



PROPERTY AND CASUALTY COMPANIES – ASSOCIATION EDITION

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

NAIC Group Code.....0215.....0215.....NAIC Company Code.....39497....Employer's ID Number....75-1227771.....
(Current) (Prior)

Organized under the Laws of.....OH.....State of Domicile or Port of Entry.....OH.....
Country of Domicile.....US.....
Incorporated/Organized.....06/03/1980.....Commenced Business.....07/11/1980.....
Statutory Home Office.....1400 PROVIDENT TOWER, ONE EAST FOURTH
STREET.....CINCINNATI, OH, US 45202.....
Main Administrative Office.....200 EAST RANDOLPH STREET, STE. 3300.....
CHICAGO, IL, US 60601.....312-661-4600.....
(Telephone)

Mail Address.....200 EAST RANDOLPH STREET, STE. 3300.....CHICAGO, IL, US 60601.....

Primary Location of Books and
Records.....200 EAST RANDOLPH STREET, STE. 3300.....
CHICAGO, IL, US 60601.....312-661-4600.....
(Telephone)

Internet Website Address.....WWW.KEMPER.COM.....

Statutory Statement Contact.....HANNAH LEE ANDREWS.....
312-661-4600.....
(Telephone)
EFASSTATUTORYREPORTING@KEMPER.COM.....904-245-5601.....
(E-Mail) (Fax)

OFFICERS

TIMOTHY DOUGLAS BRUNS#, VICE PRESIDENT &
TREASURER/CONTROLLER.....

MATTHEW JOSEPH VARAGONA, PRESIDENT.....
PATRICK BOWEN THEILER, SECRETARY.....

DIRECTORS OR TRUSTEES

TIMOTHY DOUGLAS BRUNS#.....ADITYA NMI MAHAJAN.....
MICHAEL ERIC PRESTEGAARD#.....PATRICK BOWEN THEILER.....
MATTHEW JOSEPH VARAGONA.....

State of ILLINOIS.....
County of COOK..... SS

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

x MATT HEW JOSEPH VARAGONA
PRESIDENT

x TIMOTHY DOUGLAS BRUNS
VICE PRESIDENT & TREASURER/CONTROLLER

x PATRICK BOWEN THEILER
SECRETARY

Subscribed and sworn to before me
this 19th day of

February, 2025

x Felicia M Thomas

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

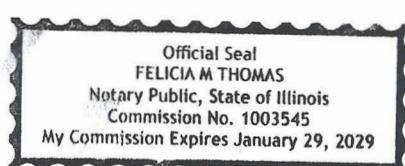


EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR 2024



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

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ALASKA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR 2024



3 9 4 9 7 2 0 2 4 4 3 0 0 3 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR 2024



3 9 4 9 7 2 0 2 4 4 3 0 0 4 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR 2024



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

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmersowners Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1 Commercial Multiple Peril (Non-Liability Portion).....												
5.2 Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9.1 Inland marine.....												
9.2 Pet insurance plans.....												
10. Financial Guaranty.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1 Vision Only (b).....												
15.2 Dental Only (b).....												
15.3 Disability Income (b).....												
15.4 Medicare Supplement (b).....												
15.5 Medicaid Title XIX (b).....												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b).....												
15.8 Federal Employees Health Benefits Plan (b).....												
15.9 Other Health (b).....												
16. Workers' Compensation.....												
17.1 Other Liability–Occurrence.....												
17.2 Other Liability–Claims-Made.....												
17.3 Excess Workers' Compensation.....												
18.1 Products Liability – Occurrence.....												
18.2 Products Liability – Claims-Made.....												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2 Other Private Passenger Auto Liability.....										(760)		(760)
19.3 Commercial Auto No-Fault (Personal Injury Protection).....												
19.4 Other Commercial Auto Liability.....												
21.1 Private Passenger Auto Physical Damage.....												
21.2 Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....									(1,500)		(760)	(760)
Details of Write-Ins												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF COLORADO DURING THE YEAR 2024



3 9 4 9 7 2 0 2 4 4 3 0 0 6 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR 2024



3 9 4 9 7 2 0 2 4 4 3 0 0 7 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR 2024



3 9 4 9 7 2 0 2 4 4 3 0 0 8 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

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

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2024



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

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers Multiple Peril.....													
4. Homeowners Multiple Peril.....													
5.1 Commercial Multiple Peril (Non-Liability Portion).....													
5.2 Commercial Multiple Peril (Liability Portion).....													
6. Mortgage Guaranty.....													
8. Ocean Marine.....													
9.1 Inland marine.....													
9.2 Pet insurance plans.....													
10. Financial Guaranty.....													
11.1 Medical Professional Liability – Occurrence.....													
11.2 Medical Professional Liability – Claims-Made.....													
12. Earthquake.....													
13.1 Comprehensive (hospital and medical) ind (b).....													
13.2 Comprehensive (hospital and medical) group (b).....													
14. Credit A&H (Group and Individual).....													
15.1 Vision Only (b).....													
15.2 Dental Only (b).....													
15.3 Disability Income (b).....													
15.4 Medicare Supplement (b).....													
15.5 Medicaid Title XIX (b).....													
15.6 Medicare Title XVIII (b).....													
15.7 Long-Term Care (b).....													
15.8 Federal Employees Health Benefits Plan (b).....													
15.9 Other Health (b).....													
16. Workers' Compensation.....													
17.1 Other Liability–Occurrence.....	101,262	112,819		46,900	7,486	(30,339)	94,186			(7,285)	18,139	10,073	
17.2 Other Liability–Claims-Made.....	35,878	34,589		14,078		1,912	29,629			368	5,706	3,551	
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).....	41,651	38,432		9,842	142,250	(13,848)	373,584	69,328	17,900	186,508	5,443	378	
19.2 Other Private Passenger Auto Liability.....		19,910	22,106		5,021	60,297	(100,110)	103,104	40,575	32,541	31,907	4,864	172
19.3 Commercial Auto No-Fault (Personal Injury Protection).....	40,041,683	34,929,222		19,080,371	10,296,214	8,452,175	24,871,985	932,626	2,098,587	6,691,055	3,985,091	364,305	
19.4 Other Commercial Auto Liability.....	147,163,488	123,490,299		70,140,395	45,145,563	58,011,220	94,130,418	4,006,776	12,807,503	19,721,728	14,643,949	1,339,096	
21.1 Private Passenger Auto Physical Damage.....		24	601		11	(36,783)	(27,645)	(996)	3,040	3,736	3,749	2	1
21.2 Commercial Auto Physical Damage.....		40,448,378	34,481,160		19,343,464	15,875,436	17,259,097	3,520,029	172,497	1,125,280	1,147,135	4,025,876	368,048
22. Aircraft (all perils).....													
23. Fidelity.....													
24. Surety.....													
26. Burglary and Theft.....													
27. Boiler and Machinery.....													
28. Credit.....													
29. International.....													
30. Warranty.....													
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	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.....													
35. TOTAL (a).....	227,852,274	193,109,228		108,640,082	71,490,463	83,552,462	123,121,938	5,224,842	16,078,630	27,805,926	22,678,850	2,073,240	
Details of Write-Ins													
3401.....													
3402.....													
3403.....													
3498. Summary of remaining write-ins for Line 34 from overflow page.....													
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....													

(a) Finance and service charges not included in Lines 1 to 35 \$5,109,112

(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.



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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial Guaranty												
11.1 Medical Professional Liability – Occurrence												
11.2 Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability–Occurrence												–
17.2 Other Liability–Claims-Made												–
17.3 Excess Workers' Compensation												
18.1 Products Liability – Occurrence												
18.2 Products Liability – Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												163
19.3 Commercial Auto No-Fault (Personal Injury Protection)												625
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												164
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												953
Details of Write-Ins												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF HAWAII DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF IDAHO DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial Guaranty												
11.1 Medical Professional Liability – Occurrence												
11.2 Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability–Occurrence												–
17.2 Other Liability–Claims-Made												–
17.3 Excess Workers' Compensation												
18.1 Products Liability – Occurrence												
18.2 Products Liability – Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												153
19.4 Other Commercial Auto Liability												573
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												158
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)								4			(1)	886
Details of Write-Ins												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF INDIANA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF IOWA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF KANSAS DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR 2024



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

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MAINE DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497



3 9 4 9 7 2 0 2 4 4 3 0 2 0 0 0 0

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR 2024



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

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR 2024



3 9 4 9 7 2 0 2 4 4 3 0 2 6 1 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial Guaranty												
11.1 Medical Professional Liability – Occurrence												
11.2 Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability–Occurrence												1
17.2 Other Liability–Claims-Made												–
17.3 Excess Workers' Compensation												
18.1 Products Liability – Occurrence												
18.2 Products Liability – Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												2
19.2 Other Private Passenger Auto Liability												1
19.3 Commercial Auto No-Fault (Personal Injury Protection)												366
19.4 Other Commercial Auto Liability												1,253
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												369
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)							363	363				1,993
Details of Write-Ins												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF MONTANA DURING THE YEAR 2024



3 9 4 9 7 2 0 2 4 4 3 0 2 7 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEVADA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR 2024



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

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial Guaranty												
11.1 Medical Professional Liability – Occurrence												
11.2 Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability–Occurrence												–
17.2 Other Liability–Claims-Made												–
17.3 Excess Workers' Compensation												
18.1 Products Liability – Occurrence												
18.2 Products Liability – Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												–
19.3 Commercial Auto No-Fault (Personal Injury Protection)												80
19.4 Other Commercial Auto Liability												288
21.1 Private Passenger Auto Physical Damage												80
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												449
Details of Write-Ins												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR 2024



3 9 4 9 7 2 0 2 4 4 3 0 3 2 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1 Commercial Multiple Peril (Non-Liability Portion).....												
5.2 Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9.1 Inland marine.....												
9.2 Pet insurance plans.....												
10. Financial Guaranty.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1 Vision Only (b).....												
15.2 Dental Only (b).....												
15.3 Disability Income (b).....												
15.4 Medicare Supplement (b).....												
15.5 Medicaid Title XIX (b).....												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b).....												
15.8 Federal Employees Health Benefits Plan (b).....												
15.9 Other Health (b).....												
16. Workers' Compensation.....							18,514	(10,439)	309,962	2,532	4,162	12,555
17.1 Other Liability—Occurrence.....												—
17.2 Other Liability—Claims-Made.....												—
17.3 Excess Workers' Compensation.....												
18.1 Products Liability – Occurrence.....												
18.2 Products Liability – Claims-Made.....												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection).....												
19.2 Other Private Passenger Auto Liability.....												46
19.3 Commercial Auto No-Fault (Personal Injury Protection).....												158
19.4 Other Commercial Auto Liability.....												
21.1 Private Passenger Auto Physical Damage.....												47
21.2 Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....						18,514	(10,439)	309,962	2,532	4,162	12,555	251
Details of Write-Ins												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial Guaranty												
11.1 Medical Professional Liability – Occurrence												
11.2 Medical Professional Liability – Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability–Occurrence												17
17.2 Other Liability–Claims-Made												(1)
17.3 Excess Workers' Compensation												
18.1 Products Liability – Occurrence												
18.2 Products Liability – Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												1
19.2 Other Private Passenger Auto Liability												1
19.3 Commercial Auto No-Fault (Personal Injury Protection)												5,238
19.4 Other Commercial Auto Liability												19,781
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												5,249
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTAL (a)												30,285
Details of Write-Ins												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF OREGON DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR 2024



