



ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2025
OF THE CONDITION AND AFFAIRS OF THE
BRANCH INSURANCE EXCHANGE

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

OFFICERS

Joseph Tierney Masters Emison, President..... Joseph Tierney Masters Emison, Secretary.....
Stephen Nicholas Lekas, Chief Executive Officer..... Jennifer Lyn Regas#, Chief Financial Officer.....

OTHER

Melanie Rose Irvin, VP, Head of Legal.....

DIRECTORS OR TRUSTEES

Vikas Singhal..... Joseph Tierney Masters Emison.....
Stephen Nicholas Lekas..... Joseph Benjamin Anderson Jr.....
Teresa Jean Brown#.....

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

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

x Joseph Emison Joseph Tierney Masters Emison President Secretary
x Jennifer Regas Jennifer Lyn Regas Chief Financial Officer
Jennifer Regas (Feb 20, 2026 13:50:35 CST)

Subscribed and sworn to before me
this 20th day of
February, 2026

x Melanie R Irvin



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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF ALASKA DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												2,368
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability – occurrence												
11.2 Medical professional liability – claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability—occurrence												
17.2 Other liability—claims-made												
17.3 Excess workers' compensation												
18.1 Products liability – occurrence												
18.2 Products liability – claims-made												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. TOTAL (a)												2,368
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19 AK

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

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	2,901,044	2,669,257	-	1,300,009	1,768,855	1,664,726	593,416	33,842	59,640	82,322	505,678	64,819
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine	4,098	3,234	-	2,387	-	-	-	-	-	-	714	92
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	56,600	47,443	-	24,774	-	39,600	98,750	-	249	637	9,866	1,265
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	2,345,815	2,102,433	-	566,130	1,628,539	2,515,861	2,783,393	56,364	98,839	289,063	408,897	52,413
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	2,280,218	2,080,439	-	541,715	1,129,894	1,159,328	56,021	3,318	11,951	15,414	397,463	50,948
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)	7,587,776	6,902,807	-	2,435,015	4,527,288	5,379,514	3,531,579	93,525	170,680	387,436	1,322,618	169,537
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19 AZ

(a) Finance and service charges not included in Lines 1 to 35 \$47,891

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



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR 2025
 NAIC Group Code: 0000 NAIC Company Code: 16825

19 AR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	5,036,163	3,262,467	-	2,643,997	1,151,536	1,368,081	459,469	-	19,920	32,321	877,849	153,403
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine	5,166	2,767	-	3,157	-	-	-	-	-	-	901	157
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	42,582	26,960	-	23,823	-	26,080	37,480	-	170	244	7,422	1,297
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)	88,693	66,997	-	29,339	12,505	39,090	28,591	-	1,039	1,348	15,460	2,702
19.2 Other private passenger auto liability	1,271,555	973,424	-	411,744	170,315	525,211	486,727	-	14,014	21,181	221,643	38,732
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	1,133,621	868,612	-	370,105	540,409	579,644	47,839	563	1,852	1,445	197,600	34,530
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)	7,577,781	5,201,228	-	3,482,165	1,874,765	2,538,107	1,060,105	563	36,995	56,539	1,320,876	230,821
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$33,959

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



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR 2025
 NAIC Group Code: 0000 NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	9,501	8,894	-	2,677	-	40	679	-	3	6	1,656	1,099
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)	42	42	-	-	-	8	8	-	-	-	7	5
19.2 Other private passenger auto liability	4,475	2,581	-	1,894	-	809	909	-	22	27	780	518
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	1,977	1,506	-	471	-	10	10	-	-	-	345	229
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)	15,995	13,023	-	5,042	-	867	1,606	-	25	33	2,788	1,850
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19 DC

(a) Finance and service charges not included in Lines 1 to 35 \$39
 (b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2025

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												5,450
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability – occurrence												
11.2 Medical professional liability – claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability—occurrence												
17.2 Other liability—claims-made												
17.3 Excess workers' compensation												
18.1 Products liability – occurrence												
18.2 Products liability – claims-made												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. TOTAL (a)												5,450
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19 FL

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

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

19 GA

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	1,302,620	1,097,309	-	482,692	898,788	719,354	353,358	7,849	10,859	39,909	227,058	82,757
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine	1,792	1,438	-	836	-	-	-	-	-	-	312	114
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability-occurrence	5,045	2,474	-	2,987	-	2,410	3,410	-	13	14	879	321
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	445,622	461,394	-	122,162	699,965	431,583	544,379	40,470	34,989	67,486	77,676	28,311
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	233,247	242,541	-	64,544	127,995	114,940	4,377	1,681	2,689	1,917	40,657	14,819
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)	1,988,325	1,805,155	-	673,221	1,726,749	1,268,287	905,524	50,001	48,550	109,326	346,583	126,321
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$5,470

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	2,657,169	2,636,992	-	1,324,739	1,551,283	900,723	493,883	37,594	59,257	114,282	463,168	75,205
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine	4,431	4,576	-	2,267	-	-	-	-	-	-	772	125
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	134,315	29,518	-	112,658	-	18,959	56,719	-	85	333	41,193	3,801
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	543,648	530,343	-	143,807	645,325	556,274	792,338	18,721	47,429	79,926	94,763	15,387
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	537,708	524,583	-	140,084	227,684	211,502	21,241	3,728	5,796	3,846	93,727	15,219
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. TOTAL (a)	3,877,270	3,726,012	-	1,723,555	2,424,292	1,687,458	1,364,180	60,043	112,567	198,387	693,624	109,737
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19.1L

(a) Finance and service charges not included in Lines 1 to 35 \$15,162

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF INDIANA DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

19 IN

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	1,572,927	1,659,453	-	691,381	848,339	560,228	553,798	5,270	24,541	73,044	274,175	32,518
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine	1,939	1,921	-	1,218	-	-	-	-	-	-	338	40
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability-occurrence	20,598	23,027	-	8,320	-	13,070	71,140	-	91	462	3,590	426
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	506,582	505,114	-	133,980	569,709	435,611	823,420	34,537	37,899	110,118	88,302	10,473
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	497,065	530,093	-	121,051	258,890	298,802	40,526	-	3,379	6,238	86,643	10,276
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. TOTAL (a)	2,599,112	2,719,609	-	955,950	1,676,937	1,307,711	1,488,885	39,807	65,910	189,862	453,049	53,733
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$16,029

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF IOWA DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	2,003,566	1,436,363	-	1,046,940	335,578	34,894	246,231	100	4,015	25,205	349,240	38,111
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	9,032	5,725	-	4,857	-	-	-	-	-	-	1,574	172
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	60,213	40,098	-	32,032	-	37,590	60,640	-	246	393	10,496	1,145
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	399,105	341,272	-	118,428	197,594	351,532	349,931	13,241	16,538	30,446	69,568	7,592
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	688,688	582,477	-	210,895	244,059	253,247	10,623	3,256	4,252	1,509	120,045	13,100
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. TOTAL (a)	3,160,604	2,405,935	-	1,413,152	777,231	677,263	667,425	16,596	25,050	57,553	550,922	60,119
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19.1A

(a) Finance and service charges not included in Lines 1 to 35 \$14,950

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	1,056,100	850,094	-	511,874	741,103	830,480	151,279	2,661	1,391	17,356	184,088	60,147
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	771	947	-	443	-	-	-	-	-	-	134	44
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability-occurrence	8,966	7,327	-	4,262	-	6,000	13,930	-	40	86	1,563	511
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)	30,625	29,192	-	8,303	21,684	87,033	77,806	-	2,351	4,843	5,338	1,744
19.2 Other private passenger auto liability	288,018	265,396	-	77,830	118,464	387,914	467,200	53	11,106	22,898	50,204	16,403
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	263,031	245,753	-	74,621	246,785	258,283	17,008	-	817	1,116	45,849	14,980
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)	1,647,511	1,398,709	-	677,333	1,128,035	1,569,710	727,223	2,714	15,705	46,299	287,176	93,830
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19 KY

(a) Finance and service charges not included in Lines 1 to 35 \$136,646

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	-	-	-	-	-	(20)	-	-	-	-	-	4,312
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability – occurrence												
11.2 Medical professional liability – claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability—occurrence												
17.2 Other liability—claims-made												
17.3 Excess workers' compensation												
18.1 Products liability – occurrence												
18.2 Products liability – claims-made												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. TOTAL (a)	-	-	-	-	-	(20)	-	-	-	-	-	4,312
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19 LA

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

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



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR 2025
 NAIC Group Code: 0000 NAIC Company Code: 16825

19.MD

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	559,414	669,438	-	231,026	283,915	432,729	405,408	5,141	21,310	38,783	97,511	26,747
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	623	655	-	126	-	-	-	-	-	-	109	30
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability-occurrence	4,155	5,027	-	2,067	-	(410)	34,910	-	(2)	226	724	199
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)	15,057	22,137	-	3,136	13,764	(23,131)	21,304	-	(12)	30,203	2,625	720
19.2 Other private passenger auto liability	141,128	205,388	-	27,375	591,077	(278,722)	794,247	43,985	16,551	171,830	24,600	6,748
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	129,659	184,088	-	26,941	46,740	32,826	3,768	-	7,551	15,141	22,601	6,199
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)	850,037	1,086,734	-	290,671	935,495	163,293	1,259,637	49,126	45,398	256,183	148,169	40,642
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$2,266

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	1,272,391	1,139,519	-	671,632	543,591	766,182	418,885	-	11,646	20,990	221,789	37,101
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine	2,760	2,636	-	857	-	-	-	-	-	-	481	80
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability-occurrence	25,228	25,023	-	14,687	-	21,490	42,760	-	136	276	4,398	736
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)	422,925	421,667	-	107,770	678,497	1,489,865	1,242,503	34,213	95,822	80,798	73,720	12,332
19.2 Other private passenger auto liability	759,815	692,133	-	200,708	43,740	679,766	846,944	2,737	43,206	51,633	132,443	22,155
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	1,233,413	1,155,341	-	324,985	829,423	818,746	49,636	2,956	5,232	3,115	214,995	35,964
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. TOTAL (a)	3,716,532	3,436,319	-	1,320,639	2,095,251	3,776,049	2,600,728	39,906	156,042	156,812	647,825	108,368
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19 MI

(a) Finance and service charges not included in Lines 1 to 35 \$127,087

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	60,027	58,980	-	21,857	-	(1,358)	5,238	-	104	695	10,463	3,187
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
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	37,863	38,987	-	10,166	8,523	6,460	22,412	-	182	1,333	6,600	2,010
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	40,548	42,170	-	10,608	16,592	19,152	2,981	-	60	86	7,068	2,153
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)	138,438	140,137	-	42,631	25,116	24,255	30,631	-	346	2,114	24,131	7,349
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19.MS

