



ANNUAL STATEMENT
For the Year Ended December 31, 2024
OF THE CONDITION AND AFFAIRS OF THE
BCS Insurance Company

NAIC Group Code	00023 (Current Period)	00023 (Prior Period)	NAIC Company Code	38245	Employer's ID Number		36-6033921
Organized under the Laws of	Ohio		State of Domicile or Port of Entry	Ohio			
Country of Domicile			United States				
Incorporated/Organized	12/05/1950		Commenced Business	11/30/1952			
Statutory Home Office	6740 North High Street (Street and Number)			Worthington, OH, US 43085			
Main Administrative Office	2 Mid America Plaza, Suite 200 (Street and Number)		Oakbrook Terrace, IL, US 60181 (City or Town, State, Country and Zip Code)	630-472-7700 (Area Code) (Telephone Number)			
Mail Address	2 Mid America Plaza, Suite 200 (Street and Number or P.O. Box)		Oakbrook Terrace, IL, US 60181 (City or Town, State, Country and Zip Code)	630-472-7700 (Area Code) (Telephone Number)			
Primary Location of Books and Records	2 Mid America Plaza, Suite 200 (Street and Number)		Oakbrook Terrace, IL, US 60181 (City or Town, State, Country and Zip Code)	630-472-7700 (Area Code) (Telephone Number)			
Internet Web Site Address	www.bcsins.com						
Statutory Statement Contact	David J. Burke (Name)		630-472-7815				
	DBurke@bcsf.com (E-Mail Address)		630-472-7837 (Fax Number)				

OFFICERS

Name	Title	Name	Title
Peter Lorin Costello	President, Chief Executive Officer	Terry Michael Hackett	General Counsel & Secretary
Susan Ann Pickar	Chief Financial Officer & Treasurer		

OTHER OFFICERS

DIRECTORS OR TRUSTEES			
Peter Lorin Costello	Terry Michael Hackett	Susan Ann Pickar	Mehboob Aziz Khoja
Andrew Kendall Neslin			

State of Illinois.....

ss

County of DuPage.....

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.

Peter Lorin Costello
 Peter Lorin Costello
 President, Chief Executive Officer

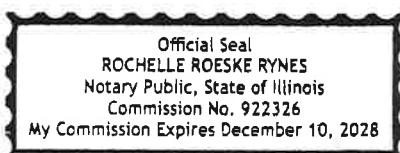
Terry Michael Hackett
 Terry Michael Hackett
 General Counsel & Secretary

Susan Ann Pickar
 Susan Ann Pickar
 Chief Financial Officer & Treasurer

Subscribed and sworn to before me
 this 26th day of February, 2025

a. Is this an original filing? Yes [X] No []
 b. If no:
 1. State the amendment number 0
 2. Date filed
 3. Number of pages attached 0

Rochelle Roeske Rynes
 Rochelle Roeske Rynes, Statutory Analyst
 12/10/2028





3 8 2 4 5 2 0 2 4 4 3 0 0 1 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Alabama				DURING THE YEAR 2024						NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	398,429	418,916			144,388	55,329	118,406	350,226	29,337	75,528	170,774	79,821	8,781
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	1,059,780	1,014,098			295,910	291,477	276,162	93,573	0	420	420	0	26,378
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	16,844	16,844			0	0	10,312	13,175	0	0	0	0	419
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	186,938	184,296			2,743	15,205	16,952	5,846	0	0	0	41,915	4,744
15.2	Dental Only (b)	579,606	571,414			8,310	58,621	63,116	17,492	0	0	0	131,450	14,115
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	16,214,523	16,178,588			37,306	15,718,991	14,907,470	4,581,127	89,093	89,093	0	1,032,894	407,629
16.	Workers' Compensation					0	0	0	0	0	0	0	0	
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	
17.2	Other Liability-Claims-Made	77,897	94,929			13,063	0	39,899	4,719,685	3,787	30,983	90,090	6,651	1,983
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	18,534,017	18,479,085	0	501,720	16,139,623	15,432,317	9,781,124	122,217	196,024	261,284	1,292,731	464,049	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

52,921 and number of persons insured under indemnity only products

9,050



3 8 2 4 5 2 0 2 4 4 3 0 0 2 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Alaska						DURING THE YEAR 2024						NAIC Company Code 38245	
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
		1 Direct Premiums Written	2 Direct Premiums Earned												
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)	31,540	43,381		13,925		0	(2,734)	36,089	0	14,606	14,735	6,419	1,872	
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine	63,094	52,856		19,395	4,183		5,812	5,971	0	.21	.21	0	2,268	
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)	0	0		0	0	0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)	256	248		7	151		111	(27)	0	0	0	0	59	6
15.2	Dental Only (b)	730	708		22	418		294	(56)	0	0	0	0	168	15
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)	0	0		0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)	10,452	10,363		.89	1,165		2,663	2,260	0	0	0	0	1,896	438
16.	Workers' Compensation														
17.1	Other Liability-Occurrence	0	0		0	0	0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	2,519	2,711		1,385	0	0	.621	2,669	0	0	0	0	252	100
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	0	0		0	0	0	0	0	0	0	0	0	0	0
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty														
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	108,591	110,267	0	34,823	5,917	6,767	46,906	0	14,627	14,756	8,794	4,699		
DETAILS OF WRITE-INS															
3401.	Special Risk	0	0		0	0	0	0	0	0	0	0	0	0	0
3402.		0	0		0	0	0	0	0	0	0	0	0	0	0
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

147



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Arizona			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	632,505	653,535			212,504	18,599	82,285	544,789	0	130,056	137,988	126,799	11,287
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	1,402,038	1,365,733			376,918	646,904	620,029	125,254	0	562	562	0	29,648
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	56,197	55,402			799	5,076	5,652	2,036	0	0	0	0	12,926
15.2	Dental Only (b)	156,390	154,173			2,233	16,113	17,084	5,262	0	0	0	0	3,293
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	661,618	653,226			9,185	161,765	156,768	73,383	0	0	0	0	14,058
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	2,968,961	2,968,961			0	743,191	993,770	992,262	0	0	0	0	61,718
17.2	Other Liability-Claims-Made	115,382	112,880			28,555	0	10,732	84,140	0	0	0	0	9,419
17.3	Excess Workers' Compensation													1,586
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	5,993,091	5,963,910	0	630,194	1,591,648	1,886,320	1,827,126	0	130,618	138,550	316,151	122,832	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

2,184



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Arkansas			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)			0	0		0	0	0	0	0	0	0	0
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	384,564	371,685			97,161	129,489	123,973	32,363	0	151	151	0	7,793
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made			0	0		0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)			0	0		0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	59,982	59,118			886	6,041	6,193	1,878	0	0	0	0	13,724
15.2	Dental Only (b)	165,391	162,971			2,491	20,077	19,927	4,830	0	0	0	0	3,482
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	740,919	732,621			10,817	342,897	326,736	62,556	0	0	0	0	16,141
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	2,179,321	2,189,586			722,552	67,768	11,662	3,012,171	10,323	(69,520)	331,890	50,757	58,898
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	3,530,177	3,515,981	0	833,907	566,272	488,491	3,113,798	10,323	(69,369)	332,041	231,395	87,640	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.														
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

2,758



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF California				DURING THE YEAR 2024						NAIC Company Code 38245			
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)			0	0		0	0	0	0	0	0	0	0	
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine	61,801,625	65,790,085			16,936,007	17,659,900	13,237,661	6,147,545	21,302	39,321	27,102	0	1,397,200	
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made			0	0		0	0	0	0	0	0	0	0	
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)			0	0		0	0	0	0	0	0	0	0	
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)	179,746	177,151			2,629	12,067	12,998	5,309	0	0	0	41,337	3,972	
15.2	Dental Only (b)	473,823	467,057			6,855	61,522	63,065	13,470	0	0	0	108,957	9,976	
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)			0	0		0	0	0	0	0	0	0	0	
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)	10,202,349	10,301,868			1,216,425	7,018,339	7,488,567	1,927,341	9,345	11,220	1,875	437,454	213,435	
16.	Workers' Compensation														
17.1	Other Liability-Occurrence			0	0		0	0	0	0	0	0	0	0	
17.2	Other Liability-Claims-Made			1,713,874	2,155,003		1,197,905	17,894,232	475,590	12,481,147	130,623	(1,552,312)	2,020,167	153,681	43,454
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	0	0			0	0	0	0	0	0	0	0	0	
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
30.	Warranty														
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	
35.	TOTAL (a)	74,371,417	78,891,164	0	19,359,821	42,646,060	21,277,881	20,574,812	161,270	(1,501,771)	2,049,144	741,429	1,668,037		
DETAILS OF WRITE-INS															
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0	
3402.		0	0			0	0	0	0	0	0	0	0	0	
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	

(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

355,824 and number of persons insured under indemnity only products

12,600



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Colorado			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	883,343	904,371			291,619	121,347	197,978	754,368	0	106,763	162,633	176,911	16,523
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	2,688,292	2,636,020			725,399	1,213,750	1,162,155	244,242	0	1,095	1,095	0	57,421
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	45,779	45,195			618	3,556	3,906	1,558	0	0	0	10,532	1,012
15.2	Dental Only (b)	141,285	139,425			1,918	17,022	17,669	4,320	0	0	0	32,497	2,975
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	5,512,820	5,467,707			140,593	4,030,030	5,017,610	1,601,061	339	527	188	172,678	115,193
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	915,257	937,455			401,443	134,710	149,180	663,706	74,357	(189,769)	197,733	69,137	17,674
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	10,186,776	10,130,173	0	1,561,590	5,520,415	6,548,498	3,269,255	74,696	(81,384)	361,649	461,755	210,798	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

11,126 and number of persons insured under indemnity only products

2,585



3 8 2 4 5 2 0 2 4 4 3 0 0 7 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Connecticut			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)			0	0		0	(60,041)		0	27,130	27,130	0	0
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	1,987,528	1,876,955			558,830	798,951	775,407	172,292	273	(7,068)	775	0	42,059
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made			0	0		0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)			0	0		0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	4,570	4,486			.91	356	372	164	0	0	0	0	1,040
15.2	Dental Only (b)	11,140	10,921			.241	1,811	1,763	370	0	0	0	0	2,531
15.3	Disability Income (b)													0
15.4	Medicare Supplement (b)													
15.5	Medicaid Title XIX (b)													
15.6	Medicare Title XVIII (b)													
15.7	Long-Term Care (b)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	51,283	50,504			1,023	149,675	(198,379)	3,382	0	0	0	0	8,132
16.	Workers' Compensation													1,027
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	390,896	403,515			129,180	8,000	106,653	355,077	0	339	5,127	77,347	7,783
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	2,445,417	2,346,381	0	689,365	958,793	625,775	531,285	273	20,401	33,032	89,050	51,204	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

232



3 8 2 4 5 2 0 2 4 4 3 0 0 8 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Delaware		DURING THE YEAR 2024									NAIC Company Code 38245	
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	105,215	105,401			25,601	12,011	(19,194)	87,748	0	16,254	17,497	21,005	2,182
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	732,126	668,359			250,946	260,148	238,505	63,265	0	283	283	0	19,771
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	9,391	9,286			105	802	883	309	0	0	0	0	2,170
15.2	Dental Only (b)	25,759	25,433			329	3,593	3,816	877	0	0	0	0	5,948
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	130,703	129,281			1,583	54,833	56,068	14,419	0	0	0	0	22,802
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0	1		0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	2,979	2,466			867	0	892	52,326	0	3,448	3,448	298	57
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	1,006,173	940,227	0	279,431	331,387	280,970	218,944	0	19,985	21,228	52,223	25,646	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

325



3 8 2 4 5 2 0 2 4 4 3 0 0 9 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF District of Columbia			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	451,620	472,096			133,728	108,777	300,784	598,689	0	(138,271)	71,483	90,249	9,913
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	71,368	65,301			20,642	22,089	21,519	6,015	0	.27	.27	0	1,360
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	4,339	4,316			.57	.30	.73	.149	0	0	0	0	999
15.2	Dental Only (b)	10,514	10,457			.149	572	.612	.306	0	0	0	0	2,423
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)	364	(120)			5,248	0	(52,058)	.486	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	48,515	48,048			.780	.8,133	.1,259	.5,788	0	0	0	0	8,786
16.	Workers' Compensation													1,122
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	1,809	.97,112			1,428	0	74,284	.299,766	0	0	0	0	.181
17.3	Excess Workers' Compensation													296
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	588,529	697,210	0	162,032	139,601	346,473	911,199	0	(138,244)	71,510	102,638	13,008	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products 120



3 8 2 4 5 2 0 2 4 4 3 0 1 0 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Florida		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	DURING THE YEAR 2024				NAIC Company Code 38245		
		1 Direct Premiums Written	2 Direct Premiums Earned					7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		DURING THE YEAR 2024										
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	0	0											0
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	9,619,792	9,603,227		2,582,801	4,887,871	4,665,116	.888,595	.86	3,835	3,980			333,873
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0											0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	6,834	6,834					(7,495)	5,345					164
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	110,873	109,378		1,551	7,165	7,955	3,252	0	0	0		25,407	2,450
15.2	Dental Only (b)	336,588	331,987		4,794	29,066	30,308	9,675	0	0	0		77,409	7,087
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)	0	0						0	0	0		0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	4,559,546	4,569,774		19,117	3,413,671	3,433,883	1,100,228	0	9	.9	417,617	95,551	
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0						0	0	0		0	0
17.2	Other Liability-Claims-Made	1,801,935	1,907,525		771,204	472,931	627,858	1,667,419	11,149	395,092	.620,144	326,837	57,540	
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	0	0						0	0	0		0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
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	0	0	0	0	0	0	0	0	0	0	0	0	
35.	TOTAL (a)	16,435,568	16,528,725	0	3,379,467	8,810,704	8,757,625	3,674,514	11,235	398,936	624,133	847,270	496,065	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0						0	0	0	0	0	0
3402.		0	0						0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

11,195 and number of persons insured under indemnity only products

4,681



3 8 2 4 5 2 0 2 4 4 3 0 1 1 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Georgia			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned											
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	825,735	859,543		280,072	75,235	47,692	734,146	0	(160,704)	192,794	165,553	33,772	
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	1,176,253	1,102,146		355,778	462,984	436,873	101,950	0	457	457	0	57,797	
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	39,558	39,558		0	0	25,928	30,942	0	0	0	0	0	1,304
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	208,086	204,838		3,294	18,172	19,100	5,612	0	0	0	0	47,506	9,266
15.2	Dental Only (b)	627,081	617,402		9,730	54,307	55,885	16,192	0	0	0	0	143,549	27,188
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)	0	0		0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	5,503,795	5,468,343		40,503	1,721,393	1,758,644	1,180,423	0	0	0	0	553,074	248,579
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0		0	0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	189,051	244,544		85,857	0	(44,685)	335,995	0	0	0	0	15,845	11,233
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	0	0		0	0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	8,569,559	8,536,374	0	775,234	2,332,091	2,299,437	2,405,260	0	(160,247)	193,251	925,527	389,139	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0		0	0	0	0	0	0	0	0	0	0
3402.		0	0		0	0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

.....6,300 and number of persons insured under indemnity only products

.....9,781



3 8 2 4 5 2 0 2 4 4 3 0 1 2 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Hawaii						DURING THE YEAR 2024						NAIC Company Code 38245	
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
		1 Direct Premiums Written	2 Direct Premiums Earned												
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)	166,867	186,109		57,538	6,909	27,995	166,550	0	(163,832)	78,922	33,405		2,918	
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine	585,512	539,391		165,822	245,579	241,900	49,206	0	160	222	0		12,032	
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0		0	
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)	0	0		0	0	0	0	0	0	0	0		0	
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)	0	0		0	0	0	0	0	0	0	0		0	
15.2	Dental Only (b)	(498)	(501)		3	0	(5)	(2)	0	0	0	0		(114)	(10)
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)	0	0		0	0	0	0	0	0	0	0		0	
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)	568,799	568,798		1	0	188,698	188,725	0	0	0	0		19,622	11,960
16.	Workers' Compensation														
17.1	Other Liability-Occurrence	0	0		0	0	0	0	0	0	0	0		0	
17.2	Other Liability-Claims-Made	1,921	1,525		958	0	1,454	1,760	0	0	0	0		192	33
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	0	0		0	0	0	0	0	0	0	0		0	
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty														
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	1,322,601	1,295,322	0	224,322	252,488	460,042	406,239	0	(163,672)	79,144	53,105		26,933	
DETAILS OF WRITE-INS															
3401.	Special Risk	0	0		0	0	0	0	0	0	0	0	0	0	0
3402.		0	0		0	0	0	0	0	0	0	0	0	0	0
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

598 and number of persons insured under indemnity only products 1



3 8 2 4 5 2 0 2 4 4 3 0 1 3 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Idaho			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	308,731	316,817			91,575	7,227	91,452	266,439	0	42,500	44,138	61,831	6,054
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	2,531,210	2,223,283			762,692	901,630	927,356	202,010	9,125	10,041	916	0	62,053
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	35,561	34,954			607	4,370	5,075	1,429	0	0	0	0	8,179
15.2	Dental Only (b)	106,855	105,461			1,698	14,016	15,811	3,996	0	0	0	0	24,576
15.3	Disability Income (b)													3,117
15.4	Medicare Supplement (b)													
15.5	Medicaid Title XIX (b)													
15.6	Medicare Title XVIII (b)													
15.7	Long-Term Care (b)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	482,455	478,980			6,935	160,608	178,735	59,174	0	0	0	0	75,195
16.	Workers' Compensation													10,631
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	64,240	102,335			12,251	0	(117,740)	164,187	0	0	0	0	4,988
17.3	Excess Workers' Compensation													1,605
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	3,529,052	3,261,830	0	875,758	1,087,851	1,100,689	697,235	9,125	52,541	45,054	174,769	84,246	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

2,032



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Illinois			DURING THE YEAR 2024							NAIC Company Code 38245				
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
1.	Fire															
2.1	Allied Lines															
2.2	Multiple Peril Crop															
2.3	Federal Flood															
2.4	Private Crop															
2.5	Private Flood															
3.	Farmowners Multiple Peril															
4.	Homeowners Multiple Peril															
5.1	Commercial Multiple Peril (Non-Liability Portion)			3,884,437	4,395,229		2,261,775	2,036,711	1,876,194	3,362,106	74,938	(1,179,444)	1,059,626	463,475	85,970	
5.2	Commercial Multiple Peril (Liability Portion)															
6.	Mortgage Guaranty															
8.	Ocean Marine															
9.1	Inland Marine			1,990,272	1,894,756		565,190	952,831	917,108	173,983	.49	829	.780	.0	43,673	
9.2	Pet Insurance Plans															
10.	Financial Guaranty															
11.1	Medical Professional Liability - Occurrence															
11.2	Medical Professional Liability - Claims-Made			0	.0		0	0	0	0	0	0	0	0		
12.	Earthquake															
13.1	Comprehensive (hospital and medical) ind (b)															
13.2	Comprehensive (hospital and medical) group (b)			.99,820	.99,820		0	12,294	15,340	78,078	0	0	0	0		
14.	Credit A & H (group and individual)													2,399		
15.1	Vision Only (b)			.98,028	.96,660		1,428	11,477	11,793	2,777	0	0	0	22,518	.2,166	
15.2	Dental Only (b)			282,912	278,965		4,084	43,657	43,970	7,655	0	0	0	64,915	.5,956	
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)			.58,783	(24,540)		1,265,345	0	2,175	17,911	0	109	.896	.0	.0	
15.8	Federal Employees Health Benefits Plan (b)															
15.9	Other Health (b)			8,170,554	8,159,032		16,659	4,034,428	3,761,895	2,155,808	25,000	25,000	.0	.452,211	183,190	
16.	Workers' Compensation															
17.1	Other Liability-Occurrence			0	.0		0	0	0	0	0	0	0	.0		
17.2	Other Liability-Claims-Made			275,069	.609,021		169,085	15,099	(181,060)	.8,285,854	2,946	(202,004)	.46,643	.15,295	.3,030	
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			0	.0		0	0	0	0	0	0	0	.0		
24.	Surety															
26.	Burglary and theft															
27.	Boiler and Machinery															
28.	Credit															
29.	International			XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
30.	Warranty															
31.	Reins nonproportional assumed property			XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
32.	Reins nonproportional assumed liability			XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
33.	Reins nonproportional assumed financial lines			XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
34.	Aggregate write-ins for other lines of business			0	.0		0	0	0	0	0	0	0	.0		
35.	TOTAL (a)			14,859,875	15,508,943		0	4,283,566	7,106,497	6,447,415	14,084,172	102,933	(1,355,510)	1,107,945	1,018,414	326,384
DETAILS OF WRITE-INS																
3401.	Special Risk			0	.0		0	0	0	0	0	0	0	.0		
3402.				0	.0		0	0	0	0	0	0	0	.0		
3403.																
3498.	Summary of remaining write-ins for Line 34 from overflow page			0	.0		0	0	0	0	0	0	0	.0		
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)			0	0		0	0	0	0	0	0	0	.0		

(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

43,200 and number of persons insured under indemnity only products

4,749



3 8 2 4 5 2 0 2 4 4 3 0 1 5 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Indiana			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	814,625	905,349			742,691	245,985	203,549	815,996	0	218,744	259,452	160,289	15,284
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	1,235,027	1,121,571			401,489	482,538	461,169	103,021	0	312	462	0	30,829
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	116,366	116,366			0	55,942	79,950	91,020	0	0	0	0	2,797
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	109,542	107,817			1,751	9,176	9,884	3,305	0	0	0	0	25,197
15.2	Dental Only (b)	330,924	325,559			5,458	31,594	33,286	9,541	0	0	0	0	76,105
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	4,069,072	4,047,694			24,305	1,266,963	1,392,397	1,479,052	0	1	1	200,583	84,383
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	198,570	242,343			54,678	3,857,491	1,356	16,476,674	103,513	109,776	6,263	28,709	4,761
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	6,874,126	6,866,699	0	1,230,372	5,949,689	2,181,591	18,978,609	103,513	328,833	266,178	490,883	147,442	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

.....8,028 and number of persons insured under indemnity only products

.....5,719



3 8 2 4 5 2 0 2 4 4 3 0 1 6 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Iowa			DURING THE YEAR 2024									NAIC Company Code 38245			
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees			
		1 Direct Premiums Written	2 Direct Premiums Earned														
1.	Fire																
2.1	Allied Lines																
2.2	Multiple Peril Crop																
2.3	Federal Flood																
2.4	Private Crop																
2.5	Private Flood																
3.	Farmowners Multiple Peril																
4.	Homeowners Multiple Peril																
5.1	Commercial Multiple Peril (Non-Liability Portion)																
5.2	Commercial Multiple Peril (Liability Portion)	644,050	790,867														
6.	Mortgage Guaranty																
8.	Ocean Marine																
9.1	Inland Marine	844,988	799,583														
9.2	Pet Insurance Plans																
10.	Financial Guaranty																
11.1	Medical Professional Liability - Occurrence																
11.2	Medical Professional Liability - Claims-Made	0	0														
12.	Earthquake																
13.1	Comprehensive (hospital and medical) ind (b)																
13.2	Comprehensive (hospital and medical) group (b)	0	0														
14.	Credit A & H (group and individual)																
15.1	Vision Only (b)	31,567	31,062														
15.2	Dental Only (b)	84,719	83,356														
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)	0	0														
15.8	Federal Employees Health Benefits Plan (b)																
15.9	Other Health (b)	510,657	515,777														
16.	Workers' Compensation																
17.1	Other Liability-Occurrence	0	0														
17.2	Other Liability-Claims-Made	139,495	186,472														
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	0	0														
24.	Surety																
26.	Burglary and theft																
27.	Boiler and Machinery																
28.	Credit																
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
30.	Warranty																
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
35.	TOTAL (a)	2,255,476	2,407,117	0	1,191,711	586,253	565,136	1,085,180	0	0	175,656	178,901	258,701	47,406			
DETAILS OF WRITE-INS																	
3401.	Special Risk	0	0														
3402.		0	0														
3403.																	
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

(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

0 and number of persons insured under indemnity only products

2,264



3 8 2 4 5 2 0 2 4 4 3 0 1 7 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Kansas			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned											
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	494,865	476,443		186,146	428,619	541,502	525,158	0	110,845	113,799	99,177	8,738	
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	1,341,898	1,250,482		396,188	455,049	435,139	114,736	0	447	515	0	29,690	
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	23,097	23,097		0	0	(26,015)	18,067	0	0	0	0	0	555
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	49,528	48,668		862	3,416	3,159	.799	0	0	0	0	11,392	1,094
15.2	Dental Only (b)	132,198	130,009		2,221	9,957	9,294	2,357	0	0	0	0	30,405	2,783
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)	0	0		0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	1,678,487	1,670,870		8,486	1,824,506	1,471,623	182,797	0	0	0	0	168,460	35,263
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0		0	0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	163,145	175,366		54,468	0	(93,346)	223,443	0	5,483	5,483	814	3,831	
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	0	0		0	0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	3,883,218	3,774,935	0	648,371	2,721,547	2,341,356	1,067,357	0	116,775	119,797	310,248	81,954	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0		0	0	0	0	0	0	0	0	0	0
3402.		0	0		0	0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

.....4,651 and number of persons insured under indemnity only products

.....1,751



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Kentucky			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	837,763	856,622			307,908	197,652	334,770	726,990	0	151,640	159,509	167,684	59,948
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	1,342,392	1,257,781			400,117	541,291	521,870	115,546	0	519	519	0	99,608
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	46,175	45,436			742	3,968	4,373	1,366	0	0	0	10,621	2,681
15.2	Dental Only (b)	120,140	118,204			1,958	8,997	9,736	3,508	0	0	0	27,635	5,893
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	3,479,137	3,471,143			9,103	1,471,736	1,913,901	1,008,754	0	0	0	157,789	191,511
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	23,049	17,113			8,700	0	1,278	5,112	0	(60,750)	0	2,305	1,766
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	5,848,656	5,766,299	0	728,528	2,223,644	2,785,928	1,861,276	0	91,409	160,028	366,034	362,407	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

.....6,361 and number of persons insured under indemnity only products

.....2,241



3 8 2 4 5 2 0 2 4 4 3 0 1 9 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Louisiana			DURING THE YEAR 2024									NAIC Company Code 38245	
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)		0	0			0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine	358,131	347,034			93,045	191,875	186,672	32,035	0	144	144	0	0	13,552
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made		0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)		0	0		0	0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)	41,429	40,774			658	2,330	2,896	1,510	0	0	0	0	9,389	1,337
15.2	Dental Only (b)	114,948	113,110			1,853	9,675	10,664	3,964	0	0	0	0	26,091	3,541
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)	0	0			0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)	489,609	482,197			7,894	149,167	154,090	54,314	0	0	0	0	85,014	15,133
16.	Workers' Compensation														
17.1	Other Liability-Occurrence	16,712,179	16,712,178			0	11,797,784	10,359,945	4,839,228	15,000	15,000	0	0	622,193	666,727
17.2	Other Liability-Claims-Made	865,129	910,204			439,155	1,245,629	550,274	4,358,371	43,987	115,165	420,618	152,959	27,677	
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	0	0			0	0	0	0	0	0	0	0	0	0
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty														
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	18,581,425	18,605,497	0	542,005	13,396,460	11,264,501	9,289,422	58,987	130,309	420,762	895,646	727,967		
DETAILS OF WRITE-INS															
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0	0
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

1,969



3 8 2 4 5 2 0 2 4 4 3 0 2 0 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Maine			DURING THE YEAR 2024									NAIC Company Code 38245	
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)	531,317	512,131			183,240	146,150	331,227	521,988	0	79,097	79,756	106,277	9,280	
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine	1,515,704	1,481,699			394,006	637,662	613,666	136,233	36,000	36,482	612	0	37,995	
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0	0
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0	30
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)	6,484	6,403			.84	371	534	237	0	0	0	0	1,374	143
15.2	Dental Only (b)	14,925	14,737			194	2,140	2,457	.479	0	0	0	0	3,297	314
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)	0	0			0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)	70,403	69,563			.882	22,520	25,838	.7,775	0	0	0	0	11,552	1,459
16.	Workers' Compensation														
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	2,996	2,274			1,455	0	.205	.730	0	0	0	0	300	.32
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	0	0			0	0	0	0	0	0	0	0	0	0
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty														
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	2,141,829	2,086,807	0	579,861	808,843	973,927	667,442	36,000	115,579	80,368	122,800	49,253		
DETAILS OF WRITE-INS															
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0	0
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