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

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1 Commercial Multiple Peril (Non-Liability Portion).....												
5.2 Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9.1 Inland marine.....												
9.2 Pet insurance plans.....												
10. Financial Guaranty.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1 Vision Only (b).....												
15.2 Dental Only (b).....												
15.3 Disability Income (b).....												
15.4 Medicare Supplement (b).....												
15.5 Medicaid Title XIX (b).....												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b).....												
15.8 Federal Employees Health Benefits Plan (b).....												
15.9 Other Health (b).....												
16. Workers' Compensation.....												
17.1 Other Liability–Occurrence.....	265	522		497								20
17.2 Other Liability–Claims-Made.....	608	1,595		673								37
17.3 Excess Workers' Compensation.....												13
18.1 Products Liability – Occurrence.....												
18.2 Products Liability – Claims-Made.....												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection).....												17
19.2 Other Private Passenger Auto Liability.....												
19.3 Commercial Auto No-Fault (Personal Injury Protection).....	(137)	13,977		442	3,781	(139,114)	10,586	268	(32,653)	2	3	(18)
19.4 Other Commercial Auto Liability.....		1,699,739	1,187,751	865,911	135,736	495,083	683,492	9,429	5,099	166	40,161	150,315
21.1 Private Passenger Auto Physical Damage.....												40,113
21.2 Commercial Auto Physical Damage.....		431,399	292,774	223,402	192,355	208,383	24,561			1,020	1,770	38,445
22. Aircraft (all perils).....												10,369
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....	2,131,874	1,496,620		1,090,926	331,872	564,489	725,266	9,697	(26,539)	42,117	188,796	50,485
Details of Write-Ins												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

(a) Finance and service charges not included in Lines 1 to 35 \$91,310

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR 2024



3 9 4 9 7 2 0 2 4 4 3 0 4 0 0 0 0 0

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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


EXHIBIT OF PREMIUMS AND LOSSES
 BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1 Commercial Multiple Peril (Non-Liability Portion).....												
5.2 Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9.1 Inland marine.....												
9.2 Pet insurance plans.....												
10. Financial Guaranty.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1 Vision Only (b).....												
15.2 Dental Only (b).....												
15.3 Disability Income (b).....												
15.4 Medicare Supplement (b).....												
15.5 Medicaid Title XIX (b).....												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b).....												
15.8 Federal Employees Health Benefits Plan (b).....												
15.9 Other Health (b).....												
16. Workers' Compensation.....												
17.1 Other Liability–Occurrence.....												–
17.2 Other Liability–Claims-Made.....												1
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).....												270
19.4 Other Commercial Auto Liability.....												1,052
21.1 Private Passenger Auto Physical Damage.....												
21.2 Commercial Auto Physical Damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....												1,597
Details of Write-Ins												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF UTAH DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF VERMONT DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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

EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR 2024



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

NAIC Group Code: 0215

NAIC Company Code: 39497

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

NONE

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

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



EXHIBIT OF PREMIUMS AND LOSSES

BUSINESS IN THE STATE OF WYOMING DURING THE YEAR 2024

NAIC Group Code: 0215

NAIC Company Code: 39497

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

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

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

EXHIBIT OF PREMIUMS AND LOSSES

GRAND TOTAL DURING THE YEAR 2024



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

NAIC Group Code: 0215

NAIC Company Code: 39497

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. Farmers Multiple Peril.....												
4. Homeowners Multiple Peril.....												
5.1 Commercial Multiple Peril (Non-Liability Portion).....												
5.2 Commercial Multiple Peril (Liability Portion).....												
6. Mortgage Guaranty.....												
8. Ocean Marine.....												
9.1 Inland marine.....												
9.2 Pet insurance plans.....												
10. Financial Guaranty.....												
11.1 Medical Professional Liability – Occurrence.....												
11.2 Medical Professional Liability – Claims-Made.....												
12. Earthquake.....												
13.1 Comprehensive (hospital and medical) ind (b).....												
13.2 Comprehensive (hospital and medical) group (b).....												
14. Credit A&H (Group and Individual).....												
15.1 Vision Only (b).....												
15.2 Dental Only (b).....												
15.3 Disability Income (b).....												
15.4 Medicare Supplement (b).....												
15.5 Medicaid Title XIX (b).....												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b).....												
15.8 Federal Employees Health Benefits Plan (b).....												
15.9 Other Health (b).....												
16. Workers' Compensation.....												
17.1 Other Liability–Occurrence.....	101,527	113,341		47,397	7,486	18,514	(10,439)	309,962	2,532	4,162	12,555	
17.2 Other Liability–Claims-Made.....	36,486	36,185		14,751		(30,339)	94,186	1,912	29,629	(7,285)	18,139	10,094
17.3 Excess Workers' Compensation.....										368	5,706	3,588
18.1 Products Liability – Occurrence.....												
18.2 Products Liability – Claims-Made.....												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection).....	41,651	38,432		9,842	142,250	(13,735)	373,584	69,328	17,893	186,525	5,443	383
19.2 Other Private Passenger Auto Liability.....	19,910	22,106		5,021	60,297	(100,088)	109,731	39,815	31,783	31,909	4,864	174
19.3 Commercial Auto No-Fault (Personal Injury Protection).....	40,041,546	34,943,199		19,080,813	10,299,995	8,313,061	24,882,571	932,894	2,065,934	6,691,221	3,985,071	370,605
19.4 Other Commercial Auto Liability.....	148,863,227	124,678,050		71,006,307	45,281,299	58,506,303	94,813,909	4,016,205	12,812,601	19,761,889	14,794,264	1,402,938
21.1 Private Passenger Auto Physical Damage.....	24	601		11	(36,420)	(28,775)	(996)	3,040	3,736	3,749	2	1
21.2 Commercial Auto Physical Damage.....	40,879,777	34,773,934		19,566,866	16,067,791	17,467,479	3,544,590	172,497	1,126,300	1,148,905	4,064,320	384,758
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and Theft.....												
27. Boiler and Machinery.....												
28. Credit.....												
29. International.....												
30. Warranty.....												
31. Reins nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....												
35. TOTAL (a).....	229,984,148	194,605,848		109,731,008	71,841,212	84,105,379	124,157,166	5,236,311	16,055,492	27,860,598	22,867,646	2,160,139
Details of Write-Ins												
3401.....												
3402.....												
3403.....												
3498. Summary of remaining write-ins for Line 34 from overflow page.....												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....												

(a) Finance and service charges not included in Lines 1 to 35 \$5,200,422

(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.

Annual Statement for the Year 2024 of the Infinity Assurance Insurance Company

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

NONE

(21) Schedule F - Part 2

NONE

Annual Statement for the Year 2024 of the Infinity Assurance 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 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute Included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15- [17+18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
Total Authorized, Affiliates, U.S. Intercompany Pooling																			
31-0943862	22268	[INFINITY INS CO	IN		229,984			55,370	2,813	68,477	32,489	109,731		268,880			268,880		
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling					229,984			55,370	2,813	68,477	32,489	109,731		268,880			268,880		
0499999 - Total Authorized, Affiliates, U.S. Non-Pool, Total																			
0899999 - Total Authorized, Affiliates, Total Authorized - Affiliates					229,984			55,370	2,813	68,477	32,489	109,731		268,880			268,880		
Total Authorized, Other U.S. Unaffiliated Insurers																			
75-0784127	33014	[TRANSPORT INS CO	OH					203	48	107				358				358	
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers								203	48	107				358			358		
1499999 - Total Authorized Excluding Protected Cells					229,984			55,573	2,860	68,584	32,489	109,731		269,237			269,237		
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells					229,984			55,573	2,860	68,584	32,489	109,731		269,237			269,237		
9999999 - Totals					229,984			55,573	2,860	68,584	32,489	109,731		269,237			269,237		

Annual Statement for the Year 2024 of the Infinity Assurance Insurance Company

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Collateral				25	26	27	Ceded Reinsurance Credit Risk										
		21	22	23	24				Net Recoverable From Reinsurers Less Penalty (Col. 15 – 27)	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Col. 28*120%)	Reinsurance Payable & Funds Held (Col. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 29 – 30)	30	31	32	33	34	35
ID Number From Col. 1	Name of Reinsurer From Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Col. 15 – 27)	Reinsurance Payable & Funds Held (Col. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 29 – 30)	30	31	32	33	34	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un- collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	
Total Authorized, Affiliates, U.S. Intercompany Pooling							268,880	–	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling				XXX			268,880	–	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
0899999 – Total Authorized, Affiliates, Total Authorized - Affiliates				XXX			268,880	–									XXX		
Total Authorized, Other U.S. Unaffiliated Insurers																			
075-0784127 – TRANSPORT INS CO							358	–	358	429	429	429	429	429	429	1			7
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers				XXX			358	–	358	429	429	429	429	429	429	XXX			7
1499999 – Total Authorized Excluding Protected Cells				XXX			269,237	–	358	429	429	429	429	429	429	XXX			7
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells				XXX			269,237	–	358	429	429	429	429	429	429	XXX			7
9999999 – Totals				XXX			269,237	–	358	429	429	429	429	429	429	XXX			7

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44	45	46	47	48	49	50	51	52	53	
		37	38	39	40	41	42	43											
ID Number From Col. 1	Name of Reinsurer From Col. 3	Current	Overdue 1 - 29 Days	Overdue 30 - 90 Days	Overdue 91 - 120 Days	Overdue Over 120 Days	Overdue Total Cols. 37 + 42 (In total should equal Cols. 7 + 8)	Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42	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 Not in Dispute Included in Cols. 40 & 41	Recoverable on Paid Losses & LAE Over 90 Days	Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	Amounts Received Prior 90 Days	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 42/Col. 43])	Percentage More Than 120 Days Overdue (Col. 46 + 48)]	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
Total Authorized, Affiliates, U.S. Intercompany Pooling																			
31-0943862	INFINITY INS CO	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	YES	—	
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	XXX	—	
0499999 - Total Authorized, Affiliates, U.S. Non-Pool, Total		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	XXX	—	
Total Authorized, Other U.S. Unaffiliated Insurers																			
75-0784127	TRANSPORT INS CO	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	YES	—	
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	XXX	—	
1499999 - Total Authorized Excluding Protected Cells		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	XXX	—	
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	XXX	—	
9999999 - Totals		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	XXX	—	

Annual Statement for the Year 2024 of the Infinity Assurance Insurance Company

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Provision for Certified Reinsurance															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	66	67	68		
ID Number From Col. 1	Name of Reinsurer From Col. 3	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col.24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days	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	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			
Total Authorized, U.S. Intercompany Pooling																			
....31-0943862	INFINITY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0199999 – Total Authorized, Affiliates, U.S. Intercompany Pooling		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0499999 – Total Authorized, Affiliates, U.S. Non-Pool, Total		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
Total Authorized, Other U.S. Unaffiliated Insurers																			
....75-0784127	TRANSPORT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0999999 – Total Authorized, Other U.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1499999 – Total Authorized Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
5799999 – Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		XXX	XXX	XXX				XXX	XXX										
9999999 – Totals		XXX	XXX	XXX	XXX			XXX	XXX										

Annual Statement for the Year 2024 of the Infinity Assurance Insurance Company

SCHEDULE F - PART 3 (CONTINUED)

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

1 ID Number From Col. 1	2 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 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%])	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
Total Authorized, Affiliates, U.S. Intercompany Pooling										
31-0943862	INFINITY INS CO.	—	XXX	XXX	—	—	—	XXX	XXX	—
0199999 - Total Authorized, Affiliates, U.S. Intercompany Pooling		—	XXX	XXX	—	—	—	XXX	XXX	—
Total Authorized, Other U.S. Unaffiliated Insurers										
75-0784127	TRANSPORT INS CO.	—	XXX	XXX	—	—	—	XXX	XXX	—
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers		—	XXX	XXX	—	—	—	XXX	XXX	—
1499999 - Total Authorized Excluding Protected Cells		—	XXX	XXX	—	—	—	XXX	XXX	—
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		—			—	—	—			—
9999999 - Totals		—			—	—	—	—		—

Annual Statement for the Year 2024 of the Infinity Assurance Insurance Company

SCHEDULE F - PART 4

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

1	2	3	4	5
Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
9999999 - Totals.....				

