	32	12	627	238	844	217		9,259	744
12. Totals	9,795	4,534	12,577	6,547	147	75	2,121	1,065	969	262		13,126	909

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		Inter-Company Pooling Participation Percentage	35
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid		Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015				—	—	—					
3. 2016				—	—	—					
4. 2017				—	—	—					
5. 2018				—	—	—					
6. 2019				—	—	—					
7. 2020	3	2	1	7.392	7.293	7.814					
8. 2021	1,517	1,325	192	63.918	63.690	65.541				1	2
9. 2022	41,167	34,201	6,966	124.987	115.586	208.065				253	75
10. 2023	140,156	85,924	54,232	184.165	121.544	1,002.559				2,814	722
11. 2024	67,548	41,112	26,436	115.784	63.535	(415.124)				8,224	1,036
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	11,292	1,834

SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	12
				4	5	6	7	8	9			
Direct and Assumed	Ceded	Net (Cols. 1-2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4-5+6-7+8-9)	Number of Claims Reported Direct and Assumed	
1. Prior	XXX	XXX	XXX								XXX	
2. 2015												
3. 2016												
4. 2017												
5. 2018												
6. 2019												
7. 2020	41	33	8	37	29			18	14		5	
8. 2021	2,091	1,818	273	3,149	2,740	111	98	325	280	6	468	
9. 2022	25,969	22,680	3,289	26,002	21,539	684	572	4,069	3,375	62	5,743	
10. 2023	45,968	31,425	14,542	37,017	23,930	507	333	6,433	4,190	306	9,434	
11. 2024	15,086	4,726	10,360	5,233	1,730	23	8	1,297	436	88	2,076	
12. Totals	XXX	XXX	XXX	71,438	49,969	1,326	1,010	12,142	8,295	463	25,631	

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded					
1. Prior													
2. 2015													
3. 2016													
4. 2017													
5. 2018													
6. 2019													
7. 2020			1	1			1	1				—	
8. 2021	46	40	103	90	16	15	64	56	—	—		29	4
9. 2022	1,571	1,167	1,503	1,028	152	122	485	345	110	56		1,102	65
10. 2023	7,020	2,691	5,751	2,237	274	105	950	366	312	86		8,822	267
11. 2024	4,868	932	4,326	870	20	3	356	66	175	28		7,845	419
12. Totals	13,505	4,830	11,684	4,227	462	245	1,856	834	597	170		17,799	755

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter-Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015				—	—	—					
3. 2016				—	—	—					
4. 2017				—	—	—					
5. 2018				—	—	—					
6. 2019				—	—	—					
7. 2020	57	45	11	138.001	137.164	141.451				—	—
8. 2021	3,816	3,319	497	182.478	182.537	182.086				18	10
9. 2022	34,575	28,204	6,371	133.139	124.356	193.699				880	223
10. 2023	58,264	33,938	24,327	126.750	107.994	167.280				7,843	979
11. 2024	16,298	4,074	12,224	108.036	86.206	117.994				7,392	453
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	16,133	1,665

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	12
				4	5	6	7	8	9			
Direct and Assumed	Ceded	Net (Cols. 1-2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4-5+6-7+8-9)	Number of Claims Reported Direct and Assumed	
1. Prior	XXX	XXX	XXX								XXX	
2. 2015												
3. 2016												
4. 2017												
5. 2018												
6. 2019												
7. 2020	1	1	–									
8. 2021	41	35	6	540	486			2	2		1	
9. 2022	589	534	55							–		
10. 2023	1,209	882	326	500	338			6	4		2	
11. 2024	613	269	344									
12. Totals	XXX	XXX	XXX	1,040	824			8	6	–	218	XXX

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			Direct and Assumed	Ceded	
1. Prior													
2. 2015													
3. 2016													
4. 2017													
5. 2018													
6. 2019													
7. 2020			–	–								–	
8. 2021			9	7			4	3				2	
9. 2022			200	156			1	1				44	
10. 2023	1,500	525	624	269			17	6	–	–		1,341	2
11. 2024			478	118			3	1				363	
12. Totals	1,500	525	1,311	550			25	11	–	–		1,749	2

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter-Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015				—	—	—					
3. 2016				—	—	—					
4. 2017				—	—	—					
5. 2018				—	—	—					
6. 2019				—	—	—					
7. 2020	—	—	—	14.000	11.200	—				—	
8. 2021	554	498	56	1,351.498	1,423.954	928.837				1	—
9. 2022	201	157	44	34.193	29.480	79.945				44	—
10. 2023	2,647	1,142	1,505	218.975	129.441	461.066				1,330	11
11. 2024	481	118	363	78.449	44.003	105.338				360	2
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	1,735	14