(a) Finance and service charges not included in Lines 1 to 35 \$957

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

19.MO

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	5,209,730	4,599,377	-	2,405,824	2,903,447	2,723,339	1,050,083	2,745	54,769	141,193	908,103	146,322
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	9,095	8,129	-	5,376	900	900	-	-	-	-	1,585	255
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	59,197	49,714	-	29,443	-	37,000	115,200	-	235	745	10,318	1,663
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	1,626,933	1,502,621	-	428,170	1,105,176	1,982,395	2,570,479	26,587	63,774	148,057	283,589	45,695
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	1,413,794	1,315,288	-	372,667	732,974	810,824	91,823	1,238	6,200	8,536	246,437	39,708
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)	8,318,749	7,475,129	-	3,241,480	4,742,497	5,554,458	3,827,585	30,570	124,978	298,531	1,450,033	233,644
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$26,362

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF MONTANA DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	2,322,141	2,008,336	-	1,157,772	2,558,059	3,835,411	1,440,703	1,665	50,244	53,910	404,770	100,207
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine	1,703	1,395	-	896	-	-	-	-	-	-	297	74
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability – occurrence												
11.2 Medical professional liability – claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability—occurrence	64,240	52,734	-	32,135	-	49,030	72,670	-	319	474	11,198	2,772
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	1,106,012	1,047,671	-	276,306	312,926	629,753	785,485	-	17,008	35,692	192,788	47,728
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	1,101,757	1,045,676	-	272,292	1,159,300	1,197,604	84,948	4,568	7,041	3,065	192,046	47,544
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)	4,595,853	4,155,812	-	1,739,401	4,030,285	5,711,798	2,383,805	6,233	74,613	93,140	801,099	198,325
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19.MT

(a) Finance and service charges not included in Lines 1 to 35 \$20,351

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

19, NE

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	2,075,123	1,646,705	-	1,030,179	277,766	245,012	155,655	-	5,552	17,476	361,713	39,835
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine	2,937	2,732	-	1,023	-	-	-	-	-	-	512	56
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	34,251	26,638	-	14,839	-	25,620	37,190	-	175	250	5,970	657
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	302,125	263,046	-	77,513	70,819	114,707	110,489	1,376	2,828	14,287	52,663	5,800
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	354,528	306,267	-	86,423	121,861	129,780	8,640	-	762	1,300	61,797	6,806
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. TOTAL (a)	2,768,964	2,245,388	-	1,209,977	470,447	515,119	311,974	1,376	9,316	33,313	482,655	53,155
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$6,619

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	471,829	366,640	-	226,513	69,227	76,171	32,496	-	1,649	4,976	82,244	20,252
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability – occurrence												
11.2 Medical professional liability – claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability—occurrence	1,912	1,701	-	808	-	1,400	3,280	-	-	12	333	82
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	44,805	43,871	-	10,160	5,403	14,574	23,691	-	414	1,485	7,810	1,923
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	39,742	37,553	-	10,023	4,523	3,450	451	-	52	99	6,927	1,706
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)	558,288	449,765	-	247,504	79,153	95,595	59,918	-	2,115	6,572	97,315	23,963
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19.NM

(a) Finance and service charges not included in Lines 1 to 35 \$1,846

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



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR 2025
 NAIC Group Code: 0000 NAIC Company Code: 16825

19. NC

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												3,850
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability – occurrence												
11.2 Medical professional liability – claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability—occurrence												
17.2 Other liability—claims-made												
17.3 Excess workers' compensation												
18.1 Products liability – occurrence												
18.2 Products liability – claims-made												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. TOTAL (a)												3,850
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

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

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



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR 2025
 NAIC Group Code: 0000 NAIC Company Code: 16825

19. ND

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	184,835	100,913	-	99,539	8,269	8,996	10,196	-	243	885	32,218	4,992
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine	1,453	618	-	940	-	-	-	-	-	-	253	39
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	13,334	6,943	-	6,860	-	7,120	9,200	-	40	57	2,324	360
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)	12,944	9,430	-	4,300	-	2,383	2,703	-	56	69	2,256	350
19.2 Other private passenger auto liability	76,246	54,458	-	25,742	11,127	27,821	20,949	-	752	1,529	13,290	2,059
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	102,015	75,681	-	33,946	44,659	58,169	14,616	-	196	288	17,782	2,755
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)	390,826	248,042	-	171,327	64,055	104,489	57,664	-	1,287	2,828	68,125	10,555
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$3,074

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

19.0H

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	2,612,151	2,748,931	-	1,201,107	1,455,734	1,129,125	1,121,444	44,134	61,696	145,928	455,322	209,615
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine	4,822	5,423	-	2,955	-	-	-	-	-	-	841	387
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability-occurrence	15,486	18,550	-	7,168	-	5,720	93,530	-	36	611	2,699	1,243
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	396,282	415,583	-	100,548	571,723	314,932	699,106	37,090	61,550	156,167	69,075	31,800
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	368,781	390,965	-	86,760	167,205	173,903	19,478	8,430	277	11,793	64,282	29,593
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. TOTAL (a)	3,397,522	3,579,452	-	1,398,538	2,194,663	1,623,680	1,933,558	89,653	123,559	314,500	592,219	272,638
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$14,357

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



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR 2025
 NAIC Group Code: 0000 NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	565,775	998,740	-	235,173	963,123	555,460	228,678	21,679	83,263	171,759	98,620	17,137
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	302	463	-	62	-	-	-	-	-	-	53	9
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability – occurrence												
11.2 Medical professional liability – claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability—occurrence	5,282	9,152	-	1,577	-	(7,380)	91,930	-	(46)	602	921	160
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)	-	-	-	-	551	(191)	-	-	-	-	-	-
19.2 Other private passenger auto liability	115,197	168,983	-	21,652	931,314	315,412	241,999	38,082	22,715	86,600	20,080	3,489
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	138,073	199,941	-	27,185	127,191	118,481	(1,846)	-	3,780	7,372	24,067	4,182
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)	824,629	1,377,279	-	285,649	2,022,180	981,782	560,761	59,761	109,711	266,333	143,740	24,977
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19 OK

(a) Finance and service charges not included in Lines 1 to 35 \$1,266

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF OREGON DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

19 OR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	822,070	712,963	-	363,094	164,969	66,746	100,684	-	2,521	10,488	143,294	17,734
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	618	480	-	292	-	-	-	-	-	-	108	13
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	22,029	18,502	-	10,750	-	14,580	37,960	-	94	245	3,840	475
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)	133,844	111,616	-	38,315	116,715	159,866	72,047	-	4,314	8,948	23,330	2,887
19.2 Other private passenger auto liability	698,841	591,237	-	200,187	206,277	538,171	668,089	6,584	16,687	27,171	121,814	15,076
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	498,977	427,652	-	139,173	362,639	418,740	61,976	100	1,309	1,663	86,976	10,764
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. TOTAL (a)	2,176,379	1,862,450	-	751,811	850,600	1,198,103	940,757	6,684	24,925	48,515	379,363	46,950
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$13,080

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



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR 2025
 NAIC Group Code: 0000 NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	636,032	738,911	-	233,490	878,635	736,874	563,073	10,894	39,484	58,686	110,866	16,890
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	611	652	-	268	-	-	-	-	-	-	106	16
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability-occurrence	6,175	6,893	-	2,150	500,000	4,300	18,270	-	26	6,647	1,076	164
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)	23,055	29,212	-	4,499	60,577	18,592	25,530	4,685	13,341	22,191	4,019	612
19.2 Other private passenger auto liability	202,344	245,332	-	43,215	1,002,473	401,509	631,519	28,144	14,045	71,783	35,270	5,373
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	282,355	350,474	-	62,194	120,168	177,793	56,210	-	3,687	7,099	49,217	7,498
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)	1,150,572	1,371,474	-	345,816	2,561,853	1,339,069	1,294,603	43,723	70,583	166,405	200,555	30,553
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19 PA

(a) Finance and service charges not included in Lines 1 to 35 \$4,648
 (b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	8,965,658	16,419,502	-	5,277,587	13,087,872	5,245,450	4,916,279	227,058	638,765	1,936,712	1,562,794	371,826
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine	5,415	10,851	-	3,064	-	-	-	-	-	-	944	225
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	32,790	62,499	-	15,842	1,015,000	(29,270)	629,440	-	(194)	14,258	5,716	1,360
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)	75,325	93,435	-	16,263	122,978	39,654	56,985	-	1,883	47,731	13,130	3,124
19.2 Other private passenger auto liability	1,372,278	1,698,861	-	305,011	7,215,321	594,218	4,809,034	589,832	402,357	747,211	239,201	56,911
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	1,224,149	1,645,556	-	241,219	518,359	447,954	13,778	4,567	40,067	75,285	213,380	50,768
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)	11,675,615	19,930,704	-	5,858,986	21,959,530	6,298,007	10,425,517	821,458	1,082,878	2,821,197	2,035,165	484,214
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19 TX

(a) Finance and service charges not included in Lines 1 to 35 \$21,226

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



**EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF UTAH DURING THE YEAR 2025**

NAIC Group Code: 0000

NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	815,899	660,099	-	438,999	46,541	86,550	134,575	-	2,662	10,291	142,219	22,756
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine	1,197	706	-	788	-	-	-	-	-	-	209	33
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	17,881	12,510	-	10,607	-	10,060	28,320	-	67	184	3,117	499
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)	26,706	21,375	-	8,754	8,757	8,587	9,271	-	273	2,859	4,655	745
19.2 Other private passenger auto liability	483,153	393,086	-	155,946	269,392	376,303	326,454	-	10,472	39,228	84,218	13,475
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	304,561	247,932	-	97,667	148,784	149,200	10,012	-	1,118	1,964	53,088	8,494
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)	1,649,397	1,335,708	-	712,761	473,474	630,700	508,631	-	14,592	54,526	287,505	46,002
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19 UT

(a) Finance and service charges not included in Lines 1 to 35 \$10,628

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



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR 2025
 NAIC Group Code: 0000 NAIC Company Code: 16825

19.WV

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	98,706	103,814	-	42,392	188,563	39,529	81,206	-	3,238	16,595	17,205	7,069
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	32,332	34,481	-	8,859	1,749	6,746	40,281	-	218	2,317	5,636	2,316
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	33,149	36,858	-	8,776	21,828	20,841	378	-	172	308	5,778	2,374
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)	164,187	175,153	-	60,027	212,140	67,116	121,865	-	3,628	19,220	28,619	11,759
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$807

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



EXHIBIT OF PREMIUMS AND LOSSES
BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR 2025
 NAIC Group Code: 0000 NAIC Company Code: 16825

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	379,246	375,181	-	182,028	93,445	(11,316)	50,234	-	2,018	12,478	66,106	8,285
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	721	610	-	196	-	-	-	-	-	-	126	16
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability-occurrence	4,440	4,686	-	2,170	-	1,180	22,990	-	4	149	774	97
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	83,516	83,394	-	21,890	152,576	92,516	90,928	-	2,770	20,403	14,558	1,824
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	90,347	87,487	-	24,264	96,919	95,621	2,828	-	1,412	2,701	15,748	1,974
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)	558,270	551,358	-	230,548	342,940	178,001	166,980	-	6,204	35,731	97,312	12,196
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

19 WI

(a) Finance and service charges not included in Lines 1 to 35 \$2,436
 (b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products .



