

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

## **ANNUAL STATEMENT**

FOR THE YEAR ENDED DECEMBER 31, 2024 OF THE CONDITION AND AFFAIRS OF THE

Allmerica Financial Alliance Insurance Company

NAIC Group Code 0088 0088 NAIC Company Code 10212 Employer's ID Number 04-3272695

Organized under the Laws of Country of Domicile	New Ha		State of Domicile or Port of Er of America	ntry NH
Incorporated/Organized	04/26/1995		Commenced Business	05/24/1995
Statutory Home Office	4 Bedford Farms Dr			Bedford, NH, US 03110-6528
Maria Adaptatatati as Office	(Street and N	,		Town, State, Country and Zip Code)
Main Administrative Office		440 Lincol (Street and		
	rcester, MA, US 01653-0002	) and a \		508-853-7200
	own, State, Country and Zip (	,	(A	rea Code) (Telephone Number)
Mail Address	440 Lincoln Stree (Street and Number or P	·		Vorcester, MA, US 01653-0002  Town, State, Country and Zip Code)
Primary Location of Books and R		440 Linco	, ,	,,,
•		(Street and		
	rcester, MA, US 01653-0002	,		508-853-7200-8557928
, ,	own, State, Country and Zip (	,	,	rea Code) (Telephone Number)
Internet Website Address		WWW.HANC	OVER.COM	
Statutory Statement Contact _		M. Hazelwood		508-853-7200-8557928
DHAZ	ZELWOOD@HANOVER.COI	(Name) VI ,		(Area Code) (Telephone Number) 508-853-6332
	(E-mail Address)			(FAX Number)
		OFFIC	ERS	
President	John Conne			Nathaniel William Clarkin
Senior Vice President & Secretary	Charles Frede	rick Cronin		
Jeffrey Mark Farber, Executiv Williard Ty-Lunn Lee, Exe Bryan James Salvatore, Ex	ecutive Vice President	OTHI Dennis Francis Kerrigan Jr., Chief Leg David John Lovely #, Ex	Executive Vice President &	Richard William Lavey, Executive Vice President Denise Maureen Lowsley, Executive Vice President
BIYAII JAINES GAIVAIGIE, EX	Reculive vice Fresident			
Warren Elliso	on Barnes	DIRECTORS OF Jeffrey Ma	rk Forbor	Lindsay France Greenfield
Dennis Francis	Kerrigan Jr.	Williard Ty	-Lunn Lee	David John Lovely
Denise Mauree	en Lowsley	John Conr	ner Roche	Bryan James Salvatore
State of	Massachusetts	ss		
County of	Worcester			
all of the herein described asset statement, together with related condition and affairs of the said r in accordance with the NAIC An rules or regulations require diff respectively. Furthermore, the s	ts were the absolute propert exhibits, schedules and explareporting entity as of the reponual Statement Instructions afterences in reporting not recope of this attestation by the differences due to electronic the methics.	y of the said reporting entity, inations therein contained, an rting period stated above, and and Accounting Practices and lated to accounting practices e described officers also incli	free and clear from any liens nexed or referred to, is a full a d of its income and deductions if Procedures manual except to and procedures, according udes the related correspondingment. The electronic filing may be rick Cronin lent & Secretary  a. Is this an original filing b. If no,  1. State the amendments	ent number
Jaime L. Hawley Notary November 29, 2030	m		Date filed      Number of pages a	

Jaime Hawley
Notary Public
COMMONWEALTH OF MASSACHUSETTS
My Commission Expires
November 29, 2030



NAIC Group Code 0088 BUSINESS	<u>IN THE STATE C</u>					•	טט	RING THE YEAR	<u> </u>		npany Code 10	14 14
	Policy and Me Less Return	ums, Including mbership Fees, Premiums and olicies not Taken	3 Dividends Paid	4	5	6	7	8 Direct Defense	9 Direct Defense	10  Direct Defense and Cost	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage	Direct Losses Incurred	Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses
1. Fire	0	0	0		)  0		0	)0	0	0	0	
2.1 Allied Lines		0	0		)  0	· ······	0	0	0	0	0	
2.2 Multiple Peril Crop		0	0				0	0	0	0	0	
2.4. Private Crop		0	0		)		0	0	0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	0	
2.5 Private Flood		0	0		1		0	1	0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
Farmowners Multiple Peril			0		)  0		n	1	n	٥٥	0	
Homeowners Multiple Peril		0	0		)		0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)		0	0		)0		ō	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)		0	0		)  0		oa	00	0	0	0	
Mortgage Guaranty	0	0	0		00		0	)0	0	0	0	
8. Ocean Marine	0	0	0	C	)  0		0	00	0	0	0	
9.1 Inland Marine	0	0	0	0	)  0		0	00	0	0	0	
9.2 Pet Insurance Plans	0	0	0		)  0		0	)  0	0	0	0	
10. Financial Guaranty	0	0	0	<u>C</u>	0  0		0  0	0  0	0	ō	0	
11.1 Medical Professional Liability - Occurrence	0	0	0		)  0	· ······	0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0		)  0		0  0	)  0	0	0	0	
12. Earthquake		0	0		)		0	)  0	0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠		
<ul><li>13.1 Comprehensive (hospital and medical) ind (b)</li></ul>		0	0		)		0		0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠		
14. Credit A&H (Group and Individual)		0	0		)		n	)	0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠		
15.1 Vision Only (b)		0	0		1		0	1	0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
15.2 Dental Only (b)		Λ	o		)  0		n	1	n	٥٥	0	
15.3 Disability Income (b)	0	0	0		)		0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0		)		0	0	0	0	0	
15.5 Medicaid Title XIX (b)		0	0		)0		ō	0	0	0	0	
15.6 Medicare Title XVIII (b)		0	0		)  0		oa	)0	0	0	0	
15.7 Long-Term Care (b)	0	0	0		)  0		o	)  0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0		)  0		0	)  0	0	0	0	
15.9 Other Health (b)	0	0	0	0	)  0		00		0	0	0	
16. Workers' Compensation		150,537	0	51,012	2 4,423	18,76			7,903	13,725	18,403	32
17.1 Other Liability - Occurrence		0	0		)  0		0	0  0	0	0	0	
17.2 Other Liability - Claims-Made	0	0	0		)  0		0  0	0	0	0	0	
17.3 Excess Workers' Compensation		0	0		0		0  0	)  0	0	0	0	
18.1 Products Liability - Occurrence		0	0		)		0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)			0 N		)		n	1	0 n	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
19.2 Other Private Passenger Auto Liability		Λ	o		)  0		n	)	Λ	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0		)		0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0		)		0	0	0	0	0	
21.1 Private Passenger Auto Physical Damage		0	0		)  0		0	)  0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0		)0		0	)0	0	0	0	
22. Aircraft (all perils)	0	0	0	0	0		0	0	0	0	0	
23. Fidelity	0	0	0	C	)  0		0	00	0	0	0	
24. Surety	0	0	0	0	)  0		0	00	0	0	0	
26. Burglary and Theft	0	0	0		)  0		0	)  0	0	0	0	
27. Boiler and Machinery		0	0	C	)  0		0	0  0	0	ō	0	
28. Credit		0	<u>0</u>	<u>C</u>	0  0		0  0	)   <u>0</u>	0	0	J0	
29. International	0	0	J0	ļ	0		ي ا	,  ō	0	0	J0	
30. Warranty	0	0	0	XXX	)  0	XXX	0XXX	)	XXX	XXX		XXX
31. Reins nonproportional assumed property	XXXXXX	XXXXXX	XXX	XXXXX		XXX		XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX						XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business										n	n	
35. Total (a)	172.849	150.537	0	51.012						13.725	18.403	32
DETAILS OF WRITE-INS		.50,007		01,012	1,120	10,70	. 00,210		7,000	30,720	.0,100	-
01											.]	
02.												
											.	
198. Summary of remaining write-ins for Line 34 from overflow page	0	0	0		)  0		0	0	0	0	0	
199. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	1 0	0	1 0	1 0	)   0	1	0 I 0	0	1 0	0	0	ĺ



Cross Presentary including   Printy	ode 10212	pany Code	NAIC Com	R 2024	RING THE YEAR	DU					F Alaska	N THE STATE C	NAIC Group Code 0088 BUSINESS II
Line of Sustains	11 1	11 Commissions	10 Direct Defense and Cost Containment	9 Direct Defense and Cost	8 Direct Defense and Cost	7		5	4	Dividends Paid or Credited to	ums, Including mbership Fees, Premiums and blicies not Taken 2	Gross Premiu Policy and Mei Less Return I Premiums on Po	
2.1 Alfold Lines		and Brokerage Expenses											
22 Milysperial Cop	0		0	0	0	0		0	0	0	0	0	
2.3 Federia Floor			0	0	0	0		0	0	0	0	0	
2.5 Pfivase Flood	0		0	0	0	0		0	0	0	0	0	
1. Farmowers Multiple Peril   0   0   0   0   0   0   0   0   0	0		0	0	0	00	(	0	0	0	0	0	
4 Homeowners Mulripe Peril (mol Lability Portion)	0		0	0	0	00		0	0	0	0	0	
5.1 Commercial Multiple Peril (Lability Profition)	0		0	0	0	0		0	0	0	0	0	
S. Commercial Multiple Period (Listility Portion)			0	0	0	)		0			0	0	
6 Mortgage Cuarriny	0		0	0	0	0		0	0	0	0	0	
9.1 Inland Marine	0		0	0	0	00		0	0	0	0	0	Mortgage Guaranty
9.2 Pet Insurance Plans	0		0	0	0	0		0	0	0	0	0	
10. Financial Guaranty	0		0	0	0			0	0	0	0	0	
11.1 Medical Professional Liability - Cocurrence	h		0	0	0	,   <sub>0</sub>	<i> </i>	0	0	0	0	0	
11						j				n		n	
2 Earthquake	0		0	0	0	0		0	0	0	0	0	11.2 Medical Professional Liability - Claims-Made
13.2   Comprehensive (hospital and medical group (b)   0   0   0   0   0   0   0   0   0	0		0	0	0	00		0	0	0	0	0	12. Earthquake
14. Credit ASH (Group and Individual)	0		0	0	0	00		0	0	0	0	0	13.1 Comprehensive (hospital and medical) ind (b)
15.1 Vision Only (b)	0		0	0	0	0		0	0	0	0	0	
15.2 Dental Chriy (b)			0	0	0	0		0	0		0	0	
15.3   Disability income (b)   0   0   0   0   0   0   0   0   0			0	0	0	1		0		٠١	0		
15.5 Medicaré Supplement (b)			0	0	0	0		0	0	0	0	0	
15.6 Medicare Tille XVIII (b)	0		0	0	0	0		0	0	0	0	0	15.4 Medicare Supplement (b)
15.7 Long-Term Care (b)	0		0	0	0	00	(	0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0		0	0	0	00		0	0	0	0	0	
15.9 Other Health (i)			0	0	0	0		0	0	0	0	0	15.7 Long-Term Care (b)
Norker's Compensation			0	0	0	J		0			0	0	
17.1   Other Liability - Courrence	17		7	7	0	3 26	26	0			157	157	
17.2   Other Liability - Claims-Made	0		0	0	0	0		0		0	0		
18.1   Products Liability - Occurrence	0		0	0	0	00		0	0	0	0	0	17.2 Other Liability - Claims-Made
18.2   Products Liability - Claims-Made	0		0	0	0	00		0	0	0	0	0	
19.1   Private Passenger Auto No-Fault (Personal Injury Protection)	0		0	0	0	00		0	0	0	0	0	18.1 Products Liability - Occurrence
19.2   Other Private Passenger Auto Liability	0		0	0	0	0		0	0	0	0	0	18.2 Products Liability - Claims-Made
19.3 Commercial Auto No-Fault (Personal Ínjury Protection) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			0	0	0	)o		0		۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	0		19.1 Private Passenger Auto No-Fault (Personal Injury Protection)
19.4 Other Commercial Auto Liability	0		0	0	0	0		0	0	0	0	0	
21.2   Commercial Auto Physical Damage	0		0	0	0	0		0	0	0	0	0	19.4 Other Commercial Auto Liability
22.   Aircraft (all perils)	0		0	0	0	00		0	0	0	0	0	21.1 Private Passenger Auto Physical Damage
23   Fidelity	0		0	0	0	00		0	0	0	0	0	21.2 Commercial Auto Physical Damage
24. Surety       0	0		0	0	0	0		0	0	0	0	0	
26. Burglary and Theft			0	0	0			0				0	
27   Boiler and Machinery	0		0	0	0	)		0			0	0	
29. International       0	0		0	0	0	0		0	0	0	0	0	
30. Warranty 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0		0	0	0	0		0	0	0	0	0	28. Credit
31. Reins nonproportional assumed property	0		0	0				0	0	0	0	0	
32. Reins nonproportional assumed liability XXX XXX XXX XXX XXX XXX XXX XXX XXX X	0xx									0	0	0	
92. Treins institutional assumed financial lines.		XXX											
		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	33 Reins nonproportional assumed financial lines
33. Aggregate Write-ins for Other Lines of Business 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0		0	0	0	)0		0		0		0	34. Aggregate Write-Ins for Other Lines of Business
35. Total (a) 157 157 0 0 0 26 26 0 7 7 7	17		7	7	0	6 26	26	0	0	0	157	157	
DETAILS OF WRITE-INS													
3401													
3402													
3403. Summary of remaining write-ins for Line 34 from overflow page 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			0	0		n			0	n	n	n	
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) 0 0 0 0 0 0 0 0 0 0 0	0		0	0	0	0		0	0		0	0	