161



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Maryland			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	1,719,403	1,701,006			596,075	474,535	907,347	1,500,348	5,184	228,313	264,960	339,659	31,647
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	1,771,043	1,708,921			500,770	800,233	765,676	158,511	198	909	711	0	38,450
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	21,870	21,574			381	815	975	704	0	0	0	5,023	709
15.2	Dental Only (b)	97,508	96,165			1,558	7,898	8,595	3,395	0	0	0	22,433	3,157
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)	0	0			0	12,800	12,800	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	453,814	449,531			6,816	95,577	101,684	55,255	0	0	0	79,870	9,865
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	161,050	183,179			136,993	1,188,250	6,497	12,275,873	26,667	20,955	0	0	12,611
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	0	0			0	0	0	16,138	0	(593)	2,161	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	4,224,688	4,160,376	0	1,242,593	2,580,108	1,803,574	14,010,224	32,049	249,584	267,832	459,596	83,848	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products 1,304



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Massachusetts				DURING THE YEAR 2024						NAIC Company Code 38245		
		1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
Line of Business														
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	0	0			0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	4,299,854	4,166,278		1,137,116	1,747,826	1,690,375	383,843	737	2,158	1,725	0	132,850	
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0		0	0	0	0	0	0	0	0	0	379
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	9,539	9,385		159	557	624	291	0	0	0	0	2,132	211
15.2	Dental Only (b)	4,735,361	4,734,896		479	4,531,187	4,711,568	1,157,047	0	0	0	0	(175,945)	96,660
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)	0	0		0	29,280	(25,327)	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	1,768,028	1,767,113		1,977	89,196	72,896	114,406	0	0	0	0	96,256	36,684
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0		0	0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	958,415	1,052,538		392,631	357,917	106,350	11,544,012	18,405	(290,387)	351,683	188,709	19,142	
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	0	0		0	0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
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	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	11,771,197	11,730,210	0	1,532,362	6,755,963	6,556,486	13,199,599	19,142	(288,229)	353,408	111,152	285,926	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0		0	0	0	0	0	0	0	0	0	0
3402.		0	0		0	0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

10,446 and number of persons insured under indemnity only products

410



3 8 2 4 5 2 0 2 4 4 3 0 2 3 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Michigan			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	543,646	507,619			186,356	94,035	170,630	483,377	0	(433,857)	131,301	108,873	9,755
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	2,530,248	2,353,063			742,861	1,137,805	1,099,911	217,005	0	806	.974	0	55,731
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	150,981	148,967			2,050	8,719	9,657	5,068	0	0	0	34,725	3,337
15.2	Dental Only (b)	421,857	416,244			5,679	32,418	34,398	13,797	0	0	0	97,021	8,882
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	14,537,000	14,514,658			23,049	5,639,134	6,738,863	4,488,460	0	0	0	1,148,886	307,369
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	238,950	348,136			128,017	115,000	59,718	7,252,943	14,252	78,319	406,487	18,715	5,065
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	18,422,682	18,288,687	0	1,088,012	7,027,111	8,113,177	12,460,650	14,252	(354,732)	538,762	1,408,220	390,139	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

43,032 and number of persons insured under indemnity only products

6,959



3 8 2 4 5 2 0 2 4 4 3 0 2 4 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Minnesota			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)			0	0		0	0	0	0	0	0	0	0
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	2,436,504	2,237,579			761,944	788,883	752,174	207,117	0	(19,371)	930	0	58,512
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made			0	0		0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)		95,436	95,436		0	3,312	37,544	74,648	0	0	0	0	2,294
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	16,272	16,122			264	1,069	1,071	439	0	0	0	0	3,743
15.2	Dental Only (b)	124,419	123,145			1,911	19,281	20,784	4,529	0	0	0	0	2,619
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)			0	0		0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	516,086	510,655			7,603	152,370	164,486	65,153	0	0	0	0	60,213
16.	Workers' Compensation													11,137
17.1	Other Liability-Occurrence		0	0		0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made		1,368,835	1,504,984		617,326	581,779	365,829	3,416,863	33,256	(48,423)	22,145	205,272	28,331
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	0	0			0	(3,248)	(3,248)	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	4,557,552	4,487,921	0	1,389,048	1,543,446	1,338,640	3,768,749	33,256	(67,794)	23,075	297,841	103,253	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

1,551



3 8 2 4 5 2 0 2 4 4 3 0 2 5 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Mississippi				DURING THE YEAR 2024						NAIC Company Code 38245		
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned											
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	251,280	245,860		.96,491	.52,456	.83,253	.200,071	.0	.67,510	.74,077	.50,117	.4,776	
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	.178,259	.175,949		.47,458	.106,439	.102,801	.16,205	.0	.73	.73	.0	.3,432	
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	.0		.0	.0	-(18,727)	.0	.0	.0	.0	.0	.0	
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	.60,349	.59,585		.871	.4,083	.4,698	.2,188	.0	.0	.0	.0	.13,859	.1,334
15.2	Dental Only (b)	.175,488	.173,194		2,572	.24,099	.25,242	.5,978	.0	.0	.0	.0	.40,308	.3,695
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)	0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	.1,763,739	.1,751,183		.13,505	.824,504	.849,299	.386,117	.0	.0	.0	.0	.184,090	.38,320
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	
17.2	Other Liability-Claims-Made	.39,304	.33,049		.20,184	.0	.2,397	.1,404,243	.0	-(55,537)	.0	.0	.3,523	.584
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	0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
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	0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	
35.	TOTAL (a)	2,468,419	2,438,820	0	181,081	1,011,581	1,048,963	2,014,802	0	12,046	74,150	291,897	52,141	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	
3402.		0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	

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

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

.....1,414 and number of persons insured under indemnity only products

.....3,049



3 8 2 4 5 2 0 2 4 4 3 0 2 6 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Missouri				DURING THE YEAR 2024						NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	1,440,291	1,511,499			1,024,642	640,635	1,772,762	2,173,596	17,604	403,170	539,346	288,171	25,394
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	2,186,860	2,066,767			633,664	712,170	680,277	190,313	4,282	5,055	.855	0	46,573
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	.68,069	.67,096			1,041	2,819	2,423	1,744	0	0	0	15,591	1,504
15.2	Dental Only (b)	204,599	201,665			3,093	14,178	13,357	5,538	0	0	0	46,929	4,307
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	2,602,815	2,592,188			11,721	774,201	464,157	.671,702	0	0	0	214,473	54,531
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	102,222	101,845			78,827	1,066,309	.8,065	16,717,291	.49,528	246,203	.795,596	.8,195	2,230
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	6,604,856	6,541,060	0	1,752,988	3,210,312	2,941,041	19,760,184	71,414	654,428	1,335,797	573,359	134,539	
DETAILS OF WRITE-INS														
3401.		0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

.....6,505 and number of persons insured under indemnity only products

.....3,192



3 8 2 4 5 2 0 2 4 4 3 0 2 7 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Montana				DURING THE YEAR 2024						NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	103,182	115,674			35,263	0	(4,933)	95,283	0	19,433	21,453	20,698	3,133
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	163,447	146,634			47,146	29,425	29,538	13,400	0	.61	.61	0	4,645
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	4,213	4,107			109	394	425	.122	0	0	0	0	93
15.2	Dental Only (b)	11,596	11,299			297	1,222	1,278	.295	0	0	0	0	2,577
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	3,175,887	3,172,724			7,213	2,133,206	3,161,921	1,034,911	0	8	8	179,586	68,189
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	937	1,479			508	0	1,516	2,071	0	0	0	0	94
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	3,459,262	3,451,917	0	90,536	2,164,247	3,189,745	1,146,082	0	19,502	21,522	203,894	76,327	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

8,384 and number of persons insured under indemnity only products

189



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Nebraska						DURING THE YEAR 2024						NAIC Company Code 38245	
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)	451,614	452,131		156,663		153,819	193,699	400,166	0	87,202	90,644	90,331	7,983	
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine	1,511,341	1,417,994		452,190		641,823	610,161	131,219	0	502	588	0	34,255	
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made	0	0		0		0	0	0	0	0	0	0	0	
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)	0	0		0		0	0	0	0	0	0	0	0	
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)	14,609	14,375		238		1,092	1,101	434	0	0	0	0	3,360	323
15.2	Dental Only (b)	37,268	36,677		606		3,434	3,244	1,025	0	0	0	0	8,571	785
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)	0	0		0		0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)	8,683,845	8,682,487		2,764		7,026,644	7,539,918	2,559,675	0	0	0	0	261,494	180,037
16.	Workers' Compensation														
17.1	Other Liability-Occurrence	0	0		0		0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	813,479	817,888		153,415		1,427,483	(41,086)	6,860,958	46,124	328,910	744,498	61,319	17,720	
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	0	0		0		0	0	0	0	0	0	0	0	0
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty														
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	11,512,156	11,421,552	0	765,876		9,254,295	8,307,037	9,953,477	46,124	416,614	835,730	425,075	241,103	
DETAILS OF WRITE-INS															
3401.	Special Risk	0	0		0		0	0	0	0	0	0	0	0	0
3402.		0	0		0		0	0	0	0	0	0	0	0	0
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

15,686 and number of persons insured under indemnity only products

665



3 8 2 4 5 2 0 2 4 4 3 0 2 9 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Nevada				DURING THE YEAR 2024						NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	198,824	180,750			88,946	36,437	(18,863)	150,762	0	34,661	36,648	39,831	5,411
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	553,457	530,546			149,358	178,151	169,657	48,849	0	219	219	0	16,205
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	29,231	28,788			447	2,369	2,848	1,051	0	0	0	0	6,724
15.2	Dental Only (b)	89,820	88,445			1,386	9,829	11,222	3,064	0	0	0	0	20,656
15.3	Disability Income (b)													1,891
15.4	Medicare Supplement (b)													
15.5	Medicaid Title XIX (b)													
15.6	Medicare Title XVIII (b)													
15.7	Long-Term Care (b)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	395,818	390,895			5,610	52,594	71,081	48,328	0	0	0	0	88,238
16.	Workers' Compensation													10,943
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	20,401	17,727			8,920	0	4,838,445	5,017,216	31,294	1,876,027	1,901,188	2,040	336
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	1,267,551	1,237,151	0	254,667	279,380	5,074,390	5,269,270	31,294	1,910,907	1,938,055	157,489	35,432	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

1,518



3 8 2 4 5 2 0 2 4 4 3 0 3 0 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF New Hampshire				DURING THE YEAR 2024						NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	630,134	590,034			204,034	96,919	355,981	573,635	0	30,548	87,264	126,084	17,142
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	1,278,427	1,188,284			361,203	346,562	335,525	108,778	.67	557	490	0	40,907
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	140	137			.4	0	3	3	0	0	0	0	32
15.2	Dental Only (b)	334	326			.8	0	6	6	0	0	0	0	77
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	177,435	162,354			50,177	80,872	78,831	14,864	0	.67	.67	0	3,668
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	3,334	2,023			1,731	0	920	1,705	0	0	0	0	.58
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	2,089,804	1,943,158	0	617,157	524,353	771,266	698,991	67	31,172	87,821	126,526	61,785	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

3,794 and number of persons insured under indemnity only products

0



3 8 2 4 5 2 0 2 4 4 3 0 3 1 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF New Jersey		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	DURING THE YEAR 2024				NAIC Company Code 38245	
		1 Direct Premiums Written	2 Direct Premiums Earned					7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		DURING THE YEAR 2024									
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)	1,378,563	1,421,549		419,174	388,260	321,539	1,314,860	0	(20,279)	295,769	275,803	30,750
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine	2,852,656	2,686,454		817,135	1,170,264	1,139,856	247,014	276	(3,367)	1,111	0	73,604
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0	0
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)	150	150		12	0	190	3,714	0	0	0	0	147
14.	Credit A & H (group and individual)												
15.1	Vision Only (b)	14,233	13,985		274	1,541	1,524	452	0	0	0	0	3,276
15.2	Dental Only (b)	38,163	37,450		769	6,382	6,252	1,187	0	0	0	0	8,776
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)	3,220	605		46,431	0	(432)	4,299	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)	10,094,554	10,098,092		3,130	10,742,282	11,712,154	3,180,267	0	2	2	705,252	215,860
16.	Workers' Compensation												
17.1	Other Liability-Occurrence	0	0		0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	117,214	264,529		58,902	0	(39,620)	7,226,426	15,790	(2,620)	0	0	9,278
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	0	0		0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	14,498,753	14,522,814	0	1,345,827	12,308,729	13,141,463	11,978,219	16,066	(26,264)	296,882	1,002,385	324,400
DETAILS OF WRITE-INS													
3401.	Special Risk	0	0		0	0	0	0	0	0	0	0	0
3402.		0	0		0	0	0	0	0	0	0	0	0
3403.													
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

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

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

13,215 and number of persons insured under indemnity only products

694



3 8 2 4 5 2 0 2 4 4 3 0 3 2 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF New Mexico			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	159,946	177,505			49,776	0	18,245	148,775	0	(1,317,366)	30,461	32,053	3,132
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	685,853	647,954			205,796	237,654	223,430	59,786	0	268	268	0	16,421
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	9,513	9,368			145	418	571	372	0	0	0	2,189	210
15.2	Dental Only (b)	25,158	24,743			415	1,781	2,184	985	0	0	0	5,786	530
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	137,115	135,280			2,037	27,285	31,502	17,138	0	0	0	20,761	7,850
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	1,749,796	1,749,796			0	1,089,400	1,045,702	547,869	0	0	0	43,541	37,183
17.2	Other Liability-Claims-Made	20,269	17,518			12,403	0	1,026	7,712	0	0	0	0	1,780
17.3	Excess Workers' Compensation													
18.1.	Products liability-Occurrence													
18.2.	Products liability-Claims-Made													
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2	Other Private Passenger Auto Liability													
19.3	Commercial Auto No-Fault (Personal Injury Protection)													
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	2,787,650	2,762,164	0	270,572	1,356,538	1,322,660	782,637	0	(1,317,098)	30,729	106,110	65,595	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

427



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF New York				DURING THE YEAR 2024						NAIC Company Code 38245		
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned											
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	821,625	1,083,245		270,150	0	(400,674)	426,801	4,364	176,056	171,693	0	17,453	
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	66,576,159	65,828,266		18,469,623	27,073,308	24,681,632	6,061,850	5,750	(21,831)	27,020	0	1,375,084	
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	216	253		.43	4,175	3,985	6,286	0	0	0	0	0	212
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	19,203	18,866		.361	1,280	1,349	.647	0	0	0	0	4,419	424
15.2	Dental Only (b)	57,809	56,891		.978	7,297	7,333	1,784	0	0	0	0	13,297	1,217
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)	0	0		0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	21,894,759	21,765,717		3,881,654	14,508,501	15,649,665	4,486,044	32,719	38,532	5,813	192,570	464,753	
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0		0	0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	46,340	352,281		.24,190	.599,945	(792,531)	16,921,767	17,910	(518,732)	.372,949	4,086	.823	
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	0	0		0	0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
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	2,323,401	2,318,151	0	649,410	352,043	692,109	2,000,747	0	95,474	484,271	465,036	42,411	
35.	TOTAL (a)	91,739,512	91,423,670	0	23,296,409	42,546,549	39,842,868	29,905,926	60,743	(230,501)	1,061,746	679,408	1,902,377	
DETAILS OF WRITE-INS														
3401.	Special Risk	2,323,401	2,318,151		649,410	352,043	692,109	2,000,747	0	95,474	484,271	465,036	42,411	
3402.														
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	2,323,401	2,318,151	0	649,410	352,043	692,109	2,000,747	0	95,474	484,271	465,036	42,411	

(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

729,504 and number of persons insured under indemnity only products

1,163



3 8 2 4 5 2 0 2 4 4 3 0 3 4 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF North Carolina			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned											
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	681,612	676,666		246,595	123,988	244,688	592,531	0	143,759	152,321	135,400	12,956	
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	4,340,439	4,251,043		1,200,164	1,891,274	1,790,867	394,239	0	1,720	1,765	0	96,332	
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	16,055	16,055		0	0	2,341	12,558	0	0	0	0	0	386
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	71,709	70,653		1,086	71,685	71,372	1,604	0	0	0	0	16,098	1,585
15.2	Dental Only (b)	643,643	634,805		9,064	58,856	58,118	16,880	0	0	0	0	146,939	13,551
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)	0	0		0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	11,264,964	11,229,767		37,971	5,314,358	8,996,849	6,175,294	0	0	0	0	675,943	246,749
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0		0	0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	290,731	273,137		183,652	0	24,164	2,395,296	3,420	(211,577)	103,667	23,909	5,228	
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	0	0		0	0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	17,309,153	17,152,126	0	1,678,532	7,460,161	11,188,399	9,588,402	3,420	(66,098)	257,753	998,289	376,787	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0		0	0	0	0	0	0	0	0	0	0
3402.		0	0		0	0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

39,273 and number of persons insured under indemnity only products

8,022



3 8 2 4 5 2 0 2 4 4 3 0 3 5 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF North Dakota			DURING THE YEAR 2024									NAIC Company Code 38245	
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)		73,031	70,011		25,082	0	18,067	58,532	0	9,417	10,180	14,625	1,292	
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine			87,082	88,280		28,500	11,237	6,797	8,177	0	.36	.36	0	2,871
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made			0	0		0	0	0	0	0	0	0	0	0
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)			0	0		0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)		2,081	2,049		34	262	299	98	0	0	0	0	.479	.46
15.2	Dental Only (b)		6,706	6,596		115	1,453	1,486	253	0	0	0	0	1,542	141
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)		0	0		0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)		439,250	438,748		522	13,989	148,175	139,222	0	0	0	0	2,300	8,733
16.	Workers' Compensation														
17.1	Other Liability-Occurrence		0	0		0	0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made		129,982	140,687		64,286	0	(20,020)	1,963,939	0	0	(60,271)	4,519	.223	3,457
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		0	0		0	0	0	0	0	0	0	0	0	0
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty														
31.	Reins nonproportional assumed property		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business		0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)		738,132	746,371	0	118,539	26,941	154,804	2,170,221	0	(50,818)	14,735	19,169	16,540	
DETAILS OF WRITE-INS															
3401.															
3402.															
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page		0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)		0	0	0	0	0	0	0	0	0	0	0	0	0

(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

.....1,274 and number of persons insured under indemnity only products

.....167



3 8 2 4 5 2 0 2 4 4 3 0 3 6 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Ohio			DURING THE YEAR 2024									NAIC Company Code 38245	
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
		1 Direct Premiums Written	2 Direct Premiums Earned												
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)	1,247,900	1,287,253		413,886	659,251	758,475	1,090,312	9,793	(435,663)	311,359	248,293	22,212		
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine	7,434,805	7,034,083		2,141,275	2,739,717	2,627,946	648,088	2,621	5,449	2,910	0	160,629		
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0	0	0	
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)	54,910	54,910		0	0	(1,080)	42,950	0	0	0	0	0	0	733
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)	150,006	148,132		2,121	79,833	80,635	4,689	0	0	0	0	34,492	3,315	
15.2	Dental Only (b)	411,847	406,681		5,878	42,873	44,523	12,417	0	0	0	0	94,661	8,671	
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)	0	0		0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)	4,142,802	4,119,688		25,283	5,142,775	5,084,883	843,942	0	0	0	0	273,928	85,868	
16.	Workers' Compensation														
17.1	Other Liability-Occurrence	0	0		0	0	0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	84,356	53,106		44,791	0	(93,137)	57,889	0	0	(246,684)	0	0	8,436	1,402
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	0	0		0	0	0	0	0	0	0	0	0	0	0
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
30.	Warranty														
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	13,526,626	13,103,853	0	2,633,234	8,664,449	8,502,245	2,700,287	12,414	(676,898)	314,269	659,810	282,330		
DETAILS OF WRITE-INS															
3401.	Special Risk	0	0		0	0	0	0	0	0	0	0	0	0	0
3402.		0	0		0	0	0	0	0	0	0	0	0	0	0
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

5,544 and number of persons insured under indemnity only products

6,766



3 8 2 4 5 2 0 2 4 4 3 0 3 7 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Oklahoma			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	693,031	713,268			224,449	622,838	584,986	689,586	0	154,792	158,359	138,000	15,137
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	554,510	531,645			169,314	277,552	262,321	49,484	822	1,043	221	0	14,923
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	214,244	214,244			0	34,862	120,341	167,577	0	0	0	0	5,229
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	71,145	70,347			821	5,586	5,544	1,629	0	0	0	0	16,362
15.2	Dental Only (b)	183,471	181,414			2,097	21,574	21,026	3,870	0	0	0	0	42,198
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	3,236,182	3,227,907			8,912	2,951,900	3,006,387	701,481	0	0	0	0	315,483
16.	Workers' Compensation													69,551
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	64,624	61,016			50,191	0	4,206	245,640	29,964	(268,319)	3,121	5,305	886
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	5,017,207	4,999,841	0	455,784	3,914,312	4,004,811	1,859,267	30,786	(112,484)	161,701	517,348	111,161	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

.....4,190 and number of persons insured under indemnity only products

.....2,398



3 8 2 4 5 2 0 2 4 4 3 0 3 8 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Oregon				DURING THE YEAR 2024						NAIC Company Code 38245		
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned											
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	457,018	484,195		168,152	33,800	29,724	408,544	0	75,079	76,523	91,470		.8,222
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	2,482,510	2,418,034		708,437	1,010,740	980,368	224,486	2,460	3,208	1,006	0		.55,157
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0		0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0		0	0	0	0	0	0	0	0		0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	29,187	28,723		464	2,237	2,300	.892	0	0	0	0	.6,714	.645
15.2	Dental Only (b)	89,074	87,621		1,453	8,756	8,918	2,680	0	0	0	0	20,486	.1,875
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)	0	0		0	0	0	0	0	0	0	0		0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	368,386	370,389		5,685	103,614	91,047	39,419	0	3	3	3	58,912	.16,162
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0		0	0	0	0	0	0	0	0		0
17.2	Other Liability-Claims-Made	75,626	74,667		15,013	24,105	25,099	1,724,799	0	(100,118)	0	0	.5,974	.1,235
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	0	0		0	0	0	0	0	0	0	0		0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	3,501,801	3,463,629	0	899,204	1,183,252	1,117,456	2,400,820	2,460	(21,828)	77,532	183,556	83,296	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0		0	0	0	0	0	0	0	0	0	0
3402.		0	0		0	0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

1,370



3 8 2 4 5 2 0 2 4 4 3 0 3 9 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Pennsylvania			DURING THE YEAR 2024							NAIC Company Code 38245			
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)			5,452,757	5,657,391		2,183,049	.51,693	(462,496)	2,791,037	.7,054	.97,385	.546,408	201,185	115,614
5.2	Commercial Multiple Peril (Liability Portion)														
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine			8,810,034	8,479,287		2,497,178	3,541,653	3,365,040	.781,530	0	3,503	3,503	0	198,571
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made			130,274	130,274		0	0	0	.175,000	0	0	0	0	.27
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)			18,594	18,594		0	0	(19,852)	14,544	0	0	0	0	.597
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)			143,252	141,449		1,849	.8,871	.9,211	4,172	0	0	0	32,847	.3,166
15.2	Dental Only (b)			395,905	390,743		5,281	.36,359	.37,872	11,745	0	0	0	90,732	.8,335
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)			252	.575		3,641	0	(.91)	.337	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)			1,765,176	1,741,610		24,550	.703,937	.683,862	.171,267	0	0	0	.299,268	.37,865
16.	Workers' Compensation														
17.1	Other Liability-Occurrence			9,151,131	9,151,131		0	.5,406,968	.6,526,222	.2,631,931	0	0	0	.359,582	.189,638
17.2	Other Liability-Claims-Made			144,439	.183,228		.93,249	.300,000	.30,415	.2,136,706	.69,714	.941,652	.1,580,164	.330,389	.2,540
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			0	.0		0	0	0	0	0	0	0	0	0
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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			0	.0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)			26,011,814	25,894,282	0	4,808,797	10,049,481	10,170,183	8,718,269	76,768	1,042,540	2,130,075	1,314,003	556,353
DETAILS OF WRITE-INS															
3401.	Special Risk			0	.0		0	0	0	0	0	0	0	0	0
3402.				0	.0		0	0	0	0	0	0	0	0	0
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page			0	.0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)			0	0	0	0	0	0	0	0	0	0	0	0

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

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

0 and number of persons insured under indemnity only products

6,569



3 8 2 4 5 2 0 2 4 4 3 0 5 4 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Puerto Rico			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)			0	0		0	0	0	0	0	0	0	0
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine		58,963	72,071		15,778	26,520	14,153	6,981	0	30	30	0	2,269
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made			0	0		0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)			0	0		0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)		0	0		0	0	0	0	0	0	0	0	0
15.2	Dental Only (b)		0	0		0	0	0	0	0	0	0	0	0
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)		0	0		0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)		0	0		0	0	0	0	0	0	0	0	0
16.	Workers' Compensation													
17.1	Other Liability-Occurrence		0	0		0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made		525	440		.85	0	.633	35,312	0	0	0	0	52
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		0	0		0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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		0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)		59,488	72,511	0	15,863	26,520	14,786	42,293	0	30	30	52	2,278
DETAILS OF WRITE-INS														
3401.	Special Risk		0	0		0	0	0	0	0	0	0	0	0
3402.			0	0		0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page		0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)		0	0	0	0	0	0	0	0	0	0	0	0

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

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

0 and number of persons insured under indemnity only products 0



3 8 2 4 5 2 0 2 4 4 3 0 4 0 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Rhode Island			DURING THE YEAR 2024									NAIC Company Code 38245	
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
		1 Direct Premiums Written	2 Direct Premiums Earned												
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)	1,323,317	1,299,326		443,385		180,693	166,043	637,794	5,275	245,342	240,714	46,575	29,687	
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine	848,311	824,240		226,625		476,848	463,671	76,102	0	342	342	0	17,940	
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made	0	0		0		0	0	0	0	0	0	0	0	
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)	0	0		0		0	0	0	0	0	0	0	0	
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)	2,029	1,993		38		142	171	86	0	0	0	0	467	45
15.2	Dental Only (b)	6,870	6,765		111		906	961	233	0	0	0	0	1,580	145
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)	0	0		0		0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)	133,794	120,832		32,070		45,309	44,944	11,967	0	39	39	4,776	3,064	
16.	Workers' Compensation														
17.1	Other Liability-Occurrence	0	0		0		0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	9,311	7,149		4,238		0	201	1,467,535	0	(26,444)	0	0	862	185
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	0	0		0		0	0	0	0	0	0	0	0	0
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty														
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	2,323,632	2,260,305	0	706,467		703,898	675,991	2,193,717	5,275	219,279	241,095	54,260	51,066	
DETAILS OF WRITE-INS															
3401.	Special Risk	0	0		0		0	0	0	0	0	0	0	0	0
3402.		0	0		0		0	0	0	0	0	0	0	0	0
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0		0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0		0	0	0	0	0	0	0	0	0

(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

2,854 and number of persons insured under indemnity only products

77



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF South Carolina			DURING THE YEAR 2024									NAIC Company Code 38245			
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	Dividends Paid or Credited to Policyholders on Direct Business	4	5	6	7	8	9	10	11	12			
		1 Direct Premiums Written	2 Direct Premiums Earned														
1.	Fire																
2.1	Allied Lines																
2.2	Multiple Peril Crop																
2.3	Federal Flood																
2.4	Private Crop																
2.5	Private Flood																
3.	Farmowners Multiple Peril																
4.	Homeowners Multiple Peril																
5.1	Commercial Multiple Peril (Non-Liability Portion)																
5.2	Commercial Multiple Peril (Liability Portion)	701,551	682,956			238,156	217,237	469,518	696,191	(1,436)	111,283	127,202	140,629	23,836			
6.	Mortgage Guaranty																
8.	Ocean Marine																
9.1	Inland Marine	2,356,462	2,244,495			662,164	955,140	918,401	207,845	0	933	933	0	105,909			
9.2	Pet Insurance Plans																
10.	Financial Guaranty																
11.1	Medical Professional Liability - Occurrence																
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0	0	0	
12.	Earthquake																
13.1	Comprehensive (hospital and medical) ind (b)																
13.2	Comprehensive (hospital and medical) group (b)	18,482	18,482			0	0	(2,903)	14,456	0	0	0	0	0	0	444	
14.	Credit A & H (group and individual)																
15.1	Vision Only (b)	129,549	127,837			1,816	7,496	8,394	4,136	0	0	0	0	28,544	5,188		
15.2	Dental Only (b)	377,440	372,617			5,127	44,191	45,183	10,905	0	0	0	0	85,617	15,311		
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)	0	0			0	0	0	0	0	0	0	0	0	0	0	
15.8	Federal Employees Health Benefits Plan (b)																
15.9	Other Health (b)	2,496,798	2,479,315			19,594	1,902,193	1,843,473	506,726	0	0	0	0	280,346	107,813		
16.	Workers' Compensation					0	0	0	0	0	0	0	0	0	0		
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0	0	0	
17.2	Other Liability-Claims-Made	212,415	209,906			117,902	20,000	(1,717)	1,934,951	18,633	28,776	464,841	16,920	3,677			
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	0	0			0	0	0	0	0	0	0	0	0	0	0	
24.	Surety																
26.	Burglary and theft																
27.	Boiler and Machinery																
28.	Credit																
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
30.	Warranty																
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
35.	TOTAL (a)	6,292,697	6,135,608	0	1,044,759	3,146,257	3,280,349	3,375,210	17,197	140,992	592,976	552,056	262,178				
DETAILS OF WRITE-INS																	
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0	0	0	
3402.		0	0			0	0	0	0	0	0	0	0	0	0	0	
3403.																	
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

