



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	District of Columbia	DURING THE YEAR 2024								NAIC Company Code	44288
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)													1,595
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	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)													1,595
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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Georgia	DURING THE YEAR 2024								NAIC Company Code	44288
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	204,658,826	175,756,952			60,793,617	274,607	384,459	231,332	30,298	43,290	57,454		
19.3 Commercial Auto No-Fault (Personal Injury Protection)						89,711,160	119,740,662	81,852,060	1,298,948	3,327,668	5,848,053	1,161	7,967,579
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage	89,245,629	78,238,344			26,060,866	56,354,821	59,294,994	5,505,171	48,304	141,815	297,432	732	3,468,845
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		
32. Reins nonproportional assumed liability	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		
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)	293,904,455	253,995,295			86,854,483	146,340,588	179,420,114	87,588,563	1,377,550	3,512,773	6,202,939	1,893	11,436,424
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 \$ 2,752,549

(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 PROGRESSIVE CHOICE INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Kansas	DURING THE YEAR 2024								NAIC Company Code	44288
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) .....												.704
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)												704	
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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Louisiana	DURING THE YEAR 2024							NAIC Company Code	44288
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												4,191
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)												4,191
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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	North Dakota	DURING THE YEAR 2024								NAIC Company Code	44288
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) .....													.947
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	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)													947
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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF Ohio		DURING THE YEAR 2024									NAIC Company Code	44288
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)														5,661
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	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)														5,661
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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Pennsylvania	DURING THE YEAR 2024								NAIC Company Code	44288
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) .....													.850
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	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)													850
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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Tennessee	DURING THE YEAR 2024							NAIC Company Code	44288
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) .....												.705
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)												705
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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Texas	DURING THE YEAR 2024								NAIC Company Code	44288
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													700
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	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)													700
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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	West Virginia	DURING THE YEAR 2024								NAIC Company Code	44288
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												1,625	
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)												1,625	
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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0155	BUSINESS IN THE STATE OF	Grand Total	DURING THE YEAR 2024								NAIC Company Code	44288
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)		204,658,826	175,756,952		60,793,617	274,607	384,459	231,332	30,298	43,290	57,454		
19.2 Other Private Passenger Auto Liability						89,711,160	119,740,662	81,852,060	1,298,948	3,327,668	5,848,053	1,161	7,984,556
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage		89,245,629	78,238,344		26,060,866	56,354,821	59,294,994	5,505,171	48,304	141,815	297,432	732	3,468,845
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)		293,904,455	253,995,295		86,854,483	146,340,588	179,420,114	87,588,563	1,377,550	3,512,773	6,202,939	1,893	11,453,402
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 \$ 2,752,549

(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 PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE F - PART 1

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8	9	10	11	12	13	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE								
34-1524319	.16322	Progressive Direct Insurance Company	OH.....	136,542	559	37,261	37,820						36,846	
0199999. Affiliates - U.S. Intercompany Pooling				136,542	559	37,261	37,820						36,846	
0499999. Total - U.S. Non-Pool														
0799999. Total - Other (Non-U.S.)														
0899999. Total - Affiliates				136,542	559	37,261	37,820						36,846	
1299999. Total - Pools and Associations														
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
9999999 Totals				136,542	559	37,261	37,820						36,846	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers			
34-1524319 ..	16322 ..	PROGRESSIVE DIRECT INSURANCE COMPANY	OH.....		293,904	1,370	359	67,152	7,335	20,436	3,391	86,854		186,897		9,842		177,055	
0199999.		Total Authorized - Affiliates - U.S. Intercompany Pooling			293,904	1,370	359	67,152	7,335	20,436	3,391	86,854		186,897		9,842		177,055	
0499999.		Total Authorized - Affiliates - U.S. Non-Pool																	
0799999.		Total Authorized - Affiliates - Other (Non-U.S.)																	
0899999.		Total Authorized - Affiliates			293,904	1,370	359	67,152	7,335	20,436	3,391	86,854		186,897		9,842		177,055	
1499999.		Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			293,904	1,370	359	67,152	7,335	20,436	3,391	86,854		186,897		9,842		177,055	
1899999.		Total Unauthorized - Affiliates - U.S. Non-Pool																	
2199999.		Total Unauthorized - Affiliates - Other (Non-U.S.)																	
2299999.		Total Unauthorized - Affiliates																	
2899999.		Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																	
3299999.		Total Certified - Affiliates - U.S. Non-Pool																	
3599999.		Total Certified - Affiliates - Other (Non-U.S.)																	
3699999.		Total Certified - Affiliates																	
4299999.		Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																	
4699999.		Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																	
4999999.		Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																	
5099999.		Total Reciprocal Jurisdiction - Affiliates																	
5699999.		Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)																	
5799999.		Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)			293,904	1,370	359	67,152	7,335	20,436	3,391	86,854		186,897		9,842		177,055	
5899999.		Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																	
9999999.		Totals			293,904	1,370	359	67,152	7,335	20,436	3,391	86,854		186,897		9,842		177,055	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk										36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)		
		21	22	23	24				Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 28 * 120%)	30	31	32	33	34	
34-1524319 ..	PROGRESSIVE DIRECT INSURANCE COMPANY	9,842	177,055
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling				XXX		9,842	177,055			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX																	
0899999. Total Authorized - Affiliates				XXX		9,842	177,055														
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				XXX		9,842	177,055													XXX	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX																	
2299999. Total Unauthorized - Affiliates				XXX																	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX																XXX	
3299999. Total Certified - Affiliates - U.S. Non-Pool				XXX						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3599999. Total Certified - Affiliates - Other (Non-U.S.)				XXX																XXX	
3699999. Total Certified - Affiliates				XXX																XXX	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)				XXX																XXX	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool				XXX						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)				XXX																XXX	
5099999. Total Reciprocal Jurisdiction - Affiliates				XXX																XXX	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)				XXX																XXX	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)				XXX		9,842	177,055													XXX	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)				XXX						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
9999999 Totals				XXX		9,842	177,055													XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)	44 Total Recoverable on Paid Losses & LAE Amounts in Dispute	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50											
		37 Current	Overdue																										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41																						
34-152439 ..	PROGRESSIVE DIRECT INSURANCE COMPANY	1,729							1,729									YES.....											
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling		1,729							1,729				1,729					XXX											
0499999. Total Authorized - Affiliates - U.S. Non-Pool																		XXX											
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																		XXX											
0899999. Total Authorized - Affiliates		1,729							1,729				1,729						XXX										
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		1,729							1,729				1,729						XXX										
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool													1,729						XXX										
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																		XXX											
2299999. Total Unauthorized - Affiliates																		XXX											
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																		XXX											
3299999. Total Certified - Affiliates - U.S. Non-Pool																		XXX											
3599999. Total Certified - Affiliates - Other (Non-U.S.)																		XXX											
3699999. Total Certified - Affiliates																		XXX											
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																		XXX											
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																		XXX											
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																		XXX											
5099999. Total Reciprocal Jurisdiction - Affiliates																		XXX											
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)																		XXX											
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		1,729							1,729				1,729						XXX										
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																		XXX											
9999999 Totals		1,729							1,729				1,729						XXX										

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															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			
		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 Past Due Amounts Not in Dispute (Col. 45 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67				
34-1524319 ..	PROGRESSIVE DIRECT INSURANCE COMPANY	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		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0899999. Total Authorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2299999. Total Unauthorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX						XXX	XXX											
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX						XXX	XXX											
3699999. Total Certified - Affiliates		XXX						XXX	XXX											
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX						XXX	XXX											
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5099999. Total Reciprocal Jurisdiction - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		XXX	XXX	XXX	XXX	XXX	XXX													
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		XXX						XXX	XXX											
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		XXX						XXX	XXX											
9999999 Totals		XXX						XXX	XXX											

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Unauthorized and Reciprocal Jurisdiction Reinsurance		75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Total Provision for Reinsurance		
				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 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([(Col. 47 * 20%) + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	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)
34-1524319 ..	PROGRESSIVE DIRECT INSURANCE COMPANY	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
0199999.	Total Authorized - Affiliates - U.S. Intercompany Pooling		XXX	XXX			XXX	XXX	
0499999.	Total Authorized - Affiliates - U.S. Non-Pool		XXX	XXX			XXX	XXX	
0799999.	Total Authorized - Affiliates - Other (Non-U.S.)		XXX	XXX			XXX	XXX	
0899999.	Total Authorized - Affiliates		XXX	XXX			XXX	XXX	
1499999.	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX	XXX			XXX	XXX	
1899999.	Total Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	
2199999.	Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	
2299999.	Total Unauthorized - Affiliates				XXX	XXX	XXX	XXX	
2899999.	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX	XXX	XXX	XXX	
3299999.	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3599999.	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3699999.	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4299999.	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4699999.	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		XXX	XXX			XXX	XXX	
4999999.	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		XXX	XXX			XXX	XXX	
5099999.	Total Reciprocal Jurisdiction - Affiliates		XXX	XXX			XXX	XXX	
5699999.	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		XXX	XXX			XXX	XXX	
5799999.	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)								
5899999.	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)								
9999999.	Totals								

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE F - PART 4

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

1 <u>Name of Reinsurer</u>	2 <u>Commission Rate</u>	3 <u>Ceded Premium</u>
1. ....	.000	.....
2. ....	.000	.....
3. ....	.000	.....
4. ....	.000	.....
5. ....	.000	.....

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 <u>Name of Reinsurer</u>	2 <u>Total Recoverables</u>	3 <u>Ceded Premiums</u>	4 <u>Affiliated</u>
6. PROGRESSIVE DIRECT INSURANCE COMPANY	186,897	293,904	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>]
7.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
8.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
9.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
10.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	56,547,943		56,547,943
2. Premiums and considerations (Line 15)	66,725,086		66,725,086
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	1,728,549	(1,728,549)	
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	30,343,062		30,343,062
6. Net amount recoverable from reinsurers		177,054,384	177,054,384
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	155,344,640	175,325,835	330,670,475
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	49,979,544	98,314,000	148,293,544
10. Taxes, expenses, and other obligations (Lines 4 through 8)	2,295,634		2,295,634
11. Unearned premiums (Line 9)	36,846,066	86,854,000	123,700,066
12. Advance premiums (Line 10)	1,035,143		1,035,143
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	9,842,165	(9,842,165)	
15. Funds held by company under reinsurance treaties (Line 13)			
16. Amounts withheld or retained by company for account of others (Line 14)			
17. Provision for reinsurance (Line 16)			
18. Other liabilities	6,867,586		6,867,586
19. Total liabilities excluding protected cell business (Line 26)	106,866,138	175,325,835	282,191,973
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	48,478,502	XXX	48,478,502
22. Totals (Line 38)	155,344,640	175,325,835	330,670,475

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?