	NAIC Group Code 0088 BUSINESS II								RING THE YEAR	· 2027		pany Code 10	7212
		Policy and Mer	Premiums and plicies not Taken	3 Dividends Paid	4	5	6	7	8 Direct Defense	9 Direct Defense	10  Direct Defense and Cost	11	12
	Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, License and Fees
	Fire	0	0	0	0	0		0	0	0	0	0	
	Allied Lines	0	0	0	0	0		0	0	0	0	0	
	Multiple Peril Crop		0		0			,	0	0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	0	
	Private Crop	u	u	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰				1	0	0	٥٥		
	Private Flood	Λ	0 n	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		,		)  0		0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
	Farmowners Multiple Peril	0	0	0	0	0		0	0	0	0	0	
	Homeowners Multiple Peril	0	0	0	0	00		0	0	0	0	0	
	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	00		00	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)	0	0	0	0	00		)0	0	0	0	0	
6.	Mortgage Guaranty	0	0	0	0	00		)0	0	0	0	0	
8.	Ocean Marine	0	0	0	0	00		)0	0	0	0	0	
9.1	Inland Marine	0	0	0	0	00		)  0	0	0	0	0	
	Pet Insurance Plans	0	0	0	0	0		00	0	0	0	0	
	Financial Guaranty	0	0	0	J0	)  0		0	0	0	0	0	
11.1	Medical Professional Liability - Occurrence	0	0	0	0	<u> </u>  0		0	0	0	0	0	
	Medical Professional Liability - Claims-Made	0	ļ0	0	J0	ː  0	ļ	0	0	J 0	0	<sub>0</sub>	
12.	Earthquake	0	0	0	0	0		0	0	0	0	0	
	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0			0	0	0		
	Comprehensive (nospital and medical) group (b)	0	0	0	0			,	0	0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠		
	Vision Only (b)	u	0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	0			,			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	0	
	Dental Only (b)	u	0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	0			,		0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
	Disability Income (b)		0 n	0 n	0	1		1		0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
15.5	Medicare Supplement (b)	n	0		0	0		) 1	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0	0	0		0	0	0	0	0	
15.6	Medicare Title XVIII (b).	0	0	0	0	00		0	0	0	0	0	
	Long-Term Care (b)		0	0	0			)	0	0	0	0	
15.8	Federal Employees Health Benefits Plan (b)	0	0	0	0	00		)0	0	0	0	0	
	Other Health (b)	0	0	0	0	00		)0	0	0	0	0	
	Workers' Compensation	418,846	418,894	0	161,931	125,621	223,540	200, 198	6, 185	17,891	36,449	44,036	14
17.1	Other Liability - Occurrence	0	0	0	0	00		)0	0	0	0	0	
	Other Liability - Claims-Made	0	0	0	0	00		)  0	0	0	0	0	
17.3	Excess Workers' Compensation	0	0	0	0	0		00	0	0	0	0	
18.1	Products Liability - Occurrence	0	0	0	0	00		00	0	0	0	0	
	Products Liability - Claims-Made	0	0	0	0	0		0	0	0	0	0	
	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		0	0	0	0	0	
19.2	Other Private Passenger Auto Liability	0	0	0	0	0		,  0	0	0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	0	
19.3	Other Commercial Auto Liability	0 n	0	0				,	0	0	٥٥		
21.4	Private Passenger Auto Physical Damage	0	n		n	,		,	n	n	0 n	n	
21.1	Commercial Auto Physical Damage	n	n	n	n	n		,	0	n	n	n	
	Aircraft (all perils)	0	0	0	0	0		)	0	0	0	0	
	Fidelity	0	0	0	0	0		)	0	0	0	0	
	Surety	0	0	0	0	0		)0	0	0	0	0	
26.	Burglary and Theft	0	0	0	0	00		)0	0	0	0	0	
	Boiler and Machinery	0	0	0	0	00		)0	0	0	0	0	
	Credit	0	0	0	0	00		)  0	0	0	0	0	
	International	0	0	0	0	00		00	0	0	0	0	
	Warranty	0	0	0	0	0  0		00	0	0	0	0	
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	xxx	XXX		xxx	XXX	XXX	XXX	XXX
	Aggregate Write-Ins for Other Lines of Business	0	0 418.894	0	161.931					0 17.891	36.449	44.036	14
	Total (a)	418,846	418,894	0	161,931	125,621	223,540	200, 198	6,185	17,891	36,449	44,036	14
	DETAILS OF WRITE-INS	I	I	1				1		1		Í	
01.													
01. 02.													
401. 402. 403.	Summary of remaining write-ins for Line 34 from overflow page	n	n					)	n	0	0		



NAIC Group Code 0088 BUSINE	SS IN THE STATE (				LOSSES	,		RING THE YEAR	R 2024	NAIC Com	npany Code 10	212
	Gross Premi Policy and Me Less Return Premiums on P	ums, Including embership Fees, Premiums and folicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0		0		0	0	0	0	0	
2.1 Allied Lines	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	0	0		0		n	1		0		
2.3 Federal Flood	0	0	0		0		o	0	0	0	0	
2.4. Private Crop	0	0	0		0		0	00	0	0	0	C
2.5 Private Flood	0	0	0		0		0	)0	0	0	0	
Farmowners Multiple Peril	0	0	0		0		0	0	0	0	0	(
5.1 Commercial Multiple Peril (Non-Liability Portion)		0	0				0	)0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)		0	0		0		0	0	0	0	0	
Mortgage Guaranty	0	0	0		0		0	00	0	0	0	
8. Ocean Marine	0	0	0		0		0	)  0	0	0	0	(
9.1 Inland Marine	0	0	0		0		0  0	0	0	0	0	
10. Financial Guaranty	0	0	0		0		ō	)	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0		0		0	00	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0		0		0	0	0	0	0	
12. Earthquake	0	0	0		0		0	)  0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	u				0		n  u	)		0	0	
14. Credit A&H (Group and Individual)		0	0		0		0	)0	0	0	0	
15.1 Vision Only (b)	0	0	0		0		0	0	0	0	0	
15.2 Dental Only (b)	0	0	0		0		0	)0	0	0	0	(
15.3 Disability Income (b)	0	0	0		0		0	0	0	0	0	
15.4 Medicare Supplement (b)		0	0		0		0	)  0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0				0	)0	0	0	0	
15.7 Long-Term Care (b)	0	0	0		0		0	00	0	0	0	C
15.8 Federal Employees Health Benefits Plan (b)		0	0		0		00	00	0	0	0	
15.9 Other Health (b)		0	0			63.34	0	)0 I11.268	0	0	0	
16. Workers' Compensation		188,620		55,9/	98,696		n 109,731	111,268		18,/3/		34,594
17.2 Other Liability - Occurrence	0	0	0		0		0	)0	0	0	0	
17.3 Excess Workers' Compensation		0	0		0		0	00	0	0	0	
18.1 Products Liability - Occurrence	0	0	0		0		0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0		0		0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)		0					n	)		0		
19.3 Commercial Auto No-Fault (Personal Injury Protection)		0	0		0		o	)0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0		0		0	00	0	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0		0		0	)  0	0	0	0	(
21.2 Commercial Auto Physical Damage	0	0	0		0		U  C	0	0	0	0	
23. Fidelity	0	0	0		0		0	0	0	0	0	(
24. Surety	0	0	0		0		0	0	0	0	0	
26. Burglary and Theft	0	0	0		0		0	0	0	0	0	
27. Boiler and Machinery	0	0	0		0		0	0  0	0	0	0	
28. Credit	0	0	0		0		0	0	0	0	0	
30. Warranty		0					0		0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	xxx	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	xxx	xxx	XXX	xxx	xxx	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0 n			63.34	5 109.731	11.268	0		16.815	34.59
DETAILS OF WRITE-INS	104,231	100,020		55,81	30,030	00,04	103,701	11,200	002	10,737	10,013	07,00
401												
402.		.							ļ			
403.		· <del> </del> · · · · · · · · · · · · · · · · · · ·				· ·····						
498. Summary of remaining write-ins for Line 34 from overflow page 499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0 n	0	0		0		0	0	0 n	0 n	0 n	
10talo (Elitos 040 i tillough 0400 plus 0400)(Elito 04 above)	ı U	0		1	U	1	·	, ,	U		ı U	



NAIC Group Code 0088 BUSINESS	<u>IN THE STATE C</u>						טט	RING THE YEAR	7 2024		npany Code 10	12 12
	Policy and Me Less Return I	ums, Including mbership Fees, Premiums and plicies not Taken	3 Dividends Paid	4	5	6	7	8 Direct Defense	9 Direct Defense	Direct Defense	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses ) Incurred	Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0		)  0	)	00	0	0	0	0	
2.1 Allied Lines		0	0		)  0		0  0	0	0	0	0	
Multiple Peril Crop		0	0				0	0	0	0	0	
2.4. Private Crop		0	0		)		0  0	0	0	0	0	
2.4. Private Grop			0		1		0			٥٥		
Farmowners Multiple Peril		0	0		)		0	0	0	0	0	
Homeowners Multiple Peril	0	0	0		)		00	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0		0		00	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)		0	0		)  0	)	00	0	0	0	0	
Mortgage Guaranty	0	0	0		)  0	)	00	0	0	0	0	
8. Ocean Marine	0	0	0		)  0	)	00	00	0	0	0	
9.1 Inland Marine	0	0	0	0	)  0	)	00	00	0	0	0	
9.2 Pet Insurance Plans	0	0	0	C	)  0	)	0  0	0	0	0	0	
10. Financial Guaranty	0	ō	<u>0</u>	<u>C</u>	0  0		0  0	<u> </u>		0	0	·····
11.1 Medical Professional Liability - Occurrence	0	0	0		)  0		0  0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0		0		0	0	0	0	0	
12. Earthquake		0	0		)		0  0	0		0	0	
13.2 Comprehensive (hospital and medical) ind (b)			0		1		0			٥٠٠٠		
14. Credit A&H (Group and Individual)			0 N		)		n	0		۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
15.1 Vision Only (b)		Λ	o		)  0	1	n			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	0	
15.2 Dental Only (b)	n	0	0		)		n	0	0		0	
15.3 Disability Income (b)	0	0	0		)		0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0		)		0	0	0	0	0	
15.5 Medicaid Title XIX (b)		0	0		)0		0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0		)  0	)	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0		)  0	)	00	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0		)  0	)	00	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	)  0	)	00		0	0	0	
16. Workers' Compensation		348, 147	0	77,750	324, 133	3 (359, 23			15,792	32,202	31,886	7
17.1 Other Liability - Occurrence		0	0		)  0	)	00	00	0	0	0	
17.2 Other Liability - Claims-Made	0	0	0		)  0		0  0	0	0	0	0	
17.3 Excess Workers' Compensation		0	0		0		0	0	0	0	0	
18.1 Products Liability - Occurrence		0	0		)		0  0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)			0 N		)		n	0		۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
19.2 Other Private Passenger Auto Liability		Λ	o		)  0	(6)	6) 32	0	(11)	10	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0		)	)	0	0	0	0	0	
19.4 Other Commercial Auto Liability		0	0		)		00	0	0	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0		)  0		0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0		)0		00	0	0	0	0	
22. Aircraft (all perils)	0	0	0		)  0		0  0	0	0	0	0	ļ
23. Fidelity	0	0	0	C	)  0	)	00	00	0	0	0	
24. Surety	0	0	0	0	)  0	)	00	00	0	0	0	
26. Burglary and Theft	0	0	0		)  0	)	0  0	0	0	0	0	ļ
27. Boiler and Machinery	0	0	0	C	)  0	)	0  0	)  0	0	0	0	ļ
28. Credit	0	0	0	<u>C</u>	<u> </u>		υ  0 <u>-</u>	<u> </u>  0	0	0	0	·····
29. International		J	J0	ļ	0		u  0	<u> </u>	<sub>0</sub>	0	J0	·····
		0 XXX	0	XXX	)  0	XXX	0	XXX		XXX	XXX	XXX
Reins nonproportional assumed property     Reins nonproportional assumed liability		XXXXXX	XXX	XXX		XXX		XXX		XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX							XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0									n	
35. Total (a)	305.869	348.147	0	77.750						32.212	31.886	7
DETAILS OF WRITE-INS	230,000	2.0,111		11,100	221,100	(300,00	,	12,010	.5,101	32,212	31,000	·
01												[
02.												
03												
98. Summary of remaining write-ins for Line 34 from overflow page	0	0	0		)  0	)	0  0	0	0	0	0	ļ
99. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	)   0	) [	0 <b> </b> 0	0	0	0	0	1



NAIC Group Code 0088 BUS	INESS IN THE STATE C				LOSSES			RING THE YEAR	R 2024	NAIC Com	npany Code 10	)212
	Gross Premiu Policy and Me Less Return I Premiums on Po	ums, Including mbership Fees, Premiums and plicies not Taken 2	3 Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0		0		00	0	0	0	0	
2.2 Multiple Peril Crop		n	0 n		)   )		n	1		0		
2.3 Federal Flood	0	0	0		0		0	0	0	0	0	
2.4. Private Crop	0	0	0		0		00	00	0	0	0	
2.5 Private Flood	0	0	0	C	) 0		00	00	0	0	0	
Farmowners Multiple Peril	0	0	0	C	0		00	)  0	0	0	0	
Homeowners Multiple Peril     Commercial Multiple Peril (Non-Liability Portion)		0	0		0		0  0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)							0	)				
6. Mortgage Guaranty	0	0	0		0		0	0	0	0	0	
8. Ocean Marine	0	0	0				0	0	0	0	0	
9.1 Inland Marine		0	0	0	)  0		00	)0	0	0	0	
9.2 Pet Insurance Plans		0	0	0	)  0		00	)  0	0	0	0	
10. Financial Guaranty		0			.  0		0  0	)  ō	0	0	0	
<ul> <li>11.1 Medical Professional Liability - Occurrence</li> <li>11.2 Medical Professional Liability - Claims-Made</li> </ul>	0	0	0				0  0	)  0	0	0	0	
12. Earthquake			n				n	1	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0		0		0	)0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0		0		00	00	0	0	0	
14. Credit A&H (Group and Individual)		0	0		)  0		00	00	0	0	0	
15.1 Vision Only (b)		0	0	0	00		00	00	0	0	0	
15.2 Dental Only (b)		0	0	C	0		00	)  0	0	0	0	
15.3 Disability Income (b)		0	0		0		0  0	0	0	0	0	
15.5 Medicare Supplement (b)			0				0	)				
15.6 Medicare Title XVIII (b)		0	0		0		0	)0	0	0	0	
15.7 Long-Term Care (b)		0	0				0	00	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0		) 0		00	00	0	0	0	
15.9 Other Health (b)		0	0	0	0		00	0	0	0	0	
16. Workers' Compensation		851,312	0	352,960	143,482	62,42			35,165	145,865	92,280	37,86
17.1 Other Liability - Occurrence	0	0	0		0		00	0	0	0	0	
17.3 Excess Workers' Compensation			0 n				0	)	0	0		
18.1 Products Liability - Occurrence		0	0		0		0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0		0		0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0		)  0		00	00	0	0	0	
19.2 Other Private Passenger Auto Liability		0	0	0	00		00	00	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)		0	0	0	0		00	0  0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0				0  0	)  0	0	0	0	
21.2 Commercial Auto Physical Damage		0					n	1	0	0		
22. Aircraft (all perils)		0	0		0		0	0	0	0	0	
23. Fidelity	0	0	0		0		00	00	0	0	0	
24. Surety	0	0	0	0	)  0		00	0	0	0	0	
26. Burglary and Theft	0	0	0		)  0		00	0	0	0	0	
27. Boiler and Machinery	······ŏ	ō	J	ļ	.  0		۰  0	,  ō	0	0	0	
28. Credit	0	l0	0				0  0		0	0	0	
30. Warranty		n	n		,		00		0	0		
31. Reins nonproportional assumed property	XXX	XXX	XXX	xxx	xxx	xxx		xxx	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business		0			143.482	62.42		)0 3 17.048	0		0	37.86
35. Total (a)  DETAILS OF WRITE-INS	8/1,909	851,312	0	352,960	143,482	62,42	2 563, 158	17,048	35,165	145,865	92,280	37,86
01												
02												
03												
98. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	)		00	)  0	0	0	0	
99. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	1	)   0		0	)   0	0	0	1 0	i .