(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

.....5,090 and number of persons insured under indemnity only products

.....5,128



3 8 2 4 5 2 0 2 4 4 3 0 4 2 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF South Dakota			DURING THE YEAR 2024									NAIC Company Code 38245	
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)	68,756	74,817			13,308	10,490	11,917	61,457	0	20,437	21,836	13,838	1,259	
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine	239,932	233,717			66,603	99,612	92,425	21,630	0	.97	.97	0	5,361	
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0	0
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)	2,944	2,884			.62	252	260	.118	0	0	0	0	.678	.65
15.2	Dental Only (b)	8,334	8,193			.147	4,244	4,208	.267	0	0	0	0	1,917	.175
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)	0	0			0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)	1,897,535	1,898,598			.727	387,749	186,220	.333,523	0	0	0	0	73,754	.42,075
16.	Workers' Compensation														
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	3,515	2,746			1,215	0	1,369	.1,590	0	0	0	0	.351	.62
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	0	0			0	0	0	0	0	0	0	0	0	0
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty														
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	2,221,016	2,220,955	0	82,062	502,347	296,399	418,585	0	20,534	21,933	90,538	48,997		
DETAILS OF WRITE-INS															
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0	0
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

11,193 and number of persons insured under indemnity only products

194



3 8 2 4 5 2 0 2 4 4 3 0 4 3 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Tennessee			DURING THE YEAR 2024									NAIC Company Code 38245	
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)	622,801	599,714			232,073	375,615	22,496	542,088	15,921	87,705	119,353	124,805		11,195
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine	1,698,872	1,681,203			462,480	731,586	695,668	155,081	0	695	695	0		34,881
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0	0
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)	35,003	35,003			0	0	(26,523)	27,378	0	0	0	0	0	841
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)	173,762	171,243			2,538	11,811	11,139	4,317	0	0	0	0	39,536	3,840
15.2	Dental Only (b)	485,407	478,531			6,929	31,905	30,097	11,619	0	0	0	0	110,661	10,220
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)	0	0			0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)	4,266,393	4,242,204			28,133	1,101,351	1,449,574	920,236	0	1	1	490,319		87,239
16.	Workers' Compensation														
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	309,932	922,226			104,869	0	263,658	3,255,514	0	(133,531)	0	0	24,390	5,912
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	0	0			0	0	0	0	0	0	0	0	0	0
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty														
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	7,592,170	8,130,124	0	837,022	2,252,268	2,446,109	4,916,233	15,921	(45,130)	120,049	789,711	155,128		
DETAILS OF WRITE-INS															
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0	0
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

3,782 and number of persons insured under indemnity only products

14,616



3 8 2 4 5 2 0 2 4 4 3 0 4 4 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Texas			DURING THE YEAR 2024									NAIC Company Code 38245				
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees				
		1 Direct Premiums Written	2 Direct Premiums Earned															
1.	Fire																	
2.1	Allied Lines																	
2.2	Multiple Peril Crop																	
2.3	Federal Flood																	
2.4	Private Crop																	
2.5	Private Flood																	
3.	Farmowners Multiple Peril																	
4.	Homeowners Multiple Peril																	
5.1	Commercial Multiple Peril (Non-Liability Portion)																	
5.2	Commercial Multiple Peril (Liability Portion)	2,144,611	2,345,232		1,227,030		.650,012		.866,751		2,274,206		0	.412,503	.439,123	.431,048	.40,295	
6.	Mortgage Guaranty																	
8.	Ocean Marine																	
9.1	Inland Marine	4,110,661	3,947,026		1,170,355		1,977,060		1,909,063		.362,837		.44	.1,163	.1,629	.0	.89,524	
9.2	Pet Insurance Plans																	
10.	Financial Guaranty																	
11.1	Medical Professional Liability - Occurrence																	
11.2	Medical Professional Liability - Claims-Made	0	.0				0	0	0		0		0	0	0	.0		
12.	Earthquake																	
13.1	Comprehensive (hospital and medical) ind (b)																	
13.2	Comprehensive (hospital and medical) group (b)	.128,817	.128,817		0		0		18,841		.100,759		0	0	0	.0	.3,096	
14.	Credit A & H (group and individual)																	
15.1	Vision Only (b)	.587,789	.579,666		.8,339		.179,130		.181,202		.17,553		0	0	0	.0	.135,166	.12,992
15.2	Dental Only (b)	1,589,409	1,567,439		22,622		.171,730		.173,046		.44,177		0	0	0	.0	.365,268	.33,468
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)	0	.0				0	0	0		0		0	0	0	.0		
15.8	Federal Employees Health Benefits Plan (b)																	
15.9	Other Health (b)	13,694,190	13,611,468		.91,459		.11,072,734		.9,674,504		.2,690,422		.15,000	.15,001	.1	.1,437,721	.291,167	
16.	Workers' Compensation						0	0	0		0		0	0	0	.0		
17.1	Other Liability-Occurrence	0	.0				0	0	0		0		0	0	0	.0		
17.2	Other Liability-Claims-Made	.361,402	.472,019		.263,705		.29,006		.(18,060)		.627,396		2,041	.(940,924)	.47,885	.31,208	.6,213	
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	0	.0				0	0	0		0		0	0	.0	.0		
24.	Surety																	
26.	Burglary and theft																	
27.	Boiler and Machinery																	
28.	Credit																	
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
30.	Warranty																	
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
34.	Aggregate write-ins for other lines of business	0	.0	0	0	0	0	0	0	0	0	0	0	0	0	.0		
35.	TOTAL (a)	22,616,879	22,651,667	0	2,783,510		14,079,672		12,805,347		6,117,350		17,085	(512,257)	488,638	2,400,411	476,755	
DETAILS OF WRITE-INS																		
3401.	Special Risk	0	.0				0	0	0		0		0	0	0	.0		
3402.		0	.0				0	0	0		0		0	0	0	.0		
3403.																		
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	.0	0	0	0	0	0	0		0		0	0	0	.0		
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0		0		0	0	0	0		

(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

24,401 and number of persons insured under indemnity only products

24,387



3 8 2 4 5 2 0 2 4 4 3 0 4 5 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Utah			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	303,964	283,035			111,612	159,834	232,174	263,685	0	52,849	56,174	61,086	5,430
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	142,160	139,760			35,422	87,142	84,452	13,074	0	.59	.59	0	2,636
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	63,374	62,429			947	4,143	5,161	2,620	0	0	0	14,447	1,400
15.2	Dental Only (b)	195,571	192,720			2,856	27,216	29,576	7,784	0	0	0	44,527	4,117
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	1,206,210	1,193,367			13,666	279,289	313,404	139,825	0	0	0	207,047	23,864
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	114,282	96,885			76,163	0	9,848	74,575	0	0	0	8,810	2,686
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	2,025,561	1,968,196	0	240,666	557,624	674,615	501,563	0	52,908	56,233	335,917	40,133	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

4,975



3 8 2 4 5 2 0 2 4 4 3 0 4 6 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Vermont				DURING THE YEAR 2024						NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)			0	0		0	0	0	0	0	0	0	0
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	365,744	361,818			97,472	178,172	170,732	33,586	0	151	151	0	9,317
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made			0	0		0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)			0	0		0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)			(22)	(25)		4	0	2	3	0	0	0	(5)
15.2	Dental Only (b)			(32)	(40)		8	0	6	6	0	0	0	(7)
15.3	Disability Income (b)													4
15.4	Medicare Supplement (b)													
15.5	Medicaid Title XIX (b)													
15.6	Medicare Title XVIII (b)													
15.7	Long-Term Care (b)			0	0		0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	1,083,800	1,083,755			.45	1,114,399	1,228,660	359,619	20,000	20,000	0	(934)	24,353
16.	Workers' Compensation													
17.1	Other Liability-Occurrence			0	0		0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	2,765	2,181			1,112	18,633	569	7,673,089	40,117	605,700	1,242,048	216	35
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	1,452,255	1,447,689	0	98,641	1,311,204	1,399,969	8,066,303	60,117	625,851	1,242,199	(730)	33,696	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

21,254 and number of persons insured under indemnity only products

34



3 8 2 4 5 2 0 2 4 4 3 0 4 7 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Virginia			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	1,202,113	1,239,311			394,780	563,817	638,384	1,040,847	0	215,455	223,505	239,137	25,524
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	3,421,635	3,256,429			1,010,645	1,841,371	1,762,963	299,773	0	592	1,342	0	81,959
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	28
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	76,350	75,248			1,192	3,634	4,627	2,671	0	0	0	17,804	1,687
15.2	Dental Only (b)	229,476	225,988			3,715	12,625	15,298	7,709	0	0	0	53,455	4,831
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	2,277,264	2,266,299			14,682	1,149,083	(36,371)	333,837	0	0	0	170,308	51,769
16.	Workers' Compensation													
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	22,846	69,911			10,423	20,000	39,066	10,174,228	0	0	0	2,285	653
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	7,229,684	7,133,186	0	1,435,437	3,590,530	2,423,967	11,859,065	0	216,047	224,847	482,989	166,451	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

3,578



3 8 2 4 5 2 0 2 4 4 3 0 4 8 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Washington		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	DURING THE YEAR 2024				NAIC Company Code 38245	
		1 Direct Premiums Written	2 Direct Premiums Earned					7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		DURING THE YEAR 2024									
1.	Fire												
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood												
3.	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril												
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)	967,701	952,567		336,782	933,798	1,529,165	1,265,059	0	157,029	161,565	193,730	18,008
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.1	Inland Marine	4,194,881	4,157,352		1,234,401	1,910,805	1,767,736	386,047	0	1,503	1,722	0	95,967
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0	0
12.	Earthquake												
13.1	Comprehensive (hospital and medical) ind (b)												
13.2	Comprehensive (hospital and medical) group (b)	0	0		0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)												
15.1	Vision Only (b)	39,433	38,861		574	2,184	2,413	1,115	0	0	0	0	871
15.2	Dental Only (b)	117,956	116,218		1,744	15,075	15,699	3,296	0	0	0	0	2,483
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)	0	0		0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)	935,291	939,444		137,287	326,776	301,806	91,617	0	189	189	79,017	19,932
16.	Workers' Compensation												
17.1	Other Liability-Occurrence	0	0		0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	75,171	125,207		16,683	0	114,276	2,899,173	2,253	(74,128)	33,979	2,864	517
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	0	0		0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	6,330,433	6,329,649	0	1,727,471	3,188,638	3,731,095	4,646,307	2,253	84,593	197,455	311,810	137,778
DETAILS OF WRITE-INS													
3401.	Special Risk	0	0		0	0	0	0	0	0	0	0	0
3402.		0	0		0	0	0	0	0	0	0	0	0
3403.													
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

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

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

9,434 and number of persons insured under indemnity only products

1,915



3 8 2 4 5 2 0 2 4 4 3 0 4 9 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF West Virginia			DURING THE YEAR 2024							NAIC Company Code 38245		
		Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses
1.	Fire													
2.1	Allied Lines													
2.2	Multiple Peril Crop													
2.3	Federal Flood													
2.4	Private Crop													
2.5	Private Flood													
3.	Farmowners Multiple Peril													
4.	Homeowners Multiple Peril													
5.1	Commercial Multiple Peril (Non-Liability Portion)													
5.2	Commercial Multiple Peril (Liability Portion)	126,062	125,746			.49,472	0	22,436	.103,783	0	.24,134	.26,275	25,142	.2,427
6.	Mortgage Guaranty													
8.	Ocean Marine													
9.1	Inland Marine	496,125	496,567			.121,981	.292,605	.282,924	.45,565	.247	.451	.204	0	.10,740
9.2	Pet Insurance Plans													
10.	Financial Guaranty													
11.1	Medical Professional Liability - Occurrence													
11.2	Medical Professional Liability - Claims-Made	0	0			0	0	0	0	0	0	0	0	0
12.	Earthquake													
13.1	Comprehensive (hospital and medical) ind (b)													
13.2	Comprehensive (hospital and medical) group (b)	0	0			0	0	0	0	0	0	0	0	0
14.	Credit A & H (group and individual)													
15.1	Vision Only (b)	19,152	18,867			.288	.2,202	.2,456	.619	0	0	0	0	.4,406
15.2	Dental Only (b)	44,365	43,713			.657	.8,459	.8,887	.1,363	0	0	0	0	.10,203
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)	0	0			0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)													
15.9	Other Health (b)	186,329	183,617			.2,793	.110,721	.113,782	.18,241	0	0	0	0	.34,327
16.	Workers' Compensation													.4,103
17.1	Other Liability-Occurrence	0	0			0	0	0	0	0	0	0	0	0
17.2	Other Liability-Claims-Made	3,940	3,116			.2,179	0	(10)	.1,718	0	0	0	0	.394
17.3	Excess Workers' Compensation													.68
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	0	0			0	0	0	0	0	0	0	0	0
24.	Surety													
26.	Burglary and theft													
27.	Boiler and Machinery													
28.	Credit													
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty													
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTAL (a)	875,973	871,626	0	177,370	413,987	430,475	171,289	247	24,585	26,479	74,472	18,695	
DETAILS OF WRITE-INS														
3401.	Special Risk	0	0			0	0	0	0	0	0	0	0	0
3402.		0	0			0	0	0	0	0	0	0	0	0
3403.														
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(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

0 and number of persons insured under indemnity only products

637



3 8 2 4 5 2 0 2 4 4 3 0 5 0 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Wisconsin						DURING THE YEAR 2024						NAIC Company Code 38245	
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
		1 Direct Premiums Written	2 Direct Premiums Earned												
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)	1,145,118	1,136,548		311,753		349,058	655,942	1,145,643	0	(115,668)	241,749	229,080	20,100	
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine	1,909,457	1,813,749		534,134		787,636	759,264	167,056	14,229	14,979	750	0	43,617	
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made	0	0		0		0	0	0	0	0	0	0	0	
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)	0	0		0		0	0	0	0	0	0	0	0	
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)	74,837	73,520		1,341		5,755	6,909	2,807	0	0	0	15,304	1,654	
15.2	Dental Only (b)	206,747	203,145		3,660		29,896	32,377	7,290	0	0	0	42,146	4,353	
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)	0	0		0		0	0	0	0	0	0	0	0	
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)	696,219	686,722		10,601		198,829	209,637	74,805	0	0	0	125,657	14,402	
16.	Workers' Compensation														
17.1	Other Liability-Occurrence	1,122,404	1,122,404		0		348,473	322,547	367,149	0	0	0	179,699	23,570	
17.2	Other Liability-Claims-Made	13,389	74,466		5,936		0	6,321	209,759	0	(165,375)	0	0	1,339	205
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	0	0		0		0	0	0	0	0	0	0	0	
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
30.	Warranty														
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	
35.	TOTAL (a)	5,168,171	5,110,554	0	867,425	1,719,647	1,992,997	1,974,509	14,229	(266,064)	242,499	593,225	107,901		
DETAILS OF WRITE-INS															
3401.	Special Risk	0	0		0		0	0	0	0	0	0	0	0	
3402.		0	0		0		0	0	0	0	0	0	0	0	
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	

(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

0 and number of persons insured under indemnity only products

3,384



3 8 2 4 5 2 0 2 4 4 3 0 5 1 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Wyoming						DURING THE YEAR 2024						NAIC Company Code 38245	
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
1.	Fire														
2.1	Allied Lines														
2.2	Multiple Peril Crop														
2.3	Federal Flood														
2.4	Private Crop														
2.5	Private Flood														
3.	Farmowners Multiple Peril														
4.	Homeowners Multiple Peril														
5.1	Commercial Multiple Peril (Non-Liability Portion)														
5.2	Commercial Multiple Peril (Liability Portion)	110,822	114,059		38,017	51,000	77,132	96,011	0	23,304	23,858	22,164	2,198		
6.	Mortgage Guaranty														
8.	Ocean Marine														
9.1	Inland Marine	23,597	26,625		6,361	6,677	5,149	2,581	0	.11	11	0	.435		
9.2	Pet Insurance Plans														
10.	Financial Guaranty														
11.1	Medical Professional Liability - Occurrence														
11.2	Medical Professional Liability - Claims-Made	0	0		0	0	0	0	0	0	0	0	0	0	
12.	Earthquake														
13.1	Comprehensive (hospital and medical) ind (b)														
13.2	Comprehensive (hospital and medical) group (b)	0	0		0	0	0	0	0	0	0	0	0	0	
14.	Credit A & H (group and individual)														
15.1	Vision Only (b)	6,586	6,491		95	1,183	1,228	219	0	0	0	0	1,515	146	
15.2	Dental Only (b)	20,310	20,023		287	4,668	4,793	.693	0	0	0	0	4,671	.427	
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)	0	0		0	0	0	0	0	0	0	0	0	0	
15.8	Federal Employees Health Benefits Plan (b)														
15.9	Other Health (b)	1,301,488	1,301,635		1,367	1,530,854	753,472	.471,554	0	0	0	0	41,751	.36,294	
16.	Workers' Compensation														
17.1	Other Liability-Occurrence	0	0		0	0	0	0	0	0	0	0	0	0	
17.2	Other Liability-Claims-Made	1,326	1,021		450	0	1,242	.1,430	0	0	0	0	.133	.22	
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	0	0		0	0	0	.29,291	0	593	2,890	0	0	0	
24.	Surety														
26.	Burglary and theft														
27.	Boiler and Machinery														
28.	Credit														
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
30.	Warranty														
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0	0	
35.	TOTAL (a)	1,464,129	1,469,854	0	46,577	1,594,382	843,016	601,779	0	23,908	26,759	70,234	39,522		
DETAILS OF WRITE-INS															
3401.	Special Risk	0	0		0	0	0	0	0	0	0	0	0	0	
3402.		0	0		0	0	0	0	0	0	0	0	0	0	
3403.															
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	

(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

0 and number of persons insured under indemnity only products

908



3 8 2 4 5 2 0 2 4 4 3 0 5 9 1 0 0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	00023	BUSINESS IN THE STATE OF Consolidated			DURING THE YEAR 2024						NAIC Company Code 38245		
		1 Direct Premiums Written	2 Direct Premiums Earned	3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken											
1.	Fire	0	0	0	0	0	0	0	0	0	0	0	0
2.1	Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion)	36,031,715	37,625,777	0	15,594,719	10,421,223	13,448,039	31,425,693	168,034	60,770	7,448,926	5,613,945	797,358
6.	Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	223,331,882	222,674,158	0	62,362,403	84,962,428	76,434,170	20,609,673	98,568	90,373	91,805	0	5,250,403
9.2	Pet Insurance Plans	0	0	0	0	0	0	0	0	0	0	0	0
10.	Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability-Claims-Made	130,274	130,274	0	0	0	0	0	0	0	0	0	27
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) - ind (b)	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) - group (b)	884,426	884,463	0	55	110,585	212,177	701,497	0	0	0	0	22,054
14.	Credit A & H (group and individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision only (b)	3,345,856	3,298,210	0	49,378	516,898	534,224	101,241	0	0	0	763,483	84,331
15.2	Dental Only (b)	14,747,309	14,605,160	0	147,421	5,570,426	5,783,851	1,448,282	0	0	0	2,113,954	339,522
15.3	Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b)	62,619	(23,480)	0	1,320,665	42,080	(62,933)	23,033	0	109	896	0	0
15.8	Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b)	180,748,662	180,202,619	0	6,030,213	117,321,427	122,951,272	46,899,737	191,496	199,692	8,196	11,957,763	4,239,382
16.	Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability-Occurrence	31,704,471	31,704,471	0	0	19,385,816	19,248,186	9,378,439	15,000	15,000	0	1,228,757	978,836
17.2	Other Liability-Claims-Made	14,935,861	17,864,669	0	6,842,902	29,444,287	6,437,615	178,952,663	800,053	(430,597)	11,822,376	1,906,697	357,795
17.3	Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
18.1.	Products Liability-Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2.	Products Liability-Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity	0	0	0	0	0	(3,248)	(3,248)	45,429	0	0	5,051	0
24.	Surety	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit	0	0	0	0	0	0	0	0	0	0	0	0
29.	International	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty	0	0	0	0	0	0	0	0	0	0	0	0
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business	2,323,401	2,318,151	0	649,410	352,043	692,109	2,000,747	0	95,474	484,271	465,036	42,411
35.	TOTAL (a)	508,246,476	511,284,472	0	92,997,166	268,123,965	245,675,462	291,761,434	1,273,151	30,821	19,861,521	24,049,635	12,112,119
DETAILS OF WRITE-INS													
3401.	Special Risk	2,323,401	2,318,151	0	649,410	352,043	692,109	2,000,747	0	95,474	484,271	465,036	42,411
3402.		0	0	0	0	0	0	0	0	0	0	0	0
3403.													
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)	2,323,401	2,318,151	0	649,410	352,043	692,109	2,000,747	0	95,474	484,271	465,036	42,411

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 1,460,473 and number of persons insured under indemnity only products 171,596

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 1

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 +7							
Other U.S. Unaffiliated Insurers														
63-0103830.	55433.	BCBS OF AL.	AL	1,276	0	0	0	0	643	0	0	0	0	0
59-2015694.	98167.	BCBS OF FL.	FL	4,481	0	0	0	0	739	0	0	0	0	0
43-1257251.	47171.	BCBS OF KC.	MO	8,482	0	0	0	0	844	0	0	0	0	0
04-1045815.	53228.	BCBS OF MA.	MA	3,207	0	0	0	0	307	0	0	0	0	0
56-0894904.	54631.	BCBS OF NC INC.	NC	7,491	0	500	500	0	3,903	0	0	0	0	0
45-0173185.	55891.	BCBS OF ND.	ND	6,979	0	10,150	10,150	0	4,171	0	0	0	0	0
47-0095156.	77780.	BCBS OF NE.	NE	2,800	0	300	300	0	2,264	0	0	0	0	0
47-2582248.	11557.	BLUE CROSS COMPLETE OF MI LLC.	MI	11,640	0	0	0	0	1,099	0	0	0	0	0
41-0984460.	55026.	BCBSM INC.	MN	1,259	0	0	0	0	206	0	0	0	0	0
05-0158952.	53473.	BCBS OF RI.	RI	4,703	0	110	110	0	3,445	0	0	0	0	0
57-0287419.	38520.	BCBS OF SC INC.	SC	4,068	0	0	0	0	343	0	0	0	0	0
03-0277307.	53295.	BCBS OF VT.	VT	2,120	0	0	0	0	0	0	0	0	0	0
83-0231011.	53767.	BCBS OF WY.	WY	207	0	0	0	0	18	0	0	0	0	0
87-2738895.	17184.	CF RISK PCC LLC.	DC	4,601	0	0	0	0	436	0	0	0	0	0
52-1962376.	60113.	FIRST CARE INC.	MD	2,168	0	0	0	0	299	0	0	0	0	0
00-0000000.	17237.	FS BENEFITS INSURANCE COMPANY.	VT	4	0	0	0	0	0	0	0	0	0	0
13-2611847.	70939.	GERBER LIFE INS CO.	NY	1,595	0	0	0	0	123	0	50	0	0	0
36-1236610.	70670.	HEALTH CARE SERV CORP A MUT LEGAL RE.	IL	19,777	0	0	0	0	3,659	0	0	0	0	0
98-0488753.	00000.	HTR RE. LTD.	HI	3,210	0	0	0	0	247	0	0	0	0	0
22-0999690.	55069.	HORIZON HLTHCARE SERV INC.	NJ	3,884	0	0	0	0	330	0	0	0	0	0
23-7384555.	81200.	LOUISIANA HLTH SERV & IND CO.	LA	3,796	0	3,500	3,500	0	1,395	0	0	0	0	0
91-0499247.	47570.	PREMERA BLUE CROSS.	WA	9,723	0	0	0	0	1,349	0	0	0	0	0
62-0506281.	68209.	PROVIDENT LIFE & CAS INS CO.	TN	2,088	0	0	0	0	163	0	0	0	0	0
01-0278678.	62235.	UNUM LIFE INS CO OF AMER.	ME	13,654	0	0	0	0	1,096	0	0	0	0	0
0999999 - Total Other U.S. Unaffiliated Insurers				123,213	0	14,560	14,560	0	27,079	0	50	0	0	0
9999999 Totals														
				123,213	0	14,560	14,560	0	27,079	0	50	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsur- ance Premiums Ceded	Reinsurance Recoverable On										16	Reinsurance Payable		19 Net Amount Recover- able From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held By Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Cols. 7 through 14 Totals	16 Amount in Dispute Included in Column 15	17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers				
Authorized - Affiliates - U.S. Non-Pool - Other																					
36-2149353	80985	14 EVER LIFE INS CO	IL		60,310	5,085	0	0	0	19,000	0	0	0	24,085	0	6,489	0	17,596	0		
0399999	- Total Authorized - Affiliates - U.S. Non-Pool - Other				60,310	5,085	0	0	0	19,000	0	0	0	24,085	0	6,489	0	17,596	0		
0499999	- Total Authorized - Affiliates - U.S. Non-Pool - Total				60,310	5,085	0	0	0	19,000	0	0	0	24,085	0	6,489	0	17,596	0		
0899999	- Total Authorized - Affiliates - Total Authorized - Affiliates				60,310	5,085	0	0	0	19,000	0	0	0	24,085	0	6,489	0	17,596	0		
Authorized - Other U.S. Unaffiliated Insurers																					
51-0434766	20370	AXIS REINS CO	NY		0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	
13-2673100	22039	GENERAL REINS CORP	DE		9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
36-1236610	70670	HEALTH CARE SERV CORP A MUT LEGAL RE	IL	2	30,047	3,642	0	0	0	20,185	0	0	0	0	23,827	0	8,409	0	15,418	0	
23-1641984	10219	QBE REINS CORP	PA		0	216	10	2,045	2	577	137	0	0	0	2,987	0	0	0	2,987	0	
43-1235868	93572	RGA REINS CO	MO		3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
75-1444207	30058	SCOR REINS CO	NY	2	6,085	512	0	0	0	2,569	58	0	0	0	2,458	0	188	0	2,270	0	
13-2997499	38776	SIRIUSPOINT AMER INS CO	NY		2,147	253	54	1,720	107	4,276	1,068	682	0	0	3,625	0	1,431	0	2,194	0	
13-1675535	25364	SWISS REINS AMER CORP	NY		0	346	16	3,585	4	889	219	0	0	0	8,160	0	251	0	7,909	0	
13-2918573	42439	TOA RE INS CO OF AMER	DE		27,166	3,896	0	5,824	0	12,596	0	0	0	0	5,059	0	18	0	5,041	0	
13-5616275	19453	TRANSATLANTIC REINS CO	NY		65,457	8,865	80	13,005	113	44,208	1,482	682	0	0	68,435	0	21,144	0	11,470	0	
0999999	- Total Authorized - Other U.S. Unaffiliated Insurers																		47,291	0	
Authorized - Other Non-U.S. Insurers																					
AA-1120337	00000	Aspen Ins UK Ltd	GBR		0	301	20	8,204	8	7,014	472	0	0	0	16,019	0	776	0	15,243	0	
AA-3194130	00000	Endurance Specialty Ins Ltd	GBR		0	99	10	5,865	6	613	92	0	0	0	6,685	0	140	0	6,545	0	
AA-1340125	00000	Hannover Rueck SE	DEU	2	597	356	26	7,726	7	9,176	716	198	0	0	18,205	0	1,162	0	17,043	0	
AA-1127084	00000	Lloyd's Syndicate Number 1084	GBR		0	13	2	1,659	5	5,650	328	1	0	0	7,658	0	372	0	7,286	0	
AA-1127183	00000	Lloyd's Syndicate Number 1183	GBR		0	0	0	0	32	9	686	171	0	0	0	898	0	0	0	898	0
AA-1127200	00000	Lloyd's Syndicate Number 1200	GBR		0	0	0	0	0	1	2	0	0	0	3	0	0	0	3	0	
AA-1127218	00000	Lloyd's Syndicate Number 1218	GBR		0	0	0	0	1	2	9	2	0	0	14	0	0	0	14	0	
AA-1120085	00000	Lloyd's Syndicate Number 1274	GBR	2	112	0	0	4	5	95	24	46	0	0	174	0	25	0	149	0	
AA-1127301	00000	Lloyd's Syndicate Number 1301	GBR	2	356	0	0	0	0	58	14	120	0	0	192	0	0	0	192	0	
AA-1127414	00000	Lloyd's Syndicate Number 1414	GBR	2	0	0	0	0	(3)	0	298	5	1	0	301	0	20	0	281	0	
AA-1120102	00000	Lloyd's Syndicate Number 1458	GBR		0	52	9	2,478	2	0	0	0	0	0	2,541	0	0	0	2,541	0	
AA-1120198	00000	Lloyd's Syndicate Number 1618	GBR		2	681	0	0	0	1	295	74	226	0	0	598	0	0	0	598	0
AA-1120156	00000	Lloyd's Syndicate Number 1686	GBR	2	15,520	71	32	1,944	462	14,870	3,669	5,135	0	0	26,183	0	(93)	0	26,276	0	
AA-1120157	00000	Lloyd's Syndicate Number 1729	GBR		0	0	0	(35)	0	671	14	0	0	0	650	0	47	0	603	0	
AA-1120171	00000	Lloyd's Syndicate Number 1856	GBR	2	111	0	0	0	0	30	8	39	0	0	77	0	0	0	77	0	
AA-1127861	00000	Lloyd's Syndicate Number 1861	GBR	2	0	0	0	2,887	20	642	160	0	0	0	3,709	0	0	0	3,709	0	
AA-1120096	00000	Lloyd's Syndicate Number 1880	GBR	2	1,438	0	0	55	11	208	52	932	0	0	1,258	0	543	0	715	0	
AA-1120054	00000	Lloyd's Syndicate Number 1886 (Incidental to 2999)	GBR	2	1,847	0	0	0	0	82	20	1,527	0	0	1,629	0	1,083	0	546	0	
AA-1120084	00000	Lloyd's Syndicate Number 1955	GBR	2	907	5	3	271	19	592	108	304	0	0	1,302	0	1	0	1,301	0	
AA-1120161	00000	Lloyd's Syndicate Number 1980	GBR		0	0	0	(85)	0	1,226	28	0	0	0	1,169	0	87	0	1,082	0	
AA-1128000	00000	Lloyd's Syndicate Number 2000	GBR		0	0	0	0	0	19	0	0	0	0	19	0	0	0	19	0	
AA-1128001	00000	Lloyd's Syndicate Number 2001	GBR	111	134	20	5,524	8	3,156	106	69	0	0	9,017	0	298	0	8,719	0		
AA-1128003	00000	Lloyd's Syndicate Number 2003	GBR	(92)	49	7	7,091	9	1,356	22	0	0	0	8,534	0	(27)	0	8,561	0		
AA-1120071	00000	Lloyd's Syndicate Number 2007	GBR	2	0	0	0	159	133	663	166	0	0	0	1,121	0	0	0	1,121	0	
AA-1120104	00000	Lloyd's Syndicate Number 2012	GBR	2	907	0	2	0	1	329	82	302	0	0	716	0	0	0	716	0	
AA-1120158	00000	Lloyd's Syndicate Number 2014	GBR		0	0	0	282	0	1,037	29	0	0	0	1,348	0	117	0	1,231	0	
AA-1120114	00000	Lloyd's Syndicate Number 2015	GBR		0	0	0	0	7	0	0	0	0	0	7	0	0	0	7	0	
AA-1128020	00000	Lloyd's Syndicate Number 2020	GBR		0	0	0	0	0	9	0	0	0	0	9	0	0	0	9	0	
AA-1128121	00000	Lloyd's Syndicate Number 2121	GBR	2	2	0	0	4	6	88	22	2	0	0	122	0	0	0	122	0	
AA-1120097	00000	Lloyd's Syndicate Number 2468	GBR	2	0	0	0	11	4	56	14	1	0	0	86	0	0	0	86	0	
AA-1128791	00000	Lloyd's Syndicate Number 2791	GBR	0	112	9	3,776	4	482	94	0	0	0	4,477	0	55	0	4,422	0		
AA-1128987	00000	Lloyd's Syndicate Number 2987	GBR	2	1,679	35	11	1,737	71	3,679	889	566	0	0	6,988	0	0	0	6,988	0	
AA-1120179	00000	Lloyd's Syndicate Number 2988	GBR	2	296	0	1	0	1	131	33	101	0	0	267	0	0	0	267	0	
AA-1126033	00000	Lloyd's Syndicate Number 33...	GBR	2	1,373	0	3	0	7	557	139	461	0	0	1,167	0	0	0	1,167	0	
AA-1120113	00000																				