Yes [] No []

If yes, give full explanation: SEE NOTES TO FINANCIAL STATEMENTS #26

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

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

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

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 (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

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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

	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	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	.....
2. 2015.....	0.5	.....	.....
3. 2016.....	0.5	.....	.....
4. 2017.....	0.5	.....	.....
5. 2018.....	0.5	.....	.....
6. 2019.....	0.5	.....	.....
7. 2020.....	0.5	.....	.....
8. 2021.....	0.5	.....	.....
9. 2022.....	0.5	.....	.....
10. 2023.....	0.5	.....	.....
11. 2024	0.5	.....	.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
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 (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.....	59	50	5		5			4	20	XXX.....
2. 2015.....	22,706	.589	22,117	13,909	282	637	1	2,082			.374	16,345	4,258
3. 2016.....	26,029	.627	25,401	16,116	384	722		2,450			.413	18,903	4,876
4. 2017.....	29,929	.766	29,164	17,632	479	817	4	2,676			.451	20,642	5,147
5. 2018.....	36,367	.890	35,477	20,975	576	912	2	2,993			.548	24,302	5,895
6. 2019.....	42,533	1,096	41,437	23,630	403	1,017	1	3,374			.613	27,617	6,557
7. 2020.....	46,831	1,164	45,667	21,364	480	865	1	3,112			.591	24,861	5,636
8. 2021.....	50,764	.828	49,936	28,490	514	985	1	3,487			.737	32,448	7,120
9. 2022.....	53,239	.878	52,361	28,799	512	772	1	3,492			.647	32,551	6,596
10. 2023.....	63,088	1,109	61,980	29,117	542	458	2	3,860			.665	32,891	7,360
11. 2024	78,010	1,369	76,640	18,428	359	87		3,736			442	21,893	8,084
12. Totals	XXX	XXX	XXX	218,519	4,579	7,278	12	31,266			5,486	252,471	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed		
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22					
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded					
1. Prior.....	677	.661			11				17				45	1	
2. 2015.....	.71	.66			3				4				.13		
3. 2016.....	158	136	126	125	6				8				.36	1	
4. 2017.....	197	165	580	580	10				12				.54	2	
5. 2018.....	260	185	734	734	20				23				.119	5	
6. 2019.....	195	.63	727	727	.32				29				.194	10	
7. 2020.....	410	157	550	550	.57				48				.358	16	
8. 2021.....	876	.99	.896	474	160		.156		163			.149	1,678	40	
9. 2022.....	2,311	159	1,024	455	441		.172		260			.123	3,594	100	
10. 2023.....	6,835	228	2,157	452	929		.338		582			.249	10,162	312	
11. 2024	18,768	359	9,168	985	1,317			.641	1,721			.664	30,271	1,722	
12. Totals	30,759	2,277	15,962	5,081	2,987			1,308		2,867			1,185	46,523	2,210

	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.....	16	29
2. 2015.....	16,707	349	16,358	73.6	59.2	74.0			0.5	5	7
3. 2016.....	19,585	646	18,938	75.2	103.0	74.6			0.5	22	14
4. 2017.....	21,923	1,227	20,696	73.2	160.2	71.0			0.5	33	22
5. 2018.....	25,917	1,496	24,421	71.3	168.0	68.8			0.5	76	43
6. 2019.....	29,004	1,193	27,811	68.2	108.9	67.1			0.5	132	62
7. 2020.....	26,406	1,188	25,218	56.4	102.0	55.2			0.5	253	105
8. 2021.....	35,213	1,087	34,126	69.4	131.3	68.3			0.5	1,199	479
9. 2022.....	37,272	1,126	36,145	70.0	128.3	69.0			0.5	2,721	873
10. 2023.....	44,277	1,224	43,053	70.2	110.4	69.5			0.5	8,313	1,849
11. 2024	53,866	1,702	52,164	69.1	124.3	68.1			0.5	26,592	3,679
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	39,362	7,161

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
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 (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.....	167		167	77		9		7		1	93	9	
3. 2016.....	193		193	163		13		11		1	186	11	
4. 2017.....	210		210	122		14		12		1	148	11	
5. 2018.....	245		245	195	2	15		13		1	221	12	
6. 2019.....	276		276	191		13		13		1	216	12	
7. 2020.....	229		228	115		8		9		1	133	9	
8. 2021.....	240		239	134		11		11		1	156	9	
9. 2022.....	296	1	296	169		13		14		2	196	12	
10. 2023.....	375		375	107		6		14		2	128	12	
11. 2024	460		460	35		1		10		1	45	10	
12. Totals	XXX	XXX	XXX	1,308	2	102		114		10	1,522	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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.....	2											2	
5. 2018.....	1											1	
6. 2019.....													
7. 2020.....	3				1							4	
8. 2021.....	12		1		1							15	
9. 2022.....	62		4		5		1		1			73	
10. 2023.....	118		13		8		2		3			144	1
11. 2024	173		52		9		4		8		1	246	3
12. Totals	371		71		24		7		13		1	486	4

	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.....	93		93	55.9		55.9			0.5		
3. 2016.....	186		186	96.3		96.4			0.5		
4. 2017.....	150		150	71.5		71.6			0.5	2	
5. 2018.....	225	2	222	91.7	739.8	90.9			0.5	1	
6. 2019.....	217		217	78.4		78.5			0.5		
7. 2020.....	137		137	59.8		59.8			0.5	3	1
8. 2021.....	172		172	71.6		71.7			0.5	13	2
9. 2022.....	268		268	90.6		90.8			0.5	66	7
10. 2023.....	271		271	72.3		72.4			0.5	131	13
11. 2024	291		291	63.3		63.3			0.5	225	22
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	442	44

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

**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 (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	

	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									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 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																

	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		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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.....	3	.....	3	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. 2024	8	.....	8	.....	.....	.....	.....	.....	.....	.....	.....	.....
12. Totals	XXX	XXX	XXX	.....	.....	.....	.....	.....	.....	.....	1	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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	.....	.....	
			
1. Prior.....
2. 2015.....
3. 2016.....
4. 2017.....
5. 2018.....
6. 2019.....
7. 2020.....
8. 2021.....
9. 2022.....
10. 2023.....
11. 2024	2	.....	3	.....	.....	.....	.....	.....	.....	.....	.....	5	.....
12. Totals	2	.....	3	.....	.....	.....	.....	.....	.....	.....	.....	5	.....

	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.....	.....	.....	.....	.....	.....	.....	.....	.....	0.5	.....	.....
3. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	0.5	.....	.....
4. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	0.5	.....	.....
5. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	0.5	.....	.....
6. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	0.5	.....	.....
7. 2020.....	.....	.....	.....	.....	.....	.....	.....	.....	0.5	.....	.....
8. 2021.....	.....	.....	.....	.....	.....	.....	.....	.....	0.5	.....	.....
9. 2022.....	.....	.....	.....	.....	.....	.....	.....	.....	0.5	.....	.....
10. 2023.....	1	.....	1	27.6	(117.3)	27.6	.....	.....	0.5	.....	.....
11. 2024	5	.....	5	61.4	4.3	63.6	.....	.....	0.5	4	1
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	XXX	4	1

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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.....	133	2	131	39		1		4				45	
3. 2016.....	139	2	136	58	3	4		6				66	
4. 2017.....	146	3	143	57	1	2		9				68	
5. 2018.....	158	4	154	49	2	3		7		1		57	
6. 2019.....	176	4	172	72		4		7				83	
7. 2020.....	195	2	193	81	1	5		9		1		95	
8. 2021.....	226		226	79		8		8				94	
9. 2022.....	246		246	118		4		13		1		135	
10. 2023.....	270		270	80		1		9				90	
11. 2024	298		297	72		1		12				84	
12. Totals	XXX	XXX	XXX	705	7	32		85		4	815	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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
6. 2019.....	2												2
7. 2020.....	1												1
8. 2021.....	3		1		1								5
9. 2022.....	14		3		4				1				21
10. 2023.....	14		6		3		1		1				25
11. 2024	41		19		6		2		8				75
12. Totals	75		29		13		3		10		1		130
													3

	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.....	45		45	33.8		34.3			0.5		
3. 2016.....	69	3	66	49.5	126.6	48.1			0.5		
4. 2017.....	68	1	68	46.8	21.4	47.3			0.5		
5. 2018.....	59	2	57	37.4	44.6	37.2			0.5	1	
6. 2019.....	85		85	48.5	6.1	49.6			0.5	2	
7. 2020.....	97	1	95	49.4	50.3	49.4			0.5	1	
8. 2021.....	99		99	43.8	3.3	43.9			0.5	4	
9. 2022.....	156		156	63.4	6.6	63.5			0.5	17	
10. 2023.....	115		115	42.5	17.6	42.6			0.5	21	
11. 2024	159		159	53.5	29.5	53.5			0.5	60	
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	104	26

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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							3	
3. 2016.....													
4. 2017.....					6							6	
5. 2018.....						76						76	
6. 2019.....													
7. 2020.....													
8. 2021.....					10							10	
9. 2022.....													
10. 2023.....	1		1										
11. 2024	1		0	77								77	
12. Totals	XXX	XXX	XXX	172								172 XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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			22										22
12. Totals			22										22