	NAIC Group Code 0088 BUSINESS II	N THE STATE C	F Delaware					DU	RING THE YEAR	R 2024	NAIC Com	pany Code 10	0212
		Gross Premit Policy and Mer Less Return F	ıms, Including	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10  Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	FireAllied Lines	0	0	0	0	)  0		00	0	0	0	0	
	Multiple Peril Crop	0	0	0	0	)		0	0	0	0	0	
	Federal Flood	0	0	0	0	)		00	0	0	0	0	
	Private Crop	0	0	0	0	)  0		00	0	0	0	0	
	Private Flood	0	0	0	0	)  0		00	0	0	0	0	
3. 4.	Farmowners Multiple Peril	0	0	0		)		0	0	0	0		
	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	)		00	0	0	0	0	
5.2	Commercial Multiple Peril (Liability Portion)	0	0	0	0	)  0		00	0	0	0	0	
6.	Mortgage Guaranty	0	0	0	0	)  0		00	0	0	0	0	
8.	Ocean Marine	0	0	0	0	)		0  0	0	0	0	0	
	Pet Insurance Plans	0	0	0		)  a		ō	0	0	0	0	
10.	Financial Guaranty	0	0	0	0	)		00	0	0	0	0	
11.1	Medical Professional Liability - Occurrence	0	0	0	0	)  0		00	0	0	0	0	
	Medical Professional Liability - Claims-Made	0	0	0	J	)  0		00	0	0	0	0	
12. 13.1	Earthquake  Comprehensive (hospital and medical) ind (b)	0	0	0		)		00	0		0		
13.1	Comprehensive (hospital and medical) group (b)	0	0	0	0	)		0	0	0	0	0	
	Credit A&H (Group and Individual)	0	0	0	0			00	0	0	0	0	
	Vision Only (b)	0	0	0	0	)  0		00	0	0	0	0	
	Dental Only (b)	0	0	0	0	)		00	0	0	0	0	
	Disability Income (b)	0	0	0	0	)		0  0	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0		)		0	0	0	0		
	Medicare Title XVIII (b).	0	0	0	0	)		00	0	0	0	0	
15.7	Long-Term Care (b)	0	0	0	0	)  0		00	0	0	0	0	
	Federal Employees Health Benefits Plan (b)	0	0	0	0	0		00	0	0	0	0	
	Other Health (b)			0		33.000	(11.46	7)20.731		13.949	3.407	54.370	
	Other Liability - Occurrence	0	0	0	0	)0	(11,40	0		0	0	0	25,75
17.2	Other Liability - Claims-Made	0	0	0	0	)		00	0	0	0	0	
	Excess Workers' Compensation	0	0	0	0	)  0		00	0	0	0	0	
18.1	Products Liability - Occurrence	0	0	0	0	)  0		0  0	0	0	0	0	
18.2	Products Liability - Claims-Made	0	0	0		)		00	0	0	0	0	
19.1	Other Private Passenger Auto Liability	0	0	0	0	)		0	0	0	0	0	
19.3	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	)  0		00	0	0	0	0	
19.4	Other Commercial Auto Liability	0	0	0	0	)		00	0	0	0	0	
21.1	Private Passenger Auto Physical Damage	0	0	0	J0	٥٠		00	0	J0	0	0	
21.2 22	Aircraft (all perils)	0	n	n		)		0n	0			0	
23.	Fidelity	0	0	0	0	)		00	0	0	0	0	
	Surety	0	0	0	0	)		00	0	0	0	0	
26.	Burglary and Theft	0	0	0	0	)  ū		00	0	0	0	0	
27. 28.	Boiler and Machinery	0	0	0	J	,  0		0	0	0 n	0	0	
29.	International	0	0	0		)		00	0	0	0	0	
30.	Warranty	0	0	0	0	)		00		0	0	0	
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXXXXX	XXX	XXX	XXXXXX		XXXXXX	XXXXXX	XXXXXX	XXX	XXXXXX
33. 34.	Reins nonproportional assumed financial lines	XXX	0	XXX	XXX			XXX	XXX	0	XXX	XXX	
35.	Total (a)	554,991	542,893	0	149,986				12,955		3,407	54,370	29,79
	DETAILS OF WRITE-INS	,	, , ,				, ,					,,,	
3401.													
3402. 3403.													
3403. 3498.	Summary of remaining write-ins for Line 34 from overflow page	n	n	n	0	)		0 0	0	0	0	0	
	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)							V					



	NAIC Group Code 0088 BUSINESS II	N THE STATE C	F District of C	olumbia				DU	RING THE YEAR	R 2024	NAIC Com	pany Code 10	0212
	200200	Gross Premiu Policy and Mei Less Return I Premiums on Po	ums, Including mbership Fees, Premiums and blicies not Taken 2	3 Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	FireAllied Lines	0	0	0	0	0		00	0	0	0	0	
	Multiple Peril Crop	0	0	0	0	0		00	0	0	0	0	
	Federal Flood	0	0	0	0	0		00	0	0	0	0	
	Private Crop	0	0	0	0	00		00	0	0	0	0	
	Private Flood	0	0	0	0	0		00	0	0	0	0	
3. 4.	Farmowners Multiple Peril		0	٠٠		0		00	0	0	0	0	
	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0		00	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0		00	0	0	0	0	
6.	Mortgage Guaranty	0	0	0	0	00		00	0	0	0	0	
8.	Ocean Marine	0	0	0	0	0		00	0	0	0	0	
	Inland Marine	0	0	0	0			0	0	0	0	0	
	Financial Guaranty	n	n	n		)		ō n	n				
11.1	Medical Professional Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
11.2	Medical Professional Liability - Claims-Made	0	0	0	0	)  0		00	0	0	0	0	
12.	Earthquake	0	0	0	0	0		00	0	0	0	0	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0		00	0	0	0	0	
	Credit A&H (Group and Individual)	0	0			0		0	0	0	0	0	
	Vision Only (b)	0	0	0	0	0		00	0	0	0	0	
	Dental Only (b)	0	0	0	0	0		00	0	0	0	0	
	Disability Income (b)	0	0	0	0	0		00	0	0	0	0	
	Medicare Supplement (b)	0	0	0	0	0		0  0	0	0	0	0	
	Medicare Title XVIII (b)	0	0			0		00	0	0	0	0	
	Long-Term Care (b)	0	0	0	0	0		00	0	0	0	0	
15.8	Federal Employees Health Benefits Plan (b)	0	0	0	0	00		00	0	0	0	0	
	Other Health (b)	0	0	0	0	00		00	0	0	0	0	
	Workers' Compensation	827,321	680,746	0	419,511	51,478	105,24			28,219	39,993	83,273	27,96
17.1	Other Liability - Occurrence	0	0	0	0	0		0  0	0	0	0	0	
	Excess Workers' Compensation	0	0			0		0	0	0	0	0	
	Products Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
18.2	Products Liability - Claims-Made	0	0	0	0	00		00	0	0	0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		00	0	0	0	0	
	Other Private Passenger Auto Liability	0	0	0	0	0		0  0	0	0	0	0	
	Other Commercial Auto Liability		0	٠٠		0		00	0	0	0	0	
21.1	Private Passenger Auto Physical Damage	0	0			)		0	0	0		0	
21.2	Commercial Auto Physical Damage	0	0	0	0	0		00	0	0	0	0	
22.	Aircraft (all perils)	0	0	0	0	0		00	0	0	0	0	
23.	Fidelity	0	0	0	J0	0		0  0	0	0	0	0	
24. 26.	Surety Burglary and Theft	J0	0	0	J0			υ  0 n	0	J0	0	0	
26. 27.	Boiler and Machinery	n	0			,		0n	0	0	0	0 n	
28.	Credit	0	0	0	0	0		00	0	0	0	0	
29.	International	0	0	0	0	0		00		0	0	0	
30.	Warranty	0	0	0	0			00		0	0	0	
31. 32.	Reins nonproportional assumed property	XXXXXX	XXX	XXXXXX	XXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
32. 33.	Reins nonproportional assumed liability	XXXXXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXXXXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0				0	0	0	0	
35.	Total (a)	827,321	680,746	0	419,511	51,478	105,24		7,025		39,993	83,273	27,96
	DETAILS OF WRITE-INS				1						-		
3401.													
3402. 3403.													
	Summary of remaining write-ins for Line 34 from overflow page		0			0		0		0	0	0	
3498.													



Content	С	Group Code 0088 BUSINESS I	N THE STATE C	F Florida				-	- ĎU	IRING THE YEAR	R 2024	NAIC Com	npany Code 10	212
Lear of Business   Wyges   Egyme   Company			Gross Premi Policy and Me Less Return	ums, Including mbership Fees, Premiums and olicies not Taken	Dividends Paid or Credited to	4	5		7	8 Direct Defense	9 Direct Defense	10 Direct Defense and Cost	11 Commissions	12
21 Miled lares		Line of Business											and Brokerage Expenses	Taxes, Licenses and Fees
22 Annels Pent Crop 2 Feeder   Crop 3 Feeder   Crop 4 Feeder   Crop 5 Feeder   Crop 5 Feeder   Crop 6 Feeder   Crop 6 Feeder   Crop 7 Feeder   Crop 7 Feeder   Crop 8 Feeder			0	0	0	0	0		00	0	0	0	0	
2.5 Fereiral Flood				0	0		)		0	1		0		
25 Prince Floor			10	0	0	0	)0		0	0	0	0	0	
A Fernomenta Multiple Perfet			0	0	0	0	0		00	0	0	0	0	
1			0	0	0	0	)  0	)	00	0	0	0	0	
5.1 Cornerad Murispe Pent (Justilly Portory)			. 0	0	0	0	0		00	00	0	0	0	
Section   Comparison   Compar			0	0	0	0	)		0  0	)  0	0	0	0	
6 Mortgage Clusterity			0	0	0		)	,	0	0	0	0	0	
8 Octan Merine			0	0	0	0	)0		0	0	0	0	0	
9.2 Pel Insurance Plans 9.2 Pel Insurance Plans 9.3 Pel Insurance Plans 9.4 Pel Insurance Plans 9.5 Pe	Ma	Marine	0	0	0	0	00		00	00	0	0	0	
10   Financial Guaranty			0	0	0	0	)  0	)	00	0	0	0	0	
11 Midcial Professional Lability - Courrence   0   0   0   0   0   0   0   0   0			0	0	0	J0	0  0		0  0	0	0	J0	0	
11.2 Medicale Professional Liability - Claims-Made 1.2 Cept ASR (Crops and Individual) 1.2 Corplet ASR (Crops and Individual) 1.3 Corplet ASR (Crops and Individual) 1.4 Cropd ASR (Crops and Individual) 1.5 Crops ASR (Crops and			·[·······0	J0	0	J	٥٥		۰  0	,  0	J0	J0	0	
12 Enthquake   0   0   0   0   0   0   0   0   0	u F	Professional Liability - Occurrence	1	n		n	)	,	0	)	n	n	n	
13.1 Comprehensive (hospital and medical) mod (b)			n		n		)n	)	0	)	0	0	0	
132 Correptensive (nospital and medical) group (b)	eh	nensive (hospital and medical) ind (b)	0	0	0	0	0		00	00	0	0	0	
15.1 Vision Only (b)	ehe	nensive (hospital and medical) group (b)		0	0	0	00		00	00	0	0	0	
15.2   Dental Confy (b)   0   0   0   0   0   0   0   0   0			0	0	0	0	0	)	00	0	0	0	0	
15.3 Disability income (b)			0	0	0	0	)  0	)	0  0	0  0	0	0	0	
15.4 Medicar's Explement (b)				0	0	0	)  0		0  0	)  0	0	0	0	
15.5 Medicard Title XVII (b)					0		)  u		0	1				
15.6 Medicare Title XVIII (b)			0	0	0	0	)		0	)0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)			0	0	0	0	)0		00	)0	0	0	0	
15.9 Other Health (b)	eri	rm Care (b)	0	0	0	0	)  0	)	00	00	0	0	0	
16				0	0	0	)  0	)	00	)  0	0	0	0	
17.1 Other Liability - Courrence			0	0	0	0	)  0		00	)  0	0	0	0	
17.2   Other Liability - Claims-Made			0	0	0		)		0	)	0	0	0	
17.3 Excess Workers Compensation   0   0   0   0   0   0   0   0   0	ia	ability - Occurrence		0	0	0	)	,	0	0	0	0	0	
18.2 Products Liability - Claims-Made	W	Vorkers' Compensation	0	0	0		)  0		0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	ts	Liability - Occurrence	0	0	0	0	00	)	00	00	0	0	0	
19.2 Other Private Passenger Auto Liability 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ts	Liability - Claims-Made	0	0	0	0	00	)	00	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Ínjury Protection)	Pa	Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	)  0	)	0  0	)  0	0	0	0	
19.4   Other Commercial Auto Liability				0	0	0	)  0		00	)  0	0	0	0	
Private Passenger Auto Physical Damage			1o		0		)  u		0	1				
21.2 Commercial Auto Physical Damage	Pa	Passenger Auto Physical Damage	0	0	0	0	)	,	00	0	0	0	0	
Aircraft (all perils)	erc	cial Auto Physical Damage	0	0	0	0	)  0		00	00	0	0	0	
24. Surety       0	t (a	all perils)	0	0	0	0	0	)	00	0	0	0	0	
26. Burglary and Theft			0	0	0	0	)  0	)	00	00	0	0	0	
27.   Boile and Machinery   0   0   0   0   0   0   0   0   0				0	0	J	0		0  0	)  ō	0	ō	0	
28. Credit			1	u	U		۰	,	0	,	0 n	u		
29. International       0			0	0	0	0	)	,	0	)0	0	0	0	
31. Reins nonproportional assumed property       XXX			0	0	0	0	0		0	,	0	0	0	
31. Reins nonproportional assumed property       XXX.       <			0	0	0					0	0			
33. Reins nonproportional assumed financial lines			XXX	XXX									XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	nor	onproportional assumed liability											XXXXXX	XXX
35. Total (a) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ıor	priproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	xxx		XXX	XXX	XXX	XXX	XXX
DETAILS OF WRITE-INS			n	0	0 n		)	,	0	)	n	n	n	
			1	ľ		ľ			· ·		1	1	1	
402.														
103		u of remaining unite ine feet ine 24 feets		······		·····								
198. Summary of remaining write-ins for Line 34 from overflow page	агу /Ті	y or remaining write-ins for Line 34 from overflow page	0	J	0	J	١٥	`	n  0	,  0		0		