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsur- ance Premiums Ceded	Reinsurance Recoverable On										16	Reinsurance Payable		19 Net Amount Recover- able From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held By Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Cols. 7 through 14 Totals	16 Amount in Dispute Included in Column 15	17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers				
AA-1126006..	00000..	Lloyd's Syndicate Number 4472	GBR..		0	172	14	6,613	7	3,795	273	0	0	10,874	0	386	0	10,488	0		
AA-1126457..	00000..	Lloyd's Syndicate Number 457	GBR..	2	3,517	0	0	355	.85	1,446	362	1,606	0	0	0	544	0	3,310	0		
AA-1126510..	00000..	Lloyd's Syndicate Number 510..	GBR..	2	5,754	0	0	218	.43	.834	208	.3,728	0	0	0	5,031	0	2,863	0		
AA-1126566..	00000..	Lloyd's Syndicate Number 566 (Incidental to 2999)...	GBR..		0	15	3	736	1	.158	0	0	0	0	0	0	0	912	0		
AA-1126570..	00000..	Lloyd's Syndicate Number 570..	GBR..		0	.5	1	241	0	0	0	0	0	0	0	0	0	247	0		
AA-1120048..	00000..	Lloyd's Syndicate Number 5820	GBR..	2	0	0	0	0	1	2	.8	2	0	0	0	0	0	0	.13		
AA-1126609..	00000..	Lloyd's Syndicate Number 609..	GBR..		0	0	0	0	7	0	0	0	0	0	0	0	0	0	.86		
AA-1126623..	00000..	Lloyd's Syndicate Number 623..	GBR..		0	31	5	1,444	1	0	0	0	0	0	0	0	0	1,481	0		
AA-1126727..	00000..	Lloyd's Syndicate Number 727..	GBR..		.56	94	7	965	1	1,931	134	35	0	0	0	0	0	0	2,955		
AA-1126780..	00000..	Lloyd's Syndicate Number 780..	GBR..		0	26	4	1,218	1	.172	0	0	0	0	0	0	0	1,420	0		
1299999 - Total Authorized - Other Non-U.S. Insurers					36,664	1,801	221	68,023	968	69,351	9,167	15,955	0	0	165,486	0	8,508	0	156,978	0	
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					162,431	15,751	301	81,028	1,081	132,559	10,649	16,637	0	0	258,006	0	36,141	0	221,865	0	
Unauthorized - Affiliates - U.S. Non-Pool - Captive																					
32-0485937..	15896..	BCS RE	VT..		34,162	0	0	19,782	106	39,580	2,916	0	0	0	62,384	0	10,690	0	51,694	57,056	
1699999 - Total Unauthorized - Affiliates - U.S. Non-Pool - Captive					34,162	0	0	19,782	106	39,580	2,916	0	0	0	62,384	0	10,690	0	51,694	57,056	
1899999 - Total Unauthorized - Affiliates - U.S. Non-Pool - Total					34,162	0	0	19,782	106	39,580	2,916	0	0	0	62,384	0	10,690	0	51,694	57,056	
2299999 - Total Unauthorized - Affiliates - Total Unauthorized - Affiliates					34,162	0	0	19,782	106	39,580	2,916	0	0	0	62,384	0	10,690	0	51,694	57,056	
Unauthorized - Other U.S. Unaffiliated Insurers																					
03-0362756..	11329..	AAA MID ATLANTIC REINS CO.	VT..	2	(3)	.0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
57-0287419..	38520..	BCBS OF SC INC..	SC..		36,324	1,126	.40	0	0	8,412	.43	402	0	0	10,023	0	5,631	0	4,392	0	
87-2738895..	17184..	CF RISK PCC LLC	DC..		7,838	.423	0	0	0	5,769	0	0	0	0	0	0	6,192	0	1,710	0	
52-1962376..	60113..	FIRST CARE INC.	MD..	2	2,396	.495	0	0	0	1,172	0	0	0	0	0	0	1,667	0	583	0	
53-0078070..	53007..	GROUP HOSPITALIZATION & MED SRVCS..	DC..	2	4	0	0	0	0	0	0	55	0	0	0	0	0	0	.59		
22-0999690..	55069..	HORIZON HLTHCARE SERV INC.	NJ..		7,838	.423	0	0	0	5,769	0	0	0	0	0	0	6,192	0	1,710	0	
87-3187162..	00000..	MERIDIAN RE..	NC..		11,762	1,025	0	0	0	0	0	0	0	0	0	0	0	0	2,585		
86-3206811..	00000..	RIVERBEND RISK SOLUTIONS, INC.	TN..	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	400		
63-0477090..	81531..	UTIC INS CO..	AL..	2	.59	0	0	0	0	0	0	0	0	0	0	0	0	0	1,279		
2399999 - Total Unauthorized - Other U.S. Unaffiliated Insurers					66,218	3,492	40	0	0	29,564	44	1,722	0	0	34,862	0	12,225	0	22,637	0	
Unauthorized - Other non-U.S. Insurers																					
AA-1460040..	00000..	AWP P&C SA - Wallisellen Branch..	FRA..	2	243,307	0	0	0	0	22,445	100	67,786	0	0	90,331	0	6,625	0	83,706	0	
AA-0000000..	00000..	Amerihealth Assurance, LTD..	BMU..	2	130	0	0	0	0	.175	0	0	0	0	0	0	0	0	175	0	
AA-3190874..	00000..	Amlin Bermuda..	BMU..		2,752	.290	.60	5,689	.93	3,869	.983	1,129	0	0	12,113	0	121	0	11,992	0	
AA-3190795..	00000..	Catalina Safety Reins Ltd..	BMU..		0	.5	4	1,332	1	.188	.46	0	0	0	1,576	0	3,048	0	1,576	0	
AA-3190875..	00000..	Hiscox Ins Co (Bermuda) Ltd..	BMU..		0	0	0	0	2,850	0	0	0	0	0	0	0	0	2,850	0		
AA-3190958..	00000..	JRG Reins Co Ltd..	BMU..		0	0	0	0	.568	0	0	0	0	0	0	0	0	0	731		
AA-1370048..	00000..	Liberty Mut Ins Europe SE..	LUX..		8	0	0	0	0	0	0	7	0	0	0	0	0	0	7		
AA-3191315..	00000..	XL Bermuda Ltd..	BMU..		56	4	2,468	3	.470	7	0	0	0	0	0	0	0	68	0		
AA-1780072..	00000..	XL RE Europe PLC..	IRL..	7	62	0	0	0	3	111	0	0	0	0	0	0	0	1	0		
2699999 - Total Unauthorized - Other Non-U.S. Insurers					246,204	413	68	12,907	100	27,421	1,136	68,922	0	0	110,967	3,048	6,815	0	104,152	0	
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					346,584	3,905	108	32,689	206	96,565	4,096	70,644	0	0	208,213	3,048	29,730	0	178,483	57,056	
Certified - Other Non-U.S. Insurers																					
CR-3190875..	00000..	Hiscox Ins Co (Bermuda) Ltd..	BMU..		(1)	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
CR-1780072..	00000..	XL RE Europe PLC..	IRL..		208	0	0	0	0	99	0	66	0	0	165	0	33	0	0	132	
4099999 - Total Certified - Other Non-U.S. Insurers					207	0	0	0	0	99	0	66	0	0	165	0	33	0	0	132	
4299999 - Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					207	0	0	0	0	99	0	66	0	0	165	0	33	0	0	132	
Reciprocal Jurisdiction - Other Non-U.S. Insurers																					
RJ-3190875..	00000..	Hiscox Ins Co (Bermuda) Ltd..	BMU..		41	0	0	0	0	0	0	0	0	0	0	0	0	0	34	0	
RJ-1780072..	00000..	XL RE Europe PLC..	IRL..		81	0	0	0	0	0	0	0	0	0	0	0	0	0	140	0	
5499999 - Total Reciprocal Jurisdiction - Other Non-U.S. Insurers					122	0	0	0	0	20	0	94	0	0	114	0	0	(60)	0	174	0
5699999 - Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					122	0	0	0	0	20	0	94	0	0	114	0	0	(60)	0	174	0
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					509,344	19,656	409	113,717	1,287	229,243	14,745	87,441	0	0	466,498	3,048	65,844	0	400,654	57,056	
9999999 Totals					509,344	19,656	409	113,717	1,287	229,243	14,745	87,441	0	0	466,498	3,048	65,844	0	400,654	57,056	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk												
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 - 27)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of (Col. 28 * 120%)	28	29	30	31	32	33	34	35 Credit Risk Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
Authorized - Affiliates - U.S. Non-Pool - Other																					
36-2149353.....4 EVER LIFE INS CO.....		0	0	0000	0	6,489	17,596	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
039999 - Total Authorized - Affiliates - U.S. Non-Pool - Other		0	0	XXX	0	6,489	17,596	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
049999 - Total Authorized - Affiliates - U.S. Non-Pool - Total		0	0	XXX	0	6,489	17,596	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
089999 - Total Authorized - Affiliates - Total Authorized - Affiliates		0	0	XXX	0	6,489	17,596	0	0	0	0	0	0	0	0	0	0	XXX	0		
Authorized - Other U.S. Unaffiliated Insurers																					
51-0434766.....AXIS REINS CO.....		0	0	0000	0	0	3	0	3	4	0	4	0	4	3	0	0	0	0		
13-2673100.....GENERAL REINS CORP.....		0	0	0000	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0		
36-1236610.....HEALTH CARE SERV CORP A MUT LEGAL RE.....		0	0	0000	0	8,409	15,418	0	23,827	28,592	8,409	20,183	0	20,183	2	0	0	0	424		
23-1641984.....QBE REINS CORP.....		0	0	0000	0	0	2,987	0	2,987	3,584	0	3,584	0	3,584	3	0	0	0	100		
43-1235868.....RGA REINS CO.....		0	0	0000	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0		
75-1444207.....SCOR REINS CO.....		0	0	0000	0	188	2,270	0	2,458	2,950	188	2,762	0	2,762	3	0	0	0	77		
13-2997499.....SIRIUSPOINT AMER INS CO.....		0	0	0000	0	1,431	2,194	0	3,625	4,350	1,431	2,919	0	2,919	4	0	0	0	96		
13-1675535.....SWISS REINS AMER CORP.....		0	0	0000	0	251	7,909	0	8,160	9,792	251	9,541	0	9,541	2	0	0	0	200		
13-2918573.....TOAR RE INS CO OF AMER.....		0	0	0000	0	18	5,041	0	5,059	6,071	18	6,053	0	6,053	3	0	0	0	169		
13-5616275.....TRANSATLANTIC REINS CO.....		0	0	0000	0	10,846	11,470	0	22,316	26,779	10,846	15,933	0	15,933	1	0	0	0	255		
099999 - Total Authorized - Other U.S. Unaffiliated Insurers		0	0	XXX	0	21,143	47,292	0	68,435	82,122	21,143	60,979	0	60,979	XXX	0	0	0	1,323		
Authorized - Other Non-U.S. Insurers																					
AA-1120337.....Aspen Ins UK Ltd.....		0	0	0000	0	776	15,243	0	16,019	19,223	776	18,447	0	18,447	3	0	0	0	517		
AA-3194130.....Endurance Specialty Ins Ltd.....		0	0	0000	0	140	6,545	0	6,685	8,022	140	7,882	0	7,882	2	0	0	0	166		
AA-1340125.....Hannover Rueck SE.....		0	0	0000	0	1,162	17,043	0	18,205	21,846	1,162	20,684	0	20,684	2	0	0	0	434		
AA-1127084.....Lloyd's Syndicate Number 1084.....		0	0	0000	0	372	7,286	0	7,658	9,190	372	8,818	0	8,818	2	0	0	0	185		
AA-1127183.....Lloyd's Syndicate Number 1183.....		0	0	0000	0	0	898	0	898	1,078	0	1,078	0	1,078	2	0	0	0	23		
AA-1127200.....Lloyd's Syndicate Number 1200.....		0	0	0000	0	0	3	0	3	4	0	4	0	4	2	0	0	0			
AA-1127218.....Lloyd's Syndicate Number 1218.....		0	0	0000	0	0	14	0	14	17	0	17	0	17	2	0	0	0			
AA-1120085.....Lloyd's Syndicate Number 1274.....		0	0	0000	0	25	149	0	174	209	25	184	0	184	2	0	0	0	4		
AA-1127301.....Lloyd's Syndicate Number 1301.....		0	0	0000	0	0	192	0	192	230	0	230	0	230	2	0	0	0	5		
AA-1127414.....Lloyd's Syndicate Number 1414.....		0	0	0000	0	20	281	0	301	361	20	341	0	341	2	0	0	0	7		
AA-1120102.....Lloyd's Syndicate Number 1458.....		0	0	0000	0	0	2,541	0	2,541	3,049	0	3,049	0	3,049	2	0	0	0	64		
AA-1120198.....Lloyd's Syndicate Number 1618.....		0	0	0000	0	0	598	0	598	718	0	718	0	718	2	0	0	0	15		
AA-1120156.....Lloyd's Syndicate Number 1686.....		0	0	0000	0	(93)	26,276	0	26,183	31,420	(93)	31,513	0	31,513	2	0	0	0	662		
AA-1120157.....Lloyd's Syndicate Number 1729.....		0	0	0000	0	47	603	0	650	780	47	733	0	733	2	0	0	0	15		
AA-1120171.....Lloyd's Syndicate Number 1856.....		0	0	0000	0	0	77	0	77	92	0	92	0	92	2	0	0	0	2		
AA-1127861.....Lloyd's Syndicate Number 1861.....		0	0	0000	0	0	3,709	0	3,709	4,451	0	4,451	0	4,451	2	0	0	0	93		
AA-1120096.....Lloyd's Syndicate Number 1880.....		0	0	0000	0	543	715	0	1,258	1,510	543	967	0	967	2	0	0	0	20		
AA-1120054.....Lloyd's Syndicate Number 1886 (Incidental to 2999).....		0	0	0000	0	1,083	546	0	1,629	1,955	1,083	872	0	872	2	0	0	0	18		
AA-1120084.....Lloyd's Syndicate Number 1955.....		0	0	0000	0	1	1,301	0	1,302	1,562	1	1,561	0	1,561	2	0	0	0	33		
AA-1120161.....Lloyd's Syndicate Number 1980.....		0	0	0000	0	87	1,082	0	1,169	1,403	87	1,316	0	1,316	2	0	0	0	28		
AA-1128000.....Lloyd's Syndicate Number 2000.....		0	0	0000	0	0	19	0	19	23	0	23	0	23	2	0	0	0	0		
AA-1128001.....Lloyd's Syndicate Number 2001.....		0	0	0000	0	298	8,719	0	9,017	10,820	298	10,522	0	10,522	2	0	0	0	221		
AA-1128003.....Lloyd's Syndicate Number 2003.....		0	0	0000	0	(27)	8,561	0	8,534	10,241	(27)	10,268	0	10,268	2	0	0	0	216		
AA-1120071.....Lloyd's Syndicate Number 2007.....		0	0	0000	0	0	1,121	0	1,121	1,345	0	1,345	0	1,345	2	0	0	0	28		
AA-1120104.....Lloyd's Syndicate Number 2012.....		0	0	0000	0	0	716	0	716	859	0	859	0	859	2	0	0	0	18		
AA-1120158.....Lloyd's Syndicate Number 2014.....		0	0	0000	0	117	1,231	0	1,348	1,618	117	1,501	0	1,501	2	0	0	0	32		
AA-1120114.....Lloyd's Syndicate Number 2015.....		0	0	0000	0	0	7	0	7	8	0	8	0	8	2	0	0	0	0		
AA-1128020.....Lloyd's Syndicate Number 2020.....		0	0	0000	0	0	9	0	9	11	0	11	0	11	2	0	0	0	0		
AA-1128121.....Lloyd's Syndicate Number 2121.....		0	0	0000	0	0	122	0	122	146	0	146	0	146	2	0	0	0	3		
AA-1120097.....Lloyd's Syndicate Number 2468.....		0	0	0000	0	0	86	0	86	103	0	103	0	103	2	0	0	0	2		
AA-1128791.....Lloyd's Syndicate Number 2791.....		0	0	0000	0	55	4,422	0	4,477	5,372	55	5,317	0	5,317	2	0	0	0	112		
AA-1128987.....Lloyd's Syndicate Number 2987.....		0	0	0000	0	0	6,988	0	6,988	8,386	0	8,386	0	8,386	2	0	0	0	176		
AA-1120179.....Lloyd's Syndicate Number 2988.....		0	0	0000	0	0	267	0	267	320	0	320	0	320	2	0	0	0	7		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk													
		21	22	23	24				Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 - 27)	28	29	30	31	32	33	34	35	36
AA-1126033...	Lloyd's Syndicate Number 33	0	0	0000	0	0	1,167	0	1,167	0	1,400	0	1,400	0	1,400	0	1,400	2	0	0	29	
AA-1120113...	Lloyd's Syndicate Number 3334...	0	0	0000	0	0	8	0	8	0	10	0	10	0	10	0	10	2	0	0	0	
AA-1126005...	Lloyd's Syndicate Number 4000	0	0	0000	0	0	1,120	0	1,120	0	1,344	0	1,344	0	1,344	0	1,344	2	0	0	28	
AA-1120075...	Lloyd's Syndicate Number 4020	0	0	0000	0	0	284	5,420	0	5,704	0	6,845	0	284	0	6,561	0	6,561	2	0	0	138
AA-1120067...	Lloyd's Syndicate Number 4242	0	0	0000	0	0	41	0	41	0	49	0	49	0	49	0	49	2	0	0	1	
AA-1126435...	Lloyd's Syndicate Number 435...	0	0	0000	0	0	306	7,060	0	7,366	0	8,839	0	306	0	8,533	0	8,533	2	0	0	179
AA-1126004...	Lloyd's Syndicate Number 4444...	0	0	0000	0	0	0	0	1,017	0	1,017	0	1,220	0	0	0	1,220	2	0	0	26	
AA-1126006...	Lloyd's Syndicate Number 4472...	0	0	0000	0	0	386	10,488	0	10,874	0	13,049	0	386	0	12,663	0	12,663	2	0	0	266
AA-1126457...	Lloyd's Syndicate Number 457...	0	0	0000	0	0	544	3,310	0	3,854	0	4,625	0	544	0	4,081	0	4,081	2	0	0	86
AA-1126510...	Lloyd's Syndicate Number 510...	0	0	0000	0	0	2,168	2,863	0	5,031	0	6,037	0	2,168	0	3,869	0	3,869	2	0	0	81
AA-1126566...	Lloyd's Syndicate Number 566 (Incidental to 2999)...	0	0	0000	0	0	1	912	0	913	0	1,096	0	1	0	1,095	0	1,095	2	0	0	23
AA-1126570...	Lloyd's Syndicate Number 570...	0	0	0000	0	0	0	247	0	247	0	296	0	0	0	296	0	296	2	0	0	6
AA-1120048...	Lloyd's Syndicate Number 5820...	0	0	0000	0	0	0	0	13	0	13	0	16	0	0	0	16	2	0	0	0	
AA-1126609...	Lloyd's Syndicate Number 609...	0	0	0000	0	0	0	0	86	0	86	0	103	0	0	0	103	2	0	0	2	
AA-1126623...	Lloyd's Syndicate Number 623...	0	0	0000	0	0	0	1,481	0	1,481	0	1,777	0	0	0	1,777	0	1,777	2	0	0	37
AA-1126727...	Lloyd's Syndicate Number 727...	0	0	0000	0	0	212	2,955	0	3,167	0	3,800	0	212	0	3,588	0	3,588	2	0	0	75
AA-1126780...	Lloyd's Syndicate Number 780...	0	0	0000	0	0	1	1,420	0	1,421	0	1,705	0	1	0	1,704	0	1,704	2	0	0	36
129999 - Total Authorized - Other Non-U.S. Insurers		0	0	XXX	0	8,508	156,978	0	165,486	198,583	8,508	190,075	0	0	190,075	XXX	0	0	4,121			
149999 - Total Authorized Excluding Protected Cells (Sum of 089999, 099999, 109999, 119999 and 129999)		0	0	XXX	0	36,140	221,866	0	233,921	280,705	29,651	251,054	0	0	251,054	XXX	0	0	5,443			
Unauthorized - Affiliates - U.S. Non-Pool - Captive																						
32-0485937... BCS RE		0	11,564	0001	0	62,384	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
169999 - Total Unauthorized - Affiliates - U.S. Non-Pool - Captive		0	11,564	XXX	0	62,384	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
189999 - Total Unauthorized - Affiliates - U.S. Non-Pool - Total		0	11,564	XXX	0	62,384	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
229999 - Total Unauthorized - Affiliates - Total Unauthorized - Affiliates		0	11,564	XXX	0	62,384	0	0	0	0	0	0	0	0	0	0	0	XXX	0			
Unauthorized - Other U.S. Unaffiliated Insurers																						
03-0362756... AAA MID ATLANTIC REINS CO.		0	0	0000	0	0	0	0	0	0	0	0	0	0	0	0	6	0	0			
57-0287419... BCBS OF SC INC.		0	6,601	0002	0	10,023	0	0	10,023	12,028	5,631	6,397	6,397	0	0	2	134	0	0			
87-2738895... CF RISK PCC LLC.		0	5,059	0003	0	6,192	0	0	6,192	7,430	1,710	5,720	5,059	661	6	0	152	79	0			
52-1962376... FIRST CARE INC.		0	1,522	0004	0	1,667	0	0	1,667	2,000	583	1,417	1,417	0	6	0	43	0	0			
53-0078070... GROUP HOSPITALIZATION & MED SRVCS.		0	550	0005	0	60	0	0	60	72	1	71	0	6	0	2	0	0	0			
22-0999690... HORIZON HLTHCARE SERV INC.		0	5,147	0006	0	6,192	0	0	6,192	7,430	1,710	5,720	5,147	573	6	0	154	69	0			
87-3187162... MERIDIAN RE		0	7,650	0007	0	9,044	0	0	9,044	10,853	2,585	8,268	7,650	618	6	0	230	74	0			
86-3206811... RIVERBEND RISK SOLUTIONS, INC.		0	948	0008	0	400	0	0	400	480	0	480	0	480	0	6	0	14	0			
63-0477090... UTIC INS CO.		0	1,404	0009	0	1,284	0	0	1,284	1,541	5	1,536	1,404	132	6	0	42	16	0			
239999 - Total Unauthorized - Other U.S. Unaffiliated Insurers		0	28,881	XXX	0	34,862	0	0	34,862	41,834	12,225	29,609	27,625	1,984	XXX	771	0	238	0			
Unauthorized - Other non-U.S. Insurers																						
AA-1460040... AWP P&C SA- Wallisellen Branch.		0	113,000	0010	0	90,331	0	0	90,331	108,397	6,625	101,772	101,772	0	2	0	2,137	0	0			
AA-0000000... Amerihealth Assurance, LTD.		0	230	0011	0	175	0	0	175	210	0	210	0	0	6	0	6	0	0			
AA-3190874... Amlin Bermuda		0	12,891	0012	0	12,113	0	0	12,113	14,536	121	14,415	12,891	1,524	6	0	387	183	0			
AA-3190795... Catalina Safety Reins Ltd.		0	2,685	0013	0	1,576	0	610	966	1,160	0	1,160	0	1,160	0	6	0	35	0			
AA-3190875... Hiscox Ins Co (Bermuda) Ltd.		0	3,233	0014	0	2,850	0	0	2,850	3,420	0	3,420	3,233	187	3	0	91	5	0			
AA-3190958... JRG Reins Co Ltd.		0	731	0015	0	731	0	0	731	877	0	877	731	146	6	0	22	18	0			
AA-1370048... Liberty Mut Ins Europe SE		0	65	0016	0	7	0	0	7	8	0	8	0	8	0	6	0	0	0			
AA-3191315... XL Bermuda Ltd.		0	5,092	0017	0	3,008	0	0	3,008	3,610	68	3,542	3,542	0	2	0	74	0	0			
AA-1780072... XL RE Europe PLC		0	157	0018	0	158	18	18	158	190	1	189	157	32	2	0	3	1	0			
269999 - Total Unauthorized - Other Non-U.S. Insurers		0	138,084	XXX	0	110,949	18	628	110,339	132,407	6,815	125,592	123,704	1,888	XXX	2,755	0	206	0			
289999 - Total Unauthorized Excluding Protected Cells (Sum of 229999, 239999, 249999, 259999 and 269999)		0	178,529	XXX	0	208,195	18	628	145,201	174,242	19,040	155,202	151,329	3,873	XXX	3,527	0	444	0			
Certified - Other Non-U.S. Insurers																						