	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		3	11,152.9		11,152.9			0.5		
3. 2016.....									0.5		
4. 2017.....	6		6	25,268.8		25,268.8			0.5		
5. 2018.....	76		76	302,876.4		302,876.4			0.5		
6. 2019.....									0.5		
7. 2020.....				849.3		849.3			0.5		
8. 2021.....	10		10	2,210.5		2,210.5			0.5		
9. 2022.....				22.0		22.0			0.5		
10. 2023.....				25.8	0.0	27.8			0.5		
11. 2024	100		100	14,911.7	23.0	19,906.5			0.5	22	
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	22	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
SCHEDULE P - PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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	362		362	159		1		33		14	193	XXX	
3. 2016	395		395	191		1		38		22	230	XXX	
4. 2017	428		428	251		1		50		27	303	XXX	
5. 2018	474		474	266		1		50		32	316	XXX	
6. 2019	534		534	225		1		50		24	277	XXX	
7. 2020	603		603	344		1		72		54	417	XXX	
8. 2021	719		719	303		2		73		42	378	XXX	
9. 2022	810		810	505		2		85		72	592	XXX	
10. 2023	917		917	412		1		90		39	503	XXX	
11. 2024	1,036		1,036	488		1		100		32	589	XXX	
12. Totals	XXX	XXX	XXX	3,144		13		641		358	3,798	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior																
2. 2015																
3. 2016																
4. 2017																
5. 2018																
6. 2019																
7. 2020																
8. 2021											1					
9. 2022	1										2	1				
10. 2023	2						1				5	3				
11. 2024	37		31		2		1		10		38	81	3			
12. Totals	40		31		2		2		10		46	85	4			

	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	193		193	53.4		53.4					
3. 2016	230		230	58.1		58.1					
4. 2017	303		303	70.8		70.8					
5. 2018	316		316	66.7		66.7					
6. 2019	277		277	51.8		51.8					
7. 2020	417		417	69.2		69.2					
8. 2021	378		378	52.6		52.6					
9. 2022	594		594	73.3		73.3				1	
10. 2023	506		506	55.2		55.2				2	1
11. 2024	670		670	64.6		64.6				68	13
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	71	14

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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.....	(2).....	.....	.....	.....	.....	.....	4	(2).....	XXX.....
2. 2015.....	11,582	.....	11,582	8,358	.....	41	.....	1,127	.....	2,105	9,526	1
3. 2016.....	13,532	.....	13,532	9,900	.....	38	.....	1,301	.....	2,470	11,240	1
4. 2017.....	15,604	48	15,556	10,900	34	41	3	1,472	.....	2,793	12,375	4
5. 2018.....	18,694	.....	18,694	13,015	.....	40	.....	1,635	.....	3,566	14,690	8
6. 2019.....	21,978	.....	21,978	15,102	.....	63	.....	1,847	.....	4,162	17,012	22
7. 2020.....	23,968	.....	23,968	15,239	.....	61	.....	1,974	.....	4,544	17,274	11,928
8. 2021.....	26,321	.....	26,321	22,557	.....	67	.....	2,666	.....	7,235	25,289	14,960
9. 2022.....	30,203	.....	30,203	27,387	.....	68	.....	3,088	.....	7,335	30,543	15,134
10. 2023.....	39,047	.....	39,047	30,390	.....	46	.....	3,536	.....	7,906	33,971	16,253
11. 2024	50,088	.....	50,088	30,842	.....	12	.....	3,698	.....	5,657	34,552	16,700
12. Totals	XXX	XXX	XXX	183,689	34	476	3	22,343	.....	47,777	206,470	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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	.....
6. 2019.....	3	.....	.....	.....	2	.....	.....	.....	.....	.....	.....	5	1
7. 2020.....	2	.....	.....	.....	2	.....	.....	.....	.....	.....	.....	5	1
8. 2021.....	6	.....	11	.....	7	.....	.....	.....	1	.....	125	25	1
9. 2022.....	21	.....	100	.....	20	.....	.....	.....	2	.....	111	143	4
10. 2023.....	42	.....	(126)	.....	33	.....	1	.....	26	.....	338	(25)	9
11. 2024	3,082	.....	(1,553)	.....	86	.....	42	.....	359	.....	3,855	2,015	790
12. Totals	3,156	.....	(1,568)	.....	150	.....	43	.....	388	.....	4,429	2,169	806

	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.....	9,526	.....	9,526	82.2	.....	82.2	.....	.....	.....	.....	.....
3. 2016.....	11,240	.....	11,240	83.1	(5.3)	83.1	.....	.....	.....	.....	.....
4. 2017.....	12,412	37	12,376	79.5	76.7	79.6	.....	.....	.....	.....	.....
5. 2018.....	14,691	.....	14,691	78.6	.....	78.6	.....	.....	.....	1	.....
6. 2019.....	17,017	.....	17,017	77.4	.....	77.4	.....	.....	.....	3	3
7. 2020.....	17,279	.....	17,279	72.1	.....	72.1	.....	.....	.....	2	3
8. 2021.....	25,314	.....	25,314	96.2	.....	96.2	.....	.....	.....	17	8
9. 2022.....	30,686	.....	30,686	101.6	.....	101.6	.....	.....	.....	121	22
10. 2023.....	33,946	.....	33,946	86.9	.....	86.9	.....	.....	.....	(84)	59
11. 2024	36,567	.....	36,567	73.0	.....	73.0	.....	.....	.....	1,529	486
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	XXX	1,588	581

Schedule P - Part 1K - Fidelity/Surety

N O N E

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

N O N E

Schedule P - Part 1M - International

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE P - PART 1T - WARRANTY

(\$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 (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	1		1										
12. Totals	XXX	XXX	XXX									XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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													

	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.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9. 2022.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10. 2023.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. 2024				16.8			16.8				
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE P - PART 1U - PET INSURANCE PLANS

(\$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 (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.....												XXX.....	
11. 2024												XXX	
12. Totals	XXX	XXX	XXX									XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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													

	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		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

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

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

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

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

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

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

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

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	XX	XX							
8. 2021.....	XXX	XXX	XXX	XX	XX							
9. 2022.....	XXX	XXX	XXX	XXX	XXX							
10. 2023.....	XXX	XXX	XXX	XXX	XXX							XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
											12. Totals	

NONE**SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)**

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	XX	XX							
8. 2021.....	XXX	XXX	XXX	XX	XX							
9. 2022.....	XXX	XXX	XXX	XXX	XXX							
10. 2023.....	XXX	XXX	XXX	XXX	XXX							XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
											12. Totals	

NONE**SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

1. Prior.....	26	23	23	22	22	22	22	21	21	21		
2. 2015.....	43	44	41	41	40	40	40	40	40	40		
3. 2016.....	XXX	57	59	61	59	59	59	60	60	60		
4. 2017.....	XXX	XXX	57	63	60	60	60	58	58	58		
5. 2018.....	XXX	XXX	XXX	49	53	53	51	50	50	51		
6. 2019.....	XXX	XXX	XXX	XXX	80	76	79	79	78	78		(1)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	87	83	80	84	86	2	6
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	93	88	92	91	(1)	3
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	128	138	142	142	4	14
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	104	105		XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	140	XXX	XXX	
											12. Totals	6
												22

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

1. Prior.....	4	6	22	20	20	20	20	20	20	20		
2. 2015.....	3	3	3	3	3	3	3	3	3	3		
3. 2016.....	XXX											
4. 2017.....	XXX	XXX	7	6	6	6	6	6	6	6		
5. 2018.....	XXX	XXX	XXX	77	76	76	76	76	76	76		
6. 2019.....	XXX	XXX	XXX	XXX	1							
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1						
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	14	10	10	10		
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13				(13)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18		(17)	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	99	XXX	XXX
											12. Totals	(18)
												(13)

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
**SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....	1				1							
2. 2015.....	163	161	160	160	160	160	160	160	160	160		
3. 2016.....	XXX	200	195	193	193	192	192	192	192	192		
4. 2017.....	XXX	XXX	252	252	253	253	253	253	253	253		
5. 2018.....	XXX	XXX	XXX	264	269	266	267	267	267	267		
6. 2019.....	XXX	XXX	XXX	XXX	228	226	227	226	227	227		
7. 2020.....	XXX	XXX	XXX	XXX	XXX	350	347	345	345	345		
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	304	302	304	305	1	3
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	510	505	508	3	(1)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	413	416	3	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	560	XXX	XXX
											12. Totals	7
												2

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	(15)	(23)	(34)	(28)	120	115	109	105	104	101	(3)	(4)
2. 2015.....	8,447	8,422	8,409	8,396	8,410	8,405	8,404	8,402	8,399	8,399		(3)
3. 2016.....	XXX	10,079	9,931	9,941	9,931	9,944	9,945	9,943	9,939	9,939		(4)
4. 2017.....	XXX	XXX	10,869	10,881	10,902	10,888	10,909	10,908	10,903	10,904	1	(4)
5. 2018.....	XXX	XXX	XXX	13,080	13,039	13,046	13,033	13,062	13,058	13,056	(2)	(6)
6. 2019.....	XXX	XXX	XXX	XXX	15,237	15,083	15,132	15,126	15,165	15,170	5	44
7. 2020.....	XXX	XXX	XXX	XXX	XXX	15,273	15,224	15,274	15,261	15,305	44	30
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	23,328	22,638	22,663	22,647	(15)	9
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26,879	27,416	27,596	180	716
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29,926	30,385	459	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	32,511	XXX	XXX	
											12. Totals	668
												778

SCHEDULE P - PART 2K - FIDELITY/SURETY

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	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XXX	XX	XX	XX					
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

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

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	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XXX	XX	XX	XX					
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

SCHEDULE P - PART 2M - INTERNATIONAL

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	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XXX	XX	XX	XX					
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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

**SCHEDULE P - PART 2N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

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												

**SCHEDULE P - PART 2O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

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	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX											
10. 2023.....	XXX				XXX							
11. 2024	XXX		XXX	XXX								
12. Totals												

**SCHEDULE P - PART 2P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

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	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX											
10. 2023.....	XXX				XXX							
11. 2024	XXX		XXX	XXX								
12. Totals												

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE P - PART 2R - SECTION 1 - PRODUCTS 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	XX								
7. 2020.....	XXX	XXX	XXX	XX	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX							
9. 2022.....	XXX	XXX	XXX	XXX	XXX							
10. 2023.....	XXX	XXX	XXX	XXX	XXX							XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
											12. Totals	

SCHEDULE P - PART 2R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

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	XX	XX							
8. 2021.....	XXX	XXX	XXX	XX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XX	XX					
10. 2023.....	XXX					XXX	XXX	XXX	XXX	XXX	XXX					XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
											12. Totals	

SCHEDULE P - PART 2S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

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	XX	XX							
8. 2021.....	XXX	XXX	XXX	XX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XX	XX					
10. 2023.....	XXX					XXX	XXX	XXX	XXX	XXX	XXX					XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
											12. Totals	

SCHEDULE P - PART 2T - WARRANTY

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	XX	XX							
8. 2021.....	XXX	XXX	XXX	XX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XX	XX	XX	XX					
10. 2023.....	XXX					XXX	XXX	XXX	XXX	XXX	XXX					XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
											12. Totals	