EXHIBIT OF PREMIUMS AND LOSSES
GRAND TOTAL DURING THE YEAR 2025

NAIC Group Code: 0000

NAIC Company Code: 16825

19 GT

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril	43,590,117	46,968,878	-	21,822,521	30,818,641	22,013,409	13,566,951	400,632	1,158,789	3,026,290	7,598,150	1,573,995
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	59,487	55,959	-	32,008	900	900	-	-	-	-	10,369	1,978
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	634,719	477,419	-	359,959	1,515,000	284,149	1,579,719	-	1,784	26,905	128,418	19,232
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)	829,216	805,103	-	220,679	1,036,028	1,821,757	1,536,748	38,898	119,067	198,990	144,540	25,220
19.2 Other private passenger auto liability	13,283,689	12,661,088	-	3,489,423	16,529,527	11,021,356	18,930,403	937,804	936,365	2,197,870	2,315,468	434,211
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	12,991,405	12,624,935	-	3,348,609	7,294,879	7,548,838	617,322	34,404	109,652	171,301	2,264,520	412,583
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)	71,388,632	73,593,381	-	29,273,199	57,194,975	42,690,408	36,231,144	1,411,737	2,325,657	5,621,355	12,461,464	2,467,219
Details of Write-Ins												
3401. None												
3402. None												
3403. None												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$527,153

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

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

NONE

(21) Schedule F - Part 2

NONE

Annual Statement for the Year 2025 of the Branch Insurance Exchange

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute Included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15- [17+18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
Total Authorized, Other U.S. Unaffiliated Insurers																				
87-2252307	22225	TRISURA INSURANCE COMPANY	OK		40									7		7		(1)	8	
36-2661954	10103	AMERICAN AGRICULTURAL INS CO	IN		241									39		39		(10)	49	
75-1444207	30058	SCOR REINS CO	NY		1	941	141	1,216	168	2,401	1,565					6,432	668	-	5,764	
13-2673100	22039	GENERAL REINS CORP	DE		5,772	1,052	60	1,197	54	1,193	264		3,306		10,661		5,724		4,937	
04-1543470	23043	LIBERTY MUT INS CO	MA		792	41	3	17		2	7				457		(69)		526	
47-0698507	23680	ODYSSEY REINS CO	CT		20										3		(1)		4	
47-0574325	32603	BERKLEY INS CO	DE		(64)	133	19			1	18				171		9		162	
13-1675535	25364	SWISS REINS AMER CORP	NY		4,590	943	116	499	11	514	74			1,641		3,798	1,203	67	2,528	
95-2769232	27847	INSURANCE CO OF THE WEST	CA		2,450	1,105	124	552	30	451	117			784		3,365	(22)		3,387	
22-2005057	26921	Everest Reinsurance Company	DE		488															
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers					14,330	4,215	463	3,481	263	4,562	2,045			6,396	3,508	24,933		7,501	67	17,365
Total Authorized, Pools, Mandatory Pools																				
AA-9991500		ILLINOIS MINE SUBSIDENCE FUND	IL		13															
AA-9991506		WEST VIRGINIA MINE SUBSIDENCE FUND	WV		1															
AA-9991502		KENTUCKY MINE SUBSIDENCE FUND	KY		1															
AA-9991503		OHIO MINE SUBSIDENCE FUND	OH																	
AA-9991159		MICHIGAN CATASTROPHIC CLAIMS ASSN	MI		92									46		46		92	(46)	
1099999 - Total Authorized, Pools, Mandatory Pools					107									46		46		92	(46)	
Total Authorized, Other Non-U.S. Insurers																				
AA-1120157		Lloyd's Syndicate Number 1729	GBR		79									13		13		(3)	16	
AA-1128001		Lloyd's Syndicate Number 2001	GBR		509									83		83		(20)	103	
AA-1120084		Lloyd's Syndicate Number 1955	GBR		4	(13)	15			1	18				21		8		13	
AA-1126609		Lloyd's Syndicate Number 609	GBR		1						3				3		1		2	
AA-1127084		Lloyd's Syndicate Number 1084	GBR		339									56		56		(14)	70	
AA-3194122		DaVinci Reins Ltd	BMU		369									49		49		123	(74)	
AA-1360015		Assicurazioni Generali S.p.A.	ITA		2,382															
AA-1128791		Lloyd's Syndicate Number 2791	GBR		271									44		44		(11)	55	
AA-3190339		RENAISSANCE REINS LTD	BMU		369									49		49		123	(74)	
AA-1340125		Hannover Rueck SE	DEU		7,955	1,689	211	1,410	60	1,522	342			3,500	814	9,548		2,884	6,664	
1299999 - Total Authorized, Other Non-U.S. Insurers					12,278	1,676	226	1,410	60	1,523	363			3,794	814	9,866		3,091	6,775	
1499999 - Total Authorized Excluding Protected Cells					26,715	5,891	689	4,891	323	6,085	2,408			10,236	4,322	34,845		10,684	67	24,094
Total Unauthorized, Other Non-U.S. Insurers																				
AA-3770492		Topsail Reins Spc Ltd	CYM		6,454	1,304	135	687	15	712	101			2,464		5,418		1,928	94	3,396
AA-3770540		NORTHERN REINS SPC LTD	CYM		1,597	469	47	219	5	214	35			324		1,313		77	1,236	
AA-3191626		SIG Re Ltd	BMU		163															
2699999 - Total Unauthorized, Other Non-U.S. Insurers					8,214	1,773	182	906	20	926	136			2,788		6,731		2,005	94	4,632
2899999 - Total Unauthorized Excluding Protected Cells					8,214	1,773	182	906	20	926	136			2,788		6,731		2,005	94	4,632
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																				
RJ-3190875		Hiscox Ins Co (Bermuda) Ltd	BMU		193									31		31		(8)	39	
RJ-3194126		Arch Reins Ltd	BMU		11	(36)	42			2	55				63		23		40	
5499999 - Total Reciprocal Jurisdiction, Other Non-U.S. Insurers					204	(36)	42			2	55			31		94		15	79	
5699999 - Total Reciprocal Jurisdiction Excluding Protected Cells					204	(36)	42			2	55			31		94		15	79	
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells					35,133	7,628	913	5,797	343	7,013	2,599			13,055	4,322	41,670		12,704	161	28,805
9999999 - Totals					35,133	7,628	913	5,797	343	7,013	2,599			13,055	4,322	41,670		12,704	161	28,805

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

1	2	Collateral				25	26	27	Ceded Reinsurance Credit Risk									
		21	22	23	24				28	29	30	31	32	33	34	35	36	
ID Number From Col. 1	Name of Reinsurer From Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 - 27)	Stressed Recoverable (Col. 28*120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29 - 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	
Total Authorized, Other U.S. Unaffiliated Insurers																		
87-2252307	TRISURA INSURANCE COMPANY					(1)	8	-	7	8	(1)	9	9	4				
36-2661954	AMERICAN AGRICULTURAL INS CO					(10)	49	-	39	47	(10)	57	57	3		2		
75-1444207	SCOR REINS CO					668	5,764	-	6,432	7,718	668	7,050	7,050	3		197		
13-2673100	GENERAL REINS CORP					5,724	4,937	-	10,661	12,793	5,724	7,069	7,069	1		113		
04-1543470	LIBERTY MUT INS CO					(69)	526	-	457	548	(69)	617	617	3		17		
47-0698507	ODYSSEY REINS CO					(1)	4	-	3	4	(1)	5	5	2		-		
47-0574325	BERKLEY INS CO					9	162	-	171	205	9	196	196	2		4		
13-1675535	SWISS REINS AMER CORP					1,270	2,528	-	3,798	4,558	1,270	3,288	3,288	2		69		
95-2769232	INSURANCE CO OF THE WEST					(22)	3,387	-	3,365	4,038	(22)	4,060	4,060	3		114		
22-2005057	Everest Reinsurance Company							-	-	-		-	-	2		-		
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers				XXX		7,568	17,365	-	24,933	29,920	7,568	22,352	22,352	XXX		517		
Total Authorized, Pools, Mandatory Pools																		
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND							-	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-9991506	WEST VIRGINIA MINE SUBSIDENCE FUND							-	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND							-	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-9991503	OHIO MINE SUBSIDENCE FUND							-	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN					46	-	-	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1099999 - Total Authorized, Pools, Mandatory Pools				XXX		46	-	-	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
Total Authorized, Other Non-U.S. Insurers																		
AA-1120157	Lloyd's Syndicate Number 1729					(3)	16	-	13	16	(3)	19	19	3		1		
AA-1128001	Lloyd's Syndicate Number 2001					(20)	103	-	83	100	(20)	120	120	3		3		
AA-1120084	Lloyd's Syndicate Number 1955					8	13	-	21	25	8	17	17	3		-		
AA-1126609	Lloyd's Syndicate Number 609					1	2	-	3	4	1	3	3	3		-		
AA-1127084	Lloyd's Syndicate Number 1084					(14)	70	-	56	67	(14)	81	81	3		2		
AA-3194122	DaVinci Reins Ltd					49	-	-	49	59	49	-	-	3		-		
AA-1360015	Assicurazioni Generali S.p.A							-	-	-		-	-	2		-		
AA-1128791	Lloyd's Syndicate Number 2791					(11)	55	-	44	53	(11)	64	64	3		2		
AA-3190339	RENAISSANCE REINS LTD					49	-	-	49	59	49	-	-	2		-		
AA-1340125	Hannover Rueck SE					2,884	6,664	-	9,548	11,458	2,884	8,574	8,574	2		180		
1299999 - Total Authorized, Other Non-U.S. Insurers				XXX		2,943	6,923	-	9,866	11,839	2,963	8,877	8,877	XXX		189		
1499999 - Total Authorized Excluding Protected Cells				XXX		10,557	24,288	-	34,799	41,759	10,531	31,228	31,228	XXX		705		
Total Unauthorized, Other Non-U.S. Insurers																		
AA-3770492	Topsail Reins Spc Ltd		3,396	0001		5,418	-	-	5,418	6,502	2,022	4,480	3,396	1,084	6	102	130	
AA-3770540	NORTHERN REINS SPC LTD				3,545	1,313	-	-	1,313	1,576	77	1,499	1,499	6	45	-		
AA-3191626	SIG Re Ltd						-	-	-	-		-	-	6		-		
2699999 - Total Unauthorized, Other Non-U.S. Insurers			3,396	XXX	3,545	6,731	-	-	6,731	8,077	2,099	5,978	4,895	1,084	XXX	147	130	
2899999 - Total Unauthorized Excluding Protected Cells			3,396	XXX	3,545	6,731	-	-	6,731	8,077	2,099	5,978	4,895	1,084	XXX	147	130	
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																		
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd					(8)	39	-	31	37	(8)	45	45	3		1		
RJ-3194126	Arch Reins Ltd					23	40	-	63	76	23	53	53	2		1		