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk											
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Col. 15 - 27)	28	29	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31	32	33	34	35 Credit Risk Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
CR-3190875	Hiscox Ins Co (Bermuda) Ltd.	0	0	0000	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CR-1780072	XL RE Europe PLC	0	13	0018	0	46	119	2	163	196	33	163	13	150	2	0	0	0	0	3
4099999	- Total Certified - Other Non-U.S. Insurers	0	13	XXX	0	46	119	2	163	196	33	163	13	150	XXX	0	0	0	0	3
4299999	- Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	0	13	XXX	0	46	119	2	163	196	33	163	13	150	XXX	0	0	0	0	3
Reciprocal Jurisdiction - Other Non-U.S. Insurers																				
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd.	0	0	0000	0	(1)	34	0	33	40	(1)	.41	0	.41	3	0	1	0	0	
RJ-1780072	XL RE Europe PLC	0	0	0000	0	(59)	140	0	81	97	(59)	156	0	156	2	0	0	0	0	3
5499999	- Total Reciprocal Jurisdiction - Other Non-U.S. Insurers	0	0	XXX	0	(60)	174	0	114	137	(60)	197	0	197	XXX	0	0	0	0	4
5699999	- Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	0	XXX	0	(60)	174	0	114	137	(60)	197	0	197	XXX	0	0	0	0	4
5799999	- Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	0	178,542	XXX	0	244,321	222,177	630	379,399	455,279	48,664	406,615	151,342	255,273	XXX	3,527	5,895			
9999999	Totals	0	178,542	XXX	0	244,321	222,177	630	379,399	455,279	48,664	406,615	151,342	255,273	XXX	3,527	5,895			

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	45 Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 43 - 44)	46 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Received Prior 90 Days	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Received Prior 90 Days	48 Percentage Overdue Col. 42/Col. 43	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20% (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50											
		37 Current	Overdue																									
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38 + 39 + 40 + 41																					
Authorized - Affiliates - U.S. Non-Pool - Other																												
36-2149353	4 EVER LIFE INS CO.	5,085	0	0	0	0	0	5,085	0	0	5,085	0	0	0	0.000	0.000	0.000	YES	0									
0399999 - Total Authorized - Affiliates - U.S. Non-Pool - Other		5,085	0	0	0	0	0	5,085	0	0	5,085	0	0	0	0.000	0.000	0.000	XXX	0									
0499999 - Total Authorized - Affiliates - U.S. Non-Pool - Total		5,085	0	0	0	0	0	5,085	0	0	5,085	0	0	0	0.000	0.000	0.000	XXX	0									
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates		5,085	0	0	0	0	0	5,085	0	0	5,085	0	0	0	0.000	0.000	0.000	XXX	0									
Authorized - Other U.S. Unaffiliated Insurers																												
51-0434766	AXIS REINS CO	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
13-2673100	GENERAL REINS CORP	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
36-1236610	HEALTH CARE SERV CORP A MUT LEGAL RE	3,600	42	0	0	0	0	42	3,642	0	0	3,642	0	0	0	1.153	0.000	0.000	YES	0								
23-1641984	QBE REINS CORP	226	0	0	0	0	0	0	226	0	0	226	0	0	0	0.000	0.000	0.000	YES	0								
43-1235868	RGA REINS CO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
75-1444207	SCOR REINS CO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
13-2997499	SIRIUSPOINT AMER INS CO	512	0	0	0	0	0	0	512	0	0	512	0	0	0	0.000	0.000	0.000	YES	0								
13-1675535	SWISS REINS AMER CORP	173	134	0	0	0	0	134	307	0	0	307	0	0	0	43.648	0.000	0.000	YES	0								
13-2918573	TOA RE INS CO OF AMER	362	0	0	0	0	0	0	362	0	0	362	0	0	0	0.000	0.000	0.000	YES	0								
13-5616275	TRANSATLANTIC REINS CO	3,896	0	0	0	0	0	0	3,896	0	0	3,896	0	0	0	0.000	0.000	0.000	YES	0								
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers		8,769	176	0	0	0	0	176	8,945	0	0	8,945	0	0	0	1.968	0.000	0.000	XXX	0								
Authorized - Other Non-U.S. Insurers																												
AA-1120337	Aspen Ins UK Ltd	321	0	0	0	0	0	0	321	0	0	321	0	0	0	0.000	0.000	0.000	YES	0								
AA-3194130	Endurance Specialty Ins Ltd	109	0	0	0	0	0	0	109	0	0	109	0	0	0	0.000	0.000	0.000	YES	0								
AA-1340125	Hannover Rueck SE	382	0	0	0	0	0	0	382	0	0	382	0	0	0	0.000	0.000	0.000	YES	0								
AA-1127084	Lloyd's Syndicate Number 1084	15	0	0	0	0	0	0	15	0	0	15	0	0	0	0.000	0.000	0.000	YES	0								
AA-1127183	Lloyd's Syndicate Number 1183	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1127200	Lloyd's Syndicate Number 1200	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1127218	Lloyd's Syndicate Number 1218	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120085	Lloyd's Syndicate Number 1274	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1127301	Lloyd's Syndicate Number 1301	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1127414	Lloyd's Syndicate Number 1414	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120102	Lloyd's Syndicate Number 1458	61	0	0	0	0	0	0	61	0	0	61	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120198	Lloyd's Syndicate Number 1618	2	0	0	0	0	0	0	2	0	0	2	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120156	Lloyd's Syndicate Number 1686	103	0	0	0	0	0	0	103	0	0	103	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120157	Lloyd's Syndicate Number 1729	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120171	Lloyd's Syndicate Number 1856	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1127861	Lloyd's Syndicate Number 1861	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120096	Lloyd's Syndicate Number 1880	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120054	Lloyd's Syndicate Number 1886 (Incidental to 2999)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120084	Lloyd's Syndicate Number 1955	8	0	0	0	0	0	0	8	0	0	8	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120161	Lloyd's Syndicate Number 1980	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1128000	Lloyd's Syndicate Number 2000	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1128001	Lloyd's Syndicate Number 2001	154	0	0	0	0	0	0	154	0	0	154	0	0	0	0.000	0.000	0.000	YES	0								
AA-1128003	Lloyd's Syndicate Number 2003	56	0	0	0	0	0	0	56	0	0	56	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120071	Lloyd's Syndicate Number 2007	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120104	Lloyd's Syndicate Number 2012	2	0	0	0	0	0	0	2	0	0	2	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120158	Lloyd's Syndicate Number 2014	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120114	Lloyd's Syndicate Number 2015	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1128020	Lloyd's Syndicate Number 2020	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1128121	Lloyd's Syndicate Number 2121	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1120097	Lloyd's Syndicate Number 2468	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0								
AA-1128791	Lloyd's Syndicate Number 2791	121	0	0	0	0	0	0	121	0	0	121	0	0	0	0.000	0.000	0.000	YES	0								
AA-1128987	Lloyd's Syndicate Number 2987	46	0	0	0	0	0	0	46	0	0	46	0	0	0	0.000	0.000	0.000	YES	0								

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44	45	46	47	48	49	50	51	52	53											
		37	Overdue																									
			38	39	40	41	42																					
			Current	1 – 29 Days	30 – 90 Days	91 – 120 Days	Over 120 Days	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	Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 – 43)	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. 50/ Col. 43)	Is the Amount in Col. 50 Less Than 20% (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50										
AA-1120179...	Lloyd's Syndicate Number 2988...		1	0	0	0	0	0	1	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126033...	Lloyd's Syndicate Number 33...		3	0	0	0	0	0	3	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1120113...	Lloyd's Syndicate Number 3334...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126005...	Lloyd's Syndicate Number 4000...		3	0	0	0	0	0	3	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1120075...	Lloyd's Syndicate Number 4020...		43	0	0	0	0	0	43	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1120067...	Lloyd's Syndicate Number 4242...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126435...	Lloyd's Syndicate Number 435...		215	0	0	0	0	0	215	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126004...	Lloyd's Syndicate Number 4444...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126006...	Lloyd's Syndicate Number 4472...		186	0	0	0	0	0	186	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126457...	Lloyd's Syndicate Number 457...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126510...	Lloyd's Syndicate Number 510...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126566...	Lloyd's Syndicate Number 566 (Incidental to 2999)...		18	0	0	0	0	0	18	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126570...	Lloyd's Syndicate Number 570...		6	0	0	0	0	0	6	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1120048...	Lloyd's Syndicate Number 5820...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126609...	Lloyd's Syndicate Number 609...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126623...	Lloyd's Syndicate Number 623...		36	0	0	0	0	0	36	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126727...	Lloyd's Syndicate Number 727...		101	0	0	0	0	0	101	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-1126780...	Lloyd's Syndicate Number 780...		30	0	0	0	0	0	30	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
129999 - Total Authorized - Other Non-U.S. Insurers		2,022	0	0	0	0	0	0	2,022	0	0	0	0	0	0.000	0.000	0.000	XXX	0									
149999 - Total Authorized Excluding Protected Cells (Sum of 089999, 099999, 109999 and 119999)		15,876	176	0	0	0	0	176	16,052	0	0	0	16,052	0	0	1.096	0.000	0.000	XXX	0								
Unauthorized - Affiliates - U.S. Non-Pool - Captive																												
32-0485937...	BCS RE...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
169999 - Total Unauthorized - Affiliates - U.S. Non-Pool - Captive			0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0									
1899999 - Total Unauthorized - Affiliates - U.S. Non-Pool - Total			0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0									
2299999 - Total Unauthorized - Affiliates - Total Unauthorized - Affiliates			0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0									
Unauthorized - Other U.S. Unaffiliated Insurers																												
03-0362756...	AAA MID ATLANTIC REINS CO...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
57-0287419...	BCBS OF SC INC...		1,166	0	0	0	0	0	1,166	0	0	0	1,166	0	0	0.000	0.000	0.000	YES.	0								
87-2738895...	CF RISK PCC LLC...		423	0	0	0	0	0	423	0	0	0	423	0	0	0.000	0.000	0.000	YES.	0								
52-1962376...	FIRST CARE INC...		495	0	0	0	0	0	495	0	0	0	495	0	0	0.000	0.000	0.000	YES.	0								
53-0078070...	GROUP HOSPITALIZATION & MED SRVCS...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
22-0999690...	HORIZON HLTHCARE SERV INC...		423	0	0	0	0	0	423	0	0	0	423	0	0	0.000	0.000	0.000	YES.	0								
87-3187162...	MERIDIAN RE...		1,025	0	0	0	0	0	1,025	0	0	0	1,025	0	0	0.000	0.000	0.000	YES.	0								
86-3206811...	RIVERBEND RISK SOLUTIONS, INC...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
63-0477090...	UTIC INS CO...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
239999 - Total Unauthorized - Other U.S. Unaffiliated Insurers		3,532	0	0	0	0	0	0	3,532	0	0	0	3,532	0	0	0.000	0.000	0.000	XXX	0								
Unauthorized - Other non-U.S. Insurers																												
AA-1460040...	AWP P&C SA - Wallisellen Branch...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-0000000...	Amerihealth Assurance, LTD...		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0									
AA-3190874...	Amli in Bermuda...		222	128	0	0	0	0	128	350	0	0	350	0	0	36.571	0.000	0.000	YES.	0								
AA-3190795...	Catalina Safety Reins Ltd...		9	0	0	0	0	0	9	0	0	0	9	0	0	0.000	0.000	0.000	YES.	0								
AA-3190875...	Hiscox Ins Co (Bermuda) Ltd...		0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0								
AA-3190958...	JRC Reins Co Ltd...		0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0								
AA-1370048...	Liberty Mut Ins Europe SE...		0	0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES.	0								
AA-3191315...	XL Bermuda Ltd...		60	0	0	0	0	0	60	0	0	0	60	0	0	0.000	0.000	0.000	YES.	0								
AA-1780072...	XL RE Europe PLC...		62	0	0	0	0	0	62	0	0	0	62	0	0	0.000	0.000	0.000	YES.	0								

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 44)	46 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Received Prior 90 Days	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Received Prior 90 Days	48	49	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20% (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50										
		37 Current	Overdue																								
			38 1 – 29 Days	39 30 – 90 Days	40 91 – 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38 + 39 + 40 + 41																				
2699999 - Total Unauthorized - Other Non-U.S. Insurers		353	128	0	0	0	128	481	0	0	481	0	0	26,611	0.000	0.000	XXX	0									
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		3,885	128	0	0	0	128	4,013	0	0	4,013	0	0	3,190	0.000	0.000	XXX	0									
Certified - Other Non-U.S. Insurers																											
CR-3190875 - Hiscox Ins Co (Bermuda) Ltd.		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
CR-1780072 - XL RE Europe PLC		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
4099999 - Total Certified - Other Non-U.S. Insurers		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0									
4299999 - Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0									
Reciprocal Jurisdiction - Other Non-U.S. Insurers																											
RJ-3190875 - Hiscox Ins Co (Bermuda) Ltd.		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
RJ-1780072 - XL RE Europe PLC		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	YES	0									
5499999 - Total Reciprocal Jurisdiction - Other Non-U.S. Insurers		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0									
5699999 - Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	0	0	0	0	0	0	0	0	0	0	0	0.000	0.000	0.000	XXX	0									
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		19,761	304	0	0	304	20,065	0	0	20,065	0	0	1,515	0.000	0.000	XXX	0										
9999999 Totals		19,761	304	0	0	0	304	20,065	0	0	20,065	0	0	1,515	0.000	0.000	XXX	0									

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)	
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0				
		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 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		
Authorized - Affiliates - U.S. Non-Pool - Other																		
36-2149353.....4 EVER LIFE INS CO.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0399999 - Total Authorized - Affiliates - U.S. Non-Pool - Other		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0499999 - Total Authorized - Affiliates - U.S. Non-Pool - Total		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Authorized - Other U.S. Unaffiliated Insurers																		
51-0434766.....AXIS 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	
36-1236610.....HEALTH CARE SERV CORP A MUT LEGAL RE.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23-1641984.....QBE REINS CORP.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43-1235868.....RGA REINS 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	
13-2997499.....SIRIUSPOINT AMER 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	
13-2918573.....TOA RE INS CO OF AMER.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-5616275.....TRANSATLANTIC REINS CO.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Authorized - Other Non-U.S. Insurers																		
AA-1120337.....Aspen Ins UK Ltd.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194130.....Endurance Specialty Ins Ltd.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340125.....Hannover Rueck SE.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120704.....Lloyd's Syndicate Number 1084.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1121783.....Lloyd's Syndicate Number 1183.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127200.....Lloyd's Syndicate Number 1200.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127218.....Lloyd's Syndicate Number 1218.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120085.....Lloyd's Syndicate Number 1274.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127301.....Lloyd's Syndicate Number 1301.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127414.....Lloyd's Syndicate Number 1414.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120102.....Lloyd's Syndicate Number 1458.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120198.....Lloyd's Syndicate Number 1618.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120156.....Lloyd's Syndicate Number 1686.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120157.....Lloyd's Syndicate Number 1729.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120171.....Lloyd's Syndicate Number 1856.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127861.....Lloyd's Syndicate Number 1861.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120096.....Lloyd's Syndicate Number 1880.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120054.....Lloyd's Syndicate Number 1886 (Incidental to 2999).....		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-1120161.....Lloyd's Syndicate Number 1980.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128000.....Lloyd's Syndicate Number 2000.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128001.....Lloyd's Syndicate Number 2001.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128003.....Lloyd's Syndicate Number 2003.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120071.....Lloyd's Syndicate Number 2007.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120104.....Lloyd's Syndicate Number 2012.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120158.....Lloyd's Syndicate Number 2014.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120114.....Lloyd's Syndicate Number 2015.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128020.....Lloyd's Syndicate Number 2020.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128121.....Lloyd's Syndicate Number 2121.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120097.....Lloyd's Syndicate Number 2468.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3 (Continued)

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)
		54 Certified Reinsurer Rating (1 through 6)	55 Effective Date of Certified Reinsurer Rating	56 Percent Collateral Required for Full Credit (0% through 100%)	57 Catastrophe Recoverables Qualifying for Collateral Deferral	58 Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	59 Dollar Amount of Collateral Required (Col. 56 * Col. 58)	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20+Col. 21+Col. 22+Col. 24]/Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	63 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 57+[Col. 58 * Col. 61])	64 Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	65 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	66 Total Collateral Provided (Col. 20+Col. 21+Col. 22+Col. 24; not to Exceed Col. 63)	67 Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	68 20% of Amount in Col. 67	
		Complete if Col. 52 = "No"; Otherwise Enter 0															
AA-1128791...	Lloyd's Syndicate Number 2791...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128987...	Lloyd's Syndicate Number 2987...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120179...	Lloyd's Syndicate Number 2988...	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-1120113...	Lloyd's Syndicate Number 3334...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126005...	Lloyd's Syndicate Number 4000...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120075...	Lloyd's Syndicate Number 4020...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120067...	Lloyd's Syndicate Number 4242...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126435...	Lloyd's Syndicate Number 435...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126004...	Lloyd's Syndicate Number 4444...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126006...	Lloyd's Syndicate Number 4472...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126457...	Lloyd's Syndicate Number 457...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126510...	Lloyd's Syndicate Number 510...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126566...	Lloyd's Syndicate Number 566 (Incidental to 2999)...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126570...	Lloyd's Syndicate Number 570...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120048...	Lloyd's Syndicate Number 5820...	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-1126623...	Lloyd's Syndicate Number 623...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126727...	Lloyd's Syndicate Number 727...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126780...	Lloyd's Syndicate Number 780...	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
129999 - 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 (Sum of 0899999, 099999, 109999, 119999 and 129999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Unauthorized - Affiliates - U.S. Non-Pool - Captive		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32-0485937...|BCS RE...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1699999 - Total Unauthorized - Affiliates - U.S. Non-Pool - Captive		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1899999 - Total Unauthorized - Affiliates - U.S. Non-Pool - Total		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2299999 - Total Unauthorized - Affiliates - Total Unauthorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Unauthorized - Other M.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
03-0362756...|AAA MID ATLANTIC REINS CO...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
57-0287419...|BCBS OF SC INC...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
87-2738895...|CF RISK PCC LLC...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
52-1962376...|FIRST CARE INC...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
53-0078070...|GROUP HOSPITALIZATION & MED SRVCS...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
22-0999690...|HORIZON HLTHCARE SERV INC...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
87-3187162...|MERIDIAN RE...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
86-3206811...|RIVERBEND RISK SOLUTIONS, INC...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
63-0477090...|UTIC INS CO...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2399999 - Total Unauthorized - Other U.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Unauthorized - Other non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1460040...|AWP P&C SA- Wallisellen Branch...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-0000000...|Amerihealth Assurance, LTD...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190874...|Amlin Bermuda...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190795...|Catalina Safety Reins Ltd...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190875...|Hiscox Ins Co (Bermuda) Ltd...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190958...|JRG Reins Co Ltd...		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)
		54 Certified Reinsurer Rating (1 through 6)	55 Effective Date of Certified Reinsurer Rating	56 Percent Collateral Required for Full Credit (0% through 100%)	57 Catastrophe Recoverables Qualifying for Collateral Deferral	58 Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	59 Dollar Amount of Collateral Required (Col. 56 * Col. 58)	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20+Col. 21+Col. 22+Col. 24]/Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 57+[Col. 58 * Col. 20%])	63 Amount of Credit Allowed for Net Recoverables (Col. 57+[Col. 58 * Col. 61])	64 Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	65 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	66 Total Collateral Provided (Col. 20+Col. 21+Col. 22+Col. 24; not to Exceed Col. 63)	67 Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	68 20% of Amount in Col. 67	
AA-1370048.....	Liberty Mut Ins Europe SE.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191315.....	XL Bermuda Ltd.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1780072.....	XL RE Europe PLC.....	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 (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Certified - Other Non-U.S. Insurers																	
CR-3190875.....	Hiscox Ins Co (Bermuda) Ltd.....	3.....	08/04/2021	20.000	.0	0	.0	0.000	0.000	0	.0	0	0	0	0	0	0
CR-1780072.....	XL RE Europe PLC.....	2.....	01/01/2023	10.000	.0	132	13	9.848	9.848	0	.130	2	0	0	0	0	0
4099999 - Total Certified - Other Non-U.S. Insurers		XXX	XXX	XXX	0	132	13	XXX	XXX	0	130	2	0	0	0	0	0
4299999 - Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	XXX	XXX	0	132	13	XXX	XXX	0	130	2	0	0	0	0	0
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-1780072.....	XL RE Europe PLC.....	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 (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 Totals		XXX	XXX	XXX	0	132	13	XXX	XXX	0	130	2	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
36-2149353	4 EVER LIFE INS CO	0	XXX	XXX	0	0	0	XXX	XXX	0
0399999	- Total Authorized - Affiliates - U.S. Non-Pool - Other	0	XXX	XXX	0	0	0	XXX	XXX	0
0499999	- Total Authorized - Affiliates - U.S. Non-Pool - Total	0	XXX	XXX	0	0	0	XXX	XXX	0
0899999	- Total Authorized - Affiliates - Total Authorized - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
Authorized - Other U.S. Unaffiliated Insurers										
51-0434766	AXIS REINS CO	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2673100	GENERAL REINS CORP	0	XXX	XXX	0	0	0	XXX	XXX	0
36-1236610	HEALTH CARE SERV CORP A MUT LEGAL RE	0	XXX	XXX	0	0	0	XXX	XXX	0
23-1641984	QBE REINS CORP	0	XXX	XXX	0	0	0	XXX	XXX	0
43-1235868	RGA REINS CO	0	XXX	XXX	0	0	0	XXX	XXX	0
75-1444207	SCOR REINS CO	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2997499	SIRIUSPOINT AMER INS CO	0	XXX	XXX	0	0	0	XXX	XXX	0
13-1675535	SWISS REINS AMER CORP	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2918573	TOA RE INS CO OF AMER	0	XXX	XXX	0	0	0	XXX	XXX	0
13-5616275	TRANSATLANTIC REINS CO	0	XXX	XXX	0	0	0	XXX	XXX	0
0999999	- Total Authorized - Other U.S. Unaffiliated Insurers	0	XXX	XXX	0	0	0	XXX	XXX	0
Authorized - Other Non-U.S. Insurers										
AA-1120337	Aspen Ins UK Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3194130	Endurance Specialty Ins Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1340125	Hannover Rueck SE	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120784	Lloyd's Syndicate Number 1084	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127183	Lloyd's Syndicate Number 1183	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127200	Lloyd's Syndicate Number 1200	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127218	Lloyd's Syndicate Number 1218	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120085	Lloyd's Syndicate Number 1274	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127301	Lloyd's Syndicate Number 1301	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127414	Lloyd's Syndicate Number 1414	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120102	Lloyd's Syndicate Number 1458	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120198	Lloyd's Syndicate Number 1618	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120156	Lloyd's Syndicate Number 1686	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120157	Lloyd's Syndicate Number 1729	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120171	Lloyd's Syndicate Number 1856	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127861	Lloyd's Syndicate Number 1861	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120096	Lloyd's Syndicate Number 1880	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120054	Lloyd's Syndicate Number 1886 (Incidental to 2999)	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120084	Lloyd's Syndicate Number 1955	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120161	Lloyd's Syndicate Number 1980	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128000	Lloyd's Syndicate Number 2000	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128001	Lloyd's Syndicate Number 2001	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128003	Lloyd's Syndicate Number 2003	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120071	Lloyd's Syndicate Number 2007	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120104	Lloyd's Syndicate Number 2012	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120158	Lloyd's Syndicate Number 2014	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120114	Lloyd's Syndicate Number 2015	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128020	Lloyd's Syndicate Number 2020	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128121	Lloyd's Syndicate Number 2121	0	XXX	XXX	0	0	0	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3 (Continued)

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

(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance				
			71	72	73	74 Complete if Col. 52 = "No"; Otherwise Enter 0	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)	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 [Col. 40 + 41] * 20%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Col. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
AA-1120097	Lloyd's Syndicate Number 2468		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128791	Lloyd's Syndicate Number 2791		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128987	Lloyd's Syndicate Number 2987		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120179	Lloyd's Syndicate Number 2988		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126033	Lloyd's Syndicate Number 33		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120113	Lloyd's Syndicate Number 3334		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126005	Lloyd's Syndicate Number 4000		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120075	Lloyd's Syndicate Number 4020		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120067	Lloyd's Syndicate Number 4242		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126435	Lloyd's Syndicate Number 435		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126004	Lloyd's Syndicate Number 4444		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126006	Lloyd's Syndicate Number 4472		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126457	Lloyd's Syndicate Number 457		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126510	Lloyd's Syndicate Number 510		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126566	Lloyd's Syndicate Number 566 (Incidental to 2999)		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126570	Lloyd's Syndicate Number 570		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126048	Lloyd's Syndicate Number 5820		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126609	Lloyd's Syndicate Number 609		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126623	Lloyd's Syndicate Number 623		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126727	Lloyd's Syndicate Number 727		0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126780	Lloyd's Syndicate Number 780		0	XXX	XXX	0	0	0	XXX	XXX	0
129999	- Total Authorized - Other Non-U.S. Insurers		0	XXX	XXX	0	0	0	XXX	XXX	0
149999	- Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 119999 and 129999)		0	XXX	XXX	0	0	0	XXX	XXX	0
	Unauthorized - Affiliates - U.S. Non-Pool - Captive										
32-0485937	BCS RE		0	0	0	XXX	XXX	XXX	0	XXX	0
169999	- Total Unauthorized - Affiliates - U.S. Non-Pool - Captive		0	0	0	XXX	XXX	XXX	0	XXX	0
189999	- Total Unauthorized - Affiliates - U.S. Non-Pool - Total		0	0	0	XXX	XXX	XXX	0	XXX	0
229999	- Total Unauthorized - Affiliates - Total Unauthorized - Affiliates		0	0	0	XXX	XXX	XXX	0	XXX	0
	Unauthorized - Other U.S. Unaffiliated Insurers										
03-0362756	AAA MID ATLANTIC REINS CO		0	.0	0	XXX	XXX	XXX	0	XXX	.0
57-0287419	BCBS OF SC INC		0	0	0	XXX	XXX	XXX	0	XXX	0
87-2738895	CF RISK PCC LLC		0	0	0	XXX	XXX	XXX	0	XXX	0
52-1962376	FIRST CARE INC		0	0	0	XXX	XXX	XXX	0	XXX	0
53-0078070	GROUP HOSPITALIZATION & MED SRVCS		0	0	0	XXX	XXX	XXX	0	XXX	0
22-0999690	HORIZON HLTHCARE SERV INC		0	0	0	XXX	XXX	XXX	0	XXX	0
87-3187162	MERIDIAN RE		0	0	0	XXX	XXX	XXX	0	XXX	0
86-3206811	RIVERBEND RISK SOLUTIONS, INC		0	0	0	XXX	XXX	XXX	0	XXX	0
63-0477090	UTIC INS CO		0	0	0	XXX	XXX	XXX	0	XXX	0
239999	- Total Unauthorized - Other U.S. Unaffiliated Insurers		0	0	0	XXX	XXX	XXX	0	XXX	0
	Unauthorized - Other non-U.S. Insurers										
AA-1460040	AWP P&C SA - Wallisellen Branch		0	0	0	XXX	XXX	XXX	0	XXX	0
AA-0000000	Amerihealth Assurance, LTD		0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190874	Amli Bermuda		0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190795	Catalina Safety Reins Ltd		0	0	610	XXX	XXX	XXX	610	XXX	.610

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance				
			71	72	73	74 Complete if Col. 52 = "No"; Otherwise Enter 0	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)	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 [Col. 40 + 41] * 20%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Col. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Certified Reinsurers (Col. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
AA-3190875	Hiscox Ins Co (Bermuda) Ltd.		0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190958	JRG Reins Co Ltd.		0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1370048	Liberty Mut Ins Europe SE		0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191315	XL Bermuda Ltd.		0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1780072	XL RE Europe PLC		0	18	0	XXX	XXX	XXX	18	XXX	18
269999	- Total Unauthorized - Other Non-U.S. Insurers		0	18	610	XXX	XXX	XXX	628	XXX	628
289999	- Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	18	610	XXX	XXX	XXX	628	XXX	628
Certified - Other Non-U.S. Insurers											
CR-3190875	Hiscox Ins Co (Bermuda) Ltd.		XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	0
CR-1780072	XL RE Europe PLC		XXX	XXX	XXX	XXX	XXX	XXX	2	XXX	2
409999	- Total Certified - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	2	XXX	2
429999	- Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	XXX	XXX	XXX	XXX	XXX	2	XXX	2
Reciprocal Jurisdiction - Other Non-U.S. Insurers											
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd.		0	XXX	XXX	0	0	0	XXX	XXX	0
RJ-1780072	XL RE Europe PLC		0	XXX	XXX	0	0	0	XXX	XXX	0
549999	- Total Reciprocal Jurisdiction - Other Non-U.S. Insurers		0	XXX	XXX	0	0	0	XXX	XXX	0
569999	- Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	XXX	XXX	0	0	0	XXX	XXX	0
579999	- Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		0	18	610	0	0	0	628	2	630
999999	Totals		0	18	610	0	0	0	628	2	630