SCHEDULE P - PART 2U - PET INSURANCE PLANS

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	XX	XX							
8. 2021.....	XXX	XXX	XXX	XX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XX	XX	XX	XX					
10. 2023.....	XXX					XXX	XXX	XXX	XXX	XXX	XXX					XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
											12. Totals	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

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

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

1. Prior.....000.....	2,463	3,567	3,994	4,194	4,291	4,347	4,373	4,406	4,420	701	33
2. 2015.....6,400.....10,935.....	12,669	13,610	13,987	14,107	14,187	14,241	14,257	14,263	14,274	1,524	1,524
3. 2016.....XXX.....7,456.....	12,612	14,686	15,708	16,075	16,311	16,399	16,439	16,453	16,453	3,087	1,788
4. 2017.....XXX.....XXX.....8,011.....	13,742	16,126	17,118	17,602	17,810	17,927	17,966	17,966	17,966	3,246	1,899
5. 2018.....XXX.....XXX.....XXX.....9,412.....	16,365	19,025	20,359	20,932	21,196	21,309	21,309	21,309	21,309	3,661	2,228
6. 2019.....XXX.....XXX.....XXX.....10,991.....	18,673	21,908	23,394	24,016	24,243	24,243	24,243	24,243	24,243	3,983	2,564
7. 2020.....XXX.....XXX.....XXX.....XXX.....9,590.....	16,889	19,864	21,198	21,198	21,748	21,748	21,748	21,748	21,748	3,289	2,331
8. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....	12,208	22,851	27,226	27,226	28,960	28,960	28,960	28,960	28,960	4,061	3,019
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....	12,913	24,774	29,060	29,060	3,926	3,926	3,926	3,926	3,926	2,569	2,569
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....	15,879	29,031	4,150	4,150	2,898	2,898	2,898	2,898	2,898		
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....	XXX	18,157	3,271	3,091							

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

1. Prior.....000.....	56	67	74	92	102	103	109	109	109	109	3
2. 2015.....21.....50.....	70	84	85	86	86	86	86	86	86	86	6
3. 2016.....XXX.....25.....	80	129	160	172	176	176	176	176	176	176	3
4. 2017.....XXX.....XXX.....27.....	66	98	116	128	134	134	135	135	136	136	3
5. 2018.....XXX.....XXX.....XXX.....29.....	91	136	166	191	191	191	207	207	208	208	4
6. 2019.....XXX.....XXX.....XXX.....32.....	32	106	162	188	188	188	202	202	204	204	4
7. 2020.....XXX.....XXX.....XXX.....XXX.....28.....	28	81	81	98	98	115	123	123	123	123	3
8. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....	XXX	18	51	51	97	97	145	145	145	145	3
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....	XXX	29	29	106	106	106	182	182	182	182	7
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....	XXX	32	32	114	114	114	6	6	6	6	5
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....	XXX	35	4	3							

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

1. Prior.....000.....	1	1	2	2	2	2	2	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.....											
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....											
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....											
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....											

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....000.....											
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.....											
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....											
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....											
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....											

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

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

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

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

1. Prior.....000.....												
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.....												

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

1. Prior.....000.....											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.....
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....

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

1. Prior.....000.....	11	16	20	20	20	20	21	21	21	21	21	21
2. 2015.....18	29	36	40	40	40	40	40	40	40	40	40	40
3. 2016.....XXX.....	22	41	45	54	59	59	59	59	60	60	60	60
4. 2017.....XXX.....XXX.....	27	41	54	57	58	58	58	58	58	58	58	58
5. 2018.....XXX.....XXX.....XXX.....	24	40	45	47	50	50	50	50	50	50	50	50
6. 2019.....XXX.....XXX.....XXX.....XXX.....	34	55	68	73	73	76	76	76	76	76	76	76
7. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....	40	59	72	72	79	79	85	85	85	85	85	85
8. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....	44	67	79	79	87	87	87	87	87	87	87	87
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....	65	105	122	122	122	122	122	122	122	122	122	122
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....	56	81	81	81	81	81	81	81	81	81	81	81
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....	73	10	10	10	10	10	10	10	10	10	10	10

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

1. Prior.....000.....	20	20	20	20	20	20	20	20	20	20	20	20
2. 2015.....3	3	3	3	3	3	3	3	3	3	3	3	3
3. 2016.....XXX.....	6	6	6	6	6	6	6	6	6	6	6	6
4. 2017.....XXX.....XXX.....	46	76	76	76	76	76	76	76	76	76	76	76
5. 2018.....XXX.....XXX.....XXX.....	XXX.....											
6. 2019.....XXX.....XXX.....XXX.....XXX.....	XXX.....											
7. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....	XXX.....											
8. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....	XXX.....											
9. 2022.....XXX.....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.....											

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior.....	000.....				1.....						XXX.....	.XXX.....
2. 2015.....	146.....	160.....	160.....	160.....	160.....	160.....	160.....	160.....	160.....	160.....	XXX.....	.XXX.....
3. 2016.....	XXX.....	182.....	194.....	193.....	193.....	192.....	192.....	192.....	192.....	192.....	XXX.....	.XXX.....
4. 2017.....	XXX.....	XXX.....	234.....	251.....	253.....	253.....	253.....	253.....	253.....	253.....	XXX.....	.XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....	239.....	267.....	265.....	267.....	267.....	267.....	267.....	XXX.....	.XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	206.....	225.....	226.....	226.....	227.....	227.....	XXX.....	.XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	315.....	345.....	345.....	345.....	345.....	XXX.....	.XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	273.....	301.....	304.....	305.....	XXX.....	.XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	430.....	502.....	507.....	XXX.....	.XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	370.....	413.....	XXX.....	.XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	489.....	XXX.....	XXX.....

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	000.....	(13).....	(24).....	(30).....	119.....	114.....	109.....	105.....	103.....	101.....	13.....	
2. 2015.....	8,392.....	8,431.....	8,413.....	8,409.....	8,406.....	8,403.....	8,400.....	8,398.....	8,398.....	8,399.....		
3. 2016.....	XXX.....	10,015.....	9,969.....	9,947.....	9,944.....	9,941.....	9,939.....	9,938.....	9,938.....	9,939.....	1.....	1.....
4. 2017.....	XXX.....	XXX.....	10,843.....	10,917.....	10,898.....	10,895.....	10,896.....	10,900.....	10,901.....	10,904.....	4.....	1.....
5. 2018.....	XXX.....	XXX.....	XXX.....	12,959.....	13,084.....	13,049.....	13,046.....	13,049.....	13,051.....	13,055.....	7.....	1.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	15,207.....	15,133.....	15,118.....	15,137.....	15,151.....	15,165.....	19.....	2.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	15,024.....	15,271.....	15,259.....	15,282.....	15,300.....	8,987.....	2,941.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	21,978.....	22,675.....	22,600.....	22,623.....	10,917.....	4,041.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	25,663.....	27,440.....	27,455.....	10,980.....	4,149.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	28,972.....	30,436.....	11,741.....	4,503.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	30,854.....	11,453.....	4,457.....

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	000.....										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.....	XX						XXX.....	.XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX					XXX.....	.XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX	XX				XXX.....	.XXX.....
10. 2023.....	XXX.....		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)

1. Prior.....	000.....										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.....	XX						XXX.....	.XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX	XX				XXX.....	.XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX	XX	XX			XXX.....	.XXX.....
10. 2023.....	XXX.....		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

1. Prior.....	000.....										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.....	XX						XXX.....	.XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX	XX	XX			XXX.....	.XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX	XX	XX	XX		XXX.....	.XXX.....
10. 2023.....	XXX.....		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 3N - Reinsurance - Nonproportional Assumed Property
N O N E

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

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines
N O N E

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence
N O N E

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

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty
N O N E

Schedule P - Part 3T - Warranty
N O N E

Schedule P - Part 3U - Pet Insurance Plans
N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

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

1. Prior.....	874	377	173						2	4
2. 2015.....	1,749	531	218	200					2	1
3. 2016.....	XXX.....	2,099	625	263	242				2	1
4. 2017.....	XXX.....	XXX.....	2,568	730	316	276	(2)	2	1	
5. 2018.....	XXX.....	XXX.....	XXX.....	3,122	892	393	350	2	1	
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	3,486	1,061	404	431		
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,869	1,143	561	.575	
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4,168	1,386	.732	.578
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4,941	1,721	.741
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	7,358	2,044
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,824

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

1. Prior.....	8	3	1							
2. 2015.....	18	5	2	1						
3. 2016.....	XXX.....	21	7	3	1					
4. 2017.....	XXX.....	XXX.....	22	7	3	1				
5. 2018.....	XXX.....	XXX.....	XXX.....	25	9	3	1			
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	.27	9	4	2		
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX	22	8	3	2	
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX	XXX.....	25	9	4	2
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX	XXX.....	XXX.....	.32	12	5
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	48	15
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56

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

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XX.....	XX.....					
8. 2021.....	XXX.....	XXX.....	XX.....	XX.....	XX.....	XX.....				
9. 2022.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....	XX.....	XX.....			
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 4E - COMMERCIAL MULTIPLE PERIL**

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.....	1	
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

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

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

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

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

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

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

1. Prior.....	5	1								
2. 2015.....	9	3	1							
3. 2016.....	XXX.....	9	3	1						
4. 2017.....	XXX.....	XXX.....	10	3	1					
5. 2018.....	XXX.....	XXX.....	XXX.....	12	4	1				
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	14	4	1			
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	17	5	2		
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	19	5	2	1
9. 2022.....	XXX.....	19	6	3						
10. 2023.....	XXX.....	20	7							
11. 2024.....	XXX.....	21								

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

1. Prior.....	4	6	2							
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....	1							
5. 2018.....	XXX.....	XXX.....	XXX.....	1						
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	1					
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1				
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4			
9. 2022.....	XXX.....	13								
10. 2023.....	XXX.....	18								
11. 2024.....	XXX.....	22								

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
**SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	1									
2. 2015.....	7	1								
3. 2016.....	XXX.....	8	1							
4. 2017.....	XXX.....	XXX.....	8							
5. 2018.....	XXX.....	XXX.....	XXX.....	9	1					
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	10	1				
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	11	1			
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	11	1		
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	41	1	
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	16	1
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	32

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	(37)	(19)	(14)						4	1
2. 2015.....	(420)	(23)	(12)	(18)				4	4	1
3. 2016.....	XXX.....	(479)	(55)	(15)	(19)			4	4	1
4. 2017.....	XXX.....	XXX.....	(593)	(63)	(16)	(21)		4	4	1
5. 2018.....	XXX.....	XXX.....	XXX.....	(712)	(75)	(21)		(26)	5	1
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	(955)	(90)	(22)	(41)	1	
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(1,055)	(102)	(28)	(40)	
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(1,232)	(118)	19	11
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(1,605)	(108)	100
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(1,792)	(125)
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(1,511)

SCHEDULE P - PART 4K - FIDELITY/SURETY

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.....									
10. 2023.....	XXX.....									
11. 2024.....	XXX.....									