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2015												
3. 2016												
4. 2017												
5. 2018												
6. 2019												
7. 2020												
8. 2021												
9. 2022												
10. 2023	-	-	-									
11. 2024												
12. Totals	XXX	XXX	XXX									XXX

NONE

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior													
2. 2015													
3. 2016													
4. 2017													
5. 2018													
6. 2019													
7. 2020													
8. 2021													
9. 2022													
10. 2023													
11. 2024													
12. Totals													

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter-Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015				-	-	-					
3. 2016				-	-	-					
4. 2017				-	-	-					
5. 2018				-	-	-					
6. 2019				-	-	-					
7. 2020				-	-	-					
8. 2021				-	-	-					
9. 2022				-	-	-					
10. 2023				-	-	-					
11. 2024				-	-	-					
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2015												XXX
3. 2016												XXX
4. 2017												XXX
5. 2018												XXX
6. 2019												XXX
7. 2020	1	1	–									XXX
8. 2021	11	10	1									XXX
9. 2022	79	72	7	28	24			2	2		5	XXX
10. 2023	125	97	28	47	33			2	2		15	XXX
11. 2024	70	63	8	14	14			1	1		–	XXX
12. Totals	XXX	XXX	XXX	90	71			6	5		20	XXX

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded					
1. Prior													
2. 2015													
3. 2016													
4. 2017													
5. 2018													
6. 2019													
7. 2020													
8. 2021													
9. 2022													
10. 2023													
11. 2024													
12. Totals													

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter-Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015				—	—	—					
3. 2016				—	—	—					
4. 2017				—	—	—					
5. 2018				—	—	—					
6. 2019				—	—	—					
7. 2020						—					
8. 2021											
9. 2022	31	26	5	38.622	36.080	64.762					
10. 2023	50	35	15	40.016	36.406	52.440					
11. 2024	15	15	—	21.393	23.358	4.998					
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	12
				4	5	6	7	8	9			
Direct and Assumed	Ceded	Net (Cols. 1-2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4-5+6-7+8-9)	Number of Claims Reported Direct and Assumed	
1. Prior	XXX	XXX	XXX								XXX	
2. 2015												
3. 2016												
4. 2017												
5. 2018												
6. 2019												
7. 2020	31	25	6	13	10			3	3	4	3	15
8. 2021	1,536	1,336	200	2,632	2,288			221	191	53	374	1,262
9. 2022	21,663	18,817	2,846	27,844	23,234	32	27	2,211	1,860	881	4,965	13,652
10. 2023	44,230	29,995	14,235	48,848	30,223	26	59	3,431	2,163	3,614	19,861	21,765
11. 2024	15,806	5,137	10,669	9,979	3,202	8	3	614	199	1,136	7,197	4,619
12. Totals	XXX	XXX	XXX	89,315	58,957	67	89	6,480	4,417	5,688	32,400	XXX

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded					
1. Prior													
2. 2015													
3. 2016													
4. 2017													
5. 2018													
6. 2019													
7. 2020			–	–			–	–				–	
8. 2021			–	–			3	2				–	
9. 2022			1	1			25	19	1	–		7	3
10. 2023	16	8	(105)	(37)	14	5	45	27	14	4		(23)	13
11. 2024	607	149	(156)	(19)	1	–	8	1	58	11		377	242
12. Totals	623	156	(260)	(55)	15	5	81	49	73	15		362	258

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter-Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015				—	—	—					
3. 2016				—	—	—					
4. 2017				—	—	—					
5. 2018				—	—	—					
6. 2019				—	—	—					
7. 2020	16	13	3	51.625	51.212	53.346				—	—
8. 2021	2,855	2,481	374	185.902	185.730	187.048				—	—
9. 2022	30,114	25,141	4,973	139.012	133.610	174.729				—	7
10. 2023	52,288	32,450	19,838	118.219	108.185	139.361				(59)	37
11. 2024	11,121	3,547	7,574	70.355	69.046	70.986				321	55
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	262	99

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-	-	-	-
3. 2016	XXX										-	-
4. 2017	XXX	XXX							-		-	-
5. 2018	XXX	XXX	XXX						-		-	-
6. 2019	XXX	XXX	XXX	XXX					-		-	-
7. 2020	XXX	XXX	XXX	XXX	XXX	3		-	-	-	-	-
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	127	191	171	163	(8)	(28)
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,757	6,222	6,373	150	1,616
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50,932	50,012	(920)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,980	XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(778)	1,588

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-	-	-	-
3. 2016	XXX								-	-	-	-
4. 2017	XXX	XXX							-	-	-	-
5. 2018	XXX	XXX	XXX						-	-	-	-
6. 2019	XXX	XXX	XXX	XXX					-	-	-	-
7. 2020	XXX	XXX	XXX	XXX	XXX	3	5	5	4	8	3	3
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	268	392	419	452	33	60
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,184	5,217	5,624	407	1,440
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,174	21,858	683	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,216	XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,126	1,502