NONE

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

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

NONE

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

	1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated
6.	INFINITY INSURANCE COMPANY	268,880	229,984	Yes
7.	TRANSPORT INSURANCE COMPANY	358		No
8.				
9.				
10.				

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 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).....	5,424,749		5,424,749
2. Premiums and considerations (Line 15).....			
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....			
4. Funds held by or deposited with reinsured companies (Line 16.2).....			
5. Other assets.....	1,944,353		1,944,353
6. Net amount recoverable from reinsurers.....		268,141,858	268,141,858
7. Protected cell assets (Line 27).....			
8. Totals (Line 28).....	7,369,103	268,141,858	275,510,961
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	—	159,369,600	159,369,600
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	1,058,463	(958,750)	99,713
11. Unearned premiums (Line 9).....		109,731,008	109,731,008
12. Advance premiums (Line 10).....			
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....			
15. Funds held by company under reinsurance treaties (Line 13).....			
16. Amounts withheld or retained by company for account of others (Line 14).....			
17. Provision for reinsurance (Line 16).....			
18. Other liabilities.....	690,655		690,655
19. Total liabilities excluding protected cell business (Line 26).....	1,749,118	268,141,858	269,890,977
20. Protected cell liabilities (Line 27).....			
21. Surplus as regards policyholders (Line 37).....	5,619,985	XXX	5,619,985
22. Totals (Line 38).....	7,369,103	268,141,858	275,510,962

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? YES
 If yes, give full explanation: SEE NOTE 26. THE COMPANY IS A MEMBER OF AN UNDERWRITING POOL WHICH ULTIMATELY CEDES 100% TO TRINITY
 UNIVERSAL INSURANCE COMPANY

(30) Schedule H - Part 1

NONE

(30) Write-Ins for Line 11 - Deductions

NONE

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

NONE

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

NONE

(31) Schedule H - Part 4 - Reinsurance

NONE

(32) Schedule H - Part 5

NONE

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

(\$000 OMITTED)

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

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

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 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
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	Loss	Loss Expense	XXX	XXX	XXX
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	—	—	—	—	—
2. 2015	—	—	—	—	—	—	—	—	—	—	—
3. 2016	—	—	—	—	—	—	—	—	—	—	—
4. 2017	—	—	—	—	—	—	—	—	—	—	—
5. 2018	—	—	—	—	—	—	—	—	—	—	—
6. 2019	—	—	—	—	—	—	—	—	—	—	—
7. 2020	—	—	—	—	—	—	—	—	—	—	—
8. 2021	—	—	—	—	—	—	—	—	—	—	—
9. 2022	—	—	—	—	—	—	—	—	—	—	—
10. 2023	—	—	—	—	—	—	—	—	—	—	—
11. 2024	—	—	—	—	—	—	—	—	—	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—

SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 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 Ceded	5 Direct and Assumed	6 Ceded	7 Direct and Assumed	8 Ceded	9 Direct and Assumed				
1. Prior	XXX	XXX	XXX	1	1	—	—	—	—	—	—	XXX	
2. 2015	829	1	828	573	8	20	1	90	2	4	672	216	
3. 2016	835	1	834	580	15	18	2	95	5	4	671	212	
4. 2017	808	1	807	542	6	16	1	92	5	4	638	201	
5. 2018	873	88	785	539	40	17	1	94	6	3	603	202	
6. 2019	973	973	—	625	625	21	21	129	129	—	—	222	
7. 2020	1,189	1,189	—	640	640	24	24	126	126	—	—	200	
8. 2021	1,269	1,269	—	863	863	31	31	168	168	—	—	291	
9. 2022	1,293	1,293	—	863	863	26	26	169	169	—	—	316	
10. 2023	1,607	1,607	—	1,359	1,359	8	8	152	152	—	—	263	
11. 2024	1,380	1,380	—	341	341	2	2	105	105	—	—	182	
12. Totals	XXX	XXX	XXX	6,928	4,763	183	117	1,221	868	15	2,584	XXX	

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded								
1. Prior	1	1	3	3	—	—	—	—	1	1	—	—	—			
2. 2015	8	8	2	2	—	—	—	—	—	—	—	—	—			
3. 2016	1	1	—	—	—	—	—	—	—	—	—	—	—			
4. 2017	3	3	—	—	—	—	1	1	1	1	—	—	—			
5. 2018	4	4	1	1	1	1	2	2	3	3	—	—	1			
6. 2019	7	7	2	2	1	1	4	4	5	5	—	—	1			
7. 2020	12	12	8	8	1	1	11	11	3	3	—	—	2			
8. 2021	27	27	23	23	3	3	24	24	7	7	—	—	4			
9. 2022	53	53	47	47	4	4	37	37	12	12	—	—	8			
10. 2023	96	96	80	80	2	2	38	38	21	21	—	—	13			
11. 2024	220	220	366	366	—	—	48	48	62	62	—	—	39			
12. Totals	433	433	533	533	14	14	165	165	117	117	—	—	68			

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 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
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	Loss	Loss Expense		—	—
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—
2. 2015	694	22	672	83.728	2,210.278	81.159	—	—	0.100	—	—
3. 2016	695	24	671	83.274	2,433.725	80.456	—	—	0.100	—	—
4. 2017	656	18	638	81.149	1,768.322	79.058	—	—	0.100	—	—
5. 2018	660	57	603	75.621	64.972	76.815	—	—	0.100	—	—
6. 2019	796	796	—	81.788	81.788	—	—	—	0.100	—	—
7. 2020	825	825	—	69.395	69.395	—	—	—	0.100	—	—
8. 2021	1,147	1,147	—	90.410	90.410	—	—	—	0.100	—	—
9. 2022	1,212	1,212	—	93.694	93.694	—	—	—	0.100	—	—
10. 2023	1,757	1,757	—	109.315	109.315	—	—	—	0.100	—	—
11. 2024	1,145	1,145	—	82.921	82.921	—	—	—	0.100	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—

SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

(\$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 Ceded	5 Direct and Assumed	6 Ceded	7 Direct and Assumed	8 Ceded	9 Direct and Assumed				
1. Prior	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX	
2. 2015	96	10	86	77	7	5	1	6	(1)	1	81	14	
3. 2016	111	7	104	89	9	5	1	7	(2)	1	93	14	
4. 2017	123	5	118	89	4	5	—	8	(1)	1	99	14	
5. 2018	141	—	121	82	(1)	4	(1)	8	(3)	—	99	14	
6. 2019	179	179	—	101	101	5	5	11	11	—	—	17	
7. 2020	283	283	—	129	129	7	7	14	14	—	—	16	
8. 2021	333	333	—	193	193	11	11	20	20	—	—	23	
9. 2022	428	428	—	208	208	8	8	21	21	—	—	34	
10. 2023	567	567	—	150	150	3	3	23	23	—	—	30	
11. 2024	446	446	—	53	53	—	—	16	16	—	—	22	
12. Totals	XXX	XXX	XXX	1,171	853	53	35	133	97	3	372	XXX	

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	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. Prior	—	—	—	—	—	—	—	—	—	—	—	—	—
2. 2015	—	—	—	—	—	—	—	—	—	—	—	—	—
3. 2016	—	—	—	—	—	—	—	—	—	—	—	—	—
4. 2017	—	—	—	—	—	—	—	—	—	—	—	—	—
5. 2018	1	1	—	—	—	—	—	—	1	1	—	—	—
6. 2019	5	5	—	—	—	—	1	1	1	1	—	—	—
7. 2020	10	10	1	1	—	—	3	3	—	—	—	—	—
8. 2021	25	25	6	6	1	1	7	7	1	1	—	—	—
9. 2022	53	53	17	17	1	1	15	15	3	3	—	—	1
10. 2023	67	67	51	51	1	1	23	23	7	7	—	—	2
11. 2024	65	65	174	174	—	—	31	31	11	11	—	—	6
12. Totals	226	226	250	250	3	3	80	80	25	25	—	—	9

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 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. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—
2. 2015	88	7	81	91,264	66,133	94,186	—	—	—	—	—
3. 2016	101	8	93	90,847	112,008	89,423	—	—	—	—	—
4. 2017	102	3	99	83,112	64,555	83,898	—	—	—	—	—
5. 2018	96	(3)	99	68,215	(14,084)	81,818	—	—	—	—	—
6. 2019	124	124	—	69,104	69,104	—	—	—	—	—	—
7. 2020	165	165	—	58,225	58,225	—	—	—	—	—	—
8. 2021	263	263	—	79,047	79,047	—	—	—	—	—	—
9. 2022	328	328	—	76,663	76,663	—	—	—	—	—	—
10. 2023	325	325	—	57,235	57,235	—	—	—	—	—	—
11. 2024	349	349	—	78,196	78,196	—	—	—	—	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—

SCHEDULE P - PART 1D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

(\$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	-	-	-	-	-	-	-	-	XXX
2. 2015	-	-	-	-	-	-	-	-	-	-	-	-
3. 2016	-	-	-	-	-	-	-	-	-	-	-	-
4. 2017	-	-	-	-	-	-	-	-	-	-	-	-
5. 2018	-	-	-	-	-	-	-	-	-	-	-	-
6. 2019	-	-	-	-	-	-	-	-	-	-	-	-
7. 2020	-	-	-	-	-	-	-	-	-	-	-	-
8. 2021	-	-	-	-	-	-	-	-	-	-	-	-
9. 2022	-	-	-	-	-	-	-	-	-	-	-	-
10. 2023	-	-	-	-	-	-	-	-	-	-	-	-
11. 2024	-	-	-	-	-	-	-	-	-	-	-	-
12. Totals	XXX	XXX	XXX	-	-	-	-	-	-	-	-	XXX