NAIC Group Code 0088 BUSINESS	<u>IN THE STATE C</u>			•			טט	RING THE YEAR	<u> 2024</u>		npany Code 10	1414
	Policy and Me Less Return I	ums, Including mbership Fees, Premiums and plicies not Taken	Dividends Paid	4	5	6	7	Direct Defense	9 Direct Defense	Direct Defense and Cost	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0		)  0	)	00	0	0	0	0	
2.1 Allied Lines	0	0	0		)  0		0  0	0	0	0	0	
Multiple Peril Crop		0	0				0  0	0	0	0	0	
2.4. Private Crop		0	0		)		0  0	0	0	0	0	
2.4. Private Grop			0		)		0	0	0	٥٠٠٠		
Farmowners Multiple Peril		0	0		)	,	0	0		0	0	
Homeowners Multiple Peril	0	0	0		)		00	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0		0		00	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)		0	0		)  0	)	00	0	0	0	0	
Mortgage Guaranty	0	0	0		)  0	)	00	0	0	0	0	
8. Ocean Marine	0	0	0		)  0	)(	00	0	0	0	0	
9.1 Inland Marine	0	0	0		)  0	)(	00	0	0	0	0	
9.2 Pet Insurance Plans		0	0	C	)  0	)	0  0	0	0	0	0	
10. Financial Guaranty	0	0	0	ļ	0		υ  0	ļ 0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	J0	0	ļ	.  0		u  0	ļ0	<sub>0</sub>	0	J0	·····
11.2 Medical Professional Liability - Claims-Made	0	0	0	ļ	0	<u> </u>	۰ ا	0	0	0	0	·····
12. Earthquake		0	0		)		0  0	0	0	0		
13.2 Comprehensive (hospital and medical) ind (b)			0		)		0	0	0	٥٠٠٠		
14. Credit A&H (Group and Individual)			0		)		n		0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
15.1 Vision Only (b)		0	0		)		n	0	0	0	0	
15.2 Dental Only (b)	0	0	0		)		n	0	0	0	0	
15.3 Disability Income (b)		0	0		)	)	00	0	0	0	0	
15.4 Medicare Supplement (b)		0	0		)		00	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0		)0		00	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0		)  0	)	00	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	C	)  0	)(	00	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	)  0	)	00	0	0	0	0	
15.9 Other Health (b)	0	0	0	C			00		0	0	0	
16. Workers' Compensation		2,277,243	0	986,952	2 197,695	411,78			119,488	175, 142	251,258	123
17.1 Other Liability - Occurrence	0	0	0		)		0  0	0	0	0	0	
17.2 Other Liability - Claims-Made		0	0		)		0  0	0	0	0	0	
18.1 Products Liability - Occurrence			0		)		0	0	0	٥٥		
18.2 Products Liability - Claims-Made		Λ	0		)	,	n			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0		)0	)	00	0	0	0	0	
19.2 Other Private Passenger Auto Liability		(1)	0		4.756	(28.67)	2)		(27.307)	19.477	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0		)	)	0		0	0	0	
19.4 Other Commercial Auto Liability		0	0		)0	)	00	0	0	0	0	ļ
21.1 Private Passenger Auto Physical Damage	0	(1)	0		)(1,035	5)(1,20)	2)	0	(99)	15	0	
21.2 Commercial Auto Physical Damage	0	0	0		)  0	)	00	0	0	0	0	ļ
22. Aircraft (all perils)	0	0	0		)  0	)	0  0	0	0	0	0	ļ
23. Fidelity	0	0	0	C	)  0	)	0  0	0	0	0	0	ļ
24. Surety	0	ō	<u>0</u>	<u>C</u>	0  0		0  0	<u>0</u>	0	0	J0	·····
26. Burglary and Theft	0	0	0	C	0		0		0	0	0	
27. Boiler and Machinery		0	0			<u> </u>	0  0	0	0	0	0	
28. Credit		0	0		,  0	{   <i>}</i>	n  0	0		0		·····
30. Warranty		n	n		,	; [;	n	n	n	0 n	n	ļ
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	,	,	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability		XXX	XXX	XXX	XXX	XXX		XXX	xxx	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX				XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0			)  0	)	00	0	0	0	0	
35. Total (a)	2,422,396	2,277,241	0	986,952				61,983		194,634	251,258	123
DETAILS OF WRITE-INS												
01											.	ļ
02.											·	
03											· ······	·····
98. Summary of remaining write-ins for Line 34 from overflow page		0	0	ļ	٥ اـــــــ ٥	: [::	0 ا	0	0	0	ļ0	ļ
9. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	1 0	0	1 0	1 0	, i 0	, i	υ ι 0	1 0	0	0	1 0	İ



NAIC Group Code 0088 E	SUSINESS IN THE STATE	OF Hawaii					DU	IRING THE YEAR	R 2024	NAIC Com	npany Code 10	212
	Gross Prer Policy and M Less Retur	niums, Including Ilembership Fees, In Premiums and Policies not Taken	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire		00	0	0	.  0		00	0	0	0	0	
2.1 Ailled Lifles		0	0		1		0	1		0		
2.3 Federal Flood		00	0		,		0	0	0	0	0	
2.4. Private Crop		0	0		)		00	0	0	0	0	
2.5 Private Flood		00	0	0	)	)	00	0	0	0	0	
Farmowners Multiple Peril		00	0	0	·  0		00	00	0	0	0	
Homeowners Multiple Peril      Commercial Multiple Peril (Non-Liability Portion)		00	0				0  0	)  0	0	0	0	
5.2 Commercial Multiple Peril (Non-Liability Portion)		0	0		,	,	0	0	0	0	0	
6. Mortgage Guaranty		00	0		,		0	0	0	0	0	
8. Ocean Marine		0	0		)		00	0	0	0	0	
9.1 Inland Marine		00	0	C	)   C	)	00	00	0	0	0	
9.2 Pet Insurance Plans		00	J 0	C	)   <u>و</u>		0  0	0	0	J0	0	
10. Financial Guaranty		u  0	0	ļ	ر۰		u  0	.  ō	0	J	0	
11.1 Medical Professional Liability - Occurrence		0	0				0	1	0	0		
11.2 Medical Professional Liability - Claims-Made		0	n		,	,	0	)	n			
13.1 Comprehensive (hospital and medical) ind (b)		00	0			í	0	)	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)		0	0		)		00	00	0	0	0	
14. Credit A&H (Group and Individual)		00	0	C	)   C	)	00	00	0	0	0	
15.1 Vision Only (b)		00	0	0	)  C	)	00	0	0	0	0	
15.2 Dental Only (b)		00	0		)   ي		0  0	0  0	0	0	0	
15.3 Disability Income (b)		00	0				0  0	0	0	0	0	
15.5 Medicaid Title XIX (b)		0			,		0	1		0		
15.6 Medicare Title XVIII (b)		00	0				0	)0	0	0	0	
15.7 Long-Term Care (b)		0	0		)		00	00	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)		00	0	C	)		00	00	0	0	0	
15.9 Other Health (b)		00	0	0	)	)	00	00	0	0	0	
16. Workers' Compensation		00	0		)  0	(	5)10	0	(1)	5	0	
17.1 Other Liability - Occurrence		0	0				0	)	0	0	0	
17.3 Excess Workers' Compensation		0	0			,	0	)	0	0	0	
18.1 Products Liability - Occurrence		00	0				0	0	0	0	0	
18.2 Products Liability - Claims-Made		0	0		)		00	00	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection	)	00	0	0	)	)	00	0	0	0	0	
19.2 Other Private Passenger Auto Liability		00	0		)	)	00	)  0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)		00	0		)		0  0	0	0	0	0	
19.4 Other Commercial Auto Liability		0	0			,	0	,	0	0	0	
21.2 Commercial Auto Physical Damage		0n				)	0	)				
22. Aircraft (all perils)		00	0		)	)	0	)	0	0	0	
23. Fidelity		0 0	0	0	)		00	0	0	0	0	
24. Surety		00	0	0	)	)	00	00	0	0	0	
26. Burglary and Theft		00	0	0	·  0		00	00	0	0	0	
27. Boiler and Machinery		u  0	J	J	ر۵		۰0	,  0	J0	J0	0	
28. Credit 29. International		n	u		,  u	`	0	,	0 n	n	0 n	
30. Warranty		0n				)	00	,	0	0	0	
31. Reins nonproportional assumed property	xxx	XXX	XXX	XXX	XXX	xxx	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	xxx		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
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		00	ļ 0		ر اِ		00	<u>.</u>	0		0	
35. Total (a)		0	0	1	0	(	5) 10	0	(1)	5	0	
DETAILS OF WRITE-INS												
02												
03.												
98. Summary of remaining write-ins for Line 34 from overflow page	ge	00	0	0	0	)	00	)0	0	0	0	
99. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)		0	0		)   C	) [	0 0	0	0	0	0	



NAIC Group Code 0088 BUSINESS	IN THE STATE C		I				טט	RING THE YEAR	\ <u>ZUZ</u> 4		npany Code 10	14 14
	Policy and Me Less Return I	ums, Including mbership Fees, Premiums and plicies not Taken	Dividends Paid	4	5	6	7	Direct Defense	9 Direct Defense	Direct Defense and Cost	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage	Direct Losses Incurred	Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	)  0	)	0  0	0	0	0	0	
2.1 Allied Lines		0	0	0	)		0  0	0	0	0	0	
2.2 Multiple Peril Crop		0	0				J	0	0	0	0	
2.4. Private Crop		0	0		)   u		J	0	0	0	0	
2.4. Private Grop			0		1		n	0		٥٥		
Farmowners Multiple Peril		0	0		)	,	0	0	0	0	0	
Homeowners Multiple Peril	0	0	0	0	)		00	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	)		00	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)		0	0	0	)	)	00	0	0	0	0	
Mortgage Guaranty	0	0	0	0	)	)	00	0	0	0	0	
8. Ocean Marine	0	0	0	0	)	)(	00	0	0	0	0	
9.1 Inland Marine	0	0	0	0	)	)(	00	0	0	0	0	
9.2 Pet Insurance Plans	0	0	0	J0	)	)	0  0	0	0	0	J0	
10. Financial Guaranty	0	0	0	0	)   <u>0</u>		0  0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	)		0  0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0			J  0	0	0	0	J0	
12. Earthquake		0	0		)   u		J	0		0		
13.1 Comprehensive (hospital and medical) ind (b)			0				)u	0		0		
14. Credit A&H (Group and Individual)			0		)		n	0		0		
15.1 Vision Only (b)			0		1		n	0		٥٥		
15.2 Dental Only (b)		n	0		1		n	n	0	٥٥		
15.3 Disability Income (b)		0	0		)	,	n	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	)	)	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	)		0	0	0	0	0	
15.6 Medicare Title XVIII (b)		0	0	0	)		00	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	)	)	00	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	)	)	00	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	)	)(	00	0	0	0	0	
16. Workers' Compensation		6, 158	0	2,663	3  0	1,80	5	0	975	1,596	618	2
17.1 Other Liability - Occurrence		0	0	0	)	)  (	0  0	0	0	0	0	
17.2 Other Liability - Claims-Made	0	0	0	0	)	)	0  0	0	0	0	0	
17.3 Excess Workers' Compensation		0	0	0	)		J  0	0	0	0	0	
18.1 Products Liability - Occurrence		0	0	0			J	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)		0	0		)   u		J	0	0	0	0	
19.2 Other Private Passenger Auto No-Pauli (Personal Injury Protection)			0		1		n	0		٥٥		
19.3 Commercial Auto No-Fault (Personal Injury Protection)		0	0		)	,	n			0		
19.4 Other Commercial Auto Liability	0	0	0	0	)	)	0	0	0	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0		)		0	0		0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	)  d		00	0	0	0	0	
22. Aircraft (all perils)	0	0	0	0	)	)	00	0	0	0	0	
23. Fidelity	0	0	0	0	)  0	)	00	0	0	0	0	
24. Surety	0	0	0	J0	)  0	)	0  0	0	0	0	0	
26. Burglary and Theft	0	0	0	0	)  0	)	0  0	0	0	0	0	
27. Boiler and Machinery	0	0	0	J0	)	)	00	ļ0	0	0	J	
28. Credit	0	J	0	J0	<u> </u>		D  0	0	0	0	0	
29. International	0	0	J0	J0	ر اِ	.	u  0	ļ 0	<sub>0</sub>	0	0	
30. Warranty	0	0	0	J0	J		J0	0	0	0	0	
31. Reins nonproportional assumed property	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed liability	XXX	XXXXXX	XXX	XXXXXX		XXXXXX		XXXXXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines				0					0	XXX		·······
35. Total (a)	0	6. 158	n	2.663		1.80			975	1.596		2
DETAILS OF WRITE-INS	0,004	3,130	0	2,000	,	1,000	0,402		313	1,000	010	-
01		L					[					L
02.												
03.												
98. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	)  0	)	0  0	0	0	0	0	
99. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	1 0	0	0	0	) l	) I (	0 <b>I</b> 0	0	1 0	0	0	