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 4

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

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
.0001	2	011001234	BANK OF NEW YORK MELLON BANK	11,564
.0002	2	011001234	BANK OF NEW YORK MELLON BANK	6,601
.0003	2	011001234	BANK OF NEW YORK MELLON BANK	5,059
.0004	2	011001234	BANK OF NEW YORK MELLON BANK	1,522
.0005	2	011001234	BANK OF NEW YORK MELLON BANK	550
.0006	2	011001234	BANK OF NEW YORK MELLON BANK	5,147
.0007	2	011001234	BANK OF NEW YORK MELLON BANK	7,650
.0008	2	011001234	BANK OF NEW YORK MELLON BANK	948
.0009	1	062000019	REGIONS BANK	1,404
.0010	1	026005092	BAEYERN LB	113,000
.0011	2	011001234	BANK OF NEW YORK MELLON BANK	230
.0012	3	026002574	BARCLAYS BANK PLC, NEW YORK BRANCH	2,836
.0012	3	981390502	LLOYDS BANK CORPORATE MARKETS PLC, NEW YORK BRANCH	2,836
.0012	3	026007728	NATIONAL AUSTRALIA BANK LIMITED	2,579
.0012	3	026007689	BNP PARIBAS, NEW YORK BRANCH	2,320
.0012	3	026008044	COMMERZBANK AKTIENGESELLSCHAFT, FILIALE LUXEMBURG	2,320
.0013	1	072000096	COMERICA BANK	2,685
.0014	1	026007728	NATIONAL AUSTRALIA BANK LIMITED	3,233
.0015	1	071904627	BMO HARRIS BANK N.A.	731
.0016	1	021000089	CITIBANK	65
.0017	1	021000089	CITIBANK	4,537
.0017	2	026009632	BANK OF TOKYO-MITSUBISHI UFJ	93
.0017	2	021000089	CITIBANK	93
.0017	2	026009593	BANK OF AMERICA N.A.	93
.0017	2	021000021	JPMORGAN CHASE BANK	93
.0017	2	026014630	MORGAN STANLEY BANK	93
.0017	2	021000248	WELLS FARGO BANK	93
.0018	2	026009632	BANK OF TOKYO-MITSUBISHI UFJ	28
.0018	2	021000322	BANK OF AMERICA N.A.	28
.0018	2	021000021	JPMORGAN CHASE BANK	28
.0018	2	021000089	CITIBANK	28
.0018	2	021000248	WELLS FARGO BANK	28
.0018	2	026014630	MORGAN STANLEY BANK	28
Total				178,542

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	<u>1</u> Name of Reinsurer	<u>2</u> Commission Rate	<u>3</u> Ceded Premium
1.	AWP P&C SA- WALLISELLEN BRANCH.....	52.484	243,307
2.	BC/BS OF SC INC.....	41.667	28,492
3.	MERIDIAN RE.....	27.545	3,924
4.	FIRST CARE INC.....	19.824	2,396
5.	HEALTH CARE SERV CORP A MUT LEGAL RE.....	12.624	6,532

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

	<u>1</u> Name of Reinsurer	<u>2</u> Total Recoverables	<u>3</u> Ceded Premiums	<u>4</u> Affiliated
6.	AWP P&C SA- WALLISELLEN BRANCH.....	90,331	243,307	Yes [] No [X]
7.	BCS RE.....	62,384	34,162	Yes [X] No []
8.	LLOYD'S SYNDICATE NUMBER 1686.....	26,170	15,520	Yes [] No [X]
9.	4 EVER LIFE INS CO.....	24,085	60,310	Yes [X] No []
10.	HEALTH CARE SERV CORP A MUT LEGAL RE.....	23,827	30,047	Yes [] No [X]

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	287,742,315		287,742,315
2. Premiums and considerations (Line 15)	51,926,674		51,926,674
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	20,065,442	(20,065,442)	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....	50,000	(50,000)	0
5. Other assets	5,951,832		5,951,832
6. Net amount recoverable from reinsurers		343,018,972	343,018,972
7. Protected cell assets (Line 27)	0		0
8. Totals (Line 28)	365,736,263	322,903,530	688,639,793
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	55,200,868	358,992,155	414,193,023
10. Taxes, expenses, and other obligations (Lines 4 through 8)	12,040,064	0	12,040,064
11. Unearned premiums (Line 9)	5,556,000	87,441,167	92,997,167
12. Advance premiums (Line 10)	0		0
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)	65,844,266	(65,844,266)	0
15. Funds held by company under reinsurance treaties (Line 13)	57,055,526	(57,055,526)	0
16. Amounts withheld or retained by company for account of others (Line 14)	0		0
17. Provision for reinsurance (Line 16)	630,000	(630,000)	0
18. Other liabilities	15,188,817		15,188,817
19. Total liabilities excluding protected cell business (Line 26)	211,515,541	322,903,530	534,419,071
20. Protected cell liabilities (Line 27)	0		0
21. Surplus as regards policyholders (Line 37)	154,220,722	XXX	154,220,722
22. Totals (Line 38)	365,736,263	322,903,530	688,639,793

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

If yes, give full explanation:

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS

	Total		Comprehensive (Hospital and Medical) Individual		Comprehensive (Hospital and Medical) Group		Medicare Supplement		Vision Only		Dental Only		Federal Employees Health Benefits Plan	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %
1. Premiums written	96,817,547	XXX	.0	XXX	439,497	XXX	.0	XXX	1,672,919	XXX	.9,726,932	XXX	.0	XXX
2. Premiums earned	96,476,727	XXX	.0	XXX	439,535	XXX	.0	XXX	1,648,892	XXX	.9,655,597	XXX	.0	XXX
3. Incurred claims	66,039,620	68.5	.0	0.0	108,175	24.6	.0	0.0	267,108	16.2	.5,245,206	54.3	.0	0.0
4. Cost containment expenses	99,711	.1	.0	0.0	.0	.0	.0	0.0	.0	0.0	.0	0.0	0.0	0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4)	66,139,331	68.6	.0	0.0	108,175	24.6	.0	0.0	267,108	16.2	.5,245,206	54.3	.0	0.0
6. Increase in contract reserves	0	.0	.0	0.0	0	.0	.0	0.0	.0	0.0	.0	0.0	0.0	0.0
7. Commissions (a)	(6,215,519)	(6.4)	.0	0.0	(43,913)	(10.0)	.0	0.0	256,249	15.5	.589,266	6.1	.0	0.0
8. Other general insurance expenses	36,698,903	38.0	.0	0.0	1,499,189	341.1	.0	0.0	250,515	15.2	.862,708	8.9	.0	0.0
9. Taxes, licenses and fees	4,685,289	4.9	.0	0.0	22,054	.50	.0	0.0	84,331	.51	.339,522	3.5	.0	0.0
10. Total other expenses incurred	35,168,673	36.5	.0	0.0	1,477,330	336.1	.0	0.0	.591,095	35.8	1,791,496	18.6	.0	0.0
11. Aggregate write-ins for deductions	0	.0	.0	0.0	0	.0	.0	0.0	.0	0.0	.0	0.0	0.0	0.0
12. Gain from underwriting before dividends or refunds	(4,831,277)	(5.0)	.0	0.0	(1,145,970)	(260.7)	.0	0.0	.790,689	48.0	2,618,895	27.1	.0	0.0
13. Dividends or refunds	0	.0	.0	0.0	0	.0	.0	0.0	.0	0.0	.0	0.0	0.0	0.0
14. Gain from underwriting after dividends or refunds	(4,831,277)	(5.0)	0	0.0	(1,145,970)	(260.7)	0	0.0	.790,689	48.0	2,618,895	27.1	0	0.0
DETAILS OF WRITE-INS														
1101.														
1102.														
1103.														
1198. Summary of remaining write-ins for Line 11 from overflow page	0	.0	.0	0.0	0	.0	.0	.0	0	.0	.0	.0	.0	.0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

	Medicare Title XVIII		Medicaid Title XIX		Credit A&H		Disability Income		Long-Term Care		Other Health	
	15 Amount	16 %	17 Amount	18 %	19 Amount	20 %	21 Amount	22 %	23 Amount	24 %	25 Amount	26 %
1. Premiums written	0	XXX	.0	XXX	.0	XXX	.0	XXX	.0	XXX	.84,978,199	XXX
2. Premiums earned	0	XXX	.0	XXX	.0	XXX	.0	XXX	.0	XXX	.84,732,703	XXX
3. Incurred claims	0	.0	.0	0.0	0	.0	0	.0	0	.0	.60,419,131	.71.3
4. Cost containment expenses	0	.0	.0	0.0	0	.0	0	.0	0	.0	.99,711	.0.1
5. Incurred claims and cost containment expenses (Lines 3 and 4)	0	.0	.0	0.0	0	.0	0	.0	0	.0	.60,518,842	.71.4
6. Increase in contract reserves	0	.0	.0	0.0	0	.0	0	.0	0	.0	.0	.0
7. Commissions (a)	0	.0	.0	0.0	0	.0	0	.0	(192)	.0	(7,016,929)	(8.3)
8. Other general insurance expenses	0	.0	.0	0.0	0	.0	0	.0	.0	.0	.34,086,491	.40.2
9. Taxes, licenses and fees	0	.0	.0	0.0	0	.0	0	.0	.0	.0	.4,239,382	.5.0
10. Total other expenses incurred	0	.0	.0	0.0	0	.0	0	.0	(192)	.0	.31,308,944	.37.0
11. Aggregate write-ins for deductions	0	.0	.0	0.0	0	.0	0	.0	.0	.0	.0	.0
12. Gain from underwriting before dividends or refunds	0	.0	.0	0.0	0	.0	0	.0	.192	.0	(7,095,083)	(8.4)
13. Dividends or refunds	0	.0	.0	0.0	0	.0	0	.0	.0	.0	.0	.0
14. Gain from underwriting after dividends or refunds	0	0.0	0	0.0	0	0.0	0	0.0	192	0.0	(7,095,083)	(8.4)
DETAILS OF WRITE-INS												
1101.												
1102.												
1103.												
1198. Summary of remaining write-ins for Line 11 from overflow page	0	.0	.0	0.0	0	.0	.0	.0	0	.0	.0	.0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

(a) Includes \$ reported as "Contract, membership and other fees retained by agents."

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

PART 2 - RESERVES AND LIABILITIES

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
A. Premium Reserves:													
1. Unearned premiums	402,842	0	55	.0	24,893	.73,971	0	0	.0	0	.0	0	303,923
2. Advance premiums .....	.0	0	.0	.0	.0	.0	0	0	.0	0	.0	0	.0
3. Reserve for rate credits .....	.0	0	.0	.0	.0	.0	0	0	.0	0	.0	0	.0
4. Total premium reserves, current year	402,842	0	55	.0	24,893	.73,971	0	0	.0	0	.0	0	303,923
5. Total premium reserves, prior year .....	.62,022	0	93	.0	.866	2,636	0	0	.0	0	.0	0	.58,427
6. Increase in total premium reserves	340,820	0	(38)	0	24,027	71,335	0	0	0	0	0	0	245,496
B. Contract Reserves:													
1. Additional reserves (a).....	.0	0	.0	.0	.0	.0	0	0	.0	0	.0	0	.0
2. Reserve for future contingent benefits.....	.0	0	.0	.0	.0	.0	0	0	.0	0	.0	0	.0
3. Total contract reserves, current year .....	.0	0	.0	.0	.0	.0	0	0	.0	0	.0	0	.0
4. Total contract reserves, prior year.....	.0	0	.0	.0	.0	.0	0	0	.0	0	.0	0	.0
5. Increase in contract reserves .....	.0	0	.0	.0	.0	.0	0	0	.0	0	.0	0	.0
C. Claim Reserves and Liabilities:													
1. Total current year .....	.28,888,058	0	.355,748	.0	.50,620	1,302,227	0	0	.0	0	.0	0	.27,179,463
2. Total prior year .....	.25,824,926	0	.304,953	.0	.41,957	1,105,444	0	0	.0	0	.0	0	.24,372,572
3. Increase .....	.3,063,132	0	.50,795	0	.8,663	196,783	0	0	0	0	0	0	.2,806,891

PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
1. Claims paid during the year:													
1.1 On claims incurred prior to current year .....	.17,560,507	0	.7,859	.0	.19,891	1,088,636	0	0	.0	0	.0	0	.16,444,121
1.2 On claims incurred during current year .....	.45,415,981	0	.49,521	.0	.238,554	3,959,787	0	0	.0	0	.0	0	.41,168,119
2. Claim reserves and liabilities, December 31, current year:													
2.1 On claims incurred prior to current year .....	.959,434	0	.6,000	.0	.0	.0	0	0	.0	0	.0	0	.953,434
2.2 On claims incurred during current year .....	.27,928,624	0	.349,749	.0	.50,620	1,302,226	0	0	.0	0	.0	0	.26,226,029
3. Test:													
3.1 Lines 1.1 and 2.1 .....	.18,519,941	0	.13,859	.0	.19,891	1,088,636	0	0	.0	0	.0	0	.17,397,555
3.2 Claim reserves and liabilities, December 31, prior year .....	.25,824,927	0	.304,953	.0	.41,957	1,105,444	0	0	.0	0	.0	0	.24,372,573
3.3 Line 3.1 minus Line 3.2	(7,304,986)	0	(291,094)	0	(22,066)	(16,808)	0	0	0	0	0	0	(6,975,018)

PART 4 - REINSURANCE

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
A. Reinsurance Assumed:													
1. Premiums written .....	.123,212,477	0	.0	.0	.0	.0	0	0	.0	0	.0	0	.123,212,477
2. Premiums earned .....	.123,212,477	0	.0	.0	.0	.0	0	0	.0	0	.0	0	.123,212,477
3. Incurred claims .....	.101,314,439	0	.0	.0	.0	.0	0	0	.0	0	.0	0	.101,314,439
4. Commissions .....	.1,250,107	0	0	0	0	0	0	0	0	0	0	0	.1,250,107
B. Reinsurance Ceded:													
1. Premiums written .....	.226,183,801	0	.444,929	.0	.1,672,937	5,020,376	0	0	.0	0	.0	.62,619	.218,982,940
2. Premiums earned .....	.225,702,722	0	.444,929	.0	.1,649,318	4,949,562	0	0	.0	0	.0	(23,480)	.218,682,393
3. Incurred claims .....	.164,693,412	0	.104,001	.0	.267,116	538,646	0	0	.0	0	.0	(62,933)	.163,846,582
4. Commissions .....	.22,300,825	0	.43,913	0	.507,233	1,524,688	0	0	0	0	0	192	.20,224,799

(a) Includes \$ premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Comprehensive (Hospital and Medical) Individual	2 Comprehensive (Hospital and Medical) Group	3 Medicare Supplement	4 Vision Only	5 Dental Only	6 Federal Employees Health Benefits Plan	7 Medicare Title XVIII	8 Medicaid Title XIX	9 Credit A&H	10 Disability Income	11 Long-Term Care	12 Other Health	13 Total
A. Direct:													
1. Incurred claims.....	.0	212,178	.0	534,224	5,783,851	.0	0	.0	.0	.0	(62,933)	122,951,272	129,418,592
2. Beginning claim reserves and liabilities.....	.0	599,905	.0	83,914	1,234,856	.0	0	.0	.0	.0	128,046	41,269,892	43,316,613
3. Ending claim reserves and liabilities.....	.0	701,496	.0	101,241	1,448,282	.0	0	.0	.0	.0	23,033	46,899,737	49,173,789
4. Claims paid.....	.0	110,587	.0	516,897	5,570,425	.0	0	.0	.0	.0	42,080	117,321,427	123,561,416
B. Assumed Reinsurance:													
1. Incurred claims.....	.0	0	.0	0	.0	.0	0	.0	.0	.0	.0	101,314,439	101,314,439
2. Beginning claim reserves and liabilities.....	.0	0	.0	0	0	.0	0	.0	.0	.0	.0	36,531,015	36,531,015
3. Ending claim reserves and liabilities.....	.0	0	.0	0	0	.0	0	.0	.0	.0	.0	100,231,197	100,231,197
4. Claims paid.....	.0	0	.0	0	0	.0	0	.0	.0	.0	.0	37,614,257	37,614,257
C. Ceded Reinsurance:													
1. Incurred claims.....	.0	104,001	.0	267,116	538,645	.0	0	.0	.0	.0	(62,933)	163,846,582	164,693,411
2. Beginning claim reserves and liabilities.....	.0	294,953	.0	41,957	129,412	.0	0	.0	.0	.0	128,046	53,428,333	54,022,701
3. Ending claim reserves and liabilities.....	.0	345,748	.0	50,621	146,055	.0	0	.0	.0	.0	23,033	119,951,471	120,516,928
4. Claims paid.....	.0	53,206	.0	258,452	522,002	.0	0	.0	.0	.0	42,080	97,323,444	98,199,184
D. Net:													
1. Incurred claims.....	.0	108,177	.0	267,108	5,245,206	.0	0	.0	.0	.0	.0	60,419,129	.66,039,620
2. Beginning claim reserves and liabilities.....	.0	304,952	.0	41,957	1,105,444	.0	0	.0	.0	.0	.0	24,372,574	.25,824,927
3. Ending claim reserves and liabilities.....	.0	355,748	.0	50,620	1,302,227	.0	0	.0	.0	.0	.0	27,179,463	.28,888,058
4. Claims paid.....	.0	57,381	.0	258,445	5,048,423	.0	0	.0	.0	.0	.0	57,612,240	.62,976,489
E. Net Incurred Claims and Cost Containment Expenses:													
1. Incurred claims and cost containment expenses.....	.0	108,175	.0	267,108	5,245,206	.0	0	.0	.0	.0	.0	60,518,842	.66,139,331
2. Beginning reserves and liabilities.....	.0	304,953	.0	41,957	1,105,444	.0	0	.0	.0	.0	.0	24,422,572	.25,874,926
3. Ending reserves and liabilities.....	.0	355,749	.0	50,620	1,302,226	.0	0	.0	.0	.0	.0	27,179,463	.28,888,058
4. Paid claims and cost containment expenses.....	0	57,379	0	258,445	5,048,424	0	0	0	0	0	0	57,761,951	63,126,199

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

Schedule P - Part 1A - Home/Farm

NONE

Schedule P - Part 1B - Private Passenger

NONE

Schedule P - Part 1C - Comm Auto/Truck

NONE

Schedule P - Part 1D - Workers' Comp

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2015	929	929	0	0	0	0	0	0	0	0	0	2	
3. 2016	21,302	20,875	427	184	184	155	155	41	0	0	41	65	
4. 2017	29,577	29,499	78	5,402	5,402	866	856	210	.11	0	209	188	
5. 2018	31,739	30,836	903	5,234	5,170	144	153	280	185	0	150	204	
6. 2019	31,432	30,027	1,405	12,573	11,602	127	117	1,244	1,081	0	1,144	274	
7. 2020	33,672	31,717	1,955	19,664	17,996	688	633	1,629	1,396	0	1,956	391	
8. 2021	49,636	44,722	4,914	26,788	23,693	521	453	2,315	1,797	0	3,681	499	
9. 2022	58,270	50,648	7,622	18,264	14,833	236	198	1,635	1,171	0	3,933	306	
10. 2023	45,299	40,881	4,418	14,242	12,112	126	109	1,306	1,228	0	2,225	220	
11. 2024	39,944	36,346	3,598	4,929	4,281	66	60	448	220	0	882	189	
12. Totals	XXX	XXX	XXX	107,280	95,273	2,929	2,734	9,108	7,089	0	14,221	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded								
1.	0	0	0	0	0	0	0	0	0	0	0	0	0			
2.	0	0	0	0	0	0	0	0	0	0	0	0	0			
3.	0	0	0	0	0	0	0	0	0	0	0	0	0			
4.	0	0	0	0	0	0	0	0	0	0	0	0	0			
5.	0	0	346	338	0	0	87	85	0	0	0	.10	0			
6.	316	290	692	640	.114	.105	.173	.160	6	6	0	100	1			
7.	0	0	.761	.699	.3	.3	.190	.175	3	3	0	.77	0			
8.	258	231	7,269	6,409	10	.9	1,817	1,602	38	34	0	1,107	3			
9.	121	.97	5,884	4,842	50	42	1,471	1,211	20	17	0	1,337	2			
10.	647	552	4,626	4,169	.109	.93	1,157	1,042	119	101	0	.701	22			
11.	2,524	2,195	9,982	8,888	257	226	2,495	2,222	244	212	0	1,759	67			
12.	3,866	3,365	29,560	25,985	543	478	7,390	6,497	430	373	0	5,091	95			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	.380	.339	.41	.1.8	.1.6	.9.6	0	0	0.0	0	0
4.	.6,478	6,269	.209	.21.9	.21.3	.267.9	0	0	0.0	0	0
5.	.6,091	5,931	.160	.19.2	.19.2	.17.7	0	0	0.0	.8	.2
6.	15,245	.14,001	.1,244	.48.5	.46.6	.88.5	0	0	0.0	.78	.22
7.	22,938	20,905	.2,033	.68.1	.65.9	.104.0	0	0	0.0	.62	.15
8.	39,016	34,228	4,788	.78.6	.76.5	.97.4	0	0	0.0	.887	.220
9.	27,681	22,411	.5,270	.47.5	.44.2	.69.1	0	0	0.0	1,066	.271
10.	22,332	19,406	.2,926	.49.3	.47.5	.66.2	0	0	0.0	.552	.149
11.	20,945	18,304	2,641	52.4	50.4	73.4	0	0	0.0	1,423	336
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	4,076	1,015

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0	
3. 2016	0	0	0	0	0	0	0	0	0	0	0	0	
4. 2017	0	0	0	0	0	0	0	0	0	0	0	0	
5. 2018	0	0	0	0	0	0	0	0	0	0	0	0	
6. 2019	0	0	0	0	0	0	0	0	0	0	0	0	
7. 2020	0	0	0	0	0	0	0	0	0	0	0	0	
8. 2021	0	0	0	0	0	0	0	0	0	0	0	0	
9. 2022	0	0	0	0	0	0	0	0	0	0	0	0	
10. 2023	0	0	0	0	0	0	0	0	0	0	0	0	
11. 2024	0	0	0	0	0	0	0	0	0	0	0	0	
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
							Loss	Loss Expense			
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

**SCHEDULE P - PART 1F - SECTION 2 - MEDICAL PROFESSIONAL
LIABILITY - CLAIMS-MADE**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	
2. 2015	102	(86)	188	0	0	0	0	0	0	0	0	0	
3. 2016	102	(598)	700	0	0	0	0	4	0	0	4	0	
4. 2017	97	(46)	143	0	0	0	0	0	0	0	0	0	
5. 2018	111	111	0	0	0	0	0	0	0	0	0	0	
6. 2019	116	116	0	0	0	0	0	29	0	0	29	0	
7. 2020	124	124	0	0	0	0	0	0	0	0	0	0	
8. 2021	121	121	0	0	0	0	0	0	0	0	0	0	
9. 2022	145	145	0	0	0	0	0	0	0	0	0	0	
10. 2023	133	133	0	0	0	0	0	10	0	0	10	0	
11. 2024	130	130	0	0	0	0	0	0	0	0	0	0	
12. Totals	XXX	XXX	XXX	0	0	0	0	43	0	0	43	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	0	0	175	175	0	0	0	0	0	0	0	0	0
12.	0	0	175	175	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount		
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid	
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0	
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
3.	4	0	4	3.9	0.0	0.6	0	0	0.0	0	0	
4.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
5.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
6.	29	0	29	25.0	0.0	0.0	0	0	0.0	0	0	
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
8.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
9.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
10.	10	0	10	7.5	0.0	0.0	0	0	0.0	0	0	
11.	175	175	0	134.6	134.6	0.0	0	0	0.0	0	0	
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0	
3. 2016	0	0	0	0	0	0	0	0	0	0	0	0	
4. 2017	0	0	0	0	0	0	0	0	0	0	0	0	
5. 2018	0	0	0	0	0	0	0	0	0	0	0	0	
6. 2019	0	0	0	0	0	0	0	0	0	0	0	0	
7. 2020	0	0	0	0	0	0	0	0	0	0	0	0	
8. 2021	0	0	0	0	0	0	0	0	0	0	0	0	
9. 2022	0	0	0	0	0	0	0	0	0	0	0	0	
10. 2023	0	0	0	0	0	0	0	0	0	0	0	0	
11. 2024	0	0	0	0	0	0	0	0	0	0	0	XXX	
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount		
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid	
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid	
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0	
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
3.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
4.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
5.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
6.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
8.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
9.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
10.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0	
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2015	10,246	5,343	4,903	7,274	3,837	0	0	12	0	0	3,449	0	
3. 2016	20,633	10,737	9,896	22,439	12,744	0	0	152	0	0	9,847	0	
4. 2017	21,866	14,073	7,793	19,847	16,099	0	0	81	0	0	3,829	0	
5. 2018	29,933	23,319	6,614	32,538	27,767	0	0	88	0	0	4,859	0	
6. 2019	18,126	10,353	7,773	9,449	5,982	0	0	63	0	0	3,530	6	
7. 2020	17,321	9,448	7,873	13,394	7,844	0	0	53	0	0	5,603	73	
8. 2021	20,110	11,203	8,907	10,157	5,193	0	0	159	0	0	5,123	209	
9. 2022	20,253	11,115	9,138	10,783	5,543	0	0	129	0	0	5,369	426	
10. 2023	27,798	15,945	11,853	18,987	10,070	15	0	252	0	0	9,184	920	
11. 2024	31,704	17,791	13,913	13,426	6,713	0	0	131	0	0	6,844	368	
12. Totals	XXX	XXX	XXX	158,294	101,792	15	0	1,120	0	0	57,637	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded								
1.	0	0	0	0	0	0	0	0	0	0	0	0	0			
2.	0	0	0	0	0	0	0	0	0	0	0	0	0			
3.	0	0	0	0	0	0	0	0	0	0	0	0	0			
4.	0	0	0	0	0	0	0	0	0	0	0	0	0			
5.	0	0	0	0	0	0	0	0	0	0	0	0	0			
6.	0	0	0	0	0	0	0	0	0	0	0	0	0			
7.	0	0	0	0	0	0	0	0	0	0	0	0	0			
8.	0	0	0	0	0	0	0	0	0	0	0	0	0			
9.	0	0	0	0	0	0	0	0	0	0	0	0	0			
10.	0	0	0	160	80	0	0	0	0	2	0	0	.82			
11.	0	0	9,218	5,002	0	0	0	0	0	103	0	0	4,319			
12.	0	0	9,378	5,082	0	0	0	0	0	105	0	0	4,401			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	7,286	3,837	3,449	71.1	71.8	70.3	0	0	0.0	0	0
3.	22,591	12,744	9,847	109.5	118.7	99.5	0	0	0.0	0	0
4.	19,928	16,099	3,829	91.1	114.4	49.1	0	0	0.0	0	0
5.	32,626	27,767	4,859	109.0	119.1	73.5	0	0	0.0	0	0
6.	9,512	5,982	3,530	52.5	57.8	45.4	0	0	0.0	0	0
7.	13,447	7,844	5,603	77.6	83.0	71.2	0	0	0.0	0	0
8.	10,316	5,193	5,123	51.3	46.4	57.5	0	0	0.0	0	0
9.	10,912	5,543	5,369	53.9	49.9	58.8	0	0	0.0	0	0
10.	19,416	10,150	9,266	69.8	63.7	78.2	0	0	0.0	.80	2
11.	22,878	11,715	11,163	72.2	65.8	80.2	0	0	0.0	4,216	103
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	4,296	105