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-	-	-	-
3. 2016	XXX								-	-	-	-
4. 2017	XXX	XXX							-	-	-	-
5. 2018	XXX	XXX	XXX						-	-	-	-
6. 2019	XXX	XXX	XXX	XXX					-	-	-	-
7. 2020	XXX	XXX	XXX	XXX	XXX				-	-	-	-
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-	-	-	-
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	-
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	-	-
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-	-	-	-
3. 2016	XXX								-	-	-	-
4. 2017	XXX	XXX							-	-	-	-
5. 2018	XXX	XXX	XXX						-	-	-	-
6. 2019	XXX	XXX	XXX	XXX					-	-	-	-
7. 2020	XXX	XXX	XXX	XXX	XXX				-	-	-	-
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-	-	-	-
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	-
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	-	-
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-	-	-	-
3. 2016	XXX								-	-	-	-
4. 2017	XXX	XXX							-	-	-	-
5. 2018	XXX	XXX	XXX						-	-	-	-
6. 2019	XXX	XXX	XXX	XXX					-	-	-	-
7. 2020	XXX	XXX	XXX	XXX	XXX				-	-	-	-
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-	-	-	-
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	-
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	-	-
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-	-	-	-
3. 2016	XXX								-	-	-	-
4. 2017	XXX	XXX							-	-	-	-
5. 2018	XXX	XXX	XXX						-	-	-	-
6. 2019	XXX	XXX	XXX	XXX					-	-	-	-
7. 2020	XXX	XXX	XXX	XXX	XXX				-	-	-	-
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-	-	-	-
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	-
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	-	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-	-	-	-
3. 2016	XXX								-	-	-	-
4. 2017	XXX	XXX							-	-	-	-
5. 2018	XXX	XXX	XXX						-	-	-	-
6. 2019	XXX	XXX	XXX	XXX					-	-	-	-
7. 2020	XXX	XXX	XXX	XXX	XXX				-	-	-	-
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-	-	-	-
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	-
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	-	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-	-	-	-
3. 2016	XXX								-	-	-	-
4. 2017	XXX	XXX							-	-	-	-
5. 2018	XXX	XXX	XXX						-	-	-	-
6. 2019	XXX	XXX	XXX	XXX					-	-	-	-
7. 2020	XXX	XXX	XXX	XXX	XXX				-	-	-	-
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-	-	-	-
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	-
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	-	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-	-	-	-
3. 2016	XXX								-	-	-	-
4. 2017	XXX	XXX							-	-	-	-
5. 2018	XXX	XXX	XXX						-	-	-	-
6. 2019	XXX	XXX	XXX	XXX					-	-	-	-
7. 2020	XXX	XXX	XXX	XXX	XXX				-	-	-	-
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	4	53	56	56	-	3
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	43	44	1	-
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,440	1,503	62	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	363	XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64	3

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-	-	-	-
3. 2016	XXX								-	-	-	-
4. 2017	XXX	XXX							-	-	-	-
5. 2018	XXX	XXX	XXX						-	-	-	-
6. 2019	XXX	XXX	XXX	XXX					-	-	-	-
7. 2020	XXX	XXX	XXX	XXX	XXX				-	-	-	-
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-	-	-	-
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	-
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	-	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-		-	
3. 2016	XXX								-		-	
4. 2017	XXX	XXX							-		-	
5. 2018	XXX	XXX	XXX						-		-	
6. 2019	XXX	XXX	XXX	XXX					-		-	
7. 2020	XXX	XXX	XXX	XXX	XXX				-		-	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-		-	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4	4	-	-
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19	14	(5)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(6)	-

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-		-	
3. 2016	XXX								-		-	
4. 2017	XXX	XXX							-		-	
5. 2018	XXX	XXX	XXX						-		-	
6. 2019	XXX	XXX	XXX	XXX					-		-	
7. 2020	XXX	XXX	XXX	XXX	XXX	5	5	3	3	3	-	-
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	286	352	339	344	5	(8)
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,765	4,284	4,622	338	(143)
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,840	18,560	720	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,112	XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,063	(152)

SCHEDULE P - PART 2K - FIDELITY/SURETY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-		-	
3. 2016	XXX								-		-	
4. 2017	XXX	XXX							-		-	
5. 2018	XXX	XXX	XXX						-		-	
6. 2019	XXX	XXX	XXX	XXX					-		-	
7. 2020	XXX	XXX	XXX	XXX	XXX				-		-	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-		-	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-		-	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-		-	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-		-	
3. 2016	XXX								-		-	
4. 2017	XXX	XXX							-		-	
5. 2018	XXX	XXX	XXX						-		-	
6. 2019	XXX	XXX	XXX	XXX					-		-	
7. 2020	XXX	XXX	XXX	XXX	XXX				-		-	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-		-	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-		-	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-		-	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