	NAIC Group Code 0088 BUSINESS	IN THE STATE C						DUI	RING THE YEAR	2024		pany Code 1	
		Policy and Me Less Return I	ums, Including mbership Fees, Premiums and plicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire	0	0	0	0	0	0	0	0	0	0	0	
	Allied Lines		0	0	0	0	0	0	0	0	0	0	
	Multiple Peril Crop		0	0	0	0	0	0	0	0	0	0	
	Federal Flood		0	0	0	0	0	0	0	0	0	0	
	Private Crop		0	0	0	0	0	0	0	0	0	0	
	Private FloodFarmowners Multiple Peril		0	0	0	0	0	0	0	0	0	0	
3. 4	Homeowners Multiple Peril		0	0	0	0	0	0	0	0	0	0	
	Commercial Multiple Peril (Non-Liability Portion)		0	0	0	0	0	0		0	0	0	
5.1	Commercial Multiple Peril (Non-Liability Portion)			0	0	0		0			0	0	
	Mortgage Guaranty		0	0	0	0	0	0	0	0	0	0	
О.	Ocean Marine		0	0	0	0	0	0	0	0	0	0	
	Inland Marine		0			0							
	Pet Insurance Plans		u	u				u	u	u	o		
	Financial Guaranty		n	n		n		n	n	n	n	0 n	
	Medical Professional Liability - Occurrence					0					٥	0	
	Medical Professional Liability - Occurrence  Medical Professional Liability - Claims-Made			0	0	0		0			0	0	
	Earthquake									u			
12.	Comprehensive (hospital and medical) ind (b)		0	0	0	0		0			٥	0	
10.1	Comprehensive (hospital and medical) group (b)										٥	0	
	Credit A&H (Group and Individual)		0	0	0	0		0				0	
	Vision Only (b)			0	0	0		0			0	0	
	Dental Only (b)			0	0	0		0			٥	0	
15.2	Disability Income (b)					0				۰۰	٥		
	Medicare Supplement (b)			0	0	0		0			٥	0	
	Medicaid Title XIX (b)					0				Λ	٥		
	Medicare Title XVIII (b)			0	0	0		0			٥	0	
	Long-Term Care (b)					0				Λ	٥		
15.7	Federal Employees Health Benefits Plan (b)										٥	0	
	Other Health (b)					0					٥	0	
	Workers' Compensation	1.739.922	1.679.879			1.197.076		1.286.106	75.172	9.984			27 .18
	Other Liability - Occurrence		1,079,079			1, 197,070		1,200,100	13, 1/2	9,904			21 , 10
	Other Liability - Occurrence Other Liability - Claims-Made		Λ							Λ	٥		
	Excess Workers' Compensation		0							۰	٥	0	
	Products Liability - Occurrence		Λ							Λ	٥		
	Products Liability - Occurrence  Products Liability - Claims-Made		Λ							Λ	٥		
	Private Passenger Auto No-Fault (Personal Injury Protection)				0	0					٥	0	
10.1	Other Private Passenger Auto Liability		35.031.133		16.678.684		19.802.123	36.267.960	985.402	1.657.612	4.542.847	4.488.179	
	Commercial Auto No-Fault (Personal Injury Protection)		0	0	10,070,004	22,400,420	19,002,123		505,402	1,037,012 0	n	4,400, 1/9	
	Other Commercial Auto Liability		0	0	0	0	0	0	0	0	0		
	Private Passenger Auto Physical Damage		35.605.113	0	17.563.699	20 .692 .385	19.667.479		863	4 816	39.639	4.724.868	
21.1	Commercial Auto Physical Damage	n	n	n	n	n		n	n	n	0	n	
	Aircraft (all perils)				0	0		0			0		
	Fidelity	n	n	n	n	n	n	n	n	n	n	n	[
	Surety	n	n	n	n		n	n	n	n	n	n	
	Burglary and Theft	η	n	n			n	n	n	n	n	n	
	Boiler and Machinery	0			0	0	0	0			0		
	Credit				0	0	0	0	0	0	0	0	
29.	International	0	n	n	0		n	n	n	n		n	
	Warranty			0	0	0	0	0	0	0	0	0	
	Reins nonproportional assumed property		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx
	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	
	Total (a)	71,044,165	72,316,125	0	34,959,758	44,355,887	40, 170, 149	37,954,182	1,061,437	1,672,412	4,764,680	9,392,904	1,112,2
-	DETAILS OF WRITE-INS												
3401.													.
3402.			ļ										.
403.			ļ										.
498.	Summary of remaining write-ins for Line 34 from overflow page		1 0	1 0	1 0	0	1 0	0	0	0	0	1 0	L
	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)									•••••••			



	NAIC Group Code 0088 BUSINESS II	N THE STATE C	F Indiana					DU	RING THE YEAR	R 2024	NAIC Com	pany Code 10	212
		Gross Premiu Policy and Me Less Return I Premiums on Po	ums, Including mbership Fees, Premiums and blicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire	. 0	0	0	0	0		0	0	0	0	0	(
	Multiple Peril Crop	0	0	0	0	0		0	0	0	0	0	
	Federal Flood	0	0	0	0	0		00	0	0	0	0	
	Private Crop	0	0	0	0	0		0	0	0	0	0	(
	Private Flood	0	0	0	0	0		0	0	0	0	0	(
3. 4.	Farmowners Multiple Peril		0	0		0		)		0	0		
	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0		0	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)	0	0	0	0	00		0	0	0	0	0	
6.	Mortgage Guaranty	0	0	0	0	0		0	0	0	0	0	
8.	Ocean Marine	0	0	0	0	0		0	0	0	0	0	
	Inland Marine Pet Insurance Plans	0	0	0	0			,0	0	0	0	0	
	Financial Guaranty		0	0		)		j	0	0	0	0	
11.1	Medical Professional Liability - Occurrence	0	0	0	0	0		0	0	0	0	0	
	Medical Professional Liability - Claims-Made	0	0	0	0	00		00	0	0	0	0	(
12.	Earthquake	0	0	0	0	0		00	0	0	0	0	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0		0	0	0	0	0	
	Comprenensive (nospital and medical) group (b)		0	0		0		J	0	0	0		
	Vision Only (b)	10	0	0	0	0		0	0	0	0	0	
	Dental Only (b)	0	0	0	0	00		0	0	0	0	0	
	Disability Income (b)	0	0	0	0	00		00	0	0	0	0	(
	Medicare Supplement (b)		0	0	0	0		0	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0	0	0		0	0	0	0	0	
	Long-Term Care (b)	0	0	0		0		)	0	0	0	0	
15.8	Federal Employees Health Benefits Plan (b)	0	0	0	0	0		j	0	0	0	0	
15.9	Other Health (b)	0	0	0	0	00		00	0	0	0	0	(
	Workers' Compensation	1,324,884	1,246,076	0	513,304	303,658	764,84			22,355	93,931		(42, 162
17.1	Other Liability - Occurrence	0	0	0	0	0		0	0	0	0	0	
	Excess Workers' Compensation	0	0	0		0		J	0	0	0		
	Products Liability - Occurrence	0	0	0	0	0		j	0	0	0	0	
18.2	Products Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	00		00	0	0	0	0	
	Other Private Passenger Auto Liability		0	0	0	0		0	0	0	0	0	
	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		0	0	0	0	0	
21.4	Private Passenger Auto Physical Damage	0	0	0		)		)	0	0	0	0	(
21.2	Commercial Auto Physical Damage	0	0	0	0	0		0	0	0	0	0	
22.	Aircraft (all perils)	0	0	0	0	)  0		0	0	0	0	0	
23.	Fidelity		0	0	0	0		0  0	0	0	0	0	
	Surety Burglary and Theft	0	0	0	J	.  0	!		0	0	J	0	
26. 27.	Boiler and Machinery	n	n	 N	n	,   		,	0 n	n	n	0 n	
28.	Credit		0	0		)		0	0	0	0	0	
29.	International	0	0	0	0	0		0		0	0	0	
30.	Warranty	0	0	0	0	00		0			0	0	(
31.	Reins nonproportional assumed property	XXXXXX	XXX	XXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
32. 33.	Reins nonproportional assumed liability	xxx	XXX	XXXXXX	XXX	XXX	XXX	XXXXXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0				0	0		0	
35.	Total (a)	1,324,884	1,246,076	0	513,304		764,84	7 802,907	6,510			138,530	(42, 162
	DETAILS OF WRITE-INS						1						
3401.							·						
3402.							· ····						
34በ3													
3403. 3498.	Summary of remaining write-ins for Line 34 from overflow page	Λ	n	n		Λ		)n		0	0	0	



NAIC Group Code 0088 BUSIN	IESS IN THE STATE C				LOSSES	•		RING THE YEAR	R 2024	NAIC Com	pany Code 10	0212
300.	Gross Premiu Policy and Me Less Return Premiums on Po	ums, Including mbership Fees, Premiums and plicies not Taken 2	3 Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0		)		00	0	0	0	0	
2.2 Multiple Peril Crop		n			)		n	1			0	
2.3 Federal Flood	0	0	0		)		0	0	0	0	0	
2.4. Private Crop	0	0	0		)		00	00	0	0	0	
2.5 Private Flood	0	0	0		)		00	0	0	0	0	
Farmowners Multiple Peril     Homeowners Multiple Peril	0	0	0		)		0  0	0	0	0	0	
Homeowners Multiple Peril      Commercial Multiple Peril (Non-Liability Portion)					)		0	)	0	0	0	
5.2 Commercial Multiple Peril (Non-Liability Portion)		0	0		)		0	)0	0	0	0	
Mortgage Guaranty	0	0	0		)		00	00	0	0	0	
8. Ocean Marine	0	0	0		)		00	00	0	0	0	
9.1 Inland Marine		0	0		)		00	0  0	0	0	0	
9.2 Pet Insurance Plans		<sub>0</sub>	0		ر		۰  0	,	J0	0	ļ0	
11.1 Medical Professional Liability - Occurrence		n	0		)		0	,	0 n	n	0 n	
11.2 Medical Professional Liability - Occurrence	0	0	0		)		0	0	0	0	0	
12. Earthquake		0	0		)		00	)0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0		)		00	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)		0	0		)		00	0  0	0	0	0	3
14. Credit A&H (Group and Individual)		0	0		)		0  0	)  0	0	0	0	
15.2 Dental Only (b)					)		0	0		0	0	
15.3 Disability Income (b)	0	0	0		)		0	)	0	0	0	
15.4 Medicare Supplement (b)		0	0		)		00	)0	0	0	0	
15.5 Medicaid Title XIX (b)		0	0		)		00	0	0	0	0	
15.6 Medicare Title XVIII (b)		0	0		)		00	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0		ر ا ر		۰  0	,  0	J0	ļ0	0	
15.9 Other Health (b)		n			)		0	)  n	n	n	0 n	
16. Workers' Compensation		98,484	0	49,790	21,327		6101,080	3,357	14,984	15, 150	12,776	6,4
17.1 Other Liability - Occurrence	0	0	0		)		00	)0	0	0	0	
17.2 Other Liability - Claims-Made		0	0		)		00	0	0	0	0	
17.3 Excess Workers' Compensation		0	0		)		00	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0		)		0  0	)  0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)		0	0		)		0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0		)		0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)		0	0		)		00	00	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0		)		00	)  0	0	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0		)		00	0	0	0	0	
21.2 Commercial Auto Physical Damage		o			)		0	)		0	0	
23. Fidelity	0	0	0		)		0	0	0	0	0	
24. Surety	0	0	0		)		00	)0	0	0	0	
26. Burglary and Theft	0	0	0		)		00	0	0	0	0	
27. Boiler and Machinery	0	0	0		)		00	0	0	0	0	
28. Credit		0	0	ļ	ر		00	0	0	0	0	
30. Warranty		n	n	(	)		00		n	n	0 n	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX		XXX		XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	49.790				3.357	0		0	6.70
35. Total (a)  DETAILS OF WRITE-INS	123, 11/	98,484	0	49,790	21,327	109,26	6 101,080	3,35/	14,984	15, 150	12,776	6,7
DETAILS OF WRITE-INS 01												
02												
03												
98. Summary of remaining write-ins for Line 34 from overflow page	0	0	0		)		00	0	0	0	0	
99. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0		)	) [	0 0	0	0	0	0	