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	..21,871	..21,871	..278	..278	..211	0	0	..211	XXX	
2. 2015	..30,155	..21,577	..8,578	..9,810	..7,303	..5,226	..3,624	..1,078	..660	0	..4,527	..884	
3. 2016	..27,403	..20,501	..6,902	..4,211	..3,931	..825	..349	..128	..106	0	..778	..405	
4. 2017	..25,562	..17,089	..8,473	..12,172	..11,575	..1,867	..1,163	..2,026	..1,816	0	..1,511	..580	
5. 2018	..20,452	..13,843	..6,609	..3,582	..3,045	..3,090	..2,441	..1,558	..1,247	0	..1,497	..360	
6. 2019	..15,649	..8,441	..7,208	..4,291	..2,982	..1,163	..399	..521	..240	0	..2,354	..166	
7. 2020	..18,213	..9,906	..8,307	..5,510	..4,492	..705	..254	..630	..364	0	..1,735	..243	
8. 2021	..23,566	..15,218	..8,348	..4,028	..3,174	..404	..32	..458	..286	0	..1,398	..247	
9. 2022	..26,859	..16,611	..10,248	..5,074	..4,081	..237	..105	..1,130	..730	0	..1,525	..207	
10. 2023	..21,559	..14,290	..7,269	..2,702	..1,679	..172	..68	..757	..231	0	..1,653	..182	
11. 2024	..17,865	..9,637	..8,228	..867	..728	..5	..5	..71	..49	0	..161	..74	
12. Totals	XXX	XXX	XXX	74,118	64,861	13,972	8,718	8,568	5,729	0	17,350	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded								
1.	..66,024	..66,024	..28,066	..28,066	..176	..176	..2,224	..2,224	..0	0	0	0	..112			
2.	..11,504	..11,504	..13,522	..13,522	..0	0	..655	..655	0	0	0	0	..9			
3.	..6,298	..6,298	..8,833	..8,833	..0	0	..730	..730	..69	..69	0	0	..6			
4.	..220	..220	..6,532	..6,532	..0	0	..870	..870	..168	..168	0	0	..2			
5.	..56	..3	..4,064	..4,063	..120	..106	..496	..496	..643	..643	0	..68	..2			
6.	..10,040	..8,550	..108	..100	..69	0	..27	..25	..15	0	0	..1,584	..3			
7.	..0	..0	..119	..109	..0	0	..30	..27	0	0	0	..13	0			
8.	..0	..0	..1,588	..998	..4	0	..659	..249	0	0	0	..1,004	0			
9.	..110	..29	..5,104	..2,610	..4	0	..1,844	..644	..26	..16	0	..3,789	..4			
10.	..5,300	..2,963	..4,582	..2,577	..64	20	..1,593	..566	..43	..34	0	..5,422	..11			
11.	..233	..202	..6,651	..3,979	7	5	..2,250	..773	..47	..39	0	..4,190	..13			
12.	99,785	95,793	79,169	71,389	444	307	11,378	7,259	1,011	969	0	16,070	162			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	..41,795	..37,268	..4,527	..138.6	..172.7	..52.8	0	0	..0.0	0	0
3.	..21,094	..20,316	..778	..77.0	..99.1	..11.3	0	0	..0.0	0	0
4.	..23,855	..22,344	..1,511	..93.3	..130.8	..17.8	0	0	..0.0	0	0
5.	..13,609	..12,044	..1,565	..66.5	..87.0	..23.7	0	0	..0.0	..54	..14
6.	..16,234	..12,296	..3,938	..103.7	..145.7	..54.6	0	0	..0.0	..1,498	..86
7.	..6,994	..5,246	..1,748	..38.4	..53.0	..21.0	0	0	..0.0	..10	..3
8.	..7,141	..4,739	..2,402	..30.3	..31.1	..28.8	0	0	..0.0	..590	..414
9.	..13,529	..8,215	..5,314	..50.4	..49.5	..51.9	0	0	..0.0	..2,575	..1,214
10.	..15,213	..8,138	..7,075	..70.6	..56.9	..97.3	0	0	..0.0	..4,342	..1,080
11.	..10,131	..5,780	..4,351	..56.7	..60.0	..52.9	0	0	..0.0	..2,703	..1,487
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	11,772	4,298

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	
2. 2015	70,038	70,038	0	26,257	26,257	26	26	.7	0	0	0	.7	
3. 2016	74,158	74,158	0	28,756	28,756	23	.23	32	0	0	0	32	
4. 2017	82,437	82,437	0	36,247	36,247	.18	.18	.52	0	0	0	.52	
5. 2018	109,110	109,110	0	41,403	41,403	.18	.18	.70	0	0	0	.70	
6. 2019	205,120	205,120	0	60,283	60,283	.38	.38	.87	0	0	0	.87	
7. 2020	82,312	82,312	0	40,452	40,452	.40	.40	.64	0	0	0	.64	
8. 2021	161,105	161,105	0	34,210	34,210	.17	.17	.83	0	0	0	.83	
9. 2022	182,149	182,149	0	80,091	80,091	.107	.107	.83	0	0	0	.83	
10. 2023	233,273	233,273	0	.81,657	.81,657	.65	.65	.31	0	0	0	.31	
11. 2024	222,674	222,674	0	65,014	65,014	28	28	0	0	0	0	XXX	
12. Totals	XXX	XXX	XXX	494,370	494,370	380	380	509	0	0	509	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	936	936	0	0	0	0	0	0	0	0	0
11.	0	0	19,674	19,674	0	0	92	92	0	0	0	0	1,198
12.	0	0	20,610	20,610	0	0	92	92	0	0	0	0	1,198

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Reserves After Discount	Losses Unpaid	Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	26,290	26,283	7	37.5	37.5	0.0	0	0	0.0	0	0
3.	28,811	28,779	32	38.9	38.8	0.0	0	0	0.0	0	0
4.	36,317	36,265	52	44.1	44.0	0.0	0	0	0.0	0	0
5.	41,491	41,421	70	38.0	38.0	0.0	0	0	0.0	0	0
6.	60,408	60,321	87	29.5	29.4	0.0	0	0	0.0	0	0
7.	40,556	40,492	64	49.3	49.2	0.0	0	0	0.0	0	0
8.	34,310	34,227	83	21.3	21.2	0.0	0	0	0.0	0	0
9.	80,281	80,198	83	44.1	44.0	0.0	0	0	0.0	0	0
10.	82,689	82,658	31	35.4	35.4	0.0	0	0	0.0	0	0
11.	84,808	84,808	0	38.1	38.1	0.0	0	0	0.0	0	0
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0	
3. 2016	0	0	0	0	0	0	0	0	0	0	0	0	
4. 2017	0	0	0	0	0	0	0	0	0	0	0	0	
5. 2018	0	0	0	0	0	0	0	0	0	0	0	0	
6. 2019	0	0	0	0	0	0	0	0	0	0	0	0	
7. 2020	0	0	0	0	0	0	0	0	0	0	0	0	
8. 2021	0	0	0	0	0	0	0	0	0	0	0	0	
9. 2022	0	0	0	0	0	0	0	0	0	0	0	0	
10. 2023	0	0	0	0	0	0	0	0	0	0	0	0	
11. 2024	0	0	0	0	0	0	0	0	0	0	0	0	
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 1K - FIDELITY/SURETY

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	(3)	0	0	0	0	0	(3)	(3)	XXX	
2. 2015	67	67	0	0	0	0	0	0	0	0	0	XXX	
3. 2016	72	72	0	0	0	6	6	0	0	0	0	XXX	
4. 2017	15	15	0	0	0	2	2	0	0	0	0	XXX	
5. 2018	0	0	0	0	0	0	0	0	0	0	0	XXX	
6. 2019	0	0	0	0	0	0	0	0	0	0	0	XXX	
7. 2020	0	0	0	0	0	0	0	0	0	0	0	XXX	
8. 2021	0	0	0	0	0	0	0	0	0	0	0	XXX	
9. 2022	0	0	0	0	0	0	0	0	0	0	0	XXX	
10. 2023	0	0	0	0	0	0	0	0	0	0	0	XXX	
11. 2024	0	0	0	0	0	0	0	0	0	0	0	XXX	
12. Totals	XXX	XXX	XXX	(3)	0	8	8	0	0	(3)	(3)	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded								
1.	0	0	0	0	0	0	0	0	0	0	0	0	0			
2.	0	0	0	0	0	0	0	0	0	0	0	0	0			
3.	0	0	21	21	0	0	3	3	0	0	0	0	0			
4.	0	0	23	23	0	0	2	2	0	0	0	0	0			
5.	0	0	2	1	0	0	0	0	0	0	0	1	0			
6.	0	0	0	0	0	0	0	0	0	0	0	0	0			
7.	0	0	0	0	0	0	0	0	0	0	0	0	0			
8.	0	0	0	0	0	0	0	0	0	0	0	0	0			
9.	0	0	0	0	0	0	0	0	0	0	0	0	0			
10.	0	0	0	0	0	0	0	0	0	0	0	0	0			
11.	0	0	0	0	0	0	0	0	0	0	0	0	0			
12.	0	0	46	45	0	0	5	5	0	0	0	1	0			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	30	30	0	41.7	41.7	0.0	0	0	0.0	0	0
4.	27	27	0	180.0	180.0	0.0	0	0	0.0	0	0
5.	2	1	1	0.0	0.0	0.0	0	0	0.0	1	0
6.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 1L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	
2. 2015	213,971	121,697	92,274	129,300	71,008	165	24	2,613	782	0	60,264	XXX	
3. 2016	218,562	134,866	83,696	153,731	100,569	106	18	2,386	672	(18)	54,964	XXX	
4. 2017	196,168	112,723	83,445	131,924	75,993	132	36	2,226	638	0	57,615	XXX	
5. 2018	262,988	180,754	82,234	168,599	118,546	360	77	2,306	657	0	51,985	XXX	
6. 2019	380,468	299,532	80,936	243,105	199,446	217	102	1,755	499	0	45,030	XXX	
7. 2020	307,586	243,096	64,490	159,199	126,981	79	5	1,747	455	14	33,584	XXX	
8. 2021	158,390	94,382	64,008	80,860	44,680	31	6	1,918	420	0	37,703	XXX	
9. 2022	174,499	102,204	72,295	108,453	66,374	93	21	1,142	55	0	43,238	XXX	
10. 2023	219,641	129,765	89,876	137,033	77,556	87	34	1,341	26	0	60,845	XXX	
11. 2024	322,179	225,703	96,476	116,905	71,489	104	15	1,470	234	(4)	46,741	XXX	
12. Totals	XXX	XXX	XXX	1,429,109	952,642	1,374	338	18,904	4,438	(8)	491,969	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	2,500	2,500	62	31	0	0	0	0	5	0	0	36	0
10.	5,100	5,100	5,003	4,075	0	0	1	1	13	0	0	941	0
11.	6,960	6,960	129,780	101,851	0	0	8	8	775	43	0	28,661	149
12.	14,560	14,560	134,845	105,957	0	0	9	9	793	43	0	29,638	149

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount		
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid	
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0	
2.	132,078	71,814	60,264	61.7	59.0	65.3	0	0	0.0	0	0	
3.	156,223	101,259	54,964	71.5	75.1	65.7	0	0	0.0	0	0	
4.	134,282	76,667	57,615	68.5	68.0	69.0	0	0	0.0	0	0	
5.	171,265	119,280	51,985	65.1	66.0	63.2	0	0	0.0	0	0	
6.	245,077	200,047	45,030	64.4	66.8	55.6	0	0	0.0	0	0	
7.	161,025	127,441	33,584	52.4	52.4	52.1	0	0	0.0	0	0	
8.	82,809	45,106	37,703	52.3	47.8	58.9	0	0	0.0	0	0	
9.	112,255	68,981	43,274	64.3	67.5	59.9	0	0	0.0	0.0	.31	
10.	148,578	86,792	61,786	67.6	66.9	68.7	0	0	0.0	0.0	.928	
11.	256,002	180,600	75,402	79.5	80.0	78.2	0	0	0.0	27,929	732	
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	28,888	750	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

Schedule P - Part 1M - International

NONE

Schedule P - Part 1N - Reinsurance

NONE

Schedule P - Part 1O - Reinsurance

NONE

Schedule P - Part 1P - Reinsurance

NONE

Schedule P - Part 1R - Prod Liab Occur

NONE

Schedule P - Part 1R - Prod Liab Claims

NONE

Schedule P - Part 1S-Fin./Mtg. Guaranty

NONE

Schedule P - Part 1T - Warranty

NONE

Schedule P - Part 1U - Pet Insurance Plans

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2017	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2018	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2019	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2020	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX
											12. Totals	0
												0

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2017	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2018	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2019	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2020	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX
											12. Totals	0
												0

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2017	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2018	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2019	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2020	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX
											12. Totals	0
												0

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2017	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2018	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2019	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2020	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX
											12. Totals	0
												0

SCHEDULE P - PART 2E- COMMERCIAL MULTIPLE PERIL

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	114	18	16	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	72	10	.10	.11	.10	.10	.10	.10	.10	.0
5. 2018	XXX	XXX	XXX	159	147	.83	.75	.74	.75	.65	(10)	(9)
6. 2019	XXX	XXX	XXX	XXX	921	1,161	1,075	1,055	1,059	1,081	.22	.26
7. 2020	XXX	XXX	XXX	XXX	XXX	1,360	1,814	1,805	1,838	1,800	(38)	(5)
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	4,126	4,246	4,309	4,266	(43)	20
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,081	5,088	4,803	(285)	(278)
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,705	2,830	125	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,381	XXX	XXX	XXX
											12. Totals	(229)
												(246)

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
											12. Totals	0
												0

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

1. Prior	27	27	27	0	0	0	0	0	0	0	0	0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
											12. Totals	0
												0

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
											12. Totals	0
												0

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	4,243	3,438	3,437	3,437	3,437	3,437	3,437	3,437	3,437	3,437	3,437	3,437
3. 2016	XXX	10,839	9,677	9,695	9,695	9,695	9,695	9,695	9,695	9,695	9,695	9,695
4. 2017	XXX	XXX	5,258	3,821	3,795	3,795	3,748	3,748	3,748	3,748	3,748	3,748
5. 2018	XXX	XXX	XXX	3,817	4,771	4,771	4,771	4,771	4,771	4,771	4,771	4,771
6. 2019	XXX	XXX	XXX	XXX	4,875	3,618	3,467	3,467	3,467	3,467	3,467	3,467
7. 2020	XXX	XXX	XXX	XXX	XXX	4,963	6,016	5,550	5,550	5,550	5,550	5,550
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	7,521	5,344	4,963	4,964	4,964	1,380
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,226	5,208	5,240	32	(1,986)
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,857	9,012	(845)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,929	XXX	(812)	(2,366)
											12. Totals	
												(2,366)

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

1. Prior	11,314	9,347	7,709	7,473	7,435	7,339	7,248	6,644	6,447	6,447	0	(197)
2. 2015	5,588	5,339	4,834	4,539	4,539	4,541	4,102	4,109	4,109	4,109	0	0
3. 2016	XXX	3,069	3,275	1,023	1,016	978	756	756	756	756	0	0
4. 2017	XXX	XXX	2,964	2,496	1,882	1,537	1,300	1,300	1,303	1,301	(2)	1
5. 2018	XXX	XXX	XXX	2,845	2,145	1,795	1,338	1,259	1,258	1,254	(4)	(5)
6. 2019	XXX	XXX	XXX	XXX	2,920	2,776	4,150	3,671	3,620	3,642	22	(29)
7. 2020	XXX	XXX	XXX	XXX	XXX	4,407	4,111	3,480	2,687	1,482	(1,205)	(1,998)
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	4,691	4,520	4,209	2,230	(1,979)	(2,290)
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,774	5,113	4,904	(209)	(870)
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,087	6,540	1,453	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,321	XXX	XXX	XXX
											12. Totals	(1,924)
												(5,388)

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior	0	3	3	3	3	3	3	3	3	3	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
										12. Totals	0	0

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
										12. Totals	0	0

SCHEDULE P - PART 2K - FIDELITY, SURETY

1. Prior	0	(20)	(49)	(74)	(99)	(128)	(137)	(143)	(148)	(151)	(3)	(8)
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	2	1	1	1	1	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
										12. Totals	(3)	(8)

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

1. Prior	4,021	591	771	702	694	647	649	648	648	648	0	0
2. 2015	61,797	59,300	58,386	58,457	58,455	58,432	58,426	58,431	58,432	58,433	1	2
3. 2016	XXX	60,426	53,313	53,192	53,310	53,272	53,278	53,267	53,267	53,250	(6)	(17)
4. 2017	XXX	XXX	58,401	56,086	56,033	56,017	56,007	56,025	56,025	56,027	2	2
5. 2018	XXX	XXX	XXX	54,227	50,389	50,335	50,337	50,334	50,337	50,336	(1)	2
6. 2019	XXX	XXX	XXX	XXX	49,345	44,925	44,085	43,868	43,849	43,774	(75)	(94)
7. 2020	XXX	XXX	XXX	XXX	XXX	41,722	34,239	32,311	32,306	32,292	(14)	(19)
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	39,578	37,432	36,219	36,205	(14)	(1,227)
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	46,494	42,751	42,182	(569)	(4,312)
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	67,076	60,458	60,458	(6,618)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	73,434	XXX	XXX	
										12. Totals	(7,294)	(5,663)

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX	
										12. Totals	0	0

NONE

Schedule P - Part 2N

NONE

Schedule P - Part 2O

NONE

Schedule P - Part 2P

NONE

Schedule P - Part 2R - Prod Liab Occur

NONE

Schedule P - Part 2R - Prod Liab Claims

NONE

Schedule P - Part 2S

NONE

Schedule P - Part 2T

NONE

Schedule P - Part 2U

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior	000	0	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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

1. Prior	000	0	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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

1. Prior	000	0	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

SCHEDULE P - PART 3D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior	000	0	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior	000	0	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0	0	2
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	54
4. 2017	XXX	XXX	0	10	10	10	10	10	10	10	10	116
5. 2018	XXX	XXX	XXX	20	41	55	55	55	55	55	55	81
6. 2019	XXX	XXX	XXX	XXX	30	866	947	952	953	981	144	129
7. 2020	XXX	XXX	XXX	XXX	XXX	752	1,533	1,564	1,649	1,723	233	158
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	1,622	2,980	3,160	3,163	285	211
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,402	3,437	3,469	196	108
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,475	2,147	122	76
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	654	31	91	91

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior	000	0	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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

1. Prior	000	0	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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

1. Prior	000	0	0	0	0	0	0	0	0	0	XXX	XXX
2. 2015	0	0	0	0	0	0	0	0	0	0	XXX	XXX
3. 2016	XXX	0	0	0	0	0	0	0	0	0	XXX	XXX
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	XXX	XXX
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	XXX	XXX
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

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

1. Prior	000	0	0	0	0	0	0	0	0	0	0	0
2. 2015	2,578	3,438	3,437	3,437	3,437	3,437	3,437	3,437	3,437	3,437	0	0
3. 2016	XXX	7,416	9,677	9,695	9,695	9,695	9,695	9,695	9,695	9,695	0	0
4. 2017	XXX	XXX	2,935	3,821	3,795	3,795	3,748	3,748	3,748	3,748	0	0
5. 2018	XXX	XXX	XXX	3,522	4,771	4,771	4,771	4,771	4,771	4,771	0	0
6. 2019	XXX	XXX	XXX	XXX	2,537	3,467	3,467	3,467	3,467	3,467	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	4,651	5,550	5,550	5,550	5,550	73	0
8. 2021	XXX	XXX	XXX	XXX	XXX	3,762	4,965	4,965	4,965	4,964	209	0
9. 2022	XXX	XXX	XXX	XXX	XXX	4,108	5,208	5,208	5,208	5,240	426	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	6,160	6,160	6,160	8,932	920	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,713	368	0

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

1. Prior	000	4,396	5,970	6,532	6,743	6,796	6,821	6,644	6,447	6,447	14	553
2. 2015	472	2,018	3,075	4,099	4,100	4,102	4,102	4,109	4,109	4,109	33	842
3. 2016	XXX	232	554	702	754	754	756	756	756	756	20	379
4. 2017	XXX	XXX	411	1,102	1,247	1,274	1,274	1,275	1,300	1,301	29	549
5. 2018	XXX	XXX	XXX	271	765	1,033	1,134	1,156	1,162	1,186	54	304
6. 2019	XXX	XXX	XXX	XXX	234	890	1,606	1,981	2,006	2,073	53	110
7. 2020	XXX	XXX	XXX	XXX	XXX	376	1,017	1,298	1,468	1,469	83	160
8. 2021	XXX	XXX	XXX	XXX	XXX	334	635	785	1,226	1,226	59	188
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	829	1,051	1,125	1,125	64	139
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	184	1,127	1,127	27	144
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	139	8	53	53

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior	000	.3	.3	.3	.3	.3	.3	.3	.3	.3	XXX	XXX
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
3. 2016	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
4. 2017	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
5. 2018	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
6. 2019	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior	000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2017	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2018	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2019	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2020	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior	000	(20)	(49)	(74)	(99)	(128)	(137)	(143)	(148)	(151)	XXX	XXX
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
3. 2016	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
4. 2017	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
5. 2018	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
6. 2019	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

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

1. Prior	000	.491	.671	.702	.694	.647	.649	.648	.648	.648	XXX	XXX
2. 2015	.37,525	.58,293	.58,386	.58,457	.58,451	.58,432	.58,426	.58,431	.58,432	.58,433	XXX	XXX
3. 2016	XXX	.40,000	.53,099	.53,192	.53,302	.53,272	.53,278	.53,267	.53,256	.53,250	XXX	XXX
4. 2017	XXX	XXX	.41,368	.55,941	.56,024	.56,017	.56,007	.56,025	.56,025	.56,027	XXX	XXX
5. 2018	XXX	XXX	XXX	.38,522	.50,212	.50,335	.50,337	.50,334	.50,337	.50,336	XXX	XXX
6. 2019	XXX	XXX	XXX	XXX	.33,233	.43,616	.43,781	.43,773	.43,774	.43,774	XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX	.22,029	.32,270	.32,310	.32,306	.32,292	XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	.23,755	.36,190	.36,219	.36,205	.36,205	XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	.29,916	.41,608	.42,151	.42,151	XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.42,420	.59,530	.59,530	XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.45,505	.45,505	XXX	XXX

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior	000	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
2. 2015	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
3. 2016	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
4. 2017	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
5. 2018	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
6. 2019	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

NON

Schedule P - Part 3N

NONE

Schedule P - Part 3O

NONE

Schedule P - Part 3P

NONE

Schedule P - Part 3R - Prod Liab Occur

NONE

Schedule P - Part 3R - Prod Liab Claims

NONE

Schedule P - Part 3S

NONE

Schedule P - Part 3T

NONE

Schedule P - Part 3U

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

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

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

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

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

SCHEDULE P - PART 4D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	114	18	16	0	0	0	0	0	0
4. 2017	XXX	XXX	72	0	0	1	0	0	0	0
5. 2018	XXX	XXX	XXX	139	47	19	20	.19	20	10
6. 2019	XXX	XXX	XXX	XXX	455	127	79	.91	96	65
7. 2020	XXX	XXX	XXX	XXX	XXX	312	.227	214	.96	.77
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	1,933	.1,102	1,039	1,075
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,885	1,577	1,302
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.867	.572
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,367

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	1,665	0	0	0	0	0	0	0	0	0
3. 2016	XXX	3,423	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	2,323	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	295	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	2,338	151	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	312	466	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	3,759	379	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,118	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,697	80
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,216

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

1. Prior	2,069	1,929	450	450	450	450	400	0	0	0
2. 2015	3,330	1,946	668	300	300	300	0	0	0	0
3. 2016	XXX	2,200	2,364	152	150	150	0	0	0	0
4. 2017	XXX	XXX	1,802	1,125	345	0	0	0	0	0
5. 2018	XXX	XXX	XXX	2,042	860	522	5	5	4	1
6. 2019	XXX	XXX	XXX	XXX	2,158	955	600	21	17	10
7. 2020	XXX	XXX	XXX	XXX	XXX	3,460	2,668	2,021	1,219	13
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	3,845	3,298	3,031	1,000
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,673	3,913	3,694
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,660	3,032
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,149

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	2	1	1	1	1
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior	3,971	50	.50	0	0	0	0	0	0	0
2. 2015	24,272	1,007	0	0	4	0	0	0	0	0
3. 2016	XXX	20,426	.214	0	.8	0	0	0	0	0
4. 2017	XXX	XXX	17,033	145	9	0	0	0	0	0
5. 2018	XXX	XXX	XXX	15,705	177	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	16,112	1,309	304	.95	75	0
7. 2020	XXX	XXX	XXX	XXX	XXX	19,504	1,969	1	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	15,324	1,242	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,578	.1,143	31
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,606	928
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,929

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

Schedule P - Part 4N

NONE

Schedule P - Part 4O

NONE

Schedule P - Part 4P

NONE

Schedule P - Part 4R - Prod Liab Occur

NONE

Schedule P - Part 4R - Prod Liab Claims

NONE

Schedule P - Part 4S

NONE

Schedule P - Part 4T - Warranty

NONE

Schedule P - Part 4U

NONE

Schedule P - Part 5A- SN1

NONE

Schedule P - Part 5A- SN2

NONE

Schedule P - Part 5A- SN3

NONE

Schedule P - Part 5B- SN1

NONE

Schedule P - Part 5B- SN2

NONE

Schedule P - Part 5B- SN3

NONE

Schedule P - Part 5C- SN1

NONE

Schedule P - Part 5C- SN2

NONE

Schedule P - Part 5C- SN3

NONE

Schedule P - Part 5D- SN1

NONE

Schedule P - Part 5D- SN2

NONE

Schedule P - Part 5D- SN3

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	11	11	11	11	11	11	11
4. 2017	XXX	XXX	0	15	39	41	41	.71	.71	.72
5. 2018	XXX	XXX	XXX	0	9	43	80	.81	.81	.81
6. 2019	XXX	XXX	XXX	XXX	0	19	139	141	142	144
7. 2020	XXX	XXX	XXX	XXX	0	203	222	229	233	
8. 2021	XXX	XXX	XXX	XXX	XXX	89	249	278	285	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.46	171	196
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.37	122
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	.2	.1	.31	.1	.1	.0
5. 2018	XXX	XXX	XXX	0	.50	.29	.0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	.6	.89	.4	0	0	1
7. 2020	XXX	XXX	XXX	XXX	XXX	121	19	6	2	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	125	.27	.6	.3
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.94	.18	.2
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.62	.22
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	67

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2015	2	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	2	2	2	2	2	2	2	2
3. 2016	XXX	0	3	3	.44	.48	.49	.49	.64	.64
4. 2017	XXX	XXX	0	.87	.115	.117	.149	.188	.188	.188
5. 2018	XXX	XXX	XXX	14	151	166	178	185	185	204
6. 2019	XXX	XXX	XXX	XXX	30	132	238	.249	.257	.274
7. 2020	XXX	XXX	XXX	XXX	XXX	121	312	.328	.333	.391
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.357	.475	.485	.499
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.209	.284	.306
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.138	.220
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	189

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL 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	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

NONE

NONE

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2B

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	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3B

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	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	4	5	6	6	6
7. 2020	XXX	XXX	XXX	XXX	0	73	.73	.73	.73	.73
8. 2021	XXX	XXX	XXX	XXX	XXX	96	206	208	209	209
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	253	422	426	426
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	730	920	920
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	368

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	4	5	6	6	6
7. 2020	XXX	XXX	XXX	XXX	XXX	0	73	.73	.73	.73
8. 2021	XXX	XXX	XXX	XXX	XXX	96	206	208	209	209
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	253	422	426	426
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	730	920	920
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	368

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	.50	.0	0	.0	1	.7	.5	.0	.0	1
2. 2015	7	16	.31	.31	.32	.32	.32	.33	.33	.33
3. 2016	XXX	.9	20	.20	.20	.20	.20	.20	.20	.20
4. 2017	XXX	XXX	0	.17	.24	.25	.28	.28	.28	.29
5. 2018	XXX	XXX	XXX	10	.18	.33	.52	.53	.53	.54
6. 2019	XXX	XXX	XXX	XXX	.5	.16	.50	.53	.53	.53
7. 2020	XXX	XXX	XXX	XXX	XXX	.3	.70	.80	.82	.83
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.17	.44	.53	.59
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.30	.58	.64
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.7	.27
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2015	2	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	462	323	272	249	191	160	131	121	115	112
2. 2015	200	159	124	107	71	.66	.29	.29	.27	.9
3. 2016	XXX	.84	.54	.40	.22	.12	.6	.6	.6	.6
4. 2017	XXX	XXX	19	.19	.9	.8	.5	.5	.3	.2
5. 2018	XXX	XXX	XXX	.40	.29	.16	.3	.2	.1	.2
6. 2019	XXX	XXX	XXX	XXX	.53	.55	.14	.4	.3	.3
7. 2020	XXX	XXX	XXX	XXX	XXX	.81	.18	.1	.0	.0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.39	.10	.7	.0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.27	.12	.4
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.20	.11
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2015	2	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	195	(12)	.76	.0	100	.3	.34	.19	(2)	(1)
2. 2015	268	359	643	626	.681	.681	.660	.702	.811	.884
3. 2016	XXX	149	315	316	.359	.360	.369	.378	.390	.405
4. 2017	XXX	XXX	XXX	.89	466	.546	.547	.556	.561	.580
5. 2018	XXX	XXX	XXX	209	309	.318	.342	.354	.354	.360
6. 2019	XXX	XXX	XXX	XXX	.92	.117	.144	.148	.152	.166
7. 2020	XXX	XXX	XXX	XXX	XXX	.93	.147	.222	.230	.243
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.105	.142	.201	.247
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.103	.148	.207
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.46	.182
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	74