NONE

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 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. Prior	-	-	-	-	-	-	-	-	-	-	-	-	-
2. 2015	-	-	-	-	-	-	-	-	-	-	-	-	-
3. 2016	-	-	-	-	-	-	-	-	-	-	-	-	-
4. 2017	-	-	-	-	-	-	-	-	-	-	-	-	-
5. 2018	-	-	-	-	-	-	-	-	-	-	-	-	-
6. 2019	-	-	-	-	-	-	-	-	-	-	-	-	-
7. 2020	-	-	-	-	-	-	-	-	-	-	-	-	-
8. 2021	-	-	-	-	-	-	-	-	-	-	-	-	-
9. 2022	-	-	-	-	-	-	-	-	-	-	-	-	-
10. 2023	-	-	-	-	-	-	-	-	-	-	-	-	-
11. 2024	-	-	-	-	-	-	-	-	-	-	-	-	-
12. Totals	-	-	-	-	-	-	-	-	-	-	-	-	-

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 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
	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. Prior	XXX	XXX	XXX	XXX	XXX	XXX	-	-	XXX	-	-
2. 2015	-	-	-	-	-	-	-	-	-	-	-
3. 2016	-	-	-	-	-	-	-	-	-	-	-
4. 2017	-	-	-	-	-	-	-	-	-	-	-
5. 2018	-	-	-	-	-	-	-	-	-	-	-
6. 2019	-	-	-	-	-	-	-	-	-	-	-
7. 2020	-	-	-	-	-	-	-	-	-	-	-
8. 2021	-	-	-	-	-	-	-	-	-	-	-
9. 2022	-	-	-	-	-	-	-	-	-	-	-
10. 2023	-	-	-	-	-	-	-	-	-	-	-
11. 2024	-	-	-	-	-	-	-	-	-	-	-
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	-	-	XXX	-	-

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

(\$000 OMITTED)

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

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

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 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. Prior	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—
2. 2015	—	—	—	—	—	—	—	—	—	—	—
3. 2016	—	—	—	—	—	—	—	—	—	—	—
4. 2017	—	—	—	—	—	—	—	—	—	—	—
5. 2018	—	—	—	—	—	—	—	—	—	—	—
6. 2019	—	—	—	—	—	—	—	—	—	—	—
7. 2020	—	—	—	—	—	—	—	—	—	—	—
8. 2021	—	—	—	0.610	0.610	—	—	—	—	—	—
9. 2022	—	—	—	0.235	0.235	—	—	—	—	—	—
10. 2023	—	—	—	19.469	19.469	—	—	—	—	—	—
11. 2024	1	1	—	87.285	87.285	—	—	—	—	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—

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

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

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 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
	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. Prior	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—
2. 2015	—	—	—	—	—	—	—	—	—	—	—
3. 2016	—	—	—	—	—	—	—	—	—	—	—
4. 2017	—	—	—	—	—	—	—	—	—	—	—
5. 2018	—	—	—	—	—	—	—	—	—	—	—
6. 2019	—	—	—	—	—	—	—	—	—	—	—
7. 2020	—	—	—	—	—	—	—	—	—	—	—
8. 2021	—	—	—	—	—	—	—	—	—	—	—
9. 2022	—	—	—	98.958	98.958	—	—	—	—	—	—
10. 2023	—	—	—	20.016	20.016	—	—	—	—	—	—
11. 2024	—	—	—	86.699	86.699	—	—	—	—	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 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	—	—	—	—	—	—	—	—	XXX	
2. 2015				—	—	—	—	—	—	—	—	XXX	
3. 2016				—	—	—	—	—	—	—	—	XXX	
4. 2017				—	—	—	—	—	—	—	—	XXX	
5. 2018				—	—	—	—	—	—	—	—	XXX	
6. 2019				—	—	—	—	—	—	—	—	XXX	
7. 2020				—	—	—	—	—	—	—	—	XXX	
8. 2021				—	—	—	—	—	—	—	—	XXX	
9. 2022				—	—	—	—	—	—	—	—	XXX	
10. 2023	1	1	—	—	—	—	—	—	—	—	—	XXX	
11. 2024	—	—	—	—	—	—	—	—	—	—	—	XXX	
12. Totals	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX	

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

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 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. Prior	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—
2. 2015	—	—	—	—	—	—	—	—	—	—	—
3. 2016	—	—	—	—	—	—	—	—	—	—	—
4. 2017	—	—	—	—	—	—	—	—	—	—	—
5. 2018	—	—	—	—	—	—	—	—	—	—	—
6. 2019	—	—	—	—	—	—	—	—	—	—	—
7. 2020	—	—	—	—	—	—	—	—	—	—	—
8. 2021	—	—	—	—	—	—	—	—	—	—	—
9. 2022	—	—	—	—	—	—	—	—	—	—	—
10. 2023	—	—	—	—	—	—	—	—	—	—	—
11. 2024	—	—	—	—	—	—	—	—	—	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—

SCHEDULE P - PART 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 Ceded	5 Direct and Assumed	6 Ceded	7 Direct and Assumed	8 Ceded	9 Direct and Assumed				
1. Prior	XXX	XXX	XXX	—	—	—	—	—	—	—	—	XXX	
2. 2015	436	3	433	278	—	2	—	40	(1)	86	321	—	
3. 2016	458	4	454	292	1	2	—	40	(2)	90	335	—	
4. 2017	453	7	446	295	12	1	(1)	42	(3)	87	330	—	
5. 2018	481	51	430	264	21	2	—	34	(2)	40	281	—	
6. 2019	525	525	—	304	304	2	2	44	44	—	—	—	
7. 2020	603	603	—	352	352	2	2	57	57	—	—	162	
8. 2021	660	660	—	544	544	1	1	76	76	—	—	220	
9. 2022	729	729	—	610	610	1	1	79	79	—	—	234	
10. 2023	1,052	1,052	—	728	728	1	1	81	81	—	—	226	
11. 2024	1,121	1,121	—	463	463	1	1	61	61	—	—	150	
12. Totals	XXX	XXX	XXX	4,129	3,034	15	7	555	391	303	1,267	XXX	

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded								
1. Prior	—	—	—	—	—	—	—	—	—	—	—	—	—			
2. 2015	—	—	—	—	—	—	—	—	—	—	—	—	—			
3. 2016	—	—	—	—	—	—	—	—	—	—	—	—	—			
4. 2017	—	—	—	—	—	—	—	—	1	1	—	—	—			
5. 2018	1	1	(1)	(1)	—	—	—	—	1	1	—	—	—			
6. 2019	5	5	(1)	(1)	—	—	—	—	1	1	—	—	—			
7. 2020	5	5	—	—	—	—	—	—	—	—	—	—	—			
8. 2021	—	—	—	—	—	—	1	1	—	—	—	—	—			
9. 2022	1	1	(2)	(2)	—	—	1	1	—	—	—	—	—			
10. 2023	1	1	(7)	(7)	—	—	2	2	1	1	—	—	—			
11. 2024	19	19	9	9	—	—	2	2	4	4	—	—	9			
12. Totals	32	32	(2)	(2)	—	—	7	7	8	8	—	—	9			

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 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
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	Loss	Loss Expense		—	—
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—
2. 2015	321	—	321	73,530	(13,602)	74,134	—	—	0.100	—	—
3. 2016	335	—	335	73,073	(8,121)	73,789	—	—	0.100	—	—
4. 2017	340	10	330	74,969	137,257	73,991	—	—	0.100	—	—
5. 2018	302	21	281	62,798	41,291	65,349	—	—	0.100	—	—
6. 2019	355	355	—	67,646	67,646	—	—	—	0.100	—	—
7. 2020	416	416	—	68,954	68,954	—	—	—	0.100	—	—
8. 2021	622	622	—	94,244	94,244	—	—	—	0.100	—	—
9. 2022	691	691	—	94,692	94,692	—	—	—	0.100	—	—
10. 2023	807	807	—	76,648	76,648	—	—	—	0.100	—	—
11. 2024	557	557	—	49,668	49,668	—	—	—	0.100	—	—
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	—	—	XXX	—	—

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

(51) Schedule P - Part 10 - Columns 1 to 12 (\$000's Omitted)

NONE

(51) Schedule P - Part 10 - Columns 13 to 25 (\$000's Omitted)

NONE

(51) Schedule P - Part 10 - Columns 26 to 36 (\$000's Omitted)

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

(56) Schedule P - Part 1T - Columns 1 to 12 (\$000's Omitted)

NONE

(56) Schedule P - Part 1T - Columns 13 to 25 (\$000's Omitted)

NONE

(56) Schedule P - Part 1T - Columns 26 to 36 (\$000's Omitted)

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

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

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)											DEVELOPMENT	
	1 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	186	161	161	158	158	158	158	158	158	158	158	158	
2. 2015	586	585	584	584	584	584	584	584	584	584	584	584	
3. 2016	XXX	598	585	581	581	581	581	581	581	581	581	581	
4. 2017	XXX	XXX	553	551	551	551	551	551	551	551	551	551	
5. 2018	XXX	XXX	XXX	515	515	515	515	515	515	515	515	515	
6. 2019	XXX	XXX	XXX	XXX									
7. 2020	XXX	XXX	XXX	XXX	XXX								
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX							
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					XXX	
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX	
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)											DEVELOPMENT	
	1 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	27	28	27	26	26	26	26	26	26	26	26	26	
2. 2015	68	70	74	74	74	74	74	74	74	74	74	74	
3. 2016	XXX	79	80	84	84	84	84	84	84	84	84	84	
4. 2017	XXX	XXX	89	90	90	90	90	90	90	90	90	90	
5. 2018	XXX	XXX	XXX	88	88	88	88	88	88	88	88	88	
6. 2019	XXX	XXX	XXX	XXX									
7. 2020	XXX	XXX	XXX	XXX									
8. 2021	XXX	XXX	XXX	XXX									
9. 2022	XXX	XXX	XXX	XXX									
10. 2023	XXX	XXX	XXX	XXX								XXX	
11. 2024	XXX	XXX	XXX	XXX							XXX	XXX	
12. Totals	XXX	XXX	XXX	XXX									

SCHEDULE P - PART 2D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

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

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

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

NONE

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

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

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

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

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

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

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

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

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

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

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

NONE**SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 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										471	471	471
2. 2015										280	280	280
3. 2016	XXX									293	293	293
4. 2017	XXX	XXX								285	285	285
5. 2018	XXX	XXX	XXX							245	245	245
6. 2019	XXX	XXX	XXX	XXX						—	—	—
7. 2020	XXX	XXX	XXX	XXX	XXX					—	—	—
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				—	—	—
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			—	—	—
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	—	—
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 2K - FIDELITY/SURETY

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

NONE**SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**

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

NONE**SCHEDULE P - PART 2M - INTERNATIONAL**

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

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

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

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 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.	XXX	86	120	158	158	158	158	158	158	158	13	—
2. 2015	283	490	540	584	584	584	584	584	584	584	124	92
3. 2016	XXX	291	485	581	581	581	581	581	581	581	121	91
4. 2017	XXX	XXX	266	551	551	551	551	551	551	551	114	87
5. 2018	XXX	XXX	XXX	515	515	515	515	515	515	515	112	89
6. 2019	XXX	XXX	XXX	XXX	—	—	—	—	—	—	121	100
7. 2020	XXX	XXX	XXX	XXX	XXX	—	—	—	—	—	106	92
8. 2021	XXX	XXX	XXX	XXX	XXX	—	—	—	—	—	147	140
9. 2022	XXX	XXX	XXX	XXX	XXX	—	—	—	—	—	180	128
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	148	102
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	73	70