	NAIC Group Code 0088 BUSINESS II	N THE STATE C	F Kansas					DU	RING THE YEAR	R 2024	NAIC Com	pany Code 10	0212
		Gross Premiu Policy and Mei Less Return I Premiums on Po	ims, Including mbership Fees, Premiums and plicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire	0	0	0	0	0		0  0	0	0	0	0	
	Multiple Peril Crop	0	0	0	0	0		00	0	0	0	0	
	Federal Flood	0	0	0	0	0		00	0	0	0	0	
	Private Crop	0	0	0	0	0		00	0	0	0	0	
	Private Flood	0	0	0	0	0		00	0	0	0	0	
3. 4.	Farmowners Multiple Peril	0	0	0	0	0		00	0	0	0	0	
	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0		00	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0		00	0	0	0	0	
6.	Mortgage Guaranty	0	0	0	0	0		00	0	0	0	0	
8.	Ocean Marine	0	0	0	0	0		00	0	0	0	0	
	Inland Marine	0	0	0	J0	0		u  0	0	J0	0	J0	
	Financial Guaranty	0	0		o	n		0n	0	0	n	o	
11.1	Medical Professional Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
	Medical Professional Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
12.	Earthquake	0	0	0	0	0		00	0	0	0	0	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0		00	0	0	0	0	
	Comprenensive (nospital and medical) group (b)	0	0	0		0		n	0	0	0		
	Vision Only (b)	0	0	0	0	0		00	0	0	0	0	
	Dental Only (b)	0	0	0	0	0		00	0	0	0	0	
	Disability Income (b)	0	0	0	0	0		00	0	0	0	0	
	Medicare Supplement (b)	0	0	0	0	0		00	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0	0	0		00	0	0	0	0	
	Long-Term Care (b)	0	0	0		0		0	0	0	0		
15.8	Federal Employees Health Benefits Plan (b)	0	0	0	0	0		00	0	0	0	0	
15.9	Other Health (b)	0	0	0	0	0		00	0	0	0	0	
	Workers' Compensation	42,141	35,904	0	17,506	(1,825	)	9 116,244	7,602	8,322	3,209	4,361	(13,59
17.1	Other Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
	Excess Workers' Compensation	0	0	0		0		00	0		0	0 n	
	Products Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
18.2	Products Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		00	0	0	0	0	
	Other Private Passenger Auto Liability	0	0	0	0	0		00	0	0	0	0	
	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		00	0	0	0	0	
21.1	Private Passenger Auto Physical Damage	n		n				ŏ	0				
21.2	Commercial Auto Physical Damage	0	0	0	0	0		00	0	0	0	0	
22.	Aircraft (all perils)	0	0	0	0	0		00	0	0	0	0	
23.	Fidelity	0	0	0	0	0		0  0	0	0	0	0	
24. 26.	Surety	0	0	0	J0	0		u  0	0	J0	0	J0	
26. 27.	Boiler and Machinery	0	0		o	n		0n	0	0	n	o	
28.	Credit	0	0	0	0	0		0	0	0	0	0	
29.	International	0	0	0	0	0		00		0	0	0	
30.	Warranty	0	0	0	0			00			0	0	
31.	Reins nonproportional assumed property	XXXXXX	XXXXXX	XXX	XXXXXX	XXXXXX	xxx		XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
32. 33.	Reins nonproportional assumed liability	XXXXXX	XXX	XXXXXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0				0	0	0	0	
35.	Total (a)	42,141	35,904	0	17,506		35,22	9 116,244	7,602		3,209	4,361	(13,59
	DETAILS OF WRITE-INS					1					-		
3401.													
3402. 3403.													
						-	· [		·	······		·	
3498.	Summary of remaining write-ins for Line 34 from overflow page	n	n l	n	n	l 0		0 I n	l n	0		0	



NAIC Group Code 0088 BUSINI	<u>ESS IN THE STATE C</u>							RING THE YEAR	2024		pany Code 10	72 12
	Policy and Me Less Return	ums, Including mbership Fees, Premiums and plicies not Taken	3  Dividends Paid	4	5	6	7	8 Direct Defense	9 Direct Defense	10 Direct Defense and Cost	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses ) Incurred	Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, License and Fees
1. Fire	0	0	0		)  0	)	00	0	0	0	0	
2.1 Allied Lines	0	0	0		)  0		0  0	0	0	0	0	
2.2 Multiple Peril Crop		0	0		)		0  0	0	0	0	0	
2.4. Private Crop	0	0	0		)		0	0	0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠		
2.5 Private Flood			0		1		0	0		۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
Farmowners Multiple Peril	0	0	0		)		0	0	0	0	0	
Homeowners Multiple Peril		0	0		)		00	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)		0	0	C	0		00	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0		00	)	00	0	0	0	0	
Mortgage Guaranty	0	0	0	C	)  0	)	00	0	0	0	0	
8. Ocean Marine	0	0	0	0	0	)	00	0	0	0	0	
9.1 Inland Marine	0	0	0	C	0  0		0  0	ļ0	0	0	0	
9.2 Pet Insurance Plans		J	J0	ļ	0		u  0	ļ0	0	0	0	·····
10. Financial Guaranty	0	J	0	ļ	0		u  0	ō	J	0	0	·····
11.1 Medical Professional Liability - Occurrence			0		١٠٠٠	<u> </u>	0			٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠		·····
11.2 Medicai Professional Liability - Claims-Made		n	n		)	,	n	n	n	0 n	n	l
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0		)		0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0		)		00	0	0	0	0	
14. Credit A&H (Group and Individual)			0		)0		0	0	0	0	0	
15.1 Vision Only (b)		0	0		)		00	0	0	0	0	
15.2 Dental Only (b)	0	0	0		)  0	)	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0		)  0	)	00	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0		00	)	00	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	)  0	)	00	0	0	0	0	
15.6 Medicare Title XVIII (b)		0	0		)  0	)	00	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0		0  0	)	0  0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)		0	0		)		0	0	0	0	0	
15.9 Other Health (b)		175.594	0	51.912	2 126, 100	5.78	0		24.399	23.500		40
17.1 Other Liability - Occurrence		173,394	0		1 120,100	1	n	22,400	24,399	23,500 N		40
17.2 Other Liability - Occurrence	0	0	0		)		n	0	0		0	
17.3 Excess Workers' Compensation		0	0		)	)	00	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0		)  0	)	0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0		)  0	)	00	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)		0	0	C	)  0	)	00	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0		)  0	)	00	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)		0	0	C	0	)	00	0	0	0	0	
19.4 Other Commercial Auto Liability	0	J	<u>0</u>	<u>C</u>	0  0		0  0	<u>0</u>	J0	ō	0	·····
21.1 Private Passenger Auto Physical Damage	0	0	0	c	0		0  0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	ļ	١٥	`	n  0	0	0	0	0	·····
23. Fidelity		Λ	0		)  0	1	n	Λ	Λ	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
24. Surety		n	n		)		0	n	n	n	n	
26. Burglary and Theft		0	0		)		0	0	0	0	0	
27. Boiler and Machinery		0	0		)  0		0	0	0	0	0	
28. Credit		0	0		)0		00	0	0	0	0	
29. International	0	0	0		00		00	0	0	0	0	
30. Warranty	0	0	0	C	)  0	)	0  0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability		XXX	XXX	XXX		XXX		XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX		XXX		XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	51.912					0	0	18.899	40
35. Total (a)  DETAILS OF WRITE-INS	182,003	1/5,594	U	51,912	126,100	5,78	1, 183, 741	22,408	24,399	23,500	18,899	40
01												
102.												
103.												
198. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	l	)0		0  0	0	0	0	0	
99. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	1	1	1	1	1	n I	0	1	0	1	1



NAIC Group Code 0088 BUSINESS	IN THE STATE O				LOSSES			RING THE YEAR	R 2024	NAIC Com	npany Code 10	)212
	Gross Premi Policy and Me Less Return Premiums on P	ums, Including embership Fees, Premiums and folicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0				00	0	0	0	0	
2.2 Multiple Peril Crop		0	0	(		,	0	0	0	0	0	
2.3 Federal Flood		0	0				0	0	0	0	0	
2.4. Private Crop	0	0	0				00	00	0	0	0	
2.5 Private Flood	0	0	0			)	00	00	0	0	0	
3. Farmowners Multiple Peril	0	0	0				00	0  0	0	0	0	
Homeowners Multiple Peril		0	0				0  0	)  0	0	0	0	
5.1 Commercial Multiple Peril (Nori-Liability Portion)		0				,	n	1	0	0	0	
6. Mortgage Guaranty		0	0				0	0	0	0	0	
8. Ocean Marine	0	0	0	(			00	00	0	0	0	
9.1 Inland Marine	0	0	0			)	00	)  0	0	0	0	
9.2 Pet Insurance Plans		0	0	ļ	<u> </u>		0  0	0	0	0	0	·····
Financial Guaranty		0	0	ļ			ν  ο	0	J0	0	0	
11.1 Medical Professional Liability - Occurrence		0 n	n		,	,	0	,	n	n	n	
12. Earthquake	0	0	0				ō	)0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0				00	00	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)		0	0	(			00	00	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0			)	00	00	0	0	0	
15.1 Vision Only (b)	0	0	0			)	00	0  0	0	0	0	
15.2 Dental Only (b)	0	0	0				0  0	)  0	0	0	0	
15.4 Medicare Supplement (b)		0	0				0	0	0	0		
15.5 Medicaid Title XIX (b)	0	0	0			,	0	)0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0				0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	(		)	00	00	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0			)	00	0	0	0	0	
15.9 Other Health (b)		0	0		266.438	3	0 0	0 5	0	0	0	
16. Workers' Compensation		171,449	0	77,651	266,438	3264,42	0		13,402	12, 125	18,069	34,73
17.1 Other Liability - Occurrence		0				,	n	1	0	0	0	
17.3 Excess Workers' Compensation		0	0				0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0		)		00	00	0	0	0	
18.2 Products Liability - Claims-Made		0	0			)	00	00	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0			)	0  0	)  0	0	0	0	
19.2 Other Private Passenger Auto Liability		0	0				0  0	0	0	0	0	
19.4 Other Commercial Auto No-Fault (Personal Injury Protection)		0					0	)				
21.1 Private Passenger Auto Physical Damage	0	0	0			,	0	)0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0		·		00	00	0	0	0	
22. Aircraft (all perils)	0	0	0			)	00	00	0	0	0	
23. Fidelity	0	0	0			)	00	00	0	0	0	
24. Surety	0	0	0				0  0	0	0	0	0	
26. Burglary and Theft	<sup>U</sup>	U	u			,	0	,	U	u		
28. Credit	0	0	0			,	0	)0	0	0	0	
29. International		0	0				00		0	0	0	
30. Warranty	0	0	0	0			00		0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX		XXXXXX	XXXXXX	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX0	XXX	XXX			XXX	XXX	0	XXX	XXX	XXX
35. Total (a)	171.970		n	77.65			41.585	14.904			18.069	34.73
DETAILS OF WRITE-INS	171,010	17 1,440		77,00	200,400	201,12	41,000	14,504	10, 402	12, 120	10,000	54,70
01											.	
02.												ļ
03		·									.	·····
98. Summary of remaining write-ins for Line 34 from overflow page	<sub>0</sub>	0 n	n		,	`	0	,  0	0 n	n	0 n	·····
55 Sans (Emico 640) timodgii 6400 pido 6400/(Emic 64 above)		1 0	U		' 1	· 1	- U			1 0	U	1



	NAIC Group Code 0088 BUSINESS II	N THE STATE C				LOSSES	`		RING THE YEAR	R 2024	NAIC Com	npany Code 10	)212
	3.220	Gross Premiu Policy and Me Less Return I Premiums on Po	ums, Including mbership Fees, Premiums and plicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire	0	0	0		)  0		00	0	0	0	0	0
	Multiple Peril Crop	0	0	0		)		00	0	0	0	0	
	Federal Flood	0	0	0		)		00	0	0	0	0	
	Private Crop	0	0	0		)		00	0	0	0	0	
	Private FloodFarmowners Multiple Peril	0	0	0		0		00	0	0	0	0	
3. 4.	Homeowners Multiple Peril	0	0	0		)		00	0	0	0	0	
5.1	Commercial Multiple Peril (Non-Liability Portion)	0	0	0		)		00	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)	0	0	0		)  0		00	0	0	0	0	
6.	Mortgage Guaranty  Ocean Marine	0	0	0		)  0		00	0	0	0	0	
8. 9.1	Inland Marine		o	0		)		00	0		0	0	
	Pet Insurance Plans	0	0	0		j		ō	0	0	0	0	
10.	Financial Guaranty	0	0	0		)  0		00	0	0	0	0	
11.1	Medical Professional Liability - Occurrence	0	0	0		0		00	0	0	0	0	
	Medical Professional Liability - Claims-Made	0	0	0		0		00	0	0	0	0	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0		)		00	0	0	0	0	
13.2	Comprehensive (hospital and medical) group (b)	0	0	0		)		00	0	0	0	0	
14.	Credit A&H (Group and Individual)	0	0	0		)		00	0	0	0	0	
	Vision Only (b)	0	0	0		)  0		00	0	0	0	0	
	Dental Only (b)	0	0	0		)  0		0  0	0	0	0	0	
	Medicare Supplement (b)		o	0		)		00	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0		)		00	0	0	0	0	
	Medicare Title XVIII (b)	0	0	0		)  0		00	0	0	0	0	(
15.7	Long-Term Care (b)	0	0	0		0  0		00	0	0	0	0	
	Federal Employees Health Benefits Plan (b) Other Health (b)	0	0	0		)		00	0	0	0	0	
	Workers' Compensation			0	46.857	9.324		071.780	204	8.333	20.888	17.717	23.73
17.1	Other Liability - Occurrence	0	0	0		)		00	0	0	0	0	
	Other Liability - Claims-Made	0	0	0		)		00	0	0	0	0	
	Excess Workers' Compensation	0	0	0		)  0		0  0	0	0	0	0	
18.1	Products Liability - Occurrence	o	o	0		)		00	0		0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0		)		00	0	0	0	0	
19.2	Other Private Passenger Auto Liability	0	0	0	(	)  0		00	0	0	0	0	
	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0		)  0		00	0	0	0	0	
19.4	Other Commercial Auto Liability	0	0	0		0		00	0	0	0	0	
21.1	Commercial Auto Physical Damage	0	0			)		0	0	0	0	0	
22.	Aircraft (all perils)	0	0	0		)		00	0	0	0	0	
23.	Fidelity	0	0	0		)  0		00	0	0	0	0	
	Surety	0	0	0		)  0		00	0	0	0	0	
26. 27.	Burglary and Theft Boiler and Machinery	10	0 n	0 n		,		0 I	0	0 n	0 n	0 n	
28.	Credit	0	0	0		)		0	0	0	0	0	
29.	International	0	0	0		)		00		0	0	0	
30.	Warranty	0	0	0				00				0	0
31. 32.	Reins nonproportional assumed property	XXXXXX	XXX XXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX		XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXX
32. 33.	Reins nonproportional assumed financial lines	XXXXXX	XXX	XXX	XXXXX	XXX	XXX	XXX	XXX	XXXXXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0		)		00	0	0	0	0	
35.	Total (a)	164,735	191,296	0	46,857	9,324	39,58	0 71,780	204	8,333	20,888	17,717	23,731
0.40:	DETAILS OF WRITE-INS		_										
3401. 3402.													
3402. 3403.													
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0		)		00	0	0	0	0	C
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0		)		0 0	0	0	0	0	0