Schedule P - Part 5R- SN1A

NONE

Schedule P - Part 5R- SN2A

NONE

Schedule P - Part 5R- SN3A

NONE

Schedule P - Part 5R- SN1B

NONE

Schedule P - Part 5R- SN2B

NONE

Schedule P - Part 5R- SN3B

NONE

Schedule P - Part 5T- SN1

NONE

Schedule P - Part 5T- SN2

NONE

Schedule P - Part 5T- SN3

NONE

Schedule P - Part 6C - SN1

NONE

Schedule P - Part 6C - SN2

NONE

Schedule P - Part 6D - SN1

NONE

Schedule P - Part 6D - SN2

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2015	929	929	929	929	929	929	929	929	929	929	0
3. 2016	XXX	21,302	21,302	21,302	21,302	21,302	21,302	21,302	21,302	21,302	0
4. 2017	XXX	XXX	29,577	29,577	29,577	29,577	29,577	29,577	29,577	29,577	0
5. 2018	XXX	XXX	XXX	31,739	31,739	31,739	31,739	31,739	31,739	31,739	0
6. 2019	XXX	XXX	XXX	XXX	31,432	31,432	31,432	31,432	31,432	31,432	0
7. 2020	XXX	XXX	XXX	XXX	XXX	33,672	33,672	33,672	33,672	33,672	0
8. 2021	XXX	XXX	XXX	XXX	XXX	49,636	49,636	49,636	49,636	49,636	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	58,270	58,270	58,270	58,270	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45,299	45,299	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	39,944	39,944	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	39,944
13. Earned Premiums (Sc P-Pt 1)	929	21,302	29,577	31,739	31,432	33,672	49,636	58,270	45,299	39,944	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2015	929	929	929	929	929	929	929	929	929	929	0
3. 2016	XXX	20,875	20,875	20,875	20,875	20,875	20,875	20,875	20,875	20,875	0
4. 2017	XXX	XXX	29,499	29,499	29,499	29,499	29,499	29,499	29,499	29,499	0
5. 2018	XXX	XXX	XXX	30,836	30,836	30,836	30,836	30,836	30,836	30,836	0
6. 2019	XXX	XXX	XXX	30,027	30,027	30,027	30,027	30,027	30,027	30,027	0
7. 2020	XXX	XXX	XXX	XXX	XXX	31,717	31,717	31,717	31,717	31,717	0
8. 2021	XXX	XXX	XXX	XXX	XXX	44,722	44,722	44,722	44,722	44,722	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	50,648	50,648	50,648	50,648	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	40,881	40,881	40,881	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36,346	36,346	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36,346
13. Earned Premiums (Sc P-Pt 1)	929	20,875	29,499	30,836	30,027	31,717	44,722	50,648	40,881	36,346	XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2015	10,246	10,246	10,246	10,246	10,246	10,246	10,246	10,246	10,246	10,246	0
3. 2016	XXX	20,633	20,633	20,633	20,633	20,633	20,633	20,633	20,633	20,633	0
4. 2017	XXX	XXX	16,356	16,356	16,356	16,356	16,356	16,356	16,356	16,356	0
5. 2018	XXX	XXX	XXX	29,933	29,933	29,933	29,933	29,933	29,933	29,933	0
6. 2019	XXX	XXX	XXX	18,126	18,126	18,126	18,126	18,126	18,126	18,126	0
7. 2020	XXX	XXX	XXX	XXX	17,321	17,321	17,321	17,321	17,321	17,321	0
8. 2021	XXX	XXX	XXX	XXX	XXX	20,110	20,110	20,110	20,110	20,110	0
9. 2022	XXX	XXX	XXX	XXX	XXX	20,253	20,253	20,253	20,253	20,253	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	27,798	27,798	27,798	27,798	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31,704	31,704	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31,704
13. Earned Premiums (Sc P-Pt 1)	10,246	20,633	21,866	29,933	18,126	17,321	20,110	20,253	27,798	31,704	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2015	5,343	5,343	5,343	5,343	5,343	5,343	5,343	5,343	5,343	5,343	0
3. 2016	XXX	10,737	10,737	10,737	10,737	10,737	10,737	10,737	10,737	10,737	0
4. 2017	XXX	XXX	8,563	8,563	8,563	8,563	8,563	8,563	8,563	8,563	0
5. 2018	XXX	XXX	XXX	23,319	23,319	23,319	23,319	23,319	23,319	23,319	0
6. 2019	XXX	XXX	XXX	XXX	10,353	10,353	10,353	10,353	10,353	10,353	0
7. 2020	XXX	XXX	XXX	XXX	9,448	9,448	9,448	9,448	9,448	9,448	0
8. 2021	XXX	XXX	XXX	XXX	XXX	11,203	11,203	11,203	11,203	11,203	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	11,115	11,115	11,115	11,115	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,945	15,945	15,945	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,791	17,791	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,791
13. Earned Premiums (Sc P-Pt 1)	5,343	10,737	14,073	23,319	10,353	9,448	11,203	11,115	15,945	17,791	XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2015	30,155	30,155	30,155	30,155	30,155	30,155	30,155	30,155	30,155	30,155	0
3. 2016	XXX	27,403	27,403	27,403	27,403	27,403	27,403	27,403	27,403	27,403	0
4. 2017	XXX	XXX	25,562	25,562	25,562	25,562	25,562	25,562	25,562	25,562	0
5. 2018	XXX	XXX	XXX	20,452	20,452	20,452	20,452	20,452	20,452	20,452	0
6. 2019	XXX	XXX	XXX	XXX	15,649	15,649	15,649	15,649	15,649	15,649	0
7. 2020	XXX	XXX	XXX	XXX	XXX	18,213	18,213	18,213	18,213	18,213	0
8. 2021	XXX	XXX	XXX	XXX	XXX	23,566	23,566	23,566	23,566	23,566	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	26,859	26,859	26,859	26,859	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,559	21,559	21,559	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,865	17,865	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,865
13. Earned Premiums (Sc P-Pt 1)	30,155	27,403	25,562	20,452	15,649	18,213	23,566	26,859	21,559	17,865	XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2015	21,577	21,577	21,577	21,577	21,577	21,577	21,577	21,577	21,577	21,577	0
3. 2016	XXX	20,501	20,501	20,501	20,501	20,501	20,501	20,501	20,501	20,501	0
4. 2017	XXX	XXX	17,089	17,089	17,089	17,089	17,089	17,089	17,089	17,089	0
5. 2018	XXX	XXX	XXX	13,843	13,843	13,843	13,843	13,843	13,843	13,843	0
6. 2019	XXX	XXX	XXX	XXX	8,441	8,441	8,441	8,441	8,441	8,441	0
7. 2020	XXX	XXX	XXX	XXX	XXX	9,906	9,906	9,906	9,906	9,906	0
8. 2021	XXX	XXX	XXX	XXX	XXX	15,218	15,218	15,218	15,218	15,218	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	16,611	16,611	16,611	16,611	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	14,290	14,290	14,290	14,290	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,637	9,637	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,637
13. Earned Premiums (Sc P-Pt 1)	21,577	20,501	17,089	13,843	8,441	9,906	15,218	16,611	14,290	9,637	XXX

SCHEDULE P - PART 6M - INTERNATIONAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sc P-Pt 1)	0	0	0	0	0	0	0	0	0	0	XXX

Schedule P - Part 6N - SN1

NONE

Schedule P - Part 6N - SN2

NONE

Schedule P - Part 6O - SN1

NONE

Schedule P - Part 6O - SN2

NONE

Schedule P - Part 6R - SN1A

NONE

Schedule P - Part 6R - SN2A

NONE

Schedule P - Part 6R - SN1B

NONE

Schedule P - Part 6R - SN2B

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

**SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS
(\$000 OMITTED)**

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	0		0.0	.0		0.0
2. Private Passenger Auto Liability/Medical	0		0.0	.0		0.0
3. Commercial Auto/Truck Liability/Medical	0		0.0	.0		0.0
4. Workers' Compensation	0		0.0	.0		0.0
5. Commercial Multiple Peril	4,752		0.0	3,619		0.0
6. Medical Professional Liability-Occurrence	0		0.0	.0		0.0
7. Medical Professional Liability-Claims-made	0		0.0	0		0.0
8. Special Liability	0		0.0	.0		0.0
9. Other Liability-Occurrence	4,743		0.0	14,181		0.0
10. Other Liability-Claims-made	16,068		0.0	7,498		0.0
11. Special Property	0		0.0	.0		0.0
12. Auto Physical Damage	0		0.0	0		0.0
13. Fidelity/Surety	1		0.0	.0		0.0
14. Other	29,638		0.0	.96,818		0.0
15. International	0		0.0	.0		0.0
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	0		0.0	.0		0.0
20. Products Liability-Claims-made	0		0.0	.0		0.0
21. Financial Guaranty/Mortgage Guaranty	0		0.0	.0		0.0
22. Warranty	0		0.0	.0		0.0
23. Pet Insurance Plans	0		0.0	.0		0.0
24. Totals	55,201	0	0.0	122,115	0	0.0

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	.0	0	.0	.0	0	.0	0	.0	0
2. 2015	0	.0	0	.0	.0	0	.0	0	.0	0
3. 2016	XXX	.0	0	.0	.0	0	.0	0	.0	0
4. 2017	XXX	XXX	0	.0	.0	0	.0	0	.0	0
5. 2018	XXX	XXX	XXX	0	.0	0	.0	0	.0	0
6. 2019	XXX	XXX	XXX	XXX	.0	0	.0	0	.0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	.0	0	.0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	.0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	.0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1 2015	2	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	.0	0	.0	.0	0	.0	0	.0	0
2. 2015	0	.0	0	.0	.0	0	.0	0	.0	0
3. 2016	XXX	.0	0	.0	.0	0	.0	0	.0	0
4. 2017	XXX	XXX	0	.0	.0	0	.0	0	.0	0
5. 2018	XXX	XXX	XXX	0	.0	0	.0	0	.0	0
6. 2019	XXX	XXX	XXX	XXX	.0	0	.0	0	.0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	.0	0	.0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	.0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	.0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

**SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS
(continued)**

SECTION 4

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	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 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

**SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS
(\$000 OMITTED)**

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	0		0.0	.0		0.0
2. Private Passenger Auto Liability/Medical	0		0.0	.0		0.0
3. Commercial Auto/Truck Liability/Medical	0		0.0	.0		0.0
4. Workers' Compensation	0		0.0	.0		0.0
5. Commercial Multiple Peril	4,752		0.0	3,619		0.0
6. Medical Professional Liability-Occurrence	0		0.0	.0		0.0
7. Medical Professional Liability-Claims-made	0		0.0	0		0.0
8. Special Liability	0		0.0	.0		0.0
9. Other Liability-Occurrence	4,743		0.0	14,181		0.0
10. Other Liability-Claims-made	16,068		0.0	7,498		0.0
11. Special Property	0		0.0	.0		0.0
12. Auto Physical Damage	0		0.0	.0		0.0
13. Fidelity/Surety	1		0.0	.0		0.0
14. Other	29,638		0.0	96,818		0.0
15. International	0		0.0	.0		0.0
16. Reinsurance-Nonproportional Assumed Property	0		0.0	.0		0.0
17. Reinsurance-Nonproportional Assumed Liability	0		0.0	.0		0.0
18. Reinsurance-Nonproportional Assumed Financial Lines	0		0.0	.0		0.0
19. Products Liability-Occurrence	0		0.0	.0		0.0
20. Products Liability-Claims-made	0		0.0	.0		0.0
21. Financial Guaranty/Mortgage Guaranty	0		0.0	.0		0.0
22. Warranty	0		0.0	.0		0.0
23. Pet Insurance Plans	0		0.0	.0		0.0
24. Totals	55,201	0	0.0	122,115	0	0.0

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	.0	0	.0	.0	.0	.0	.0	.0	.0
2. 2015	0	.0	0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	.0	0	.0	.0	.0	.0	.0	.0	.0
4. 2017	XXX	XXX	0	.0	.0	.0	.0	.0	.0	.0
5. 2018	XXX	XXX	XXX	0	.0	.0	.0	.0	.0	.0
6. 2019	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2020	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1 2015	2	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	.0	0	.0	.0	.0	.0	.0	.0	.0
2. 2015	0	.0	0	.0	.0	.0	.0	.0	.0	.0
3. 2016	XXX	.0	0	.0	.0	.0	.0	.0	.0	.0
4. 2017	XXX	XXX	0	.0	.0	.0	.0	.0	.0	.0
5. 2018	XXX	XXX	XXX	0	.0	.0	.0	.0	.0	.0
6. 2019	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2020	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	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 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	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 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	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 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	0	0	0	0	0	0	0	0	0	0
2. 2015	0	0	0	0	0	0	0	0	0	0
3. 2016	XXX	0	0	0	0	0	0	0	0	0
4. 2017	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.

1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost?

Yes [X] No []

If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:

1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? \$ 175,000

1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP No. 65? Yes [] No [X]

1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [X] No []

1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A [X]

1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

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

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

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

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

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

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

5.1 Fidelity	\$ 0
5.2 Surety	\$ 0

6. Claim count information is reported per claim or per claimant (indicate which). CLAIM
If not the same in all years, explain in Interrogatory 7.

7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [] No [X]

7.2 An extended statement may be attached.
Adjusting and other expenses paid that represent internal claims department costs are allocated based on the distribution of paid activity. Adjusting and other expense reserves are allocated based on the distribution of outstanding loss reserves

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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

Allocated By States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL					0
2. Alaska	AK					0
3. Arizona	AZ					0
4. Arkansas	AR					0
5. California	CA					0
6. Colorado	CO					0
7. Connecticut	CT					0
8. Delaware	DE					0
9. District of Columbia	DC			364		364
10. Florida	FL					0
11. Georgia	GA					0
12. Hawaii	HI					0
13. Idaho	ID					0
14. Illinois	IL			58,783		58,783
15. Indiana	IN					0
16. Iowa	IA					0
17. Kansas	KS					0
18. Kentucky	KY					0
19. Louisiana	LA					0
20. Maine	ME					0
21. Maryland	MD					0
22. Massachusetts	MA					0
23. Michigan	MI					0
24. Minnesota	MN					0
25. Mississippi	MS					0
26. Missouri	MO					0
27. Montana	MT					0
28. Nebraska	NE					0
29. Nevada	NV					0
30. New Hampshire	NH					0
31. New Jersey	NJ			3,220		3,220
32. New Mexico	NM					0
33. New York	NY					0
34. North Carolina	NC					0
35. North Dakota	ND					0
36. Ohio	OH					0
37. Oklahoma	OK					0
38. Oregon	OR					0
39. Pennsylvania	PA			252		252
40. Rhode Island	RI					0
41. South Carolina	SC					0
42. South Dakota	SD					0
43. Tennessee	TN					0
44. Texas	TX					0
45. Utah	UT					0
46. Vermont	VT					0
47. Virginia	VA					0
48. Washington	WA					0
49. West Virginia	WV					0
50. Wisconsin	WI					0
51. Wyoming	WY					0
52. American Samoa	AS					0
53. Guam	GU					0
54. Puerto Rico	PR					0
55. U.S. Virgin Islands	VI					0
56. Northern Mariana Islands	MP					0
57. Canada	CAN					0
58. Aggregate Other Alien	OT					0
59. Totals		0	0	0	62,619	62,619

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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

Asterisk	Explanation
1	Ancilzye Insurance Agency LLC is owned by Ancilzye Technologies LLC.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 * Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	11	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
80985	36-2149353	4 Ever Life Insurance Company					(10,985,865)	22,331,956			11,346,091	(77,495,031)
38245	36-6033921	BCS Insurance Company					(30,052,834)	(7,545,258)			(37,598,092)	86,469,007
	36-4247278	BCS Financial Corporation					44,546,898				44,546,898	
	36-4303124	BCS Financial Services Corporation					(601,931)				(601,931)	
	36-3120811	BCS Insurance Agency, Inc.									0	
	37-1732732	Ancilize Technologies LLC									0	
	32-0485937	BCS Re Inc.					(2,660,275)	4,421,123			1,760,848	(62,383,811)
	98-1353021	4 Ever Life International Limited					(245,993)	(19,207,821)			(19,453,814)	53,409,835
	75-0956156	LifeSecure Holdings Corporation									0	
	51-0309072	Medical Risk Managers, Inc.									0	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE Y

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

1 Insurers in Holding Company	2 Owners with Greater than 10% Ownership	3 Ownership Percentage Column 2 of Column 1	4 Granted Disclaimer of Control/Affiliation of Column 2 Over Column 1 (Yes/No)	5 Ultimate Controlling Party	6 U.S. Insurance Groups or Entities Controlled by Column 5	7 Ownership Percentage (Columns 5 of Column 6)	8 Granted Disclaimer of Control/Affiliation of Column 5 Over Column 6 (Yes/No)
BCS Insurance Company.....	BCS Financial Corporation.....	100.000 %	NO	BCS Financial Corporation.....	BCS Re Inc.....	100.000 %	NO
4 Ever Life Insurance Company.....	BCS Financial Corporation.....	100.000 %	NO	BCS Financial Corporation.....	BCS Re Inc.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	LifeSecure Holdings Corporation.....	80.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Michigan Medicaid Holdings Company.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Embergent Holdings, Inc.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	BCBSM and Independence Health Group Inc.....	BMH LLC.....	38.740 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Blue Cross and Blue Shield of Vermont.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	BCBSM and Independence Health Group Inc.....	Vista HoldCo LLC.....	38.740 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Blue Care Network of Michigan.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Woodward Straits Insurance Company.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Financial Services Holding Company, LLC.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Services Holding Company, LLC.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Pharmacy-Related Holding Company, LLC.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Care Transformation Holding Company.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Behavioral Health Holding Company, LLC.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Strategic Services Holding Company, LLC.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Provider-Related Holding Company, LLC.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Shell Holding Company I, LLC.....	100.000 %	NO
BCS Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Shell Holding Company II, LLC.....	100.000 %	NO
4 Ever Life Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	LifeSecure Holdings Corporation.....	80.000 %	NO
4 Ever Life Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Michigan Medicaid Holdings Company.....	100.000 %	NO
4 Ever Life Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Embergent Holdings, Inc.....	100.000 %	NO
4 Ever Life Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	BCBSM and Independence Health Group Inc.....	BMH LLC.....	38.740 %	NO
4 Ever Life Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	Blue Cross and Blue Shield of Vermont.....	100.000 %	NO
4 Ever Life Insurance Company.....	Blue Cross Blue Shield of Michigan Mutual Insurance Company.....	10.080 %	NO	BCBSM and Independence Health Group Inc.....	Vista HoldCo LLC.....	38.740 %	NO

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SCHEDULE Y

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

RESPONSES

MARCH FILING

1. Will an actuarial opinion be filed by March 1?YES.....
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?YES.....
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?YES.....
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?YES.....

APRIL FILING

5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?YES.....
6. Will Management's Discussion and Analysis be filed by April 1?YES.....
7. Will the Supplemental Investment 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?SEE EXPLANATION.....

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.

MARCH FILING

11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?SEE EXPLANATION.....
12. Will the Financial Guaranty Insurance Exhibit be filed by March 1?SEE EXPLANATION.....
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?YES.....
14. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?YES.....
15. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?SEE EXPLANATION.....
16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?SEE EXPLANATION.....
17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?SEE EXPLANATION.....
18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?SEE EXPLANATION.....
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?SEE EXPLANATION.....
22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?SEE EXPLANATION.....
23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?YES.....
24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?SEE EXPLANATION.....
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?SEE EXPLANATION.....
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?SEE EXPLANATION.....
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?SEE EXPLANATION.....
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?SEE EXPLANATION.....
31. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?YES.....
32. Will the Accident and Health Policy Experience Exhibit be filed by April 1?YES.....
33. Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?YES.....
34. Will the Cybersecurity Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?YES.....
35. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit – Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?YES.....
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.....

Explanation:

8. Not applicable

11. Not applicable

12. Not applicable

15. Not applicable

16. Not applicable

17. Not applicable

18. Not applicable

21. Not applicable

22. Not applicable

24. Not applicable

25. Not applicable

26. Not applicable

27. Not applicable

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

30. Not applicable

36. Not applicable

37. Not applicable

Bar Code:



OVERFLOW PAGE FOR WRITE-INS

E29 Additional Aggregate Lines for Line 58.

*SCEPT3 - Schedule E - Part 3 - Special Deposits

	1 Type of Deposit	2 Purpose of Deposit	3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
5804. 3128MJ2C3.....	B.....	Held for collateral			92,425	78,696
5805. 3128MJSK7.....	B.....	Held for collateral			66,207	56,401
5806. 3128MJXQ8.....	B.....	Held for collateral			49,891	42,616
5807. 3128MJZ37.....	B.....	Held for collateral			70,308	59,983
5808. 3128MJZ86.....	B.....	Held for collateral			47,536	40,343
5809. 3128PRTM1.....	B.....	Held for collateral			1,437	1,424
5810. 31292MDY6.....	B.....	Held for collateral			216,719	190,040
5811. 312940EU9.....	B.....	Held for collateral			32,452	31,011
5812. 3132DWERO.....	B.....	Held for collateral			875,641	806,086
5813. 3132GGCG8.....	B.....	Held for collateral			175,597	160,667
5814. 3132GJEL9.....	B.....	Held for collateral			72,044	65,205
5815. 3132HL3K7.....	B.....	Held for collateral			71,086	60,981
5816. 3132HNHV4.....	B.....	Held for collateral			69,677	59,385
5817. 3132L92Z7.....	B.....	Held for collateral			93,371	80,309
5818. 3132QWMK2.....	B.....	Held for collateral			162,802	147,267
5819. 3132WNEP3.....	B.....	Held for collateral			41,685	35,456
5820. 3136AB3Q4.....	B.....	Held for collateral			221,042	190,821
5821. 3136B1BD5.....	B.....	Held for collateral			251,405	232,853
5822. 3137FDEST.....	B.....	Held for collateral			741,914	706,837
5823. 3138A2BV0.....	B.....	Held for collateral			52,061	48,735
5824. 3138L9H39.....	B.....	Held for collateral			414,841	395,674
5825. 3138X0Y36.....	B.....	Held for collateral			166,276	144,538
5826. 31392CT61.....	B.....	Held for collateral			58,741	59,594
5827. 31402C4F6.....	B.....	Held for collateral			21,235	20,918
5828. 31403C6L0.....	B.....	Held for collateral			18,171	17,251
5829. 31403JTN6.....	B.....	Held for collateral			26,565	26,747
5830. 3140Q7C0.....	B.....	Held for collateral			197,104	176,262
5831. 3140Q9E25.....	B.....	Held for collateral			141,759	122,964
5832. 3140Q9TJ2.....	B.....	Held for collateral			82,538	72,078
5833. 31412PU82.....	B.....	Held for collateral			63,592	60,680
5834. 3141207B9.....	B.....	Held for collateral			68,627	64,375
5835. 31415RZU1.....	B.....	Held for collateral			2,987	3,021
5836. 31416RRG0.....	B.....	Held for collateral			43,185	40,648
5837. 31416XQT0.....	B.....	Held for collateral			62,923	57,904
5838. 31418CR89.....	B.....	Held for collateral			155,716	138,960
5839. 31418VT51.....	B.....	Held for collateral			929	924
5840. 31419LXR9.....	B.....	Held for collateral			63,080	58,890
5841. 36251XAR8.....	B.....	Held for collateral			652,361	620,507
5842. 78413MAC2.....	B.....	Held for collateral			664,077	541,745
5843. 902055AA0.....	B.....	Held for collateral			451,664	421,871
5844. 912810QH4.....	B.....	Held for collateral			845,801	765,375
5845. 912810RT7.....	B.....	Held for collateral			342,200	225,969
5846. 912810RZ3.....	B.....	Held for collateral			280,018	196,525
5847. 912828J27.....	B.....	Held for collateral			774,893	772,699
5848. 912828M56.....	B.....	Held for collateral			225,635	221,133
5849. 91282CDY4.....	B.....	Held for collateral			861,469	841,561
5850. 91282CGM7.....	B.....	Held for collateral			490,054	465,313

OVERFLOW PAGE FOR WRITE-INS

E29 Additional Aggregate Lines for Line 58.

*SCEPT3 - Schedule E - Part 3 - Special Deposits

	1 Type of Deposit	2 Purpose of Deposit	3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
5851. 949890AV2.....	B.....	Held for collateral			662,153	651,784
5852. 95001FAX3.....	B.....	Held for collateral			704,221	680,808
Summary of remaining write-ins for Line 58 from page E29	XXX	XXX	0	0	11,948,115	10,961,834

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

Supp "A" to Schedule T - Physicians
NONE

Supp "A" to Schedule T - Hospitals
NONE



SUPPLEMENT FOR DECEMBER 31, 2024 OF THE BCS Insurance Company

Designate the type of health care providers reported on this page.

Other Health Care Professionals

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

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama	AL							
2. Alaska	AK							
3. Arizona	AZ							
4. Arkansas	AR							
5. California	CA							
6. Colorado	CO							
7. Connecticut	CT							
8. Delaware	DE							
9. District of Columbia	DC							
10. Florida	FL							
11. Georgia	GA							
12. Hawaii	HI							
13. Idaho	ID							
14. Illinois	IL							
15. Indiana	IN							
16. Iowa	IA							
17. Kansas	KS							
18. Kentucky	KY							
19. Louisiana	LA							
20. Maine	ME							
21. Maryland	MD							
22. Massachusetts	MA							
23. Michigan	MI							
24. Minnesota	MN							
25. Mississippi	MS							
26. Missouri	MO							
27. Montana	MT							
28. Nebraska	NE							
29. Nevada	NV							
30. New Hampshire	NH							
31. New Jersey	NJ							
32. New Mexico	NM							
33. New York	NY							
34. North Carolina	NC							
35. North Dakota	ND							
36. Ohio	OH							
37. Oklahoma	OK							
38. Oregon	OR							
39. Pennsylvania	PA	130,274	130,274	0	0	0	0	175,000
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 aliens	OT	0	0	0	0	0	0	0
59. Totals		130,274	130,274	0	0	0	0	175,000
DETAILS OF WRITE-INS								
58001.								
58002.								
58003.								
58998. Sum. of remaining write-ins for Line 58 from overflow page		0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)		0	0	0	0	0	0	0



SUPPLEMENT FOR DECEMBER 31, 2024 OF THE BCS Insurance Company

Designate the type of health care providers reported on this page.

Other Health Care Facilities

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

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama	AL.							
2. Alaska	AK.							
3. Arizona	AZ.							
4. Arkansas	AR.							
5. California	CA.							
6. Colorado	CO.							
7. Connecticut	CT.							
8. Delaware	DE.							
9. District of Columbia	DC.							
10. Florida	FL.							
11. Georgia	GA.							
12. Hawaii	HI.							
13. Idaho	ID.							
14. Illinois	IL.							
15. Indiana	IN.							
16. Iowa	IA.							
17. Kansas	KS.							
18. Kentucky	KY.							
19. Louisiana	LA.							
20. Maine	ME.							
21. Maryland	MD.							
22. Massachusetts	MA.							
23. Michigan	MI.							
24. Minnesota	MN.							
25. Mississippi	MS.							
26. Missouri	MO.							
27. Montana	MT.							
28. Nebraska	NE.							
29. Nevada	NV.							
30. New Hampshire	NH.							
31. New Jersey	NJ.							
32. New Mexico	NM.							
33. New York	NY.							
34. North Carolina	NC.							
35. North Dakota	ND.							
36. Ohio	OH.							
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 aliens	OT.	0	0	0	0	0	0	0
59. Totals		0	0	0	0	0	0	0
DETAILS OF WRITE-INS								
58001								
58002								
58003								
58998. Sum. of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	0	0	0	0	0	0	0	0

NONE



SUPPLEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

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

NAIC Group Code 00023

NAIC Company Code 38245

Company Name BCS Insurance Company

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

1. Monoline Policies

Direct Premiums		Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Written	2 Earned	3 Paid	4 Incurred	5 Paid	6 Incurred	7 Claims Made	8 Occurrence
\$ 0	\$ 0	\$ 25,728,830	\$ (410,293)	\$ 431,048	\$ 325,558	0.0 %	0.0 %

2. Commercial Multiple Peril (CMP) Packaged Policies

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

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

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

2.31 Amount quantified: \$ 0

2.32 Amount estimated using reasonable assumptions: \$ 0

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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

NAIC Group Code 00023.....

NAIC Company Code 38245.....

	Direct Business Only			
	Prior Year		Current Year	
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
1. Completed operations.....	0			
2. Errors & omissions (E&O)	7,380,394	7,310,341	1,408,048	334,145
3. Directors & officers (D&O)	0	0	25,728,830	84,045,617
4. Environmental liability	0			
5. Excess workers' compensation	0			
6. Commercial excess & umbrella	27,797,607	31,704,471	19,385,816	0
7. Personal umbrella	0			
8. Employment liability	0			
9. Aggregate write-ins for facilities and premises (CGL).....	0	0	0	0
10. Internet & cyber liability	12,647,282	7,625,520	2,307,409	15,404,124
11. Aggregate write-ins for other	0	0	0	0
12. Total ASL 17 – other liability (sum of lines 1 through 11)	47,825,283	46,640,332	48,830,103	99,783,886
DETAILS OF WRITE-INS				
0901.....				
0902.....				
0903.....				
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)	0	0	0	0
1101.....				
1102.....				
1103.....				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0

OVERFLOW PAGE FOR WRITE-INS



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Alabama

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Alaska

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 California

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

**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 Colorado

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Connecticut

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Delaware

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

**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 Florida

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

**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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Hawaii

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Idaho

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

**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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Kansas

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

**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 Louisiana

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Maine

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Massachusetts

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Minnesota

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

**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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Nevada

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Hampshire

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Jersey

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

**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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Carolina

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

**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 Puerto Rico

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Rhode Island

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 South Carolina

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 South Dakota

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF Tennessee

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Vermont

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF Virginia

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Washington

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 00023.....

NAIC Company Code 38245.....

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



SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2024 OF THE BCS Insurance Company

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 Wyoming

NAIC Group Code 00023.....

NAIC Company Code 38245.....

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