SCHEDULE P - PART 2M - INTERNATIONAL

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior									-	-	-	-
2. 2015									-		-	
3. 2016	XXX								-		-	
4. 2017	XXX	XXX							-		-	
5. 2018	XXX	XXX	XXX						-		-	
6. 2019	XXX	XXX	XXX	XXX					-		-	
7. 2020	XXX	XXX	XXX	XXX	XXX				-		-	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-		-	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-		-	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-		-	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								—	—	—	
2. 2015									—			
3. 2016	XXX								—			
4. 2017	XXX	XXX							—			
5. 2018	XXX	XXX	XXX						—			
6. 2019	XXX	XXX	XXX	XXX					—			
7. 2020	XXX	XXX	XXX	XXX	XXX			—	—	—	—	3
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	46	159	159	161	88	97
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,939	5,363	6,045	1,389	1,191
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29,656	46,554	4,923	2,053
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,348	1,337	952

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								—	—	—	
2. 2015									—			
3. 2016	XXX								—			
4. 2017	XXX	XXX							—			
5. 2018	XXX	XXX	XXX						—			
6. 2019	XXX	XXX	XXX	XXX					—			
7. 2020	XXX	XXX	XXX	XXX	XXX		1	1	1	7	3	2
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	75	223	379	423	256	189
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	986	3,127	4,575	2,588	3,090
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,912	13,261	3,845	5,322
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,518	622	1,035

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								—	—	—	
2. 2015									—			
3. 2016	XXX								—			
4. 2017	XXX	XXX							—			
5. 2018	XXX	XXX	XXX						—			
6. 2019	XXX	XXX	XXX	XXX					—			
7. 2020	XXX	XXX	XXX	XXX	XXX				—			
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			—			
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		—			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								—	—	—	
2. 2015									—			
3. 2016	XXX								—			
4. 2017	XXX	XXX							—			
5. 2018	XXX	XXX	XXX						—			
6. 2019	XXX	XXX	XXX	XXX					—			
7. 2020	XXX	XXX	XXX	XXX	XXX				—			
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			—			
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		—			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								—	—	—	
2. 2015									—			
3. 2016	XXX								—			
4. 2017	XXX	XXX							—			
5. 2018	XXX	XXX	XXX						—			
6. 2019	XXX	XXX	XXX	XXX					—			
7. 2020	XXX	XXX	XXX	XXX	XXX				—			
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			—			
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		—			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								-	-	-	
2. 2015									-			
3. 2016	XXX								-			
4. 2017	XXX	XXX							-			
5. 2018	XXX	XXX	XXX						-			
6. 2019	XXX	XXX	XXX	XXX					-			
7. 2020	XXX	XXX	XXX	XXX	XXX				-			
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-			
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								-	-	-	
2. 2015									-			
3. 2016	XXX								-			
4. 2017	XXX	XXX							-			
5. 2018	XXX	XXX	XXX						-			
6. 2019	XXX	XXX	XXX	XXX					-			
7. 2020	XXX	XXX	XXX	XXX	XXX				-			
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-			
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								-	-	XXX	XXX
2. 2015									-		XXX	XXX
3. 2016	XXX								-		XXX	XXX
4. 2017	XXX	XXX							-		XXX	XXX
5. 2018	XXX	XXX	XXX						-		XXX	XXX
6. 2019	XXX	XXX	XXX	XXX					-		XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX				-		XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-		XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-		XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-		XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								-	-	-	
2. 2015									-			
3. 2016	XXX								-			
4. 2017	XXX	XXX							-			
5. 2018	XXX	XXX	XXX						-			
6. 2019	XXX	XXX	XXX	XXX					-			
7. 2020	XXX	XXX	XXX	XXX	XXX				-			
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			54	54	1	-
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-		-	-
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	162	-	-
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								-	-	-	
2. 2015									-			
3. 2016	XXX								-			
4. 2017	XXX	XXX							-			
5. 2018	XXX	XXX	XXX						-			
6. 2019	XXX	XXX	XXX	XXX					-			
7. 2020	XXX	XXX	XXX	XXX	XXX				-			
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			-			
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								—	—	XXX	XXX
2. 2015									—		XXX	XXX
3. 2016	XXX								—		XXX	XXX
4. 2017	XXX	XXX							—		XXX	XXX
5. 2018	XXX	XXX	XXX						—		XXX	XXX
6. 2019	XXX	XXX	XXX	XXX					—		XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX				—		XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			—		XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4	4	XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	14	XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								—	—		
2. 2015									—			
3. 2016	XXX								—			
4. 2017	XXX	XXX							—			
5. 2018	XXX	XXX	XXX						—			
6. 2019	XXX	XXX	XXX	XXX					—			
7. 2020	XXX	XXX	XXX	XXX	XXX	4	5	3	3	3	6	9
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	218	346	338	344	876	386
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,537	4,284	4,614	9,947	3,702
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,161	18,593	16,029	5,723
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,782	3,126	1,251