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 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.	XXX	12	19	26	26	26	26	26	26	26	—	—
2. 2015	25	50	61	74	74	74	74	74	74	74	9	5
3. 2016	XXX	28	53	84	84	84	84	84	84	84	9	5
4. 2017	XXX	XXX	29	90	90	90	90	90	90	90	9	5
5. 2018	XXX	XXX	XXX	88	88	88	88	88	88	88	9	5
6. 2019	XXX	XXX	XXX	XXX	—	—	—	—	—	—	10	7
7. 2020	XXX	XXX	XXX	XXX	XXX	—	—	—	—	—	9	7
8. 2021	XXX	XXX	XXX	XXX	XXX	—	—	—	—	—	14	9
9. 2022	XXX	XXX	XXX	XXX	XXX	—	—	—	—	—	20	13
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	12
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	8

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

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

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

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

NONE

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

NONE**SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

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

NONE**SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

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

NONE**SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

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

NONE**SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**

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

NONE

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

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11 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	XXX										471	471
2. 2015											280	280
3. 2016	XXX										293	293
4. 2017	XXX	XXX									285	285
5. 2018	XXX	XXX	XXX								245	245
6. 2019	XXX	XXX	XXX	XXX							—	—
7. 2020	XXX	XXX	XXX	XXX	XXX						—	—
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					—	—
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				—	—
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			—	—
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		99	42

SCHEDULE P - PART 3K - FIDELITY/SURETY

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

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

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

SCHEDULE P - PART 3M - INTERNATIONAL

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

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

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

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	88	40	22							
2. 2015	168	40	25							
3. 2016	XXX	175	46							
4. 2017	XXX	XXX	160							
5. 2018	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	7	4	2							
2. 2015	22	3	2							
3. 2016	XXX	28	7							
4. 2017	XXX	XXX	33							
5. 2018	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	7	4	2							
2. 2015	22	3	2							
3. 2016	XXX	28	7							
4. 2017	XXX	XXX	33							
5. 2018	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

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

NON

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

(73) Schedule P - Part 5A - Section 1

NONE

(73) Schedule P - Part 5A - Section 2

NONE

(73) Schedule P - Part 5A - Section 3

NONE

SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR-END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	39	10	2	—	—	1	—	—	—	—
2. 2015.....	85	117	122	123	123	123	123	124	124	124
3. 2016.....	XXX	86	115	119	120	120	119	121	121	121
4. 2017.....	XXX	XXX	79	107	111	112	112	113	114	114
5. 2018.....	XXX	XXX	XXX	78	105	110	110	111	112	112
6. 2019.....	XXX	XXX	XXX	XXX	79	111	116	118	120	121
7. 2020.....	XXX	XXX	XXX	XXX	XXX	63	91	98	103	106
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	72	119	140	147
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	91	161	180
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	99	148
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	73

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.....	12	3	2	2	1	—	—	—	—	—
2. 2015.....	29	6	3	2	1	1	1	—	—	—
3. 2016.....	XXX	27	6	3	2	2	3	1	—	—
4. 2017.....	XXX	XXX	26	5	2	2	2	1	1	—
5. 2018.....	XXX	XXX	XXX	26	6	3	2	1	1	1
6. 2019.....	XXX	XXX	XXX	XXX	35	8	4	3	2	1
7. 2020.....	XXX	XXX	XXX	XXX	XXX	37	10	5	4	2
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	56	15	8	4
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43	20	8
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	13
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	39

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 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	18	1	2	—	(1)	—	—	—	—	13
2. 2015.....	201	216	217	217	216	216	216	216	216	216
3. 2016.....	XXX	200	212	213	213	213	213	213	212	212
4. 2017.....	XXX	XXX	186	198	199	200	200	200	202	201
5. 2018.....	XXX	XXX	XXX	189	200	201	200	200	202	202
6. 2019.....	XXX	XXX	XXX	XXX	204	217	218	219	221	222
7. 2020.....	XXX	XXX	XXX	XXX	XXX	174	189	192	198	200
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	239	267	286	291
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	233	305	316
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	231	263
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	182

SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR-END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	3	—	—	—	—	—	—	—	—	—
2. 2015.....	6	8	9	9	9	9	9	9	9	9
3. 2016.....	XXX	7	9	9	9	9	9	9	9	9
4. 2017.....	XXX	XXX	7	9	9	9	9	9	9	9
5. 2018.....	XXX	XXX	XXX	7	9	9	9	9	9	9
6. 2019.....	XXX	XXX	XXX	XXX	7	9	10	10	10	10
7. 2020.....	XXX	XXX	XXX	XXX	XXX	5	8	9	9	9
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	7	12	13	14
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	18	20
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	16
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8

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

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 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	1	—	—	—	—	—	—	—	—	—
2. 2015.....	13	14	14	14	14	14	14	14	14	14
3. 2016.....	XXX	14	15	15	14	14	14	14	14	14
4. 2017.....	XXX	XXX	14	15	14	14	14	14	14	14
5. 2018.....	XXX	XXX	XXX	15	15	14	14	14	14	14
6. 2019.....	XXX	XXX	XXX	XXX	16	17	17	17	17	17
7. 2020.....	XXX	XXX	XXX	XXX	XXX	13	16	17	16	16
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	19	23	23	23
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29	33	34
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26	30
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22

(76) Schedule P - Part 5D - Section 1

NONE

(76) Schedule P - Part 5D - Section 2

NONE

(76) Schedule P - Part 5D - Section 3

NONE

(77) Schedule P - Part 5E - Section 1

NONE

(77) Schedule P - Part 5E - Section 2

NONE

(77) Schedule P - Part 5E - Section 3

NONE

(78) Schedule P - Part 5F - Section 1A

NONE

(78) Schedule P - Part 5F - Section 2A

NONE

(78) Schedule P - Part 5F - Section 3A

NONE

(79) Schedule P - Part 5F - Section 1B

NONE

(79) Schedule P - Part 5F - Section 2B

NONE

(79) Schedule P - Part 5F - Section 3B

NONE

(80) Schedule P - Part 5H - Section 1A

NONE

(80) Schedule P - Part 5H - Section 2A

NONE

(80) Schedule P - Part 5H - Section 3A

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**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	—	—	—	—	—	—	—	—	—	—	—
2. 2015	96	96	96	96	96	96	96	96	96	96	96
3. 2016	XXX	111	111	111	111	111	111	111	111	111	111
4. 2017	XXX	XXX	123	123	123	123	123	123	123	123	123
5. 2018	XXX	XXX	XXX	141	141	141	141	141	141	141	141
6. 2019	XXX	XXX	XXX	XXX	179	179	179	179	179	179	179
7. 2020	XXX	XXX	XXX	XXX	XXX	283	283	283	283	283	283
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	333	333	333	333	333
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	428	428	428	428
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	567	567	567
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	446	446
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	446
13. Earned Premiums (Sc P-Pt 1)	96	111	123	141	179	283	333	428	567	446	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	—	—	—	—	—	—	—	—	—	—	—
2. 2015	10	10	10	10	10	10	10	10	10	10	10
3. 2016	XXX	7	7	7	7	7	7	7	7	7	7
4. 2017	XXX	XXX	5	5	5	5	5	5	5	5	5
5. 2018	XXX	XXX	XXX	20	20	20	20	20	20	20	20
6. 2019	XXX	XXX	XXX	XXX	179	179	179	179	179	179	179
7. 2020	XXX	XXX	XXX	XXX	XXX	283	283	283	283	283	283
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	333	333	333	333	333
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	428	428	428	428
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	567	567	567
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	446	446
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	446
13. Earned Premiums (Sc P-Pt 1)	10	7	5	20	179	283	333	428	567	446	XXX

SCHEDULE P - PART 6D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

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	—	—	—	—	—	—	—	—	—	—	—
2. 2015	—	—	—	—	—	—	—	—	—	—	—
3. 2016	XXX	—	—	—	—	—	—	—	—	—	—
4. 2017	XXX	XXX	—	—	—	—	—	—	—	—	—
5. 2018	XXX	XXX	XXX	—	—	—	—	—	—	—	—
6. 2019	XXX	XXX	XXX	XXX	—	—	—	—	—	—	—
7. 2020	XXX	XXX	XXX	XXX	XXX	—	—	—	—	—	—
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	—	—	—	—	—
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	—	—
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	—
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned Premiums (Sc P-Pt 1)	—	—	—	—	—	—	—	—	—	—	—

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	—	—	—	—	—	—	—	—	—	—	—
2. 2015	—	—	—	—	—	—	—	—	—	—	—
3. 2016	XXX	—	—	—	—	—	—	—	—	—	—
4. 2017	XXX	XXX	—	—	—	—	—	—	—	—	—
5. 2018	XXX	XXX	XXX	—	—	—	—	—	—	—	—
6. 2019	XXX	XXX	XXX	XXX	—	—	—	—	—	—	—
7. 2020	XXX	XXX	XXX	XXX	XXX	—	—	—	—	—	—
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	—	—	—	—	—
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	—	—
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—	—
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	—	—
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned Premiums (Sc P-Pt 1)	—	—	—	—	—	—	—	—	—	—	—

NONE

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL**SECTION 1**

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

NONE**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											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)							1	1	1	1	XXX

NONE**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											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)							1	1	1	1	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											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)							1	1	1	1	XXX

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											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P–Pt 1)											XXX

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											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P–Pt 1)											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											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P–Pt 1)											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											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P–Pt 1)											XXX

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

Annual Statement for the Year 2024 of the Infinity Assurance Insurance Company

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P INTERROGATORIES

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

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

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

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

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

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

5. What were the net premiums (in thousands of dollars) in force at the end of the year for:
5.1. Fidelity..... \$.....
5.2. Surety..... \$.....
6. Claim count information is reported per claim or per claimant (indicate which)..... PER CLAIMANT.....
If not the same in all years, explain in Interrogatory 7.
- 7.1. The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses?..... NO.....
- 7.2. An extended statement may be attached.....
DURING THE PERIODS PRESENTED IN SCHEDULE P, THE COMPANY HAS EXPERIENCED CHANGES IN ITS BUSINESS MIX DUE IN PART TO THE INITIAL AND SUBSEQUENT IMPACTS OF QUOTA SHARE REINSURANCE AGREEMENTS WITH AFFILIATES, IN WHICH THE COMPANY ASSUMES EXISTING AND FUTURE BUSINESS, ACQUISITIONS OF BUSINESSES AND THE REUNDERWRITING OF CERTAIN BOOKS OF BUSINESS.