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
ID Number From Col. 1	Name of Reinsurer From Col. 3	Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 - 27)	Stressed Recoverable (Col. 28*120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29 - 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
5499999 - Total Reciprocal Jurisdiction, Other Non-U.S. Insurers				XXX		15	79	-	94	113	15	98		98	XXX		2
5699999 - Total Reciprocal Jurisdiction Excluding Protected Cells				XXX		15	79	-	94	113	15	98		98	XXX		2
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells			3,396	XXX	3,545	17,303	24,367	-	41,624	49,949	12,645	37,304	4,895	32,410	XXX	147	838
9999999 - Totals			3,396	XXX	3,545	17,303	24,367	-	41,624	49,949	12,645	37,304	4,895	32,410	XXX	147	838

Annual Statement for the Year 2025 of the Branch Insurance Exchange

SCHEDULE F - PART 3 (CONTINUED)

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

1 ID Number From Col. 1	2 Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43 - 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46 + 48])	51 Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
		37 Current	38 Overdue 1 - 29 Days	39 Overdue 30 - 90 Days	40 Overdue 91 - 120 Days	41 Overdue Over 120 Days	42 Overdue Total Overdue Cols. 38 + 39 + 40 + 41	43 Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)											
Total Authorized, Other U.S. Unaffiliated Insurers																			
87-2252307	TRISURA INSURANCE COMPANY																	YES	-
36-2661954	AMERICAN AGRICULTURAL INS CO																	YES	-
75-1444207	SCOR REINS CO	1,082						1,082		1,082								YES	-
13-2673100	GENERAL REINS CORP	1,111						1,111		1,111								YES	-
04-1543470	LIBERTY MUT INS CO	43						43		43								YES	-
47-0698507	ODYSSEY REINS CO																	YES	-
47-0574325	BERKLEY INS CO	152						152		152								YES	-
13-1675535	SWISS REINS AMER CORP	1,059						1,059		1,059								YES	-
95-2769232	INSURANCE CO OF THE WEST	1,230						1,230		1,230								YES	-
22-2005057	Everest Reinsurance Company																	YES	-
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers		4,677						4,677		4,677								XXX	-
Total Authorized, Pools, Mandatory Pools																			
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND																	YES	-
AA-9991506	WEST VIRGINIA MINE SUBSIDENCE FUND																	YES	-
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND																	YES	-
AA-9991503	OHIO MINE SUBSIDENCE FUND																	YES	-
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN																	YES	-
1099999 - Total Authorized, Pools, Mandatory Pools																		XXX	-
Total Authorized, Other Non-U.S. Insurers																			
AA-1120157	Lloyd's Syndicate Number 1729																	YES	-
AA-1128001	Lloyd's Syndicate Number 2001																	YES	-
AA-1120084	Lloyd's Syndicate Number 1955	2						2		2								YES	-
AA-1126609	Lloyd's Syndicate Number 609	-						-		-								YES	-
AA-1127084	Lloyd's Syndicate Number 1084																	YES	-
AA-3194122	DaVinci Reins Ltd																	YES	-
AA-1360015	Assicurazioni Generali S.p.A																	YES	-
AA-1128791	Lloyd's Syndicate Number 2791																	YES	-
AA-3190339	RENAISSANCE REINS LTD																	YES	-
AA-1340125	Hannover Rueck SE	1,900						1,900		1,900								YES	-
1299999 - Total Authorized, Other Non-U.S. Insurers		1,902						1,902		1,902								XXX	-
1499999 - Total Authorized Excluding Protected Cells		6,579						6,579		6,579								XXX	-
Total Unauthorized, Other Non-U.S. Insurers																			
AA-3770492	Topsail Reins Spc Ltd	1,438						1,438		1,438								YES	-
AA-3770540	NORTHERN REINS SPC LTD	516						516		516								YES	-
AA-3191626	SIG Re Ltd																	YES	-
2699999 - Total Unauthorized, Other Non-U.S. Insurers		1,954						1,954		1,954								XXX	-
2899999 - Total Unauthorized Excluding Protected Cells		1,954						1,954		1,954								XXX	-
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																			
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd																	YES	-
RJ-3194126	Arch Reins Ltd	6						6		6								YES	-

Annual Statement for the Year 2025 of the Branch Insurance Exchange

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44	45	46	47	48	49	50	51	52	53	
		37	38	39	40	41	42											43
ID Number From Col. 1	Name of Reinsurer From Col. 3	Current	Overdue 1 - 29 Days	Overdue 30 - 90 Days	Overdue 91 - 120 Days	Overdue Over 120 Days	Overdue Total Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43 - 44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46 + 48])	Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
5499999 - Total Reciprocal Jurisdiction, Other Non-U.S. Insurers		6						6			6	-			-		XXX	-
5699999 - Total Reciprocal Jurisdiction Excluding Protected Cells		6						6			6	-			-		XXX	-
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		8,539						8,539			8,539	-			-		XXX	-
9999999 - Totals		8,539						8,539			8,539	-			-		XXX	-

Annual Statement for the Year 2025 of the Branch Insurance Exchange

SCHEDULE F - PART 3 (CONTINUED)

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

1 ID Number From Col. 1	2 Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col.24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col.24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 -Col. 66)	20% of Amount in Col. 67		
Total Authorized, Other U.S. Unaffiliated Insurers																		
87-2252307	TRISURA INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36-2661954	AMERICAN AGRICULTURAL INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
75-1444207	SCOR REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2673100	GENERAL REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
04-1543470	LIBERTY MUT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0698507	ODYSSEY REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0574325	BERKLEY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1675535	SWISS REINS AMER CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-2769232	INSURANCE CO OF THE WEST	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
22-2005057	Everest Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999 - Total Authorized, Other U.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Total Authorized, Pools, Mandatory Pools																		
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991506	WEST VIRGINIA MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991503	OHIO MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999 - Total Authorized, Pools, Mandatory Pools		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Total Authorized, Other Non-U.S. Insurers																		
AA-1120157	Lloyd's Syndicate Number 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128001	Lloyd's Syndicate Number 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120084	Lloyd's Syndicate Number 1955	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126609	Lloyd's Syndicate Number 609	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127084	Lloyd's Syndicate Number 1084	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194122	DaVinci Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1360015	Assicurazioni Generali S.p.A	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128791	Lloyd's Syndicate Number 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190339	RENAISSANCE REINS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340125	Hannover Rueck SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1299999 - Total Authorized, Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999 - Total Authorized Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Total Unauthorized, Other Non-U.S. Insurers																		
AA-3770492	Topsail Reins Spc Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3770540	NORTHERN REINS SPC LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191626	SIG Re Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2699999 - Total Unauthorized, Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2899999 - Total Unauthorized Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers																		
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements [(Col. 20 + Col. 21 + Col. 22 + Col.24) / Col. 58]	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col.24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 -Col. 66)	20% of Amount in Col. 67		
RJ-3194126	Arch Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5499999 - Total Reciprocal Jurisdiction, Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5699999 - Total Reciprocal Jurisdiction Excluding Protected Cells		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells		XXX	XXX	XXX				XXX	XXX									
9999999 - Totals		XXX	XXX	XXX				XXX	XXX									

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

1	2	70	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73	74	75	76	77	78
ID Number From Col. 1	Name of Reinsurer From Col. 3	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Complete if Col. 52 = "Yes"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col 26 * 20% or [Cols. 40 + 41] * 20%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
Total Authorized, Other U.S. Unaffiliated Insurers										
87-2252307	TRISURA INSURANCE COMPANY	-	XXX	XXX	-	-	-	XXX	XXX	-
36-2661954	AMERICAN AGRICULTURAL INS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
75-1444207	SCOR REINS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
13-2673100	GENERAL REINS CORP	-	XXX	XXX	-	-	-	XXX	XXX	-
04-1543470	LIBERTY MUT INS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
47-0698507	ODYSSEY REINS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
47-0574325	BERKLEY INS CO	-	XXX	XXX	-	-	-	XXX	XXX	-
13-1675535	SWISS REINS AMER CORP	-	XXX	XXX	-	-	-	XXX	XXX	-
95-2769232	INSURANCE CO OF THE WEST	-	XXX	XXX	-	-	-	XXX	XXX	-
22-2005057	Everest Reinsurance Company	-	XXX	XXX	-	-	-	XXX	XXX	-
0999999	- Total Authorized, Other U.S. Unaffiliated Insurers	-	XXX	XXX	-	-	-	XXX	XXX	-
Total Authorized, Pools, Mandatory Pools										
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-9991506	WEST VIRGINIA MINE SUBSIDENCE FUND	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-9991502	KENTUCKY MINE SUBSIDENCE FUND	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-9991503	OHIO MINE SUBSIDENCE FUND	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN	-	XXX	XXX	-	-	-	XXX	XXX	-
1099999	- Total Authorized, Pools, Mandatory Pools	-	XXX	XXX	-	-	-	XXX	XXX	-
Total Authorized, Other Non-U.S. Insurers										
AA-1120157	Lloyd's Syndicate Number 1729	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1128001	Lloyd's Syndicate Number 2001	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1120084	Lloyd's Syndicate Number 1955	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1126609	Lloyd's Syndicate Number 609	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1127084	Lloyd's Syndicate Number 1084	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-3194122	DaVinci Reins Ltd.	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1360015	Assicurazioni Generali S.p.A	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1128791	Lloyd's Syndicate Number 2791	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-3190339	RENAISSANCE REINS LTD	-	XXX	XXX	-	-	-	XXX	XXX	-
AA-1340125	Hannover Rueck SE	-	XXX	XXX	-	-	-	XXX	XXX	-
1299999	- Total Authorized, Other Non-U.S. Insurers	-	XXX	XXX	-	-	-	XXX	XXX	-
1499999	- Total Authorized Excluding Protected Cells	-	XXX	XXX	-	-	-	XXX	XXX	-
Total Unauthorized, Other Non-U.S. Insurers										
AA-3770492	Topsail Reins Spc Ltd	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-3770540	NORTHERN REINS SPC LTD	-	-	-	XXX	XXX	XXX	-	XXX	-
AA-3191626	SIG Re Ltd.	-	-	-	XXX	XXX	XXX	-	XXX	-
2699999	- Total Unauthorized, Other Non-U.S. Insurers	-	-	-	XXX	XXX	XXX	-	XXX	-
Total Reciprocal Jurisdiction, Other Non-U.S. Insurers										
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-
RJ-3194126	Arch Reins Ltd	-	XXX	XXX	-	-	-	XXX	XXX	-

SCHEDULE F - PART 3 (CONTINUED)