SCHEDULE P - PART 3K - FIDELITY/SURETY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								—	—	XXX	XXX
2. 2015									—		XXX	XXX
3. 2016	XXX								—		XXX	XXX
4. 2017	XXX	XXX							—		XXX	XXX
5. 2018	XXX	XXX	XXX						—		XXX	XXX
6. 2019	XXX	XXX	XXX	XXX					—		XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX				—		XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			—		XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		—		XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—		XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								—	—	XXX	XXX
2. 2015									—		XXX	XXX
3. 2016	XXX								—		XXX	XXX
4. 2017	XXX	XXX							—		XXX	XXX
5. 2018	XXX	XXX	XXX						—		XXX	XXX
6. 2019	XXX	XXX	XXX	XXX					—		XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX				—		XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			—		XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		—		XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—		XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

SCHEDULE P - PART 3M - INTERNATIONAL

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	XXX								—	—	XXX	XXX
2. 2015									—		XXX	XXX
3. 2016	XXX								—		XXX	XXX
4. 2017	XXX	XXX							—		XXX	XXX
5. 2018	XXX	XXX	XXX						—		XXX	XXX
6. 2019	XXX	XXX	XXX	XXX					—		XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX				—		XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			—		XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		—		XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—		XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
		2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior.....									—	
2.	2015.....									—	
3.	2016.....	XXX								—	
4.	2017.....	XXX	XXX							—	
5.	2018.....	XXX	XXX	XXX						—	
6.	2019.....	XXX	XXX	XXX	XXX					—	
7.	2020.....	XXX	XXX	XXX	XXX	XXX	3		—	—	
8.	2021.....	XXX	XXX	XXX	XXX	XXX	XXX	36	30	12	3
9.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,656	477	225
10.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,840	2,369
11.	2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,489

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

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
		2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior.....									—	
2.	2015.....									—	
3.	2016.....	XXX								—	
4.	2017.....	XXX	XXX							—	
5.	2018.....	XXX	XXX	XXX						—	
6.	2019.....	XXX	XXX	XXX	XXX					—	
7.	2020.....	XXX	XXX	XXX	XXX	XXX	3	1	—	—	—
8.	2021.....	XXX	XXX	XXX	XXX	XXX	XXX	63	40	20	21
9.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,743	719	615
10.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,357	4,098
11.	2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,745

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

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

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

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

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

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

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

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

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

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

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

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

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

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
		2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior									-	
2.	2015									-	
3.	2016	XXX								-	
4.	2017	XXX	XXX							-	
5.	2018	XXX	XXX	XXX						-	
6.	2019	XXX	XXX	XXX	XXX					-	
7.	2020	XXX	XXX	XXX	XXX	XXX				-	-
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	4	28	-	2
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	43	44
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	876	366
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	363

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

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

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

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

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
		2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior									-	
2.	2015									-	
3.	2016	XXX								-	
4.	2017	XXX	XXX							-	
5.	2018	XXX	XXX	XXX						-	
6.	2019	XXX	XXX	XXX	XXX					-	
7.	2020	XXX	XXX	XXX	XXX	XXX				-	-
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	(5)	2	-	-
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	304	(4)	7
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	380	(50)
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(130)

SCHEDULE P - PART 4K - FIDELITY/SURETY

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

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

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

SCHEDULE P - PART 4M - INTERNATIONAL

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

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS

SECTION 1										
Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior									—	
2. 2015									—	
3. 2016	XXX								—	
4. 2017	XXX	XXX							—	
5. 2018	XXX	XXX	XXX						—	
6. 2019	XXX	XXX	XXX	XXX					—	
7. 2020	XXX	XXX	XXX	XXX	XXX				—	—
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	31	93	88	88
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,029	1,334	1,389
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,662	4,923
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,337

SECTION 2										
Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior									—	
2. 2015									—	
3. 2016	XXX								—	
4. 2017	XXX	XXX							—	
5. 2018	XXX	XXX	XXX						—	
6. 2019	XXX	XXX	XXX	XXX					—	
7. 2020	XXX	XXX	XXX	XXX	XXX		1		—	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	59	2	—	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	684	63	15
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,865	150
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	744