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

NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership, Provide Percentage	14 Ultimate Controlling Entity(ies) / Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
	KEMPER CORPORATION		95-4255452		0000860748	NEW YORK STOCK EXCHANGE	KEMPER CORPORATION	DE	UIP						NO
	KEMPER CORPORATION		37-1656986			ACCELERATE INSURANCE NETWORK, LLC		IL	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		20-8809010			ACCESS INSURANCE AGENCY OF ARIZONA, LLC		AZ	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		20-8115603			ACCESS INSURANCE AGENCY OF INDIANA, LLC		IN	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		20-8115668			ACCESS INSURANCE AGENCY OF NEVADA, LLC		NV	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		26-2621251			ACCESS INSURANCE AGENCY OF SOUTH CAROLINA, LLC		SC	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		26-4133974			AEGON OPPORTUNITY ZONE FUND JOINT VENTURE 1, LP			NIA	UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	100.000	KEMPER CORPORATION	NO	1
	KEMPER CORPORATION		10920	77-0475915		AGENCIA DE SEGUROS DE ACCESO, LLC		TX	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION		77-0472398			ALLIANCE UNITED INSURANCE COMPANY		CA	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		38156	39-1344101		ALLIANCE UNITED INSURANCE SERVICES, LLC		CA	NIA	ALLIANCE UNITED INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		10730	36-4335932		ALPHA PROPERTY & CASUALTY INSURANCE COMPANY		WI	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		84-4192397			AMERICAN ACCESS CASUALTY COMPANY		IL	IA	AMERICAN ACCESS HOLDINGS, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		29211	75-0774903		AMERICAN ACCESS HOLDINGS, LLC		DE	NIA	CRANBERRY HOLDINGS, INC.	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		58-0642684			CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY		TX	IA	THE RELIABLE LIFE INSURANCE COMPANY	MANAGEMENT		KEMPER CORPORATION	NO	3
	KEMPER CORPORATION		37524	75-1636168		CASUALTY UNDERWRITERS, INC.		GA	NIA	INFINITY PROPERTY AND CASUALTY SERVICES, INC.	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		92-1599608			CHARTER INDEMNITY COMPANY		TX	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		85-4330188			CORONADO MEDICAL CENTER, LLC		DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		04-3294619			CRANBERRY HOLDINGS, INC.		DE	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		43-1511864			DIRECT RESPONSE CORPORATION		DE	NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION		19852	95-1466743		FAMILY SECURITY FUNERALS COMPANY		TX	NIA	THE RELIABLE LIFE INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION		92-1612977			FINANCIAL INDEMNITY COMPANY		IL	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		36-4448107			FOOTHILLS CORPORATE, LLC		DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	

Annual Statement for the Year 2024 of the Infinity Assurance Insurance Company

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership, Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No)	*
98.1	KEMPER CORPORATION		74-2641866			INFINITY AGENCY OF TEXAS	TX	NIA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES		
	KEMPER CORPORATION	39497	75-1227771			INFINITY ASSURANCE INSURANCE COMPANY	OH	RE	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	11738	34-0927698			INFINITY AUTO INSURANCE COMPANY	OH	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	21792	58-1132392			INFINITY CASUALTY INSURANCE COMPANY	OH	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	13820	43-6030348			INFINITY COUNTY MUTUAL INSURANCE COMPANY	TX	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	4	
	KEMPER CORPORATION	20-4363792				INFINITY FINANCIAL CENTERS, LLC	DE	NIA	INFINITY PROPERTY AND CASUALTY CORPORATION	MANAGEMENT		KEMPER CORPORATION	NO	5	
	KEMPER CORPORATION	10061	34-1767787			INFINITY INDEMNITY INSURANCE COMPANY	IN	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	58-1293110				INFINITY INSURANCE AGENCY, INC.	AL	NIA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES		
	KEMPER CORPORATION	22268	31-0943862			INFINITY INSURANCE COMPANY	IN	UDP	INFINITY PROPERTY AND CASUALTY CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	10195	34-1785809			INFINITY PREFERRED INSURANCE COMPANY	OH	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	03-0483872				INFINITY PROPERTY AND CASUALTY CORPORATION	OH	UIP	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	58-1080659				INFINITY PROPERTY AND CASUALTY SERVICES, INC.	GA	NIA	INFINITY STANDARD INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES		
	KEMPER CORPORATION	16802	73-0772113			INFINITY SAFEGUARD INSURANCE COMPANY	OH	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	20260	31-1333017			INFINITY SELECT INSURANCE COMPANY	IN	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	12599	58-1806189			INFINITY STANDARD INSURANCE COMPANY	IN	IA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	27-3557296				KAHG LLC	IL	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	5	
	KEMPER CORPORATION	98-1683863				KEMPER BERMUDA LTD.	BMU	IA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	92-1599353				KEMPER CENTER, LLC	DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	36-4105161				KEMPER CORPORATE SERVICES, INC.	IL	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	39004	91-1119010			KEMPER FINANCIAL INDEMNITY COMPANY	IL	IA	RESPONSE INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	75-1865314				KEMPER GENERAL AGENCY, INC.	TX	NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES		
	KEMPER CORPORATION	10914	36-4230019			KEMPER INDEPENDENCE INSURANCE COMPANY	IL	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION					KEMPER MANAGEMENT, LLC	IL	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO		

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership, Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No) *	
	KEMPER CORPORATION		75-2874538			KEMPER PERSONAL INSURANCE GENERAL AGENCY, INC.		TX	NIA	UNITRIN DIRECT PROPERTY & CASUALTY COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION		30-1329283			KEMPER PROPERTIES, LLC		DE	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	17513	92-2801349			KEMPER RECIPROCAL		IL	IA	KEMPER MANAGEMENT, LLC	Attorney In-Fact		KEMPER CORPORATION	NO	
	KEMPER CORPORATION		34-1852743			LEADER GROUP, INC.		OH	NIA	INFINITY AUTO INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION		75-2280915			LEADER MANAGING GENERAL AGENCY, INC.		TX	NIA	NCM MANAGEMENT CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION		98-0426067			MERASTAR INDUSTRIES LLC		DE	NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	31968	62-0928337			MERASTAR INSURANCE COMPANY		IL	IA	MERASTAR INDUSTRIES LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	31178	63-0599704			MUTUAL SAVINGS FIRE INSURANCE COMPANY		AL	IA	MUTUAL SAVINGS LIFE INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	66397	63-0148960			MUTUAL SAVINGS LIFE INSURANCE COMPANY		AL	IA	UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		75-2538407			NCM MANAGEMENT CORPORATION		DE	NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES	
	KEMPER CORPORATION		36-4442975			NEWINS INSURANCE AGENCY HOLDINGS, LLC		IL	NIA	CRANBERRY HOLDINGS, INC.	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		36-4442975			NEWINS REAL ESTATE HOLDINGS, LLC		IL	NIA	NEWINS INSURANCE AGENCY HOLDINGS, LLC.	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		92-1622384			NORTH SCOTTSDALE GATEWAY, LLC		DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	36625	43-1156323			OLD RELIABLE CASUALTY COMPANY		MO	IA	CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		99-0539948			PENNANTPARK SENIOR SECURED LOAN FUND I, LLC			NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	50.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	43044	04-2794993			RANDOLPH INVESTMENTS FUND, LLC		DE	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	20133	61-6027355			RESPONSE INSURANCE COMPANY		IL	IA	DIRECT RESPONSE CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
0215	KEMPER CORPORATION	26050	39-1341441			RESPONSE WORLDWIDE DIRECT AUTO INSURANCE COMPANY		IL	IA	WARNER INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		20-3046396			RESPONSE WORLDWIDE INSURANCE COMPANY		IL	IA	RESPONSE INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		92-1605543			SECURITY ONE AGENCY LLC		IL	NIA	MERASTAR INDUSTRIES LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION		92-1588929			SENIOR LOAN FUND JV, I LLC			NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	50.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION					SKYLINE ESPLANADE 6, LLC		DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	
	KEMPER CORPORATION					SKYLINE ESPLANADE 7, LLC		DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO	

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership, Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No)	*
98.3	KEMPER CORPORATION		92-1600556			SKYLINE ESPLANADE 9, LLC	DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION		92-1597819			SUMMERRATE CORPORATE CENTER, LLC	DE	NIA	KEMPER PROPERTIES, LLC	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION					SUNRUN KRONOS OWNER 2000, LLC		NIA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	22.500	KEMPER CORPORATION	NO	9	
	KEMPER CORPORATION					SUNRUN KRONOS OWNER 2000, LLC		NIA	UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	7.600	KEMPER CORPORATION	NO		
	KEMPER CORPORATION		31-1357130			THE INFINITY GROUP, INC.	IN	NIA	INFINITY INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	YES		
	KEMPER CORPORATION		36-6007812			THE KEMPER FOUNDATION	IL	NIA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	68357	43-0476110			THE RELIABLE LIFE INSURANCE COMPANY	MO	IA	UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	19887	75-0620550			TRINITY UNIVERSAL INSURANCE COMPANY	TX	IA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	12998	72-6019774			UNION NATIONAL FIRE INSURANCE COMPANY	LA	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	69779	72-0340280			UNION NATIONAL LIFE INSURANCE COMPANY	LA	IA	UNITED INSURANCE COMPANY OF AMERICA	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	11142	23-1614367			UNITED CASUALTY INSURANCE COMPANY OF AMERICA	IL	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	69930	36-1896670			UNITED INSURANCE COMPANY OF AMERICA	IL	IA	KEMPER CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	10881	13-3974181			UNITRIN ADVANTAGE INSURANCE COMPANY	NY	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	16063	52-1752227			UNITRIN AUTO AND HOME INSURANCE COMPANY	NY	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	29351	74-1084315			UNITRIN COUNTY MUTUAL INSURANCE COMPANY	TX	IA	NCM MANAGEMENT CORPORATION	MANAGEMENT		KEMPER CORPORATION	NO	10	
	KEMPER CORPORATION	10226	36-4013825			UNITRIN DIRECT INSURANCE COMPANY	IL	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	10915	36-4230008			UNITRIN DIRECT PROPERTY & CASUALTY COMPANY	IL	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	25909	13-5460208			UNITRIN PREFERRED INSURANCE COMPANY	NY	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	40703	39-1401314			UNITRIN SAFEGUARD INSURANCE COMPANY	WI	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	10698	93-1217821			VALLEY PROPERTY & CASUALTY INSURANCE COMPANY	OR	IA	TRINITY UNIVERSAL INSURANCE COMPANY	OWNERSHIP	100.000	KEMPER CORPORATION	NO		
	KEMPER CORPORATION	26085	36-3423817			WARNER INSURANCE COMPANY	IL	IA	DIRECT RESPONSE CORPORATION	OWNERSHIP	100.000	KEMPER CORPORATION	NO		

Annual Statement for the Year 2024 of the Infinity Assurance Insurance Company

Asterisk	Explanation
1	AEGON OPPORTUNITY FUND JOINT VENTURE 1, LLC, (AEGON) IS AN AFFILIATE BY VIRTUE OF UNITED INSURANCE COMPANY OF AMERICA (UNITED) HAVING A MAJORITY PARTNERSHIP INTEREST IN AEGON.....
2	KEMPER RECIPROCAL (NAIC #17513, DOMICILED IN THE STATE OF ILLINOIS) IS AFFILIATED WITH KEMPER MANAGEMENT, LLC BY VIRTUE OF THEIR FUNCTION AS ATTORNEY IN-FACT.....
3	CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY (NAIC# 29211, DOMICILED IN THE STATE OF TEXAS) IS AFFILIATED WITH THE RELIABLE LIFE INSURANCE COMPANY BY VIRTUE OF A MANAGEMENT AGREEMENT.....
4	INFINITY COUNTY MUTUAL INSURANCE COMPANY (NAIC# 13820, DOMICILED IN THE STATE OF TEXAS) IS AFFILIATED WITH NCM MANAGEMENT CORPORATION BY VIRTUE OF A MANAGEMENT AGREEMENT.....
5	THESE ENTITIES ARE LIMITED LIABILITY COMPANIES. PERCENTAGES RELATE TO THE OWNER'S MEMBERSHIP INTEREST IN THE LLC.....
6	OLD RELIABLE CASUALTY COMPANY (NAIC# 36625, DOMICILED IN THE STATE OF MISSOURI) IS AFFILIATED BY VIRTUE OF ITS OWNERSHIP BY CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY.....
7	PENNANTPARK SENIOR SECURED LOAN FUND I, LLC (PSLL), IS AN AFFILIATE BY VIRTUE OF TRINITY HAVING 50% CONTROL OF THE BOARD OF PSSL, WITH THE OTHER 50% VESTED IN PENNANTPARK FLOATING RATE CAPITAL, LTD.....
8	SENIOR LOAN FUND JV, I LLC (SLFJV) IS AN AFFILIATE BY VIRTUE OF TRINITY HAVING 50% CONTROL OF THE BOARD OF SLFJV, WITH THE OTHER 50% VESTED IN OAKTREE SPECIALTY LENDING CORP.....
9	SUNRUN KRONOS OWNER 2020, LLC (SUNRUN) IS AN AFFILIATE BY VIRTUE OF TRINITY HAVING A 22.9% PARTNERSHIP INTEREST IN SUNRUN.....
10	UNITRIN COUNTY MUTUAL INSURANCE COMPANY (NAIC# 29351, DOMICILED IN THE STATE OF TEXAS) IS AFFILIATED WITH NCM MANAGEMENT CORP. BY VIRTUE OF A MANAGEMENT AGREEMENT.....