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

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.....									
10. 2023.....	XXX.....									
11. 2024.....	XXX.....									

SCHEDULE P - PART 4M - INTERNATIONAL

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.....									
10. 2023.....	XXX.....									
11. 2024.....	XXX.....									

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

**SCHEDULE P - PART 4N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

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.....	XX.....	XX.....						
6. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
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 4O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

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

**SCHEDULE P - PART 4P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE P - PART 4R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

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

SCHEDULE P - PART 4R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

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

SCHEDULE P - PART 4S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

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

SCHEDULE P - PART 4T - WARRANTY

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.....									
10. 2023.....	XXX.....									
11. 2024.....	XXX.....									

SCHEDULE P - PART 4U - PET INSURANCE PLANS

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

**SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 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	XX							
6. 2019	XXX	XXX	XX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

SECTION 3

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										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XX							
6. 2019	XXX	XXX	XX	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	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
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	613	125	44	15	506	6	3	1		
2. 2015	1,956	2,574	2,671	2,707	2,721	2,724	2,731	2,733	2,733	2,734
3. 2016	XXX	2,222	2,902	3,016	3,059	3,070	3,080	3,085	3,087	3,087
4. 2017	XXX	XXX	2,321	3,049	3,172	3,211	3,231	3,240	3,245	3,246
5. 2018	XXX	XXX	XXX	2,585	3,440	3,574	3,627	3,646	3,657	3,661
6. 2019	XXX	XXX	XXX	XXX	2,844	3,732	3,892	3,953	3,975	3,983
7. 2020	XXX	XXX	XXX	XXX	XXX	2,282	3,071	3,218	3,271	3,289
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	2,659	3,783	3,994	4,061
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,565	3,727	3,926
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,961	4,150
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,271

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	201	78	37	21	13	7	3	2	2	1
2. 2015	740	149	61	26	13	10	3	1	1	
3. 2016	XXX	812	176	70	29	18	9	3	2	1
4. 2017	XXX	XXX	879	191	75	37	18	9	4	2
5. 2018	XXX	XXX	XXX	1,019	216	91	39	20	10	5
6. 2019	XXX	XXX	XXX	XXX	1,132	247	100	40	19	10
7. 2020	XXX	XXX	XXX	XXX	XXX	1,011	223	.87	34	16
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	1,396	299	107	40
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,374	285	100
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,449	312
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,722

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	172	24	9	1	851	1	2	(1)		
2. 2015	4,032	4,224	4,247	4,254	4,257	4,258	4,258	4,258	4,258	4,258
3. 2016	XXX	4,616	4,836	4,862	4,871	4,874	4,875	4,876	4,876	4,876
4. 2017	XXX	XXX	4,847	5,106	5,135	5,143	5,146	5,147	5,147	5,147
5. 2018	XXX	XXX	XXX	5,534	5,850	5,881	5,890	5,893	5,894	5,895
6. 2019	XXX	XXX	XXX	XXX	6,232	6,507	6,541	6,552	6,555	6,557
7. 2020	XXX	XXX	XXX	XXX	XXX	5,311	5,591	5,623	5,633	5,636
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	6,664	7,062	7,109	7,120
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,131	6,550	6,596
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,908	7,360
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,084

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
**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.....	2									
2. 2015.....	4	6	6	6	6	6	6	6	6	6
3. 2016.....	XXX	5	7	8	8	8	8	8	8	8
4. 2017.....	XXX	XXX	5	7	8	8	8	8	8	8
5. 2018.....	XXX	XXX	XXX	5	7	8	8	8	8	8
6. 2019.....	XXX	XXX	XXX	XXX	5	7	8	8	8	8
7. 2020.....	XXX	XXX	XXX	XXX	XXX	3	5	5	5	6
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	3	5	5	6
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	6	7
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	6
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE P - PART 5D - WORKERS' COMPENSATION**(EXCLUDING EXCESS WORKERS' COMPENSATION)****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.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

SECTION 3

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.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	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	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL
SECTION 1

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

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

SECTION 3

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.....										
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 5F - Medical Professional Liability - Occurrence - Section 1A

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE**SECTION 1A**

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

SECTION 2A

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

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior										
2. 2015	6	7	7	7	7	7	7	7	7	7
3. 2016	XXX	8	8	8	8	8	8	8	8	8
4. 2017	XXX	XXX	9	10	10	10	10	9	9	9
5. 2018	XXX	XXX	XXX	9	10	10	10	10	10	10
6. 2019	XXX	XXX	XXX	XXX	10	11	11	10	10	10
7. 2020	XXX	XXX	XXX	XXX	XXX	15	16	16	16	16
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	12	13	13	13
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	19	19
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	13
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 5T - Warranty - Section 1

N O N E

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

**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.....	167	167	167	167	167	167	167	167	167	167	
3. 2016.....	XXX	193	193	193	193	193	193	193	193	193	
4. 2017.....	XXX	XXX	210	210	210	210	210	210	210	210	
5. 2018.....	XXX	XXX	XXX	245	245	245	245	245	245	245	
6. 2019.....	XXX	XXX	XXX	XXX	276	276	276	276	276	276	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	229	229	229	229	229	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	240	240	240	240	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	296	296	296	296	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	375	375	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	460	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	460
13. Earned Premiums (Sch P-Pt. 1)		167	193	210	245	276	229	240	296	375	460
											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	1	1	1	
10. 2023.....	XXX	XXX	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	
13. Earned Premiums (Sch P-Pt. 1)											XXX
								1			

**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	X	XXX							
6. 2019.....	XXX	XXX	X	XXX	X						
7. 2020.....	XXX	XXX	X	XXX	X	X					
8. 2021.....	XXX	XXX	X	XXX	X	X	X				
9. 2022.....	XXX	XXX	X	XXX	X	X	X	XXX			
10. 2023.....	XXX	XXX	X	XXX	X	X	X	XXX			
11. 2024.....	XXX	XXX	X	XXX	X	X	X	XXX			
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch 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	X	XXX							
6. 2019.....	XXX	XXX	X	XXX	X						
7. 2020.....	XXX	XXX	X	XXX	X	X					
8. 2021.....	XXX	XXX	X	XXX	X	X	X				
9. 2022.....	XXX	XXX	X	XXX	X	X	X	XXX			
10. 2023.....	XXX	XXX	X	XXX	X	X	X	XXX			
11. 2024.....	XXX	XXX	X	XXX	X	X	X	XXX			
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

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

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

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 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.....	133	133	133	133	133	133	133	133	133	133	
3. 2016.....	XXX	139	139	139	139	139	139	139	139	139	
4. 2017.....	XXX	XXX	146	146	146	146	146	146	146	146	
5. 2018.....	XXX	XXX	XXX	158	158	158	158	158	158	158	
6. 2019.....	XXX	XXX	XXX	XXX	176	176	176	176	176	176	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	195	195	195	195	195	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	226	226	226	226	226	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	246	246	246	246	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	270	270	270	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	298	298	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	298
13. Earned Premiums (Sch P-Pt. 1)	133	139	146	158	176	195	226	246	270	298	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.....	2	2	2	2	2	2	2	2	2	2	
3. 2016.....	XXX	2	2	2	2	2	2	2	2	2	
4. 2017.....	XXX	XXX	3	3	3	3	3	3	3	3	
5. 2018.....	XXX	XXX	XXX	4	4	4	4	4	4	4	
6. 2019.....	XXX	XXX	XXX	XXX	4	4	4	4	4	4	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	2	2	2	2	2	
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				
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
13. Earned Premiums (Sch P-Pt. 1)	2	2	3	4	4	2					XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

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

SECTION 1B

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

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 6R - Products Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 6R - Products Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 7A - Section 1 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 2 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 3 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 1 - Reinsurance Loss Sensitive Contracts

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
SCHEDULE P INTERROGATORIES

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

1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
 If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:

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

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

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

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

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

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior		
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 [X] No []

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

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

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

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

5. What were the net premiums in force at the end of the year for:

(in thousands of dollars) 5.1 Fidelity
 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? Yes [] No [X]

7.2 (An extended statement may be attached.)

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

Allocated by States and Territories

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						
29. Nevada	N					
30. New Hampshire	NH					
31. New Jersey	NJ					
32. New Mexico	NM					
33. New York	NY					
34. North Carolina	NC					
35. North Dakota	ND					
36. Ohio	OH					
37. Oklahoma	OK					
38. Oregon	OR					
39. Pennsylvania	PA					
40. Rhode Island	RI					
41. South Carolina	SC					
42. South Dakota	SD					
43. Tennessee	TN					
44. Texas	TX					
45. Utah	UT					
46. Vermont	VT					
47. Virginia	VA					
48. Washington	WA					
49. West Virginia	WV					
50. Wisconsin	WI					
51. Wyoming	WY					
52. American Samoa	AS					
53. Guam	GU					
54. Puerto Rico	PR					
55. U.S. Virgin Islands	VI					
56. Northern Mariana Islands	MP					
57. Canada	CAN					
58. Aggregate Other Alien	OT					
59. Total						