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

1	2	70	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance				
			71	72	73	74	75	76	77	78	
ID Number From Col. 1	Name of Reinsurer From Col. 3	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Complete if Col. 52 = "Yes"; 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%)	Complete if Col. 52 = "No"; Otherwise Enter 0	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
5499999 - Total Reciprocal Jurisdiction, Other Non-U.S. Insurers.....	-	-	XXX	XXX	-	-	-	-	XXX	XXX	-
5699999 - Total Reciprocal Jurisdiction Excluding Protected Cells.....	-	-	XXX	XXX	-	-	-	-	XXX	XXX	-
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells.....	-	-	-	-	-	-	-	-	-	-	-
9999999 - Totals.....	-	-	-	-	-	-	-	-	-	-	-

SCHEDULE F - PART 4

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

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
.....0001.....	.....1.....	.....026009593.....	BANK OF AMERICA N.A.....	.....2,922
.....0001.....	.....1.....	.....026003780.....	Deutsche Bank AG New York Branch.....	.....474
9999999 – Totals.....				.....3,396

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	1 Name of Reinsurer	2 Commission Rate	3 Ceded Premium
1.	LIBERTY MUTUAL INSURANCE CO.....	35.000	792
2.	TOPSAIL.....	24.500	6,455
3.	GENERAL REINS CORP.....	24.500	5,773
4.	SWISS REINS AMER CORP.....	24.500	4,590
5.	INSURANCE COMPANY OF THE WEST.....	24.500	2,450

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

	1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated
6.	GENERAL REINS CORP.....	10,661	5,773	NO
7.	Hannover Rueck SE.....	9,548	7,956	NO
8.	SCOR REINS CO.....	6,432	1	NO
9.	TOPSAIL.....	5,417	6,455	NO
10.	SWISS REINS AMER CORP.....	3,797	4,590	NO

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1	2	3
	As Reported (Net of Ceded)	Restatement Adjustments	Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	67,176,738		67,176,738
2. Premiums and considerations (Line 15)	4,919,810		4,919,810
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	8,539,428	(8,539,428)	-
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	5,462,461		5,462,461
6. Net amount recoverable from reinsurers		28,801,236	28,801,236
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	86,098,436	20,261,809	106,360,245
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	27,743,621	15,750,026	43,493,647
10. Taxes, expenses, and other obligations (Lines 4 through 8)	(2,148,106)	4,161,666	2,013,560
11. Unearned premiums (Line 9)	16,217,208	13,055,990	29,273,198
12. Advance premiums (Line 10)			
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)	12,705,873	(12,705,873)	-
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	3,808,651		3,808,651
19. Total liabilities excluding protected cell business (Line 26)	58,327,248	20,261,809	78,589,057
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	27,771,188	XXX	27,771,188
22. Totals (Line 38)	86,098,436	20,261,809	106,360,245

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

(30) Schedule H - Part 1

NONE

(30) Write-Ins for Line 11 - Deductions

NONE

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

NONE

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

NONE

(31) Schedule H - Part 4 - Reinsurance

NONE

(32) Schedule H - Part 5

NONE

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

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)	
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2016												
3. 2017												
4. 2018												
5. 2019												
6. 2020	37	30	7					3	2		1	3
7. 2021	2,374	2,081	293	1,286	1,125			212	183		190	186
8. 2022	32,937	29,589	3,348	35,994	29,816	347	309	4,199	3,593	12	6,822	2,598
9. 2023	76,103	70,694	5,409	125,417	76,477	432	650	10,683	6,269	76	53,136	7,193
10. 2024	58,339	64,708	(6,368)	56,706	35,442	94	64	5,248	2,762	47	23,781	3,330
11. 2025	46,969	35,447	11,522	16,837	10,122	40	32	2,535	1,257	7	8,001	1,435
12. Totals	XXX	XXX	XXX	236,241	152,982	912	1,054	22,879	14,067	142	91,930	XXX

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded					
1. Prior													
2. 2016													
3. 2017													
4. 2018													
5. 2019													
6. 2020													
7. 2021			20	18			17	15				5	
8. 2022	91	72	389	322	23	17	326	247	18	10		178	8
9. 2023	744	373	1,042	478	134	56	1,409	714	54	23		1,739	38
10. 2024	721	297	936	512	106	43	679	217	184	50		1,507	62
11. 2025	5,027	2,262	4,596	1,805	16	10	316	130	909	266		6,391	340
12. Totals	6,583	3,005	6,984	3,136	279	126	2,747	1,322	1,164	348		9,820	448

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2016				-	-	-					
3. 2017				-	-	-					
4. 2018				-	-	-					
5. 2019				-	-	-					
6. 2020	3	2	1	7.392	7.293	7.814					
7. 2021	1,534	1,340	194	64.637	64.406	66.281				3	2
8. 2022	41,387	34,386	7,000	125.654	116.214	209.085				85	93
9. 2023	139,914	85,039	54,875	183.848	120.292	1,014.454				935	804
10. 2024	64,675	39,388	25,288	110.860	60.870	(397.097)				847	659
11. 2025	30,276	15,885	14,392	64.460	44.813	124.905				5,556	835
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	7,426	2,394

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

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2016												
3. 2017												
4. 2018												
5. 2019												
6. 2020	41	33	8	37	29			18	15		11	5
7. 2021	2,091	1,818	273	3,154	2,745	127	112	324	279	6	470	448
8. 2022	25,969	22,680	3,289	27,773	22,900	925	774	4,085	3,362	59	5,747	5,745
9. 2023	45,968	31,425	14,542	44,063	27,742	1,160	745	6,475	4,096	337	19,115	9,471
10. 2024	15,086	4,726	10,360	10,813	3,455	76	25	1,419	456	148	8,372	2,152
11. 2025	13,466	4,717	8,749	3,163	1,119	14	5	967	335	52	2,685	1,469
12. Totals	XXX	XXX	XXX	89,003	57,991	2,302	1,661	13,289	8,543	601	36,399	XXX

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior													
2. 2016													
3. 2017													
4. 2018													
5. 2019													
6. 2020			1	-			1	1				-	
7. 2021	10	8	78	68			65	56	1	-		21	2
8. 2022	402	247	835	593	54	27	468	337	7	6		556	20
9. 2023	2,518	833	2,335	899	231	82	797	305	44	12		3,794	94
10. 2024	2,182	383	1,547	246	90	14	320	49	49	8		3,488	71
11. 2025	4,542	1,152	6,018	1,508	16	4	354	89	216	35		8,357	341
12. Totals	9,653	2,623	10,814	3,315	392	127	2,005	837	316	62		16,216	528

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount			
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX				
2. 2016				-	-	-							
3. 2017				-	-	-							
4. 2018				-	-	-							
5. 2019				-	-	-							
6. 2020	57	45	11	137.942	137.106	141.391				-	-		
7. 2021	3,760	3,269	491	179.819	179.805	179.911				12	9		
8. 2022	34,550	28,247	6,303	133.042	124.545	191.634				396	160		
9. 2023	57,623	34,714	22,908	125.355	110.466	157.528				3,121	673		
10. 2024	16,496	4,637	11,859	109.349	98.115	114.473				3,099	388		
11. 2025	15,290	4,247	11,042	113.541	90.045	126.207				7,900	457		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	14,529	1,687		

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)		
				4	5	6	7	8	9				
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				
1. Prior	XXX	XXX	XXX									XXX	
2. 2016													
3. 2017													
4. 2018													
5. 2019													
6. 2020	1	1	-										
7. 2021	41	35	6	540	486			2	2			54	
8. 2022	589	534	55	15	14			1	1	-		2	
9. 2023	1,209	882	326	2,000	1,309			6	4			693	
10. 2024	613	269	344										
11. 2025	477	159	319										
12. Totals	XXX	XXX	XXX	2,555	1,808			9	7	-		749	XXX

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded					
1. Prior													
2. 2016													
3. 2017													
4. 2018													
5. 2019													
6. 2020			-	-									
7. 2021			9	8			4	3					2
8. 2022			184	144			1	1					39
9. 2023			531	229			17	6	-	-			313
10. 2024			378	84			2	1					296
11. 2025			478	109			3	1					371
12. Totals			1,580	574			27	12	-	-			1,021

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount				
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid			
												29	30	31
												Direct and Assumed	Ceded	Net
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX					
2. 2016				-	-	-								
3. 2017				-	-	-								
4. 2018				-	-	-								
5. 2019				-	-	-								
6. 2020	-	-	-	16.000	12.800	-								
7. 2021	555	499	56	1,353.268	1,425.706	930.717					1			
8. 2022	201	160	41	34.130	29.969	74.526					39			
9. 2023	2,554	1,547	1,007	211.298	175.339	308.525					303			
10. 2024	380	85	296	62.013	31.446	85.873					294			
11. 2025	481	109	371	100.666	68.954	116.458					369			
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		1,006			

SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2016												
3. 2017												
4. 2018												
5. 2019												
6. 2020												
7. 2021												
8. 2022												
9. 2023	-	-	-									
10. 2024												
11. 2025												
12. Totals	XXX	XXX	XXX									XXX

NONE

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior													
2. 2016													
3. 2017													
4. 2018													
5. 2019													
6. 2020													
7. 2021													
8. 2022													
9. 2023													
10. 2024													
11. 2025													
12. Totals													

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2016				-	-	-					
3. 2017				-	-	-					
4. 2018				-	-	-					
5. 2019				-	-	-					
6. 2020				-	-	-					
7. 2021				-	-	-					
8. 2022				-	-	-					
9. 2023				-	-	-					
10. 2024				-	-	-					
11. 2025				-	-	-					
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2016												XXX
3. 2017												XXX
4. 2018												XXX
5. 2019												XXX
6. 2020	1	1	-									XXX
7. 2021	11	10	1									XXX
8. 2022	79	72	7	28	24			2	2	-	5	XXX
9. 2023	125	97	28	47	32			2	2		16	XXX
10. 2024	70	63	8	14	13			1	1		1	XXX
11. 2025	56	35	21	1	-			1	-		1	XXX
12. Totals	XXX	XXX	XXX	90	70			6	5	-	22	XXX

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior													
2. 2016													
3. 2017													
4. 2018													
5. 2019													
6. 2020													
7. 2021													
8. 2022													
9. 2023													
10. 2024													
11. 2025													
12. Totals													