NAIC Group Code 0088 BUSINES	S IN THE STATE (				LOSSES	` ,		RING THE YEAR	R 2024	NAIC Com	npany Code 10	212
	Gross Premi Policy and Me Less Return	embership Fees, Premiums and Policies not Taken	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0		0		00	0	0	0	0	
2.2 Multiple Peril Crop	0	0	0		0		0	0	0	0	0	
2.3 Federal Flood	0	0	0		0		0	0	0	0	0	
2.4. Private Crop	0	0	0		0		00	00	0	0	0	
2.5 Private Flood	0	0	0		0		00	00	0	0	0	
Farmowners Multiple Peril	0	0	0		0		00	0  0	0	0	0	
Homeowners Multiple Peril		0	0		0		0  0	)  0	0	0	0	
5.2 Commercial Multiple Peril (Non-Elability Portion)		0	0		0		0	0	0	0	0	
6. Mortgage Guaranty	0	0	0		0		0	0	0	0	0	
8. Ocean Marine	0	0	0		0		00	00	0	0	0	
9.1 Inland Marine	0	0	0		0		00	)  0	0	0	0	
9.2 Pet Insurance Plans	0	0	0		0		0  0	0	0	0	0	
Financial Guaranty		0	0		0		0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence		0 n	n		n		0	,	0 n	n	0 n	
12. Earthquake	0	0	0				0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0		0		00	)  0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0		0		00	00	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0		0		00	00	0	0	0	
15.1 Vision Only (b)	0	0	0		0		0  0	0	0	0	0	
15.2 Dental Only (b)		0	0		0		0  0	)  0	0	0	0	
15.4 Medicare Supplement (b)	0 0	0	0		0		0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0		0		0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0		0		00	)0	0	0	0	
15.7 Long-Term Care (b)	0	0	0		0		00	00	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0		0		0  0	0  0	0	0	0	
15.9 Other Health (b)		0	0	551, 417	159.299	658 14	0 682.968	3	0		0	
17.1 Other Liability - Occurrence		1, 147,819		551,41/	159,299	658, 14	0 682,968		/1,988	96,479	123,496	37 , 46
17.2 Other Liability - Occurrence	0	0	0				0	)0	0	0	0	
17.3 Excess Workers' Compensation		0	0		0		00	00	0	0	0	
18.1 Products Liability - Occurrence	0	0	0		0		00	00	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0		0		00	00	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0		0		0  0	)  0	0	0	0	
19.2 Other Private Passenger Auto Liability		0	0		0		00	0	0	0	0	
19.4 Other Commercial Auto No-Fault (Personal Injury Protection)		0					0	)				
21.1 Private Passenger Auto Physical Damage	0	0	0		0		00	)0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0		0		00	00	0	0	0	
22. Aircraft (all perils)	0	0	0		0		00	0	0	0	0	
23. Fidelity	0	0	0		0		00	00	0	0	0	
24. Surety	0	0	ō	ļ	0		0  0	.  ō	0	ō	0	
26. Burglary and Theft	U	U	u				0	,	U	u		
28. Credit	n		n				0	)	0	0	0	
29. International	0	0	0		0		0		0	0	0	
30. Warranty	0	0	0				00		0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXXXXX	XXX	XXX	XXXXXX	XXX		XXXXXX	XXXXXX	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX			XXX	XXX	XXX	XXX	XXX	XXX
35. Total (a)	1.244.195	1,147,819	n	551.417		658 . 14		3 13.526	71.988	96.479	123,496	37.46
DETAILS OF WRITE-INS	1,277,100	1, 147,010		301,417	100,200	550, 14	552,500	10,020	71,300	55,475	120,400	57,40
01												
02.												
03												
<ol> <li>Summary of remaining write-ins for Line 34 from overflow page</li> <li>Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)</li> </ol>	0	0	0		0		0		U	u		
oo. Totalo (Ellico ofo i tillough ofoo plus offoo)(Ellic off above)	ı U	U	U	1	U	1	· 0	, 0	U	U	1 0	l



#### **EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

BUSINESS IN THE STATE OF Massachusetts NAIC Group Code 0088 DURING THE YEAR 2024 NAIC Company Code 10212 Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Direct Defense Premiums on Policies not Taken Dividends Paid Direct Defense Direct Defense and Cost or Credited to and Cost and Cost Containment Commissions Direct Premiums Policyholders Direct Unearned Direct Losses Paid Direct Losses Direct Containment Containment Expense and Brokerage Taxes, Licenses Direct Premiums (deducting salvage) Line of Business Written Earned on Direct Business Premium Reserves Incurred Losses Unpaid Expense Paid Expense Incurred Unpaid Expenses and Fees 2.1 Allied Lines .. 2.2 Multiple Peril Crop ... 2.3 Federal Flood . 2.4. Private Crop ... 2.5 Private Flood 3. Farmowners Multiple Peril . 4. Homeowners Multiple Peril 5.1 Commercial Multiple Peril (Non-Liability Portion) 5.2 Commercial Multiple Peril (Liability Portion) ... 6. Mortgage Guaranty ..... 8. Ocean Marine ... 9.1 Inland Marine . 9.2 Pet Insurance Plans .. 10. Financial Guaranty ... 11.1 Medical Professional Liability - Occurrence 11.2 Medical Professional Liability - Claims-Made 12. Earthquake ...... 13.1 Comprehensive (hospital and medical) ind (b) 13.2 Comprehensive (hospital and medical) group (b) 14. Credit A&H (Group and Individual) . 15.1 Vision Only (b)..... 15.2 Dental Only (b) . 15.3 Disability Income (b) . 15.4 Medicare Supplement (b) 15.5 Medicaid Title XIX (b) ... 15.6 Medicare Title XVIII (b).... 15.7 Long-Term Care (b) ..... 15.8 Federal Employees Health Benefits Plan (b) 15.9 Other Health (b) .... 16. Workers' Compensation .. .56,754 .11,014 46,302 13,211 .77,380 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 ... Burglary and Theft Boiler and Machinery . 27 28. Credit ... International 29. 30. Warranty .. 31. Reins nonproportional assumed property XXX. XXX.. XXX. XXX. .XXX.. XXX. XXX. Reins nonproportional assumed liability XXX .XXX .XXX. .XXX. XXX. XXX. XXX. .XXX .XXX .XXX. .XXX. .XXX. Reins nonproportional assumed financial lines . .xxx.. .xxx. .xxx. .XXX. .XXX. XXX. .XXX. Aggregate Write-Ins for Other Lines of Business 34 35. Total (a) 56.754 80.193 17.081 46.302 83.780 2.415 13,211 5.973 DETAILS OF WRITE-INS 3401. 3402. 3403. Summary of remaining write-ins for Line 34 from overflow page Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)

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



	NAIC Group Code 0088 BUSINESS II	N THE STATE C	F Michigan					DU	RING THE YEAR	R 2024	NAIC Com	pany Code 10	0212
		Gross Premiu Policy and Me Less Return I	ıms, Including	3 Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10  Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire	0	0	0	0	0		0  0	0	0	0	0	
	Multiple Peril Crop	0	0	0	0	0		0	0	0	0	0	
	Federal Flood	0	0	0	0	0		0	0	0	0	0	
	Private Crop	0	0	0	0	0		00	0	0	0	0	
	Private Flood	0	0	0	0	0		00	0	0	0	0	
3. 4.	Farmowners Multiple Peril	0	0		0	0		00	0	0	0	0	
	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0		00	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0		00	0	0	0	0	
6.	Mortgage Guaranty	0	0	0	0	0		00	0	0	0	0	
	Ocean Marine	0	0	0	0	0		00	0	0	0	0	
	Inland Marine	0	0	0	J0	0	[ ];	u  0	0	0	0	J	
	Financial Guaranty	n	0 N	 n	u	n		n n	0 n	n	0 n	n	
	Medical Professional Liability - Occurrence	0	0	0		0		0	0	0	0	0	
11.2	Medical Professional Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
12.	Earthquake	0	0	0	0	0		00	0	0	0	0	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	······································	0  0	0	0	0	0	
	Comprehensive (hospital and medical) group (b)	0	0		0	0		00	0	0	0	0	
	Vision Only (b)	0	0			0		0	0	0	0	0	
	Dental Only (b)	0	0	0	0	0		0	0	0	0	0	
15.3	Disability Income (b)	0	0	0	0	0		00	0	0	0	0	
	Medicare Supplement (b)	0	0	0	0	0		00	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0	0	0	······································	00	0	0	0	0	
	Medicare Title XVIII (b)		0			0		00	0		0	0	
15.8	Federal Employees Health Benefits Plan (b)	0	0	0	0	0		00	0	0	0	0	
	Other Health (b)	0	0	0	0	0		00	0	0	0	0	
	Workers' Compensation	3,205,760	2,963,381	0	1,064,801	412,658	1,764,084	42,715,470	82,612	213,075	407,081	347,678	143,08
17.1	Other Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
17.2	Other Liability - Claims-Made  Excess Workers' Compensation	0	0	0	0	0	······································	00	0	0	0	0	
	Products Liability - Occurrence		0 0			0		n	0	n		0	
18.2	Products Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		00	0	0	0	0	
	Other Private Passenger Auto Liability	0	0	0	0	0		00	0	0	0	0	
	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	······································	0  0	0	0	0	0	
19.4	Other Commercial Auto Liability	0	0		0	0		00	0	0	0	0	
21.1	Commercial Auto Physical Damage	0	0			0		0	0	0	0	0	
22.	Aircraft (all perils)	0	0	0	0	0		00	0	0	0	0	
	Fidelity	0	0	0	0	0		00	0	0	0	0	
	Surety	0	0	0	0	0		00	0	0	0	0	
	Burglary and Theft	0	0	0	J	0	[]	n  0	0	J	0	0	
27. 28.	Credit	U	U	 n		U		n  0	0 n	n	0 n	0 n	
29.	International	0	0	0		0		00	0	0	0	0	
30.	Warranty	0	0	0	0	0		00		0	0	0	
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXXXXX	XXX	XXX	XXX	XXX	XXX	XXX	XXXXXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX0	XXX	XXX	XXX
34	Total (a)	3,205,760	2,963,381	0	1.064.801	412.658			82.612		407.081	347.678	143.08
	DETAILS OF WRITE-INS	5,255,760	2,000,001		1,001,001	,000	1,101,00	2,7.10,470	52,012	2.0,010	.5.,001	3,010	,
									1	1			1
35. 3401.													
35. 3401. 3402.													
35. 401. 402. 403.	Summary of remaining write-ins for Line 34 from overflow page												



NAIC Group Code 0088	BUSINESS IN THE STATE				LOSSES	•		RING THE YEAR	R 2024	NAIC Com	npany Code 10	212
	Gross Pre Policy and I Less Retu Premiums on 1	miums, Including Membership Fees, The Premiums and Policies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire		.0  0	0		)  0		00	0	0	0	0	
2.2 Multiple Peril Crop		0	0		)		0	1		0		
2.3 Federal Flood		. 0	0		)		0	0	0	0	0	
2.4. Private Crop		.00	0		)		00	00	0	0	0	
2.5 Private Flood		.00	0		)		00	0	0	0	0	
Farmowners Multiple Peril		. 00	0		0  0	!	00	0  0	0	0	0	
Homeowners Multiple Peril      Commercial Multiple Peril (Non-Liability Portion)		. 0	0		)		0  0	)  0	0	0	0	
5.2 Commercial Multiple Peril (Non-Liability Portion)		0	n		)		n	1	0	0		
6. Mortgage Guaranty		. 0	0		)		0	0	0	0	0	
8. Ocean Marine		. 0 0	0		)		00	00	0	0	0	
9.1 Inland Marine		.00	0		)   C		00	0	0	0	0	
9.2 Pet Insurance Plans		.0  0	0	[	)		0  0	0	0	J0	0	
Financial Guaranty      Medical Professional Liability - Occurrence		. n  0	0	ļ	ر ا۔۔۔۔۔۔ ر		u  0	.  ō	0	J	0	·····
11.1 Medical Professional Liability - Occurrence		. 0	0		)		0	)	0	0		
12. Earthquake		0	n		)		n	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)		. 0 0	0		)		0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)		. 0 0	0		)		00	00	0	0	0	
14. Credit A&H (Group and Individual)		. 0 0	0	(	)		00	00	0	0	0	
15.1 Vision Only (b)		. 0 0	0		)  0		00	0	0	0	0	
15.2 Dental Only (b)		. 0   0	0		)	!	0  0	0	0	0	0	
15.3 Disability Income (b)		. 0	0		)		0  0	)  0	0	0	0	
15.5 Medicaid Title XIX (b)		0			)		0	)		0		
15.6 Medicare Title XVIII (b)		. 0 0	0		)		0	0	0	0	0	
15.7 Long-Term Care (b)		.00	0		)		00	00	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)		.00	0	(	)		00	00	0	0	0	
15.9 Other Health (b)		.00	0		)  0		00	00	0	0	0	
16. Workers' Compensation		. 0   0	0		)  0		0  0	0	0	0	(9)	1,4
17.1 Other Liability - Occurrence		. 0	0		)		0	)  0	0	0	0	
17.3 Excess Workers' Compensation		0	0		)		0	0	0	0	0	
18.1 Products Liability - Occurrence		. 0	0		)		0	0	0	0	0	
18.2 Products Liability - Claims-Made		. 0 0	0		)		00	00	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection	on)	. 0 0	0		)  0		00	00	0	0	0	
19.2 Other Private Passenger Auto Liability		.00	0		)  0		00	)  0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)		. 0  0	0		)  0		0  0	0	0	0	0	
19.4 Other Commercial Auto Liability		. 0	0		)		0	)  0	0	0	0	
21.2 Commercial Auto Physical Damage		. 00	0		)		0	)0	0	0	0	
22. Aircraft (all perils)		.0	0		)		0	)0	0	0	0	
23. Fidelity		.00	0		)  0		00	)0	0	0	0	
24. Surety		.0	0		)		00	0	0	0	0	
26. Burglary and Theft		. 0  0	0	ļ	)  0		0  0	0	0	0	0	·····
Boiler and Machinery		. u  0	0	ļ	ر ا ر		۰0	,  0	J0	J0	0	
28. Credit		. 0	0 n		,		0	,	0 n	n	0 n	
30. Warranty		.0			)		00		0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	xxx	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	xxx		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
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		00		ļ	)  ū		0  0	.  ō	0		0	
35. Total (a)  DETAILS OF WRITE-INS		0	0	1	0	<u> </u>	0	0	0	0	(9)	1,4
01												
02.												
03.												
98. Summary of remaining write-ins for Line 34 from overflow p	page	.00	0		)  0		00	0	0	0	0	
.99. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above	e)	0	0	(	)   0	) <b>[</b>	0   0	0	0	0	1 0	