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(es)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.....	.....	00000	34-0963169	.....	0000080661	NYSE	The Progressive Corporation .....	.. OH....	.... UIP....	Board, Management	Board	.....	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	27804	95-2676519	.....	.....	.....	Drive Insurance Company .....	.. OH....	.... IA....	The Progressive Corporation	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 135....
.....	.....	00000	83-0371533	.....	.....	.....	Progressive Agency Holdings, Inc. .....	.. DE....	.... NIA....	The Progressive Corporation	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	11410	68-0004572	.....	.....	.....	Drive New Jersey Insurance Company .....	.. NJ....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	12879	20-4093467	.....	.....	.....	Progressive Commercial Casualty Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	24252	34-1094197	.....	.....	.....	Progressive American Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	17350	31-1193845	.....	.....	.....	Progressive Bayside Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	24260	34-6513736	.....	.....	.....	Progressive Casualty Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	34-1576555	.....	.....	.....	PC Investment Company .....	.. DE....	.... NIA....	Progressive Casualty Insurance Company	Ownership...	100.000	The Progressive Corporation .....	.... YES....	.... 13....
.0155	Progressive Insurance Group	29203	74-1082840	.....	.....	.....	Progressive County Mutual Insurance Company .....	.. TX....	.... IA....	Progressive Casualty Insurance Company	Management...	.....	The Progressive Corporation .....	.... NO....	.... 123....
.0155	Progressive Insurance Group	42412	34-1374634	.....	.....	.....	Progressive Gulf Insurance Company .....	.. OH....	.... IA....	Progressive Casualty Insurance Company	Ownership...	100.000	The Progressive Corporation .....	.... YES....	.... 13....
.0155	Progressive Insurance Group	32786	34-1172685	.....	.....	.....	Progressive Specialty Insurance Company .....	.. OH....	.... IA....	Progressive Casualty Insurance Company	Ownership...	100.000	The Progressive Corporation .....	.... YES....	.... 13....
.....	.....	00000	.....	.....	.....	.....	Trussville/Cahaba, AL , LLC .....	.. OH....	.... NIA....	Progressive Specialty Insurance Company	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	42994	39-1453002	.....	.....	.....	Progressive Classic Insurance Company .....	.. WI....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	10067	99-0311930	.....	.....	.....	Progressive Hawaii Insurance Corp. .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	10187	34-1787734	.....	.....	.....	Progressive Michigan Insurance Company .....	.. MI....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	35190	99-0935623	.....	.....	.....	Progressive Mountain Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	38628	34-1318335	.....	.....	.....	Progressive Northern Insurance Company .....	.. WI....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	42919	91-1187829	.....	.....	.....	Progressive Northwestern Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	37834	34-1287020	.....	.....	.....	Progressive Preferred Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	10050	72-1269745	.....	.....	.....	Progressive Security Insurance Company .....	.. LA....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	38784	59-1951700	.....	.....	.....	Progressive Southeastern Insurance Company .....	.. IN....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	12302	20-3187886	.....	.....	.....	Progressive Freedom Insurance Company .....	.. OH....	.... IA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	27-2393886	.....	.....	.....	Progressive Commercial Advantage Agency, Inc. .....	.. OH....	.... NIA....	Progressive Agency Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	20-1583033	.....	.....	.....	Progressive Commercial Holdings, Inc. .....	.. DE....	.... NIA....	The Progressive Corporation	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	10194	59-3213819	.....	.....	.....	Artisan and Truckers Casualty Company .....	.. WI....	.... IA....	Progressive Commercial Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	10243	06-0281045	.....	.....	.....	National Continental Insurance Company .....	.. NY....	.... IA....	Progressive Commercial Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	10193	59-3213719	.....	.....	.....	Progressive Express Insurance Company .....	.. OH....	.... IA....	Progressive Commercial Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	11770	36-3298008	.....	.....	.....	United Financial Casualty Company .....	.. OH....	.... IA....	Progressive Commercial Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	15643	47-1849658	.....	.....	.....	Blue Hill Specialty Insurance Company Inc. .....	.. IL....	.... IA....	Progressive Commercial Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	35-0160330	.....	.....	.....	Protective Insurance Corporation .....	.. IN....	.... NIA....	Progressive Commercial Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	12416	35-6021485	.....	.....	.....	Protective Insurance Company .....	.. IN....	.... IA....	Protective Insurance Corporation	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	40460	35-1524574	.....	.....	.....	Sagamore Insurance Company .....	.. IN....	.... IA....	Protective Insurance Company	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	13149	26-1865258	.....	.....	.....	Protective Specialty Insurance Company .....	.. IN....	.... IA....	Protective Insurance Company	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	26-0327941	.....	.....	.....	B&L Brokerage Services, Inc. .....	.. IN....	.... NIA....	Protective Insurance Corporation	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	45-3337116	.....	.....	.....	B&L Management, Inc. .....	.. DE....	.... NIA....	Protective Insurance Corporation	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	35-1864904	.....	.....	.....	B&L Insurance Ltd. .....	.. BMU....	.... IA....	Protective Insurance Corporation	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	38-3564766	.....	.....	.....	Transport Specialty Insurance Agency, Inc. .....	.. MI....	.... NIA....	B&L Brokerage Services, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	83-0371538	.....	.....	.....	Progressive Direct Holdings, Inc. .....	.. DE....	.... UDP....	The Progressive Corporation	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	44180	23-2599971	.....	.....	.....	Mountain Laurel Assurance Company .....	.. OH....	.... IA....	Progressive Direct Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	11851	62-0484104	.....	.....	.....	Progressive Advanced Insurance Company .....	.. OH....	.... IA....	Progressive Direct Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	58-1772717	.....	.....	.....	Progressive Auto Pro Insurance Agency, Inc. .....	.. FL....	.... NIA....	Progressive Direct Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	44288	62-1444848	.....	.....	.....	Progressive Choice Insurance Company .....	.. OH....	.... RE....	Progressive Direct Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	16322	34-1524319	.....	.....	.....	Progressive Direct Insurance Company .....	.. OH....	.... IA....	Progressive Direct Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.....	.....	00000	.....	.....	.....	.....	Gadsden, AL , LLC .....	.. OH....	.... NIA....	Progressive Direct Insurance Company	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	14800	22-2404709	.....	.....	.....	Progressive Garden State Insurance Company .....	.. NJ....	.... IA....	Progressive Direct Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	37605	33-0350911	.....	.....	.....	Progressive Marathon Insurance Company .....	.. MI....	.... IA....	Progressive Direct Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....
.0155	Progressive Insurance Group	24279	34-0472535	.....	.....	.....	Progressive Max Insurance Company .....	.. OH....	.... IA....	Progressive Direct Holdings, Inc.	Ownership...	100.000	The Progressive Corporation .....	.... NO....	.... 13....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0155	Progressive Insurance Group	44695	86-0686869			Progressive Paloverde Insurance Company .....	.. IN.....IA.....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
.0155	Progressive Insurance Group	21735	36-3789786			Progressive Premier Insurance Company of Illinois .....	.. OH.....IA.....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
.0155	Progressive Insurance Group	10192	59-3213815			Progressive Select Insurance Company .....	.. OH.....IA.....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	34-1804869			Progressive Advantage Agency, Inc. .....	.. OH.....NIA.....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
.0155	Progressive Insurance Group	21727	36-3789787			Progressive Universal Insurance Company .....	.. WI.....IA.....	Progressive Direct Holdings, Inc.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
.0155	Progressive Insurance Group	16816	84-4920049			Progressive Life Insurance Company .....	.. OH.....IA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	99-0311966			Garden Sun Insurance Services, Inc. .....	.. HI.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	95-2706008			Pacific Motor Club .....	.. CA.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	11-3203413			PROGNY Agency, Inc. .....	.. NY.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	34-1574447			Progressive Adjusting Company, Inc. .....	.. OH.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	13-3673368			Progressive Capital Management Corp. .....	.. NY.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	34-1378861			Progressive Investment Company, Inc. .....	.. DE.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	34-6530101			Progressive Premium Budget, Inc. .....	.. OH.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	34-1574448			Progressive RSC, Inc. .....	.. OH.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	84-3633213			358 Ventures, Inc. .....	.. OH.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	20-2702408			Progressive Vehicle Service Company .....	.. OH.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	51-0295493			Village Transport Corp. .....	.. DE.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	34-1324270			Wilson Mills Land Co. .....	.. OH.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	87-4036792			Progressive Next Inc. .....	.. DE.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	59-3491541			ARX Holding Corp. .....	.. DE.....NIA.....	The Progressive Corporation	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 136	
.0155	Progressive Insurance Group	11072	56-2512990			ASI Home Insurance Corp. .....	.. FL.....IA.....	ARX Holding Corp.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
.0155	Progressive Insurance Group	13142	26-1996532			ASI Preferred Insurance Corp. .....	.. FL.....IA.....	ARX Holding Corp.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
.0155	Progressive Insurance Group	10872	59-3459912			American Strategic Insurance Corp. .....	.. IN.....IA.....	ARX Holding Corp.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
.0155	Progressive Insurance Group	11059	75-2904629			ASI Lloyds .....	.. TX.....IA.....	ASI Lloyds, Inc.	Management.....		The Progressive Corporation .....	.. NO.....	.. 134	
.0155	Progressive Insurance Group	12196	20-1284676			ASI Assurance Corp. .....	.. FL.....IA.....	ARX Holding Corp.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
.0155	Progressive Insurance Group	14042	27-3421622			ASI Select Insurance Corp. .....	.. IN.....IA.....	ARX Holding Corp.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	59-3621835			ASI Lloyds, Inc. .....	.. TX.....NIA.....	ARX Holding Corp.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	11-3644072			Sunshine Security Insurance Agency, Inc. .....	.. FL.....NIA.....	ARX Holding Corp.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
.0155	Progressive Insurance Group	13038	26-1142659			ASI Underwriters Corp. .....	.. FL.....NIA.....	ARX Holding Corp.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	81-1112584			Progressive Property Insurance Company .....	.. LA.....IA.....	ARX Holding Corp.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
		00000	47-4504370			ASI Select Auto Insurance Corp. .....	.. CA.....NIA.....	ARX Holding Corp.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	
						PropertyPlus Insurance Agency, Inc. .....	.. DE.....NIA.....	ARX Holding Corp.	Ownership.....	100.000	The Progressive Corporation .....	.. NO.....	.. 13	