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2016				-	-	-					
3. 2017				-	-	-					
4. 2018				-	-	-					
5. 2019				-	-	-					
6. 2020											
7. 2021											
8. 2022	31	26	5	38.622	35.917	66.447					
9. 2023	50	34	16	40.016	35.510	55.522					
10. 2024	15	14	1	21.393	22.910	8.732					
11. 2025	1	1	1	2.555	1.712	3.928					
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4-5+6-7+8-9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2016												
3. 2017												
4. 2018												
5. 2019												
6. 2020	31	25	6	13	10			3	3	4	3	15
7. 2021	1,536	1,336	200	2,632	2,288			222	192	53	374	1,263
8. 2022	21,663	18,817	2,846	27,828	23,057	32	27	2,216	1,853	918	5,139	13,658
9. 2023	44,230	29,995	14,235	48,589	29,243	34	70	3,434	2,105	3,862	20,638	21,776
10. 2024	15,806	5,137	10,669	10,267	3,122	22	7	640	197	1,719	7,603	4,761
11. 2025	12,625	4,373	8,252	7,282	2,516	13	5	578	200	480	5,153	3,505
12. Totals	XXX	XXX	XXX	96,610	60,237	101	109	7,093	4,549	7,036	38,911	XXX

Years in Which Premiums Were Earned and Losses Were Incurred	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior													
2. 2016													
3. 2017													
4. 2018													
5. 2019													
6. 2020			-	-			-	-				-	
7. 2021			-	-			5	4				1	
8. 2022	-	-	1	1			50	37	-	-		13	1
9. 2023	3	1	12	5			86	44	1	-		52	1
10. 2024	10	2	(31)	(6)			16	2	5	-		1	5
11. 2025	670	165	(48)	(13)	-	-	14	4	155	17		619	274
12. Totals	682	168	(65)	(13)	-	-	171	91	161	17		686	281

Years in Which Premiums Were Earned and Losses Were Incurred	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount							
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid						
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX								
2. 2016				-	-	-											
3. 2017				-	-	-											
4. 2018				-	-	-											
5. 2019				-	-	-											
6. 2020	16	13	3	51.338	50.927	53.049				-	-						
7. 2021	2,859	2,484	375	186.110	185.933	187.290				-	1						
8. 2022	30,128	24,975	5,153	139.074	132.725	181.054				-	13						
9. 2023	52,158	31,468	20,691	117.925	104.910	145.351				9	43						
10. 2024	10,929	3,325	7,604	69.144	64.726	71.272				(17)	18						
11. 2025	8,664	2,893	5,772	68.630	66.158	69.940				470	149						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	463	224						

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 2A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX	3							
7. 2021	XXX	XXX	XXX	XXX	XXX	127	191	171	163	165	2	(6)
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	4,757	6,222	6,373	6,386	14	164
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50,932	50,012	50,430	419	(502)
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,980	22,668	(1,312)	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,471	XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(878)	(344)

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX	3	5	5	4	8	8		3
7. 2021	XXX	XXX	XXX	XXX	XXX	268	392	419	452	446	(6)	27
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	4,184	5,217	5,624	5,579	(45)	362
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,174	21,858	20,498	(1,360)	(676)
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,216	10,856	(360)	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,229	XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(1,771)	(285)

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX	XXX							
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

SCHEDULE P - PART 2D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX	XXX							
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX	XXX							
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

SCHEDULE P - PART 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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX	XXX							
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX	XXX							
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX	XXX							
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX	XXX	4	53	56	56	56		
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	44	43	44	41	(3)	(2)
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,440	1,503	1,005	(498)	(436)
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	363	296	(67)	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	371	XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(568)	(438)

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX	XXX							
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	One Year	Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX	XXX							
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	4	4	4	4		
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19	14	15	1	(4)
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1		XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	(5)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	One Year	Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX	5	5	3	3	3	3		
7. 2021	XXX	XXX	XXX	XXX	XXX	286	352	339	344	345		6
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	4,765	4,284	4,622	4,789	168	505
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,840	18,560	19,361	801	1,521
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,112	7,157	45	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,254	XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,014	2,032

SCHEDULE P - PART 2K - FIDELITY/SURETY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	One Year	Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX								
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	One Year	Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX								
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

SCHEDULE P - PART 2M - INTERNATIONAL

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	One Year	Two Year
1. Prior												
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX								
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

Annual Statement for the Year 2025 of the Branch Insurance Exchange

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX											
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								3
7. 2021	XXX	XXX	XXX	XXX	XXX	46	159	159	161	161	88	98
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	1,939	5,363	6,045	6,216	1,397	1,193
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29,656	46,554	48,722	5,083	2,072
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,348	21,295	2,190	1,078
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,724	566	529

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX											
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX		1	1	1	7	7	3	2
7. 2021	XXX	XXX	XXX	XXX	XXX	75	223	379	423	425	256	190
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	986	3,127	4,575	5,024	2,633	3,092
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,912	13,261	16,736	4,036	5,341
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,518	7,409	920	1,161
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,053	430	698

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX											
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX	XXX							
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

SCHEDULE P - PART 3D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX											
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX	XXX							
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX											
2. 2016												
3. 2017	XXX											
4. 2018	XXX	XXX										
5. 2019	XXX	XXX	XXX									
6. 2020	XXX	XXX	XXX	XXX								
7. 2021	XXX	XXX	XXX	XXX	XXX							
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX								-	-	-	
2. 2016									-	-	-	
3. 2017	XXX								-	-	-	
4. 2018	XXX	XXX							-	-	-	
5. 2019	XXX	XXX	XXX						-	-	-	
6. 2020	XXX	XXX	XXX	XXX					-	-	-	
7. 2021	XXX	XXX	XXX	XXX	XXX				-	-	-	
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX			-	-	-	
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX								-	-	-	
2. 2016									-	-	-	
3. 2017	XXX								-	-	-	
4. 2018	XXX	XXX							-	-	-	
5. 2019	XXX	XXX	XXX						-	-	-	
6. 2020	XXX	XXX	XXX	XXX					-	-	-	
7. 2021	XXX	XXX	XXX	XXX	XXX				-	-	-	
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX			-	-	-	
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12	
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025			
1. Prior	XXX								-	-	-	XXX	XXX
2. 2016									-	-	-	XXX	XXX
3. 2017	XXX								-	-	-	XXX	XXX
4. 2018	XXX	XXX							-	-	-	XXX	XXX
5. 2019	XXX	XXX	XXX						-	-	-	XXX	XXX
6. 2020	XXX	XXX	XXX	XXX					-	-	-	XXX	XXX
7. 2021	XXX	XXX	XXX	XXX	XXX				-	-	-	XXX	XXX
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX			-	-	-	XXX	XXX
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	XXX	XXX
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	XXX	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX								-	-	-	
2. 2016									-	-	-	
3. 2017	XXX								-	-	-	
4. 2018	XXX	XXX							-	-	-	
5. 2019	XXX	XXX	XXX						-	-	-	
6. 2020	XXX	XXX	XXX	XXX					-	-	-	
7. 2021	XXX	XXX	XXX	XXX	XXX			54	54	54	1	-
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX		-	-	2	1	-
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	162	691	2	-
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX								-	-	-	
2. 2016									-	-	-	
3. 2017	XXX								-	-	-	
4. 2018	XXX	XXX							-	-	-	
5. 2019	XXX	XXX	XXX						-	-	-	
6. 2020	XXX	XXX	XXX	XXX					-	-	-	
7. 2021	XXX	XXX	XXX	XXX	XXX				-	-	-	
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX			-	-	-	
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		-	
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX							-	-	-	XXX	XXX
2. 2016								-	-	-	XXX	XXX
3. 2017	XXX							-	-	-	XXX	XXX
4. 2018	XXX	XXX						-	-	-	XXX	XXX
5. 2019	XXX	XXX	XXX					-	-	-	XXX	XXX
6. 2020	XXX	XXX	XXX	XXX				-	-	-	XXX	XXX
7. 2021	XXX	XXX	XXX	XXX	XXX			-	-	-	XXX	XXX
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	4	4	4	4	XXX	XXX
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	14	15	XXX	XXX
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	XXX	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX							-	-	-		
2. 2016								-	-	-		
3. 2017	XXX							-	-	-		
4. 2018	XXX	XXX						-	-	-		
5. 2019	XXX	XXX	XXX					-	-	-		
6. 2020	XXX	XXX	XXX	XXX	4	5	3	3	3	3	6	9
7. 2021	XXX	XXX	XXX	XXX	XXX	218	346	338	344	344	876	387
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	3,537	4,284	4,614	4,776	9,956	3,701
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,161	18,593	19,310	16,045	5,730
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,782	7,160	3,427	1,329
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,774	2,400	831

SCHEDULE P - PART 3K - FIDELITY/SURETY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX							-	-	-	XXX	XXX
2. 2016								-	-	-	XXX	XXX
3. 2017	XXX							-	-	-	XXX	XXX
4. 2018	XXX	XXX						-	-	-	XXX	XXX
5. 2019	XXX	XXX	XXX					-	-	-	XXX	XXX
6. 2020	XXX	XXX	XXX	XXX				-	-	-	XXX	XXX
7. 2021	XXX	XXX	XXX	XXX	XXX			-	-	-	XXX	XXX
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	XXX	XXX
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	-	XXX	XXX
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	XXX	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX							-	-	-	XXX	XXX
2. 2016								-	-	-	XXX	XXX
3. 2017	XXX							-	-	-	XXX	XXX
4. 2018	XXX	XXX						-	-	-	XXX	XXX
5. 2019	XXX	XXX	XXX					-	-	-	XXX	XXX
6. 2020	XXX	XXX	XXX	XXX				-	-	-	XXX	XXX
7. 2021	XXX	XXX	XXX	XXX	XXX			-	-	-	XXX	XXX
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	XXX	XXX
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	-	XXX	XXX
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	XXX	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3M - INTERNATIONAL

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	XXX							-	-	-	XXX	XXX
2. 2016								-	-	-	XXX	XXX
3. 2017	XXX							-	-	-	XXX	XXX
4. 2018	XXX	XXX						-	-	-	XXX	XXX
5. 2019	XXX	XXX	XXX					-	-	-	XXX	XXX
6. 2020	XXX	XXX	XXX	XXX				-	-	-	XXX	XXX
7. 2021	XXX	XXX	XXX	XXX	XXX			-	-	-	XXX	XXX
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX		-	-	-	XXX	XXX
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	-	XXX	XXX
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	XXX	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Annual Statement for the Year 2025 of the Branch Insurance Exchange

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1.	Prior										
2.	2016										
3.	2017	XXX									
4.	2018	XXX	XXX								
5.	2019	XXX	XXX	XXX							
6.	2020	XXX	XXX	XXX	XXX	3					
7.	2021	XXX	XXX	XXX	XXX	XXX	36	30	12	3	5
8.	2022	XXX	XXX	XXX	XXX	XXX	XXX	1,656	477	225	146
9.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,840	2,369	1,259
10.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,489	886
11.	2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,977

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

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1.	Prior										
2.	2016										
3.	2017	XXX									
4.	2018	XXX	XXX								
5.	2019	XXX	XXX	XXX							
6.	2020	XXX	XXX	XXX	XXX	3	1				
7.	2021	XXX	XXX	XXX	XXX	XXX	63	40	20	21	19
8.	2022	XXX	XXX	XXX	XXX	XXX	XXX	1,743	719	615	373
9.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,357	4,098	1,928
10.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,745	1,572
11.	2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,775