SECTION 3										
Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior									—	—
2. 2015									—	
3. 2016	XXX								—	
4. 2017	XXX	XXX							—	
5. 2018	XXX	XXX	XXX						—	
6. 2019	XXX	XXX	XXX	XXX					—	
7. 2020	XXX	XXX	XXX	XXX	XXX	1	4	3	2	3
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	132	189	183	185
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,878	2,578	2,595
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,330	7,126
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,033

SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

SECTION 1										
Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior									—	
2. 2015									—	
3. 2016	XXX								—	
4. 2017	XXX	XXX							—	
5. 2018	XXX	XXX	XXX						—	
6. 2019	XXX	XXX	XXX	XXX					—	
7. 2020	XXX	XXX	XXX	XXX	XXX			2	2	3
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	73	225	246	256
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,206	2,406	2,588
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,765	3,845
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	622

SECTION 2										
Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior									—	
2. 2015									—	
3. 2016	XXX								—	
4. 2017	XXX	XXX							—	
5. 2018	XXX	XXX	XXX						—	
6. 2019	XXX	XXX	XXX	XXX					—	
7. 2020	XXX	XXX	XXX	XXX	XXX	3	7	3	1	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	157	72	11	4
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,219	210	65
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,239	267
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	419

SECTION 3										
Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior									—	—
2. 2015									—	
3. 2016	XXX								—	
4. 2017	XXX	XXX							—	
5. 2018	XXX	XXX	XXX						—	
6. 2019	XXX	XXX	XXX	XXX					—	
7. 2020	XXX	XXX	XXX	XXX	XXX	3	7	9	5	5
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	328	515	444	449
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,182	5,700	5,743
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,151	9,434
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,076

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A										
Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior									—	
2. 2015									—	
3. 2016	XXX								—	
4. 2017	XXX	XXX							—	
5. 2018	XXX	XXX	XXX						—	
6. 2019	XXX	XXX	XXX	XXX					—	
7. 2020	XXX	XXX	XXX	XXX	XXX				—	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			1	1
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		—	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A										
Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior									—	
2. 2015									—	
3. 2016	XXX								—	
4. 2017	XXX	XXX							—	
5. 2018	XXX	XXX	XXX						—	
6. 2019	XXX	XXX	XXX	XXX					—	
7. 2020	XXX	XXX	XXX	XXX	XXX				—	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX		1	—	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		—	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	2
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A										
Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior									—	—
2. 2015									—	
3. 2016	XXX								—	
4. 2017	XXX	XXX							—	
5. 2018	XXX	XXX	XXX						—	
6. 2019	XXX	XXX	XXX	XXX					—	
7. 2020	XXX	XXX	XXX	XXX	XXX				—	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX		1	1	1
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		—	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	2
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

(81) Schedule P - Part 5H - Section 1B

NONE

(81) Schedule P - Part 5H - Section 2B

NONE

(81) Schedule P - Part 5H - Section 3B

NONE

(82) Schedule P - Part 5R - Section 1A

NONE

(82) Schedule P - Part 5R - Section 2A

NONE

(82) Schedule P - Part 5R - Section 3A

NONE

(83) Schedule P - Part 5R - Section 1B

NONE

(83) Schedule P - Part 5R - Section 2B

NONE

(83) Schedule P - Part 5R - Section 3B

NONE

(84) Schedule P - Part 5T - Section 1

NONE

(84) Schedule P - Part 5T - Section 2

NONE

(84) Schedule P - Part 5T - Section 3

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1											
Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR-END (\$000 OMITTED)										11
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P–Pt 1)									–	XXX	XXX

SECTION 2											
Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR-END (\$000 OMITTED)										11
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	–	
13. Earned Premiums (Sc P–Pt 1)											XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A											
Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR-END (\$000 OMITTED)										11
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	41	41	41	41	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	589	589	589	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,209	1,209	
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	613	613
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	613
13. Earned Premiums (Sc P–Pt 1)						1	41	589	1,209	613	XXX

SECTION 2A											
Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR-END (\$000 OMITTED)										11
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	35	35	35	35	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	534	534	534	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	882	882	
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	269	269
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	269
13. Earned Premiums (Sc P–Pt 1)						1	35	534	882	269	XXX

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 OMITTED)