Asterisk	Explanation
1	Schedule Y Part 1A is a common schedule for all companies of The Progressive Corporation, however column 10 requires specific relationship information relative to the reporting entity.
2	Progressive County Mutual Insurance Company is a Texas county mutual insurance company that is managed, but not owned by Progressive Casualty Insurance Company.
3	None of the companies that are part of The Progressive Corporation are Federally chartered or insured institutions and therefore, do not have Federal RSSD numbers.
4	ASI Lloyds is a Texas Lloyds insurance company that is managed, but not owned by ASI Lloyds, Inc.
5	Effective July 18, 2023, Progressive West Insurance Company changed its name to Drive Insurance Company.
6	Effective November 19, 2024 ARK Royal Underwriters, LLC was administratively dissolved.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)	
34-0963169	.....	The Progressive Corporation .....	.....	(26,000,000)	.....	.....	2,285,230,621	.....	.....	.....	2,259,230,621	.....
83-0371533	.....	Progressive Agency Holdings, Inc.	2,126,000,000	(5,000,000)	.....	.....	.....	1,875,036,089	*	.....	.....	2,121,000,000	.....
24260	34-6513736	Progressive Casualty Insurance Company ..	.....	(1,014,000,000)	(553,791,488)	.....	8,272,658,587	.....	.....	.....	8,579,903,188	.....	(9,099,696,429)
24252	34-1094197	Progressive American Insurance Company ..	.....	.....	.....	.....	(23,186,676)	.....	.....	.....	(23,186,676)	.....	.....
32786	34-1172685	Progressive Specialty Insurance Company ..	.....	(182,000,000)	180,303,068	.....	(79,361,608)	.....	.....	.....	(81,058,540)	.....	.....
38784	59-1951700	Progressive Southeastern Insurance Company .....	.....	(7,000,000)	.....	6,869,309	.....	(11,408,290)	*	.....	.....	(11,538,981)	.....
38628	34-1318335	Progressive Northern Insurance Company ..	.....	(291,000,000)	.....	288,386,940	.....	(135,584,060)	*	.....	.....	(138,197,120)	.....
37834	34-1287020	Progressive Preferred Insurance Company ..	.....	(120,000,000)	.....	118,929,174	.....	(68,514,568)	*	.....	.....	(69,585,394)	.....
42412	34-1374634	Progressive Gulf Insurance Company ..	.....	(42,000,000)	.....	41,466,080	.....	(21,682,755)	*	.....	.....	(22,216,675)	.....
42919	91-1187829	Progressive Northwestern Insurance Company .....	.....	(273,000,000)	.....	270,624,954	.....	(133,215,080)	*	.....	.....	(135,590,126)	.....
42994	39-1453002	Progressive Classic Insurance Company ..	.....	(62,000,000)	.....	61,134,900	.....	(34,232,024)	*	.....	.....	(35,097,124)	.....
17350	31-1193845	Progressive Bayside Insurance Company ..	.....	(5,000,000)	.....	4,921,296	.....	(5,638,221)	*	.....	.....	(5,716,925)	.....
35190	93-0935623	Progressive Mountain Insurance Company ..	.....	.....	5,000,000	.....	(10,164,162)	.....	.....	.....	(5,164,162)	.....	.....
10187	34-1787734	Progressive Michigan Insurance Company ..	.....	(70,000,000)	.....	69,324,391	.....	(45,196,548)	*	.....	.....	(45,872,157)	.....
29203	74-1082840	Progressive County Mutual Insurance Company .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10050	72-1269745	Progressive Security Insurance Company ..	.....	(4,000,000)	.....	3,887,394	.....	(81,098,679)	(1,725,261,437)	.....	.....	(1,806,360,116)	6,763,373,485
11410	68-0004572	Drive New Jersey Insurance Company ..	.....	.....	.....	.....	(91,590,507)	(133,688,496)	.....	.....	.....	(225,391,609)	502,554,868
10067	99-0311930	Progressive Hawaii Insurance Corp. ....	.....	(56,000,000)	.....	55,099,845	.....	(125,753,424)	22,996,215	.....	.....	(102,767,209)	1,247,625,439
12302	20-3187886	Progressive Freedom Insurance Company ..	.....	.....	.....	.....	(88,173,816)	.....	.....	.....	.....	(89,073,971)	.....
12879	20-4093467	Progressive Commercial Casualty Company ..	.....	.....	.....	.....	(4,477,706)	.....	.....	.....	.....	(4,477,706)	.....
83-0371538	.....	Progressive Direct Holdings, Inc.	1,061,000,000	(30,000,000)	.....	.....	.....	(102,686)	.....	.....	.....	(102,686)	.....
16322	34-1524319	Progressive Direct Insurance Company ..	.....	(903,000,000)	.....	897,368,031	.....	(5,374,172,910)	815,660,706	*	.....	.....	(4,564,144,173)
24279	34-0472535	Progressive Max Insurance Company ..	.....	(61,000,000)	.....	60,149,053	.....	(51,568,720)	616	*	.....	.....	(52,419,051)
44695	86-0686869	Progressive Paloverde Insurance Company ..	.....	.....	10,000,000	.....	.....	(6,632,381)	.....	*	.....	3,367,619	.....
21735	36-3789786	Progressive Premier Insurance Company of Illinois .....	.....	.....	5,000,000	.....	.....	(16,771,841)	.....	*	.....	(11,771,841)	.....
21727	36-3789787	Progressive Universal Insurance Company ..	.....	(20,000,000)	.....	19,649,652	.....	(39,100,254)	.....	*	.....	(39,450,602)	.....
37605	33-0350911	Progressive Marathon Insurance Company ..	.....	(40,000,000)	.....	39,668,940	.....	(51,570,712)	.....	*	.....	(51,901,772)	.....
10192	59-3213815	Progressive Select Insurance Company ..	.....	.....	3,000,000	.....	(1,350,217,606)	(791,157,607)	.....	.....	(2,138,375,213)	4,274,660,070	
44288	62-1444848	Progressive Choice Insurance Company ..	.....	.....	.....	.....	(3,443,470)	.....	.....	.....	.....	(3,443,470)	.....
11851	62-0484104	Progressive Advanced Insurance Company ..	.....	(15,000,000)	.....	14,751,512	.....	(38,636,727)	.....	*	.....	(38,885,215)	.....
14800	22-2404709	Progressive Garden State Insurance Company .....	.....	.....	12,000,000	.....	.....	(272,822,819)	(24,503,099)	.....	.....	(285,325,918)	1,087,323,090
44180	23-2599971	Mountain Laurel Assurance Company .....	.....	(22,000,000)	.....	21,560,903	.....	(177,936,872)	.....	.....	.....	(178,375,969)	.....
20-1583033	.....	Progressive Commercial Holdings, Inc.	480,000,000	.....	.....	.....	.....	.....	.....	.....	480,000,000	.....	.....
11770	36-3298008	United Financial Casualty Company .....	.....	(445,000,000)	.....	440,731,328	.....	(917,973,570)	552,019,861	.....	.....	(370,222,381)	(4,532,535,720)
10243	06-0281045	National Continental Insurance Company ..	.....	.....	.....	.....	(9,591,499)	(703,717)	.....	.....	(10,295,216)	5,133,754	
10194	59-3213819	Artisan and Truckers Casualty Company ..	.....	.....	.....	.....	(223,174,201)	(176,671,034)	.....	.....	(399,845,235)	1,573,872,198	
10193	59-3213719	Progressive Express Insurance Company ..	.....	(35,000,000)	.....	34,434,236	.....	(202,799,649)	(338,193,374)	.....	.....	(541,558,787)	2,044,102,103
15643	47-1849658	Blue Hill Specialty Insurance Company Inc.	.....	.....	.....	.....	(52,264,615)	(37,155,453)	.....	.....	(89,420,068)	914,561,419	
34-1576555	.....	PC Investment Company .....	.....	.....	.....	.....	438,766	.....	.....	.....	438,766	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
.....	34-1378861	Progressive Investment Company, Inc. ....	.....	.....	(2,075,469,518)	.....	367,955	.....	.....	.....	(2,075,101,563)	.....
.....	13-3673368	Progressive Capital Management Corp. ....	.....	.....	.....	.....	15,125,023	.....	.....	.....	15,125,023	.....
.....	34-1804869	Progressive Advantage Agency, Inc. ....	.....	.....	.....	.....	(413,348,047)	.....	.....	.....	(413,348,047)	.....
.....	27-2393886	Progressive Commercial Advantage Agency, Inc. ....	.....	.....	.....	.....	(1,783,881)	.....	.....	.....	(1,783,881)	.....
.....	34-1574447	Progressive Adjusting Company, Inc. ....	.....	.....	.....	.....	(119,586)	.....	.....	.....	(119,586)	.....
.....	51-0295493	Village Transport Corp. ....	.....	.....	.....	.....	1,117,700	.....	.....	.....	1,117,700	.....
16816	84-4920049	Progressive Life Insurance Company	21,000,000	.....	.....	.....	(7,239,561)	.....	.....	.....	13,760,439	.....
27804	95-2676519	Drive Insurance Company ....	.....	5,000,000	.....	.....	(96,875,486)	(38,369,270)	.....	.....	(130,244,756)	580,997,847
.....	84-3633213	358 Ventures, Inc. ....	.....	.....	.....	.....	(3,184,578)	.....	.....	.....	(3,184,578)	.....
.....	87-4036792	Progressive Next Inc. ....	.....	.....	.....	.....	(14,399,845)	.....	.....	.....	(14,399,845)	.....
.....	59-3491541	ARX Holding Corp. ....	.....	.....	(87,000,000)	.....	(1,156)	.....	.....	.....	(87,001,156)	.....
.....	10872	American Strategic Insurance Corp. ....	.....	95,000,000	.....	.....	(234,561,689)	29,071,792	*	.....	(110,489,897)	(340,073,090)
.....	59-3459912	ASI Lloyds ....	.....	20,000,000	.....	.....	(14,852,866)	(1,704,428)	*	.....	3,442,706	.....
.....	11059	75-2904629	Progressive Property Insurance Company ....	.....	.....	.....	(1,849,136)	(1,078,881)	*	.....	(2,928,017)	.....
.....	13038	26-1142659	.....	.....	.....	.....	(737,430)	(67,011)	*	.....	2,195,559	.....
.....	12196	20-1284676	ASI Assurance Corp.	3,000,000	.....	.....	(7,253,058)	(190,603)	*	.....	(5,443,661)	.....
.....	11072	56-2512990	ASI Home Insurance Corp. ....	.....	2,000,000	.....	(11,333,682)	(35,128,656)	.....	.....	(81,462,338)	340,073,090
.....	13142	26-1996532	ASI Preferred Insurance Corp. ....	.....	(35,000,000)	.....	(11,678,042)	(508,968)	*	.....	(10,187,010)	.....
.....	14042	27-3421622	ASI Select Insurance Corp. ....	.....	2,000,000	.....	19,185	.....	.....	.....	19,185	.....
.....	11-3644072	Sunshine Security Insurance Agency Inc. ....	.....	.....	.....	.....	(212,838)	.....	.....	.....	(60,212,838)	.....
.....	35-0160330	Protective Insurance Corporation ....	.....	.....	(60,000,000)	.....	(4,456,374)	(11,325,541)	.....	.....	44,218,085	(36,414)
.....	12416	35-6021485	Protective Insurance Company ....	.....	60,000,000	.....	(6,945,489)	5,941,168	.....	.....	(1,004,321)	294,027
.....	40460	35-1524574	Sagamore Insurance Company ....	.....	.....	.....	(2,213,652)	5,740,403	.....	.....	3,526,751	(954,435)
.....	13149	26-1865258	Protective Specialty Insurance Company ....	.....	.....	.....	6,148,355	9,250,725	.....	.....	9,250,725	696,822
.....	35-1864904	B&L Insurance Ltd. ....	.....	.....	.....	.....	(1,140)	.....	.....	.....	6,148,355	.....
.....	26-0327941	B&L Brokerage Services, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....	(1,140)	.....
.....	45-3337116	B&L Management, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9999999 Control Totals			.....	.....	.....	.....	.....	.....	.....	XXX	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