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

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1.	Prior										
2.	2016										
3.	2017	XXX									
4.	2018	XXX	XXX								
5.	2019	XXX	XXX	XXX							
6.	2020	XXX	XXX	XXX	XXX						
7.	2021	XXX	XXX	XXX	XXX						
8.	2022	XXX	XXX	XXX	XXX	XXX					
9.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1.	Prior										
2.	2016										
3.	2017	XXX									
4.	2018	XXX	XXX								
5.	2019	XXX	XXX	XXX							
6.	2020	XXX	XXX	XXX	XXX						
7.	2021	XXX	XXX	XXX	XXX						
8.	2022	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1.	Prior										
2.	2016										
3.	2017	XXX									
4.	2018	XXX	XXX								
5.	2019	XXX	XXX	XXX							
6.	2020	XXX	XXX	XXX	XXX						
7.	2021	XXX	XXX	XXX	XXX						
8.	2022	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior										
2. 2016										
3. 2017	XXX									
4. 2018	XXX	XXX								
5. 2019	XXX	XXX	XXX							
6. 2020	XXX	XXX	XXX	XX						
7. 2021	XXX	XXX	XXX	XX	XX					
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior										
2. 2016										
3. 2017	XXX									
4. 2018	XXX	XXX								
5. 2019	XXX	XXX	XXX							
6. 2020	XXX	XXX	XXX	XX						
7. 2021	XXX	XXX	XXX	XX	XX					
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior										
2. 2016										
3. 2017	XXX									
4. 2018	XXX	XXX								
5. 2019	XXX	XXX	XXX							
6. 2020	XXX	XXX	XXX	XX						
7. 2021	XXX	XXX	XXX	XX	XX					
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior										
2. 2016										
3. 2017	XXX									
4. 2018	XXX	XXX								
5. 2019	XXX	XXX	XXX							
6. 2020	XXX	XXX	XXX	XXX						
7. 2021	XXX	XXX	XXX	XXX	XXX	4	28	2	2	2
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	44	43	44	39
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	876	366	313
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	363	296
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	371

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior										
2. 2016										
3. 2017	XXX									
4. 2018	XXX	XXX								
5. 2019	XXX	XXX	XXX							
6. 2020	XXX	XXX	XXX	XX						
7. 2021	XXX	XXX	XXX	XX	XX					
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1.	Prior.....										
2.	2016.....										
3.	2017.....	XXX									
4.	2018.....	XXX	XXX								
5.	2019.....	XXX	XXX	XXX							
6.	2020.....	XXX	XXX	XXX	XX						
7.	2021.....	XXX	XXX	XXX	XX						
8.	2022.....	XXX	XXX	XXX	XXX	XXX					
9.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1.	Prior.....										
2.	2016.....										
3.	2017.....	XXX									
4.	2018.....	XXX	XXX								
5.	2019.....	XXX	XXX	XXX							
6.	2020.....	XXX	XXX	XXX	XXX						
7.	2021.....	XXX	XXX	XXX	XXX	XXX	(5)	2			
8.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX	304	(4)	7	13
9.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	380	(50)	50
10.	2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(130)	(11)
11.	2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(24)

SCHEDULE P - PART 4K - FIDELITY/SURETY

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1.	Prior.....										
2.	2016.....										
3.	2017.....	XXX									
4.	2018.....	XXX	XXX								
5.	2019.....	XXX	XXX	XXX							
6.	2020.....	XXX	XXX	XXX	XX						
7.	2021.....	XXX	XXX	XXX	XX						
8.	2022.....	XXX	XXX	XXX	XXX	XXX					
9.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX				
10.	2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11.	2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1.	Prior.....										
2.	2016.....										
3.	2017.....	XXX									
4.	2018.....	XXX	XXX								
5.	2019.....	XXX	XXX	XXX							
6.	2020.....	XXX	XXX	XXX	XX						
7.	2021.....	XXX	XXX	XXX	XX						
8.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4M - INTERNATIONAL

Years in Which Losses Were Incurred		BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1.	Prior.....										
2.	2016.....										
3.	2017.....	XXX									
4.	2018.....	XXX	XXX								
5.	2019.....	XXX	XXX	XXX							
6.	2020.....	XXX	XXX	XXX	XX						
7.	2021.....	XXX	XXX	XXX	XX						
8.	2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

Annual Statement for the Year 2025 of the Branch Insurance Exchange

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 5A - HOMEOWNERS/FAROWNERS

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior									-	-
2. 2016									-	
3. 2017	XXX								-	
4. 2018	XXX	XXX							-	
5. 2019	XXX	XXX	XXX						-	
6. 2020	XXX	XXX	XXX	XXX					-	-
7. 2021	XXX	XXX	XXX	XXX	XXX	31	93	88	88	88
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	1,029	1,334	1,389	1,397
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,662	4,923	5,083
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,337	2,190
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	566

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior									-	
2. 2016									-	
3. 2017	XXX								-	
4. 2018	XXX	XXX							-	
5. 2019	XXX	XXX	XXX						-	
6. 2020	XXX	XXX	XXX	XXX		1			-	
7. 2021	XXX	XXX	XXX	XXX	XXX	59	2		-	
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	684	63	15	8
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,865	150	38
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	744	62
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	340

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior									-	-
2. 2016									-	
3. 2017	XXX								-	
4. 2018	XXX	XXX							-	
5. 2019	XXX	XXX	XXX						-	
6. 2020	XXX	XXX	XXX	XXX	1	4	3	2	3	3
7. 2021	XXX	XXX	XXX	XXX	XXX	132	189	183	185	186
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	2,878	2,578	2,595	2,598
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,330	7,126	7,193
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,033	3,330
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,435

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

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior								-	-	
2. 2016								-		
3. 2017	XXX							-		
4. 2018	XXX	XXX						-		
5. 2019	XXX	XXX	XXX					-		
6. 2020	XXX	XXX	XXX	XXX				2	2	3
7. 2021	XXX	XXX	XXX	XXX	XXX	73	225	246	256	256
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	1,206	2,406	2,588	2,633
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,765	3,845	4,036
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	622	920
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	430

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior								-		
2. 2016								-		
3. 2017	XXX							-		
4. 2018	XXX	XXX						-		
5. 2019	XXX	XXX	XXX					-		
6. 2020	XXX	XXX	XXX	XXX	3	7	3	1		
7. 2021	XXX	XXX	XXX	XXX	XXX	157	72	11	4	2
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	2,219	210	65	20
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,239	267	94
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	419	71
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	341

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior								-	-	
2. 2016								-		
3. 2017	XXX							-		
4. 2018	XXX	XXX						-		
5. 2019	XXX	XXX	XXX					-		
6. 2020	XXX	XXX	XXX	XXX	3	7	9	5	5	5
7. 2021	XXX	XXX	XXX	XXX	XXX	328	515	444	449	448
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	6,182	5,700	5,743	5,745
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,151	9,434	9,471
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,076	2,152
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,469

(75) Schedule P - Part 5C - Section 1

NONE

(75) Schedule P - Part 5C - Section 2

NONE

(75) Schedule P - Part 5C - Section 3

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior								-	-	
2. 2016								-		
3. 2017	XXX							-		
4. 2018	XXX	XXX						-		
5. 2019	XXX	XXX	XXX					-		
6. 2020	XXX	XXX	XXX	XXX				-		
7. 2021	XXX	XXX	XXX	XXX	XXX			1	1	1
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX		-		1
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	-	2
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior								-		
2. 2016								-		
3. 2017	XXX							-		
4. 2018	XXX	XXX						-		
5. 2019	XXX	XXX	XXX					-		
6. 2020	XXX	XXX	XXX	XXX				-		
7. 2021	XXX	XXX	XXX	XXX	XXX		1	-		
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX		-		
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	2	
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR-END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior								-	-	
2. 2016								-		
3. 2017	XXX							-		
4. 2018	XXX	XXX						-		
5. 2019	XXX	XXX	XXX					-		
6. 2020	XXX	XXX	XXX	XXX				-		
7. 2021	XXX	XXX	XXX	XXX	XXX		1	1	1	1
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX		-		1
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	2	2
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR-END (\$000 OMITTED)										11
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	Current Year Premiums Earned
1. Prior											
2. 2016											
3. 2017	XXX										
4. 2018	XXX	XXX									
5. 2019	XXX	XXX	XXX								
6. 2020	XXX	XXX	XXX	XXX							
7. 2021	XXX	XXX	XXX	XXX	XXX						
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned premiums (Sc P-Pt 1)								-			XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR-END (\$000 OMITTED)										11
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	Current Year Premiums Earned
1. Prior											
2. 2016											
3. 2017	XXX										
4. 2018	XXX	XXX									
5. 2019	XXX	XXX	XXX								
6. 2020	XXX	XXX	XXX	XXX							
7. 2021	XXX	XXX	XXX	XXX	XXX						
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned premiums (Sc P-Pt 1)								-			XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR-END (\$000 OMITTED)										11
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	Current Year Premiums Earned
1. Prior											
2. 2016											
3. 2017	XXX										
4. 2018	XXX	XXX									
5. 2019	XXX	XXX	XXX								
6. 2020	XXX	XXX	XXX	XXX							
7. 2021	XXX	XXX	XXX	XXX	XXX	41	41	41	41	41	
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	589	589	589	589	
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,209	1,209	1,209	
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	613	613	
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	477	477
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	477
13. Earned premiums (Sc P-Pt 1)					1	41	589	1,209	613	477	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR-END (\$000 OMITTED)										11
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	Current Year Premiums Earned
1. Prior											
2. 2016											
3. 2017	XXX										
4. 2018	XXX	XXX									
5. 2019	XXX	XXX	XXX								
6. 2020	XXX	XXX	XXX	XXX							
7. 2021	XXX	XXX	XXX	XXX	XXX	35	35	35	35	35	
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	534	534	534	534	
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	882	882	882	
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	269	269	
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	159	159
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	159
13. Earned premiums (Sc P-Pt 1)					1	35	534	882	269	159	XXX

Annual Statement for the Year 2025 of the Branch Insurance Exchange

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 OMITTED)

SECTION 1

Schedule P – Part 1		1	2	3	4	5	6
		Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
1.	Homeowners/farmowners	9,820			17,670		
2.	Private passenger auto liability/medical	16,216			9,378		
3.	Commercial auto/truck liability/medical						
4.	Workers' compensation						
5.	Commercial multiple peril						
6.	Medical professional liability—occurrence						
7.	Medical professional liability—claims-made						
8.	Special liability						
9.	Other liability—occurrence	1,021			468		
10.	Other liabilities—claims-made						
11.	Special property				32		
12.	Auto physical damage	686			8,707		
13.	Fidelity/surety						
14.	Other						
15.	International						
16.	Reinsurance-nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX
17.	Reinsurance-nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX
18.	Reinsurance-nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX
19.	Products liability—occurrence						
20.	Products liability—claims-made						
21.	Financial guaranty/mortgage guaranty						
22.	Warranty						
23.	Pet insurance plans						
24.	Totals	27,744			36,256		