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 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
	37-1656986	ACCELERATE INSURANCE NETWORK, LLC	—	—	—	—	—	—	—	—	—	—
	20-8809010	ACCESS INSURANCE AGENCY OF ARIZONA, LLC	—	—	—	—	—	—	—	—	—	—
	20-8115603	ACCESS INSURANCE AGENCY OF INDIANA, LLC	—	—	—	—	—	—	—	—	—	—
	20-8115668	ACCESS INSURANCE AGENCY OF NEVADA, LLC	—	—	—	—	—	—	—	—	—	—
	26-2621251	ACCESS INSURANCE AGENCY OF SOUTH CAROLINA, LLC	—	—	—	—	—	—	—	—	—	—
		AEGON OPPORTUNITY ZONE FUND JOINT VENTURE 1, LP	—	—	—	—	—	—	—	—	—	—
	26-4133974	AGENCIA DE SEGUROS DE ACCESO, LLC	—	—	—	—	—	—	—	—	—	—
10920	77-0475915	ALLIANCE UNITED INSURANCE COMPANY	(2,400,000)	—	—	—	—	—	—	—	(2,400,000)	—
	77-0472398	ALLIANCE UNITED INSURANCE SERVICES, LLC	(19,740,000)	—	—	—	—	—	—	—	(19,740,000)	—
38156	39-1344101	ALPHA PROPERTY & CASUALTY INSURANCE COMPANY	(300,000)	—	—	8,870,870	(8,685,353)	—	—	—	(114,483)	31,229,032
10730	36-4335932	AMERICAN ACCESS CASUALTY COMPANY	(13,250,000)	—	—	23,232,722	—	—	—	—	9,982,722	—
	84-4192397	AMERICAN ACCESS HOLDINGS, LLC	—	—	—	—	—	—	—	—	—	—
29211	75-0774903	CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY	—	—	—	4,852,815	(7,514,947)	—	—	—	(2,662,132)	25,808
	58-0642684	CASUALTY UNDERWRITERS, INC.	—	—	—	—	—	—	—	—	—	—
37524	75-1636168	CHARTER INDEMNITY COMPANY	—	—	—	485,564	(885,822)	—	—	—	(400,258)	1,685,846
	92-1599608	CORONADO MEDICAL CENTER, LLC	—	—	—	—	—	—	—	—	—	—
	85-4330188	CRANBERRY HOLDINGS, INC.	—	—	—	—	—	—	—	—	—	—
	04-3294619	DIRECT RESPONSE CORPORATION	(469,000)	—	—	—	—	—	—	—	(469,000)	—
	43-1511864	FAMILY SECURITY FUNERALS COMPANY	—	—	—	—	—	—	—	—	—	—
19852	95-1466743	FINANCIAL INDEMNITY COMPANY	(14,000,000)	—	—	12,889,142	2,790,289	—	—	—	1,679,431	27,014,879
	92-1612977	FOOTHILLS CORPORATE, LLC	(840,000)	—	—	—	—	—	—	—	(840,000)	—
	36-4448107	ILLINOIS VEHICLE INSURANCE AGENCY, LLC	—	—	—	—	—	—	—	—	—	—
	74-2641866	INFINITY AGENCY OF TEXAS	—	—	—	—	—	—	—	—	—	—
39497	75-1227771	INFINITY ASSURANCE INSURANCE COMPANY	—	—	—	30,946,394	38,958,560	*	—	—	69,904,953	268,742,989
11738	34-0927698	INFINITY AUTO INSURANCE COMPANY	—	—	—	120,628,295	422,670	*	—	—	121,050,965	503,116,183
21792	58-1132392	INFINITY CASUALTY INSURANCE COMPANY	—	—	—	11,956,527	15,441,834	*	—	—	27,398,361	83,856,290
13820	43-6030348	INFINITY COUNTY MUTUAL INSURANCE COMPANY	—	—	—	45,489,344	67,797,614	—	—	—	113,286,958	328,874,184
	20-4363792	INFINITY FINANCIAL CENTERS, LLC	—	—	—	—	—	—	—	—	—	—
10061	34-1767787	INFINITY INDEMNITY INSURANCE COMPANY	—	—	—	54,822,752	(2,149,980)	*	—	—	52,672,772	228,248,728
	58-1293110	INFINITY INSURANCE AGENCY, INC.	—	—	—	4,649	—	—	—	—	4,649	—
22268	31-0943862	INFINITY INSURANCE COMPANY	325,000	—	—	405,168,446	53,998,876	*	—	—	459,492,322	1,245,490,907
10195	34-1785809	INFINITY PREFERRED INSURANCE COMPANY	(325,000)	—	—	14,152	(2,669)	*	—	—	(313,517)	—
	03-0483872	INFINITY PROPERTY AND CASUALTY CORPORATION	—	—	—	—	—	—	—	—	—	—
	58-1080659	INFINITY PROPERTY AND CASUALTY SERVICES, INC.	—	—	—	—	—	—	—	—	—	—
16802	73-0772113	INFINITY SAFEGUARD INSURANCE COMPANY	—	—	—	4,061,273	(1,160,557)	*	—	—	2,900,716	10,234,586
20260	31-1333017	INFINITY SELECT INSURANCE COMPANY	—	—	—	50,364,055	(73,358,275)	*	—	—	(22,994,220)	514,971,856
12599	58-1806189	INFINITY STANDARD INSURANCE COMPANY	—	—	—	2,480,091	745,752	*	—	—	3,225,843	9,332,868

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 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
	27-3557296	KAHG LLC	—	—	—	—	—	—	—	—	—	—
	98-1683863	KEMPER BERMUDA LTD	—	—	—	—	—	54,448,373	—	—	54,448,373	(2,846,803,138)
	92-1599353	KEMPER CENTER, LLC	—	—	—	—	—	—	—	—	—	—
	36-4105161	KEMPER CORPORATE SERVICES, INC.	—	—	—	—	(1,062,309,567)	—	—	—	(1,062,309,567)	—
	95-4255452	KEMPER CORPORATION	83,193,774	180,246,226	(136,087,475)	—	(15,041,314)	—	—	—	112,311,211	—
39004	91-1119010	KEMPER FINANCIAL INDEMNITY COMPANY	—	—	—	—	182	(7,640)	—	—	(7,458)	13,432
	75-1865314	KEMPER GENERAL AGENCY, INC.	—	—	—	—	—	—	—	—	—	—
10914	36-4230019	KEMPER INDEPENDENCE INSURANCE COMPANY	—	—	—	—	47,309,631	(22,456,663)	—	—	24,852,968	128,908,786
		KEMPER MANAGEMENT LLC	(1,050,000)	—	—	—	(6,573,865)	—	—	—	(7,623,865)	—
	75-2874538	KEMPER PERSONAL INSURANCE GENERAL AGENCY, INC.	—	—	—	—	—	—	—	—	—	—
	30-1329283	KEMPER PROPERTIES, LLC	1,730,000	—	—	—	—	—	—	—	1,730,000	—
17513	92-2801349	KEMPER RECIPROCAL	—	(18,000,000)	—	—	6,573,865	—	—	—	(11,426,135)	—
	34-1852743	LEADER GROUP, INC.	—	—	—	—	—	—	—	—	—	—
	75-2280915	LEADER MANAGING GENERAL AGENCY, INC.	—	—	—	—	65,932	—	—	—	65,932	—
	98-0426067	MERASTAR INDUSTRIES LLC	(7,000)	—	—	—	—	—	—	—	(7,000)	—
31968	62-0928337	MERASTAR INSURANCE COMPANY	(8,600,000)	—	—	—	299,418	(2,888,581)	—	—	(11,189,163)	2,457,368
31178	63-0599704	MUTUAL SAVINGS FIRE INSURANCE COMPANY	—	—	—	—	2,196,954	(1,083,253)	—	—	1,113,701	150,310
66397	63-0148960	MUTUAL SAVINGS LIFE INSURANCE COMPANY	(1,700,000)	—	—	—	13,071,468	(6,470,960)	—	—	4,900,508	398,507,415
	75-2538407	NCM MANAGEMENT CORPORATION	(4,500,000)	26,100,000	—	—	—	—	—	—	21,600,000	—
	36-4442975	NEWINS INSURANCE AGENCY HOLDINGS, LLC	(9,000,000)	—	—	—	—	—	—	—	(9,000,000)	—
		NEWINS REAL ESTATE HOLDINGS, LLC	—	—	—	—	—	—	—	—	—	—
	92-1622384	NORTH SCOTTSDALE GATEWAY, LLC	—	—	—	—	—	—	—	—	—	—
36625	43-1156323	OLD RELIABLE CASUALTY COMPANY	—	—	—	—	1,283,075	(1,948,727)	—	—	(665,652)	(362,232)
		PENNANTPARK SENIOR SECURED LOAN FUND I, LLC	—	—	—	—	—	—	—	—	—	—
	99-0539948	RANDOLPH INVESTMENT FUND, LLC	—	—	—	—	—	—	—	—	—	—
43044	04-2794993	RESPONSE INSURANCE COMPANY	—	—	—	—	121,430	(138,269)	—	—	(16,839)	449,535
20133	61-6027355	RESPONSE WORLDWIDE DIRECT AUTO INSURANCE COMPANY	—	—	—	—	673	2,906	—	—	3,579	28,388
26050	39-1341441	RESPONSE WORLDWIDE INSURANCE COMPANY	—	—	—	—	2,395	27,558	—	—	29,953	28,262
	20-3046396	SECURITY ONE AGENCY LLC	(180,000)	—	—	—	—	—	—	—	(180,000)	—
		SENIOR LOAN FUND JV, I LLC	—	—	—	—	—	—	—	—	—	—
	92-1605543	SKYLINE ESPLANADE 6, LLC	(375,000)	—	—	—	—	—	—	—	(375,000)	—
	92-1588929	SKYLINE ESPLANADE 7, LLC	(200,000)	—	—	—	—	—	—	—	(200,000)	—
	92-1600556	SKYLINE ESPLANADE 9, LLC	(315,000)	—	—	—	—	—	—	—	(315,000)	—
	92-1597819	SUMMERGATE CORPORATE CENTER, LLC	—	—	—	—	—	—	—	—	—	—
		SUNRUN KRONOS OWNER 2000, LLC	—	—	—	—	—	—	—	—	—	—
		SUNRUN KRONOS OWNER 2000, LLC	—	—	—	—	—	—	—	—	—	—
	.31-1357130	THE INFINITY GROUP, INC.	—	—	—	—	—	—	—	—	—	—