24260	Progressive Casualty Insurance Company	49.00%	16322	Progressive Direct Insurance Company	77.00%
24252	Progressive American Insurance Company	2.00%	24279	Progressive Max Insurance Company	6.00%
32786	Progressive Specialty Insurance Company	7.00%	21735	Progressive Premier Insurance Company of Illinois	2.00%
38784	Progressive Southeastern Insurance Company	1.00%	21727	Progressive Universal Insurance Company	4.00%
38628	Progressive Northern Insurance Company	12.00%	37605	Progressive Marathon Insurance Company	6.00%
37834	Progressive Preferred Insurance Company	6.00%	44695	Progressive Paloverde Insurance Company	0.50%
42412	Progressive Gulf Insurance Company	2.00%	11851	Progressive Advanced Insurance Company	4.00%
42919	Progressive Northwestern Insurance Company	12.00%	44288	Progressive Choice Insurance Company	0.50%
42994	Progressive Classic Insurance Company	3.00%			
17350	Progressive Bayside Insurance Company	0.50%	10872	American Strategic Insurance Corp	76.50%
35190	Progressive Mountain Insurance Company	1.00%	11059	ASI Lloyds	17.00%
10187	Progressive Michigan Insurance Company	4.00%	11072	ASI Home Insurance Corp	2.00%
12302	Progressive Freedom Insurance Company	0.50%	14042	ASI Select Insurance Corp	2.00%
			13038	Progressive Property Insurance Company	2.00%
			12196	ASI Assurance Corp	0.50%

Detailed Explanation

For the above listed companies, see Annual Statement Footnote 26 for further information.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SCHEDULE Y

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

1 Insurers in Holding Company	2 Owners with Greater Than 10% Ownership	3 Ownership Percentage Column 2 of Column 1	4 Granted Disclaimer of Control\\ Affiliation of Column 2 Over Column 1 (Yes/No)	5 Ultimate Controlling Party	6 U.S. Insurance Groups or Entities Controlled by Column 5	7 Ownership Percentage (Column 5 of Column 5 Over Column 6 (Yes/No)	8 Granted Disclaimer of Control\\ Affiliation of Column 5 Over Column 6 (Yes/No)
Progressive Casualty Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive American Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Specialty Insurance Company	Progressive Casualty Insurance Company	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Southeastern Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Northern Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Preferred Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Gulf Insurance Company	Progressive Casualty Insurance Company	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Northwestern Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Classic Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Bayside Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Mountain Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Michigan Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive County Mutual Insurance Company .....	.....	.....	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Drive Insurance Company	The Progressive Corporation	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Security Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Drive New Jersey Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Hawaii Insurance Corp.	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Freedom Insurance Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Commercial Casualty Company	Progressive Agency Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Direct Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Max Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Paloverde Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Premier Insurance Company of Illinois	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Universal Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Marathon Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Select Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Choice Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Advanced Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Garden State Insurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Mountain Laurel Assurance Company	Progressive Direct Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
United Financial Casualty Company	Progressive Commercial Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
National Continental Insurance Company	Progressive Commercial Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Artisan and Truckers Casualty Company	Progressive Commercial Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Express Insurance Company	Progressive Commercial Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Blue Hill Specialty Insurance Company Inc.	Progressive Commercial Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
American Strategic Insurance Corp	ARX Holding Corp.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
ASI Lloyds .....	.....	.....	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Progressive Property Insurance Company	ARX Holding Corp.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
ASI Assurance Corp	ARX Holding Corp.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
ASI Home Insurance Corp.	ARX Holding Corp.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
ASI Preferred Insurance Corp	ARX Holding Corp.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
ASI Select Insurance Corp	ARX Holding Corp.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Protective Insurance Company	Protective Insurance Corporation	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
.....	Progressive Commercial Holdings, Inc.	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....
Sagamore Insurance Company	Protective Insurance Company	100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group	100.000	.....NO.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

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

1 Insurers in Holding Company	2 Owners with Greater Than 10% Ownership	3 Ownership Percentage Column 2 of Column 1	4 Granted Disclaimer of Control\\ Affiliation of Column 2 Over Column 1 (Yes/No)	5 Ultimate Controlling Party	6 U.S. Insurance Groups or Entities Controlled by Column 5	7 Ownership Percentage (Column 5 of Column 6)	8 Granted Disclaimer of Control\\ Affiliation of Column 5 Over Column 6 (Yes/No)
Protective Specialty Insurance Company	Protective Insurance Company .....	.....100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group .....	.....100.000	.....NO.....
Progressive Life Insurance Company	The Progressive Corporation .....	.....100.000	.....NO.....	The Progressive Corporation	Progressive Insurance Group .....	.....100.000	.....NO.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**REQUIRED FILINGS**

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

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

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

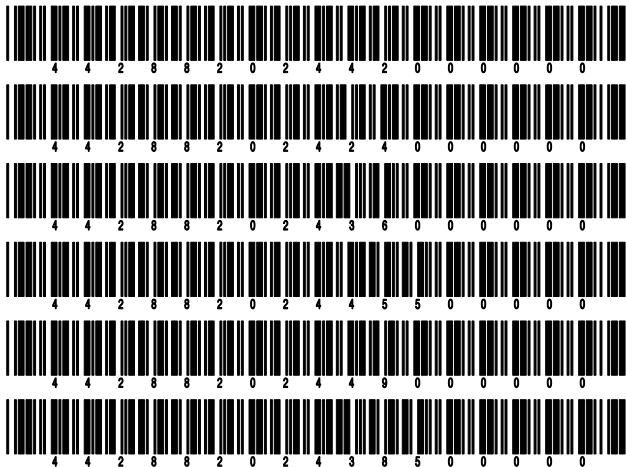
MARCH FILING		
11.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
12.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
15.	Will the Trusted Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
16.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
17.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
18.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
20.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	NO
21.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
22.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
23.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	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 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?	NO

Explanations:

- 11.
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Bar Codes:

11. SIS Stockholder Information Supplement [Document Identifier 420]
12. Financial Guaranty Insurance Exhibit [Document Identifier 240]
13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]
14. Supplement A to Schedule T [Document Identifier 455]
15. Trusted Surplus Statement [Document Identifier 490]
16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

17. Reinsurance Summary Supplemental Filing [Document Identifier 401]



18. Medicare Part D Coverage Supplement [Document Identifier 365]



20. Reinsurance Attestation Supplement [Document Identifier 399]



21. Exceptions to the Reinsurance Attestation Supplement
[Document Identifier 400]



22. Bail Bond Supplement [Document Identifier 500]



23. Director and Officer Insurance Coverage Supplement [Document Identifier 505]



24. Relief from the five-year rotation requirement for lead audit partner
[Document Identifier 224]



25. Relief from the one-year cooling off period for independent CPA
[Document Identifier 225]



26. Relief from the Requirements for Audit Committees [Document Identifier 226]



27. Reinsurance Counterparty Reporting Exception – Asbestos and Pollution
Contracts [Document Identifier 555]



30. Credit Insurance Experience Exhibit [Document Identifier 230]



31. Long-Term Care Experience Reporting Forms [Document Identifier 306]



32. Accident and Health Policy Experience Exhibit [Document Identifier 210]



33. Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]



34. Cybersecurity and Identity Theft Insurance Coverage Supplement
[Document Identifier 550]



35. Life, Health & Annuity Guaranty Association Assessable Premium Exhibit -
Parts 1 and 2 [Document Identifier 290]



36. Private Flood Insurance Supplement [Document Identifier 560]



37. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]



38. Management's Report of Internal Control Over Financial Reporting
[Document Identifier 223]



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
OVERFLOW PAGE FOR WRITE-INS

NONE



SUPPLEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY

EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS

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

(To Be Filed by March 1)

NAIC Group Code 0155

NAIC Company Code 44288

	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 & premises (CGL)
10. Internet & cyber liability
11. Aggregate write-ins for other
12. Total ASL 17 - other liability (sum of lines 1 through 11)
DETAILS OF WRITE-INS				
0901. Comprehensive Personal Liability
0902. Premises and Operations Liability
0903. Commercial General Liability
0998. Summary of remaining write-ins for Line 9 from overflow page
0999. Totals (Lines 0901 through 0903 plus 0998)(Line 9 above)
1101. Boaters
1102. Motorist
1103. Other
1198. Summary of remaining write-ins for Line 11 from overflow page
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)

SUPPLEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Exhibit of Other Liabilities by Lines of Business Line 9

	Direct Business Only			
	Prior Year	Current Year		
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
0904.
0997. Summary of remaining write-ins for Line 9 from overflow page				

Additional Write-ins for Exhibit of Other Liabilities by Lines of Business Line11

	Direct Business Only			
	Prior Year	Current Year		
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
1104.
1197. Summary of remaining write-ins for Line 11 from overflow page				



**SUPPLEMENT FOR THE YEAR 2024 OF THE PROGRESSIVE CHOICE INSURANCE COMPANY
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR**

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

FOR THE STATE OF: Georgia

NAIC Group Code 0155

NAIC Company Code 44288

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income
2. Health
3. Homeowners .....	..... NO
4. Individual Annuity
5. Individual Life
6. Lender-Placed Home and Auto
7. Long-Term Care
8. Other Health
9. Private Flood
10. Private Passenger Auto .....	..... YES
11. Short-Term Limited Duration Health Plans
12. Travel