SECTION 1

		1	2	3	4	5	6
		Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P – Part 1							
1.	Homeowners/Farmowners.....	13,126			(3,031)		
2.	Private Passenger Auto Liability/Medical.....	17,799			8,074		
3.	Commercial Auto/Truck Liability/Medical.....						
4.	Workers' Compensation.....						
5.	Commercial Multiple Peril.....						
6.	Medical Professional Liability—Occurrence.....						
7.	Medical Professional Liability—Claims-made.....						
8.	Special Liability.....						
9.	Other Liability—Occurrence.....	1,749			265		
10.	Other Liabilities—Claims-made.....						
11.	Special Property.....				8		
12.	Auto Physical Damage.....	362			8,112		
13.	Fidelity/ Surety.....						
14.	Other.....						
15.	International.....						
16.	Reinsurance-Nonproportional Assumed Property.....	XXX	XXX	XXX	XXX	XXX	XXX
17.	Reinsurance-Nonproportional Assumed Liability.....	XXX	XXX	XXX	XXX	XXX	XXX
18.	Reinsurance-Nonproportional Assumed Financial Lines.....	XXX	XXX	XXX	XXX	XXX	XXX
19.	Products Liability—Occurrence.....						
20.	Products Liability—Claims-made.....						
21.	Financial Guaranty/Mortgage Guaranty.....						
22.	Warranty.....						
23.	Pet Insurance Plans.....						
24.	Totals.....	33,036			13,428		

SECTION 2

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

SECTION 3

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

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

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

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

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS

(\$000 OMITTED)

SECTION 1

		1	2	3	4	5	6
		Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P – Part 1							
1.	Homeowners/Farmowners.....	13,126			(3,031)		
2.	Private Passenger Auto Liability/Medical.....	17,799			8,074		
3.	Commercial Auto/Truck Liability/Medical.....						
4.	Workers' Compensation.....						
5.	Commercial Multiple Peril.....						
6.	Medical Professional Liability—Occurrence.....						
7.	Medical Professional Liability—Claims-made.....						
8.	Special Liability.....						
9.	Other Liability—Occurrence.....	1,749			265		
10.	Other Liabilities—Claims-made.....						
11.	Special Property.....				8		
12.	Auto Physical Damage.....	362			8,112		
13.	Fidelity/ Surety.....						
14.	Other.....						
15.	International.....						
16.	Reinsurance-Nonproportional Assumed Property.....						
17.	Reinsurance-Nonproportional Assumed Liability.....						
18.	Reinsurance-Nonproportional Assumed Financial Lines.....						
19.	Products Liability—Occurrence.....						
20.	Products Liability—Claims-made.....						
21.	Financial Guaranty/Mortgage Guaranty.....						
22.	Warranty.....						
23.	Pet Insurance Plans.....						
24.	Totals.....	33,036			13,428		

SECTION 2

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

SECTION 3

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

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

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

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

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

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

SCHEDULE P INTERROGATORIES

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

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

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

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

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

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.
5. What were the net premiums (in thousands of dollars) in force at the end of the year for:
5.1. Fidelity.....\$.....
5.2. Surety.....\$.....
6. Claim count information is reported per claim or per claimant (indicate which).....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?.....NO.....
- 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	NONE					
2.	Alaska	AK						
3.	Arizona	AZ						
4.	Arkansas	AR						
5.	California	CA						
6.	Colorado	CO						
7.	Connecticut	CT						
8.	Delaware	DE						
9.	District of Columbia	DC						
10.	Florida	FL						
11.	Georgia	GA						
12.	Hawaii	HI						
13.	Idaho	ID						
14.	Illinois	IL						
15.	Indiana	IN						
16.	Iowa	IA						
17.	Kansas	KS						
18.	Kentucky	KY						
19.	Louisiana	LA						
20.	Maine	ME						
21.	Maryland	MD						
22.	Massachusetts	MA						
23.	Michigan	MI						
24.	Minnesota	MN						
25.	Mississippi	MS						
26.	Missouri	MO						
27.	Montana	MT						
28.	Nebraska	NE						
29.	Nevada	NV						
30.	New Hampshire	NH						
31.	New Jersey	NJ						
32.	New Mexico	NM						
33.	New York	NY						
34.	North Carolina	NC						
35.	North Dakota	ND						
36.	Ohio	OH						
37.	Oklahoma	OK						
38.	Oregon	OR						
39.	Pennsylvania	PA						
40.	Rhode Island	RI						
41.	South Carolina	SC						
42.	South Dakota	SD						
43.	Tennessee	TN						
44.	Texas	TX						
45.	Utah	UT						
46.	Vermont	VT						
47.	Virginia	VA						
48.	Washington	WA						
49.	West Virginia	WV						
50.	Wisconsin	WI						
51.	Wyoming	WY						
52.	American Samoa	AS						
53.	Guam	GU						
54.	Puerto Rico	PR						
55.	U.S. Virgin Islands	VI						
56.	Northern Mariana Islands	MP						
57.	Canada	CAN						
58.	Aggregate Other Alien	OT						
59.	Totals							

NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership, Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No)	*
		16825	84-4471638				Branch Insurance Exchange	OH	RE	Branch Financial, LLC	Attorney In-Fact		Branch Holdings, Inc.	NO	
			82-0628587				Branch Financial, LLC	DE	OTH	Branch Holdings, Inc.	Ownership	100.000	Branch Holdings, Inc.	NO	1
			87-3106338				Branch Claims, LLC	OH	NIA	Branch Holdings, Inc.	Ownership	100.000	Branch Holdings, Inc.	NO	
			33-2573425				Branch Holdings, Inc.	DE	OTH	Branch Holdings, Inc.	Board of Directors		Branch Holdings, Inc.	NO	2

Asterisk	Explanation
1	Branch Financial, LLC. is the attorney-in-fact for the subscribers of Branch Insurance Exchange.
2	Branch Holdings, Inc. is the owner of Branch Financial, LLC, the attorney-in-fact for the subscribers of Branch Insurance Exchange.