SECTION 2

Years in Which Policies Were Issued		INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
		2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1.	Prior										
2.	2016										
3.	2017	XXX									
4.	2018	XXX	XXX								
5.	2019	XXX	XXX	XXX							
6.	2020	XXX	XXX	XXX	XXX						
7.	2021	XXX	XXX	XXX	XXX	XXX					
8.	2022	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued		BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
		2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1.	Prior										
2.	2016										
3.	2017	XXX									
4.	2018	XXX	XXX								
5.	2019	XXX	XXX	XXX							
6.	2020	XXX	XXX	XXX	XXX						
7.	2021	XXX	XXX	XXX	XXX	XXX					
8.	2022	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

SECTION 4

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior										
2. 2016										
3. 2017	XXX									
4. 2018	XXX	XXX								
5. 2019	XXX	XXX	XXX							
6. 2020	XXX	XXX	XXX	XX						
7. 2021	XXX	XXX	XXX	XXX	XXX					
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SECTION 5

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR-END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior										
2. 2016										
3. 2017	XXX									
4. 2018	XXX	XXX								
5. 2019	XXX	XXX	XXX							
6. 2020	XXX	XXX	XXX	XX						
7. 2021	XXX	XXX	XXX	XXX	XXX					
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS

(\$000 OMITTED)

SECTION 1

Schedule P – Part 1		1	2	3	4	5	6
		Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
1.	Homeowners/farmowners	9,820			17,670		
2.	Private passenger auto liability/medical	16,216			9,378		
3.	Commercial auto/truck liability/medical						
4.	Workers' compensation						
5.	Commercial multiple peril						
6.	Medical professional liability—occurrence						
7.	Medical professional liability—claims-made						
8.	Special liability						
9.	Other liability—occurrence	1,021			468		
10.	Other liabilities—claims-made						
11.	Special property				32		
12.	Auto physical damage	686			8,707		
13.	Fidelity/surety						
14.	Other						
15.	International						
16.	Reinsurance-nonproportional assumed property						
17.	Reinsurance-nonproportional assumed liability						
18.	Reinsurance-nonproportional assumed financial lines						
19.	Products liability—occurrence						
20.	Products liability—claims-made						
21.	Financial guaranty/mortgage guaranty						
22.	Warranty						
23.	Pet insurance plans						
24.	Totals	27,744			36,256		

SECTION 2

Years in Which Policies Were Issued		INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
		2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1.	Prior										
2.	2016										
3.	2017	XXX									
4.	2018	XXX	XXX								
5.	2019	XXX	XXX	XXX							
6.	2020	XXX	XXX	XXX	XXX						
7.	2021	XXX	XXX	XXX	XXX	XXX					
8.	2022	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued		BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR-END (\$000 OMITTED)									
		1	2	3	4	5	6	7	8	9	10
		2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1.	Prior										
2.	2016										
3.	2017	XXX									
4.	2018	XXX	XXX								
5.	2019	XXX	XXX	XXX							
6.	2020	XXX	XXX	XXX	XXX						
7.	2021	XXX	XXX	XXX	XXX	XXX					
8.	2022	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

SECTION 4

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior										
2. 2016										
3. 2017	XXX									
4. 2018	XXX	XXX								
5. 2019	XXX	XXX	XXX							
6. 2020	XXX	XXX	XXX	XX						
7. 2021	XXX	XXX	XXX	XXX	XXX					
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR-END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior										
2. 2016										
3. 2017	XXX									
4. 2018	XXX	XXX								
5. 2019	XXX	XXX	XXX							
6. 2020	XXX	XXX	XXX	XX						
7. 2021	XXX	XXX	XXX	XXX	XXX					
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 6

Years in Which Policies Were Issued	INCURRED ADJUSTABLE COMMISSIONS REPORTED AT YEAR-END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior										
2. 2016										
3. 2017	XXX									
4. 2018	XXX	XXX								
5. 2019	XXX	XXX	XXX							
6. 2020	XXX	XXX	XXX	XX						
7. 2021	XXX	XXX	XXX	XXX	XXX					
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 7

Years in Which Policies Were Issued	RESERVES FOR COMMISSION ADJUSTMENTS AT YEAR-END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior										
2. 2016										
3. 2017	XXX									
4. 2018	XXX	XXX								
5. 2019	XXX	XXX	XXX							
6. 2020	XXX	XXX	XXX	XX						
7. 2021	XXX	XXX	XXX	XXX	XXX					
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P INTERROGATORIES

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

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601. Prior.....		
1.602. 2016.....		
1.603. 2017.....		
1.604. 2018.....		
1.605. 2019.....		
1.606. 2020.....		
1.607. 2021.....		
1.608. 2022.....		
1.609. 2023.....		
1.610. 2024.....		
1.611. 2025.....		
1.612. Totals.....		

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

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

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

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

5. What were the net premiums (in thousands of dollars) in force at the end of the year for:
 - 5.1. Fidelity..... \$.....
 - 5.2. Surety..... \$.....
6. Claim count information is reported per claim or per claimant (indicate which)..... PER CLAIM.....
If not the same in all years, explain in Interrogatory 7.
- 7.1. The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses?..... NO.....
- 7.2. An extended statement may be attached

SCHEDULE T – PART 2
 INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN
 Allocated By States And Territories

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

NONE

Annual Statement for the Year 2025 of the Branch Insurance Exchange

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership, Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No)	*
		16825	84-4471638				Branch Insurance Exchange	OH	RE	Branch Financial, LLC	Attorney In-Fact		Branch Holdings, Inc.	NO	
			82-0628587				Branch Financial, LLC	DE	OTH	Branch Holdings, Inc.	Ownership	100.000	Branch Holdings, Inc.	NO	1
			87-3106338				Branch Claims, LLC	OH	NIA	Branch Holdings, Inc.	Ownership	100.000	Branch Holdings, Inc.	NO	
			33-2573425				Branch Holdings, Inc.	DE	OTH	Branch Holdings, Inc.	Board of Directors		Branch Holdings, Inc.	NO	2
			39-4700990				Mutual Services, LLC	DE	OTH	Branch Holdings, Inc.	Ownership	100.000	Branch Holdings, Inc.	NO	3

Asterisk	Explanation
1	Branch Financial, LLC. is the attorney-in-fact for the subscribers of Branch Insurance Exchange.
2	Branch Holdings, Inc. is the owner of Branch Financial, LLC, the attorney-in-fact for the subscribers of Branch Insurance Exchange.
3	Mutual Services, LLC, a subsidiary of Branch Holdings, Inc., was formed on October 1, 2025.

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
16825	84-4471638	Branch Insurance Exchange					(19,728,976)				(19,728,976)	
	82-0628587	Branch Financial, LLC					16,728,825				16,728,825	
	87-3106338	Branch Claims, LLC					3,000,151				3,000,151	
	33-2573425	Branch Holdings, Inc.										
	39-4700990	Mutual Services, LLC										
9999999	- Control Totals						-		XXX		-	

SCHEDULE Y

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

1 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)
Branch Insurance Exchange	Branch Financial, LLC (Attorney-in-Fact) .....	.....%	.....NO.....	Branch Holdings, Inc.	N/A .....	.....%	.....NO.....

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**REQUIRED FILINGS**

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

























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

SUPPLEMENTAL FILINGS

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

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Explanation	Barcode
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OVERFLOW PAGE FOR WRITE-INS

OVERFLOW PAGE FOR WRITE-INS
BUSINESS IN THE STATE OF ALASKA DURING THE YEAR 2025

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR 2025

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR 2025

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF INDIANA DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF IOWA DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF MONTANA DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR 2025

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
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BUSINESS IN THE STATE OF OREGON DURING THE YEAR 2025

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										
3404. None												
3405. None												
3406. None												
3407. None												
3408. None												
3409. None												
3410. None												
3497. Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR 2025

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										
3404. None												
3405. None												
3406. None												
3407. None												
3408. None												
3409. None												
3410. None												
3497. Summary of remaining write-ins for Line 34 from overflow page												

OVERFLOW PAGE FOR WRITE-INS

BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2025

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										
3404. None												
3405. None												
3406. None												
3407. None												
3408. None												
3409. None												
3410. None												
3497. Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF UTAH DURING THE YEAR 2025

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										
3404. None												
3405. None												
3406. None												
3407. None												
3408. None												
3409. None												
3410. None												
3497. Summary of remaining write-ins for Line 34 from overflow page												

BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR 2025

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										
3404. None												
3405. None												
3406. None												
3407. None												
3408. None												
3409. None												
3410. None												
3497. Summary of remaining write-ins for Line 34 from overflow page												

OVERFLOW PAGE FOR WRITE-INS

BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR 2025

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

GRAND TOTAL DURING THE YEAR 2025

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

102.10



EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS

AS REPORTED ON LINE 17 OF THE EXHIBIT OF PREMIUMS AND LOSSES
To Be Filed by March 1

NAIC Group Code: 0000

NAIC Company Code: 16825

	Direct Business Only			
	Prior Year	Current Year		
	1	2	3	4
	Written Premium	Written Premium	Losses Paid (deducting salvage)	Losses Unpaid (Case Base)
1. Completed operations.....				
2. Errors & omissions (E&O).....				
3. Directors & officers (D&O).....				
4. Environmental liability.....				
5. Excess workers' compensation.....				
6. Commercial excess & umbrella.....				
7. Personal umbrella.....	396,096	634,719	1,515,000	-
8. Employment liability.....				
9. Aggregate write-ins for facilities and premises (CGL).....				
10. Internet & cyber liability.....				
11. Aggregate write-ins for other.....				
12. Total ASL 17 - other liability (sum of lines 1 through 11).....	396,096	634,719	1,515,000	-
Details of Write-Ins				
0901.....				
0902.....				
0903.....				
0998. Summary of remaining write-ins for Line 09 from overflow page.....				
0999. Summary of remaining write-ins for Line 09 from overflow page.....				
1101.....				
1102.....				
1103.....				
1198. Summary of remaining write-ins for Line 11 from overflow page.....				
1199. Summary of remaining write-ins for Line 11 from overflow page.....				

OVERFLOW PAGE FOR WRITE-INS



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Arizona

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Arkansas

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF District of Columbia

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Georgia

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Illinois

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Indiana

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Iowa

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Kentucky

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Maryland

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Michigan

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Mississippi

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Missouri

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Montana

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Nebraska

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF New Mexico

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF North Dakota

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Ohio

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Oklahoma

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Oregon

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Pennsylvania

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Texas

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Utah

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF West Virginia

NAIC Group Code: 0000

NAIC Company Code: 16825

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



MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed By March 1)
 FOR THE STATE OF Wisconsin

NAIC Group Code: 0000

NAIC Company Code: 16825

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