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)
		36-6007812 THE KEMPER FOUNDATION.....	—	—				—			—	—
68357	43-0476110	THE RELIABLE LIFE INSURANCE COMPANY.....	—	11,850,000			45,909,320	(14,943,947)			42,815,373	79,955,118
19887	75-0620550	TRINITY UNIVERSAL INSURANCE COMPANY.....	677,006	(183,346,226)	136,087,475		12,194,172	(27,219,603)			(61,607,176)	(3,539,638,701)
12998	72-6019774	UNION NATIONAL FIRE INSURANCE COMPANY.....	—	—			5,199,063	(4,193,760)			1,005,303	1,583,100
69779	72-0340280	UNION NATIONAL LIFE INSURANCE COMPANY.....	(700,000)	—			31,179,022	(449,660)			30,029,362	73,010,007
11142	23-1614367	UNITED CASUALTY INSURANCE COMPANY OF AMERICA.....	(350,000)	—			8,331,906	(3,407,337)			4,574,569	1,180,110
69930	36-1896670	UNITED INSURANCE COMPANY OF AMERICA.....	2,400,000	(11,850,000)			67,344,909	(32,583,806)			25,311,103	2,295,330,598
10881	13-3974181	UNITRIN ADVANTAGE INSURANCE COMPANY.....	—	—			2,233,881	(935,164)			1,298,717	85,410
16063	52-1752227	UNITRIN AUTO AND HOME INSURANCE COMPANY.....	(8,224,780)	(5,000,000)			13,710,997	(1,737,901)			(1,251,684)	29,612,139
29351	74-1084315	UNITRIN COUNTY MUTUAL INSURANCE COMPANY.....	—	—			7,093,391	4,754,103			11,847,494	7,806,179
10226	36-4013825	UNITRIN DIRECT INSURANCE COMPANY.....	(225,000)	—			2,259,445	(1,607,534)			426,911	3,628,741
10915	36-4230008	UNITRIN DIRECT PROPERTY & CASUALTY COMPANY.....	(625,000)	—			549,724	56,320			(18,956)	621,264
25909	13-5460208	UNITRIN PREFERRED INSURANCE COMPANY.....	—	—			2,773,417	1,600,384			4,373,801	9,072,718
40703	39-1401314	UNITRIN SAFEGUARD INSURANCE COMPANY.....	(950,000)	—			37,498,647	(23,785,830)			12,762,817	101,068,762
10698	93-1217821	VALLEY PROPERTY & CASUALTY INSURANCE COMPANY.....	—	—			452,797	(1,349,482)			(896,686)	1,453,975
26085	36-3423817	WARNER INSURANCE COMPANY.....	—	—			1,942	(79,521)			(77,579)	(971,702)
9999999 - Control Totals.....			—	—	—		—	—	XXX		—	—

SCHEDULE Y

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

1	2	3	4	5	6	7	8
Insurers in Holding Company	Owners with Greater than 10% Ownership	Ownership Percentage Column 2 of Column 1	Granted Disclaimer of Control / Affiliation of Column 2 Over Column 1 (Yes/No)	Ultimate Controlling Party	U.S. Insurance Groups or Entities Controlled by Column 5	Ownership Percentage (Column 5 of Column 6) (Yes/No)	Granted Disclaimer of Control / Affiliation of Column 5 Over Column 6 (Yes/No)
ALPHA PROPERTY & CASUALTY INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
AMERICAN ACCESS CASUALTY COMPANY	AMERICAN ACCESS HOLDINGS, LLC	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY		%	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
CHARTER INDEMNITY COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
FINANCIAL INDEMNITY COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY ASSURANCE INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY AUTO INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY CASUALTY INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY COUNTY MUTUAL INSURANCE COMPANY		%	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY INDEMNITY INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY INSURANCE COMPANY	INFINITY PROPERTY AND CASUALTY CORPORATION	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY PREFERRED INSURANCE COMPANY	INFININTY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY SAFEGUARD INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY SELECT INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
INFINITY STANDARD INSURANCE COMPANY	INFINITY INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
KEMPER FINANCIAL INDEMNITY COMPANY	RESPONSE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
KEMPER INDEPENDENCE INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
KEMPER RECIPROCAL		%	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
MERASTAR INSURANCE COMPANY	MERASTAR INDUSTRIES, LLC	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
MUTUAL SAVINGS FIRE INSURANCE COMPANY	MUTUAL SAVINGS LIFE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
MUTUAL SAVINGS LIFE INSURANCE COMPANY	UNITED INSURANCE COMPANY OF AMERICA	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
OLD RELIABLE CASUALTY COMPANY	CAPITOL COUNTY MUTUAL FIRE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
RESPONSE INSURANCE COMPANY	DIRECT RESPONSE CORPORATION	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
RESPONSE WORLDWIDE DIRECT AUTO INSURANCE COMPANY	RESPONSE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
RESPONSE WORLDWIDE INSURANCE COMPANY	RESPONSE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO

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 (Column 5 of Column 6) (Yes/No)	8 Granted Disclaimer of Control / Affiliation of Column 5 Over Column 6 (Yes/No)
THE RELIABLE LIFE INSURANCE COMPANY	UNITED INSURANCE COMPANY OF AMERICA	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
TRINITY UNIVERSAL INSURANCE COMPANY	KEMPER CORPORATION	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
UNION NATIONAL FIRE INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
UNION NATIONAL LIFE INSURANCE COMPANY	UNITED INSURANCE COMPANY OF AMERICA	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
UNITED CASUALTY INSURANCE COMPANY OF AMERICA	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
UNITED INSURANCE COMPANY OF AMERICA	KEMPER CORPORATION	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
UNITRIN ADVANTAGE INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
UNITRIN AUTO AND HOME INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
UNITRIN COUNTY MUTUAL INSURANCE COMPANY		%	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
UNITRIN DIRECT INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
UNITRIN DIRECT PROPERTY & CASUALTY COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
UNITRIN PREFERRED INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
UNITRIN SAFEGUARD INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
VALLEY PROPERTY & CASUALTY INSURANCE COMPANY	TRINITY UNIVERSAL INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO
WARNER INSURANCE COMPANY	RESPONSE INSURANCE COMPANY	100.000 %	NO	KEMPER CORPORATION	KEMPER CORPORATION	100.000 %	NO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**REQUIRED FILINGS**

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

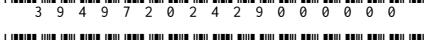
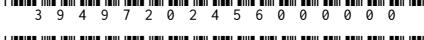
	Response
March Filing	
1. Will an actuarial opinion be filed by March 1?	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4. Will the confidential Risk-based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

SUPPLEMENTAL FILINGS

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

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

	Explanation	Barcode
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		 3 9 4 9 7 2 0 2 4 4 2 0 0 0 0 0 0 0
12.		 3 9 4 9 7 2 0 2 4 2 4 0 0 0 0 0 0 0
13.		 3 9 4 9 7 2 0 2 4 3 6 0 0 0 0 0 0 0
14.		 3 9 4 9 7 2 0 2 4 4 5 5 0 0 0 0 0 0
15.		 3 9 4 9 7 2 0 2 4 4 9 0 0 0 0 0 0 0
16.		 3 9 4 9 7 2 0 2 4 3 8 5 0 0 0 0 0 0
17.		 3 9 4 9 7 2 0 2 4 4 0 1 0 0 0 0 0 0
18.		 3 9 4 9 7 2 0 2 4 3 6 5 0 0 0 0 0 0
19.		
20.		
21.		 3 9 4 9 7 2 0 2 4 4 0 0 0 0 0 0 0 0
22.		 3 9 4 9 7 2 0 2 4 5 0 0 0 0 0 0 0 0
23.		 3 9 4 9 7 2 0 2 4 5 0 5 0 0 0 0 0 0
24.		 3 9 4 9 7 2 0 2 4 2 2 4 0 0 0 0 0 0
25.		 3 9 4 9 7 2 0 2 4 2 2 5 0 0 0 0 0 0
26.		 3 9 4 9 7 2 0 2 4 2 2 6 0 0 0 0 0 0
27.		 3 9 4 9 7 2 0 2 4 5 5 5 0 0 0 0 0 0
28.		
29.		
30.		 3 9 4 9 7 2 0 2 4 2 3 0 0 0 0 0 0 0
31.		 3 9 4 9 7 2 0 2 4 3 0 6 0 0 0 0 0 0
32.		 3 9 4 9 7 2 0 2 4 2 1 0 0 0 0 0 0 0
33.		 3 9 4 9 7 2 0 2 4 2 1 6 0 0 0 0 0 0
34.		 3 9 4 9 7 2 0 2 4 5 5 0 0 0 0 0 0 0
35.		 3 9 4 9 7 2 0 2 4 2 9 0 0 0 0 0 0 0
36.		 3 9 4 9 7 2 0 2 4 5 6 0 0 0 0 0 0 0
37.		 3 9 4 9 7 2 0 2 4 5 6 5 0 0 0 0 0 0
38.		

OVERFLOW PAGE FOR WRITE-INS

OVERFLOW PAGE FOR WRITE-INS

**EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS**

AS REPORTED ON LINE 17 OF THE EXHIBIT OF PREMIUMS AND LOSSES

To Be Filed by March 1

NAIC Group Code: 0215

NAIC Company Code: 39497

	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.....				
2. Errors & omissions (E&O).....				
3. Directors & officers (D&O).....				
4. Environmental liability.....				
5. Excess workers' compensation.....				
6. Commercial excess & umbrella.....				
7. Personal umbrella.....				
8. Employment liability.....				
9. Aggregate write-ins for facilities and premises (CGL).....	150,477	138,013	7,486	1
10. Internet & cyber liability.....				
11. Aggregate write-ins for other.....				
12. Total ASL 17 - other liability (sum of lines 1 through 11).....	150,477	138,013	7,486	1
Details of Write-Ins				
0901. Commercial General Liability.....	150,477	138,013	7,486	1
0902.....				
0903.....				
0998. Summary of remaining write-ins for Line 09 from overflow page.....				
0999. Summary of remaining write-ins for Line 09 from overflow page.....	150,477	138,013	7,486	1
1101.....				
1102.....				
1103.....				
1198. Summary of remaining write-ins for Line 11 from overflow page.....				
1199. Summary of remaining write-ins for Line 11 from overflow page.....				

OVERFLOW PAGE FOR WRITE-INS

**MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR**

For The Year Ended December 31, 2024

(To Be Filed By March 1)

FOR THE STATE OF Florida

NAIC Group Code: 0215

NAIC Company Code: 39497

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