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)
16825	84-4471638	Branch Insurance Exchange		37,000,000			(38,110,606)				(1,110,606)	
	82-0628587	Branch Financial, LLC		(37,000,000)			32,494,962				(4,505,038)	
	87-3106338	Branch Claims, LLC					5,615,644				5,615,644	
	33-2573425	Branch Holdings, Inc.										
9999999 – Control Totals				–			–		XXX		–	

SCHEDULE Y

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

1	2	3	4	5	6	7	8
Insurers in Holding Company	Owners with Greater than 10% Ownership	Ownership Percentage Column 2 of Column 1	Granted Disclaimer of Control / Affiliation of Column 2 Over Column 1 (Yes/No)	Ultimate Controlling Party	U.S. Insurance Groups or Entities Controlled by Column 5	Ownership Percentage (Column 5 of Column 6)	Granted Disclaimer of Control / Affiliation of Column 5 Over Column 6 (Yes/No)
Branch Insurance Exchange.....	Branch Financial, LLC (Attorney-in-Fact).....% NO	Branch Holdings, Inc.....	N/A% NO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

	Response
March Filing	
1. Will an actuarial opinion be filed by March 1?	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
April Filing	
5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6. Will Management's Discussion and Analysis be filed by April 1?	YES
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
May Filing	
8. Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	NO
June Filing	
9. Will an audited financial report be filed by June 1?	YES
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

SUPPLEMENTAL FILINGS

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

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Explanation	Barcode
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	NOT APPLICABLE
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16.	
17.	
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37.	
38.	

OVERFLOW PAGE FOR WRITE-INS

OVERFLOW PAGE FOR WRITE-INS

BUSINESS IN THE STATE OF ALASKA DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

OVERFLOW PAGE FOR WRITE-INS

BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR 2024													
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2024													
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR 2024													
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to									
		Direct Premiums Written	Direct Premiums Earned	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
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

OVERFLOW PAGE FOR WRITE-INS

BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF IOWA DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

OVERFLOW PAGE FOR WRITE-INS

BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

OVERFLOW PAGE FOR WRITE-INS

BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

OVERFLOW PAGE FOR WRITE-INS

BUSINESS IN THE STATE OF MONTANA DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

OVERFLOW PAGE FOR WRITE-INS

BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

OVERFLOW PAGE FOR WRITE-INS

BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF OREGON DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

OVERFLOW PAGE FOR WRITE-INS

BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF UTAH DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

OVERFLOW PAGE FOR WRITE-INS

BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												

GRAND TOTAL DURING THE YEAR 2024

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
3404.	None												
3405.	None												
3406.	None												
3407.	None												
3408.	None												
3409.	None												
3410.	None												
3497.	Summary of remaining write-ins for Line 34 from overflow page												



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: 0000

NAIC Company Code: 16825

	Direct Business Only			
	Prior Year	Current Year		
	1	2	3	4
	Written Premium	Written Premium	Losses Paid (deducting salvage)	Losses Unpaid (Case Base)
1. Completed operations.....				
2. Errors & omissions (E&O).....				
3. Directors & officers (D&O).....				
4. Environmental liability.....				
5. Excess workers' compensation.....	—			
6. Commercial excess & umbrella.....				
7. Personal umbrella.....	1,057,926	396,096	500,000	1,500,000
8. Employment liability.....				
9. Aggregate write-ins for facilities and premises (CGL).....				
10. Internet & cyber liability.....				
11. Aggregate write-ins for other.....				
12. Total ASL 17 - other liability (sum of lines 1 through 11).....	1,057,926	396,096	500,000	1,500,000
Details of Write-Ins				
0901.....				
0902.....				
0903.....				
0998. Summary of remaining write-ins for Line 09 from overflow page.....				
0999. Summary of remaining write-ins for Line 09 from overflow page.....				
1101.....				
1102.....				
1103.....				
1198. Summary of remaining write-ins for Line 11 from overflow page.....				
1199. Summary of remaining write-ins for Line 11 from overflow page.....				

OVERFLOW PAGE FOR WRITE-INS



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

NAIC Group Code: 0000

NAIC Company Code: 16825

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