NAIC Group Code 0088 BU	<u>SINESS IN THE STATE C</u>						DU	RING THE YEAR	7 2024		npany Code 10	<u> </u>
	Policy and Me Less Return I	ums, Including mbership Fees, Premiums and blicies not Taken	3 Dividends Paid	4	5	6	7	8 Direct Defense	9 Direct Defense	10 Direct Defense and Cost	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, License and Fees
1. Fire	0	0	0	0	0		)0	0	0	0	0	
2.1 Allied Lines	0	0	0	0	0	· · · · · · · · · · · · · · · · · · ·	)  0	0	0	0	0	
2.2 Multiple Peril Crop		0	0	0	0		J	0	0	0	0	
2.4. Private Crop		0	0	0	0		,  0	0	0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	0	
2.5 Private Flood		Λ	0		0		,	0	0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
Farmowners Multiple Peril		0 n	0		0		1	0	0 n	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
Homeowners Multiple Peril		0	0	0	0		0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)		0	0	0	0		)	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)		0	0	0	0		)0	0	0	0	0	
6. Mortgage Guaranty	0	0	0		0		)0	0	0	0	0	
8. Ocean Marine	0	0	0	0	0		)0	0	0	0	0	
9.1 Inland Marine	0	0	0	0	0		)0	0	0	0	0	
9.2 Pet Insurance Plans	0	0	0	0	0		)  0	0	0	0	0	
10. Financial Guaranty	0	0	0	0	0		)  0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0		)0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made		0	0	0	0		)  0	0	0	0	0	
12. Earthquake	0	0	0	0	0		)  0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)		0	0	0	0	(	00	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)		0	0	0	0	(	00	0	0	0	0	
14. Credit A&H (Group and Individual)		0	0	0	0		)  0	0	0	0	0	
15.1 Vision Only (b)		0	0	0	0		0	0	0	0	0	
15.2 Dental Only (b)		0	0	0	0		0  0	0	0	0	0	
15.3 Disability Income (b)	0	0	0	0	0	· · · · · · · · · · · · · · · · · · ·	)  0	0	0	0	0	
15.4 Medicare Supplement (b)		0	0	0	0	······································	0	0	0	0	0	
15.5 Medicaid Title XIX (b)		0	0	0	0		J	0	0	0	0	
15.6 Medicare Title XVIII (b)		0	0	0	0		J	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)		0	0		0		0	0	0	0	0	
15.9 Other Health (b)		٥	0		0		1	0		۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
16. Workers' Compensation		45.333	0	19.700			8.487		1.242	2.908	5.501	2
17.1 Other Liability - Occurrence		0	0	10,700	0	0,040	)	0	1,242	2,300 N	0,301	
17.2 Other Liability - Claims-Made	0	0	0	0	0		)	0	0		0	
17.3 Excess Workers' Compensation		0	0	0	0		)0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0	0		)0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0		)0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection) .	0	0	0	0	0		)0	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0	0	0		)0	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		)0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	0	0		)0	0	0	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0		)  0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	0		)  0	0	0	0	0	
22. Aircraft (all perils)	0	0	0	0	0		)  0	0	0	0	0	
23. Fidelity		0	0	0	0		)  0	0	0	0	0	ļ
24. Surety		0	0	0	0		)  0	0	0	0	0	
26. Burglary and Theft		0	0	0	0		)  0	0	0	0	J0	
27. Boiler and Machinery		0	ļ0	0	0		0	0	0	<u>0</u>	0	
28. Credit		0	<u>0</u>	ļ0	0	[	)  0	0	J0	0	J0	·····
29. International		0	0	0	0	······································	0	0	0	0	0	
	0	0	0	0	0		J0	0	0	0	0	
31. Reins nonproportional assumed property	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXX	XXXXXX	XXX
32. Reins nonproportional assumed liability		XXX	XXX	XXX	XXXXXX	XXXXXX		XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines		0		0					0			·······
35. Total (a)	53.347	45.333	n	19.700		3.540			1.242	2.908		2.
DETAILS OF WRITE-INS	33,047	70,000	0	19,700	0	0,040	0,407	0	1,242	2,300	3,301	
101												1
02.												
03.		[										
·U3												
198. Summary of remaining write-ins for Line 34 from overflow page	0	0	0		0		)0	0	0	0	0	



NAIC Group Code 0088 BUSINESS	<u>IN THE STATE C</u>			•			טט	RING THE YEAR	<u> 2024</u>		npany Code 10	1212
	Policy and Me Less Return	ums, Including mbership Fees, Premiums and plicies not Taken	3 Dividends Paid	4	5	6	7	8 Direct Defense	9 Direct Defense	Direct Defense	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage	Direct Losses Incurred	Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, License and Fees
1. Fire		0	0		)  0		00	0	0	0	0	
2.1 Allied Lines		0	0		)  0	· · · · · · · · · · · · · · · · · · ·	0  0	0	0	0	0	
2.2 Multiple Peril Crop		0	0				0	0	0	0	0	
2.4. Private Crop		0	0		)		0  0	0	0	0	0	
2.4. Private Grop			0		1		0			٥٥		
Farmowners Multiple Peril		n	n		)  0		n	0	0	٥٥		
Homeowners Multiple Peril		0	0		)		n	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0		)		00	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)		0	0		)0		0	0	0	0	0	
6. Mortgage Guaranty		0	0		)  0		0	0	0	0	0	
8. Ocean Marine	0	0	0		)  0		00	0	0	0	0	
9.1 Inland Marine	0	0	0	0	0		0  0	0	0	0	0	ļ
9.2 Pet Insurance Plans	0	0	0	C	)  0		00	00	0	0	0	
10. Financial Guaranty		0	0	0	)  0		0  0	00	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0	0	)  0		00	00	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	)  0		0  0	00	0	0	0	
12. Earthquake		0	0		)  0		0  0	·  0	ļ0	0	J0	ļ
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0		)  0		0  0	00	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0		0		0  0	0	0	0	0	
4. Credit A&H (Group and Individual)		0	0		)  0	· · · · · · · · · · · · · · · · · · ·	0  0	0	0	0	0	
15.1 Vision Only (b)		0	0		)  0		0	0	0	0	0	
5.2 Dental Only (b)	0	0	0		)  0		0  0	0	0	0	0	
5.3 Disability Income (b)		0	0				0	0	0	0	0	
15.4 Medicare Supplement (b)		0	0		)		0  0	0		0		
15.6 Medicare Title XVIII (b)			0		)		0			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	0	
15.7 Long-Term Care (b)			0		)		0			٥٥		
15.8 Federal Employees Health Benefits Plan (b)		Λ	0		)  0		n			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
15.9 Other Health (b)	0	0	0		)		00	0	0	0	0	
16. Workers' Compensation			0	63.497					20.089	13.302	28.563	
17.1 Other Liability - Occurrence		0	0		)0		0		0	0	0	
17.2 Other Liability - Claims-Made		0	0		0		0	00	0	0	0	
7.3 Excess Workers' Compensation	0	0	0		)0		00	0	0	0	0	
8.1 Products Liability - Occurrence	0	0	0		)0		00	0	0	0	0	
8.2 Products Liability - Claims-Made	0	0	0		)  0		00	0	0	0	0	
9.1 Private Passenger Auto No-Fault (Personal Injury Protection)		0	0		00		00	00	0	0	0	
9.2 Other Private Passenger Auto Liability	0	0	0	0	)  0		00	00	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0		)  0		0  0	0	0	0	0	ļ
9.4 Other Commercial Auto Liability	0	0	0	0	)  0		0  0	00	0	0	0	
1.1 Private Passenger Auto Physical Damage	0	0	0	C	0  0		υ  ο	ļ  0	0	0	J0	·····
1.2 Commercial Auto Physical Damage	·· 0	0	ļ0	ļ	0		u  0	.  0	0	0	0	·
2. Aircraft (all perils)	0	0	0		)  0	· ······	0  0	0	0	0	0	
3. Fidelity	·· 0	J0	0	ļ	0		u  0	.  0	J	0	J0	·····
4. Surety		0	0	ļ	0		0 ا	0	0	0	J0	
Burglary and Theft     Boiler and Machinery			0		,		n			0		
7. Boller and Machinery			0		,		n			U		
8. Credit		u	U		۱۰۰۰		n			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
9. International	n	n	n		)		n	,	n	0 n	n	
Wallanty     Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed liability		XXX	XXX	XXX		XXX		XXX	xxx	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX		XXX			XXX	XXX	XXX	XXX
Aggregate Write-Ins for Other Lines of Business	0									0	0	
5. Total (a)	276,830	246,863	0	63,497						13,302	28,563	
DETAILS OF WRITE-INS	,	,		,,,,,,	,,,,,	.,	3,555	,,,,,	,	.,,	1	
01											.	
02.											.	
03.											.	
98. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	C	)  0		00	0	0	0	0	
199. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	1 0	0	)   0	) [	0 <b> </b> 0	0	0	0	1 0	1



NAIC Group Code 0088 BUSINESS	IN THE STATE C				LOSSES			RING THE YEAR	R 2024	NAIC Com	npany Code 10	212
	Gross Premi Policy and Me Less Return	ums, Including mbership Fees, Premiums and blicies not Taken	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10  Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0			)	00	0	0	0	0	
2.2 Multiple Peril Crop		0			1	1	n	0	0	0		
2.3 Federal Flood		0	0			í	00	0	0	0	0	
2.4. Private Crop	0	0	0			)	00	0	0	0	0	
2.5 Private Flood	0	0	0	0		)	00	0	0	0	0	
3. Farmowners Multiple Peril	0	0	0	0			00	0	0	0	0	
Homeowners Multiple Peril     Commercial Multiple Peril (Non-Liability Portion)		0	0			,	0  0	0	0	0	0	
5.2 Commercial Multiple Peril (Non-Elability Portion)		0	0			,	n n	0		0		
Mortgage Guaranty		0	0			í	00	0	0	0	0	
8. Ocean Marine	0	0	0	0		)	00	0	0	0	0	
9.1 Inland Marine	0	0	0			)	00	0	0	0	0	
9.2 Pet Insurance Plans	0	0	0	C	<u> </u>		0  0	<u>0</u>	0	J0	0	
10. Financial Guaranty		ļ0	0	ļ0	;		V  0	0	0	J0	0	
11.1 Medical Professional Liability - Occurrence	n	n	n		,	,	0	n	n	n	n	
11.2 Medical Professional Clability - Glaims-Made			n			,	0	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0			)	00	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	C		)	00	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0		)	00	0	0	0	0	
15.1 Vision Only (b)	0	0	0	0			00	0	0	0	0	
15.2 Dental Only (b)	0	0	0				0  0	0	0	0	0	
15.4 Medicare Supplement (b)		0					0	0	0	0		
15.5 Medicaid Title XIX (b)	0	0	0			)	0	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	C		)	00	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	C		)	00	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0			)	00	0	0	0	0	
15.9 Other Health (b)		0	0			)(3.75	53)	0		0	0	1.9
16. Workers' Compensation		/52	0	2,634		)  (3,/5	0 1,987		(1,58/)		(61)	1,9
17.1 Other Liability - Occurrence		0	0			,	0	0	0	0	0	
17.3 Excess Workers' Compensation		0	0			j	00	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0	0		)	00	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0		)	00	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0				0  0	0	0	0	0	
19.2 Other Private Passenger Auto Liability		0	0				0  0	0	0	0	0	
19.3 Other Commercial Auto No-Fault (Personal Injury Protection)						,	n	0	0			
21.1 Private Passenger Auto Physical Damage	0	0	0			í	00	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0		·	)	00	0	0	0	0	
22. Aircraft (all perils)	0	0	0	0		)	00	0	0	0	0	
23. Fidelity	0	0	0	C	<u> </u>		0  0	<u>0</u>	0	J0	0	
24. Surety		ļ0	0	ļ0	;		V  0	0	0	J0	0	
26. Burgiary and Theπ	n	n	n		,   t	,	0	n	n	n	n	
28. Credit	0	0	0				0	0	0	0	0	
29. International		0	0			)	0		0	0	0	
30. Warranty	0	0	0			)	00					
31. Reins nonproportional assumed property		XXX	XXX	XXX		XXX		XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
33. Reins nonproportional assumed financial lines	0			XXX		XXX			0			
35. Total (a)	(1,872)	752	0	2,634		(3,75		0	(1,587)		(61)	1,9
DETAILS OF WRITE-INS	(1,012)	7.02				,0,110	.,001		(1,001)	-	(0.)	1,01
01												
02												
03. Summary of remaining write-ins for Line 34 from overflow page									·····			
98. Summary of remaining write-ins for Line 34 from overflow page	n	n	n		,   c	í	0	n	n	n	n	
33. Totals (Lines 340) tillough 3403 plus 3430/(Line 34 above)	U	U	U	1	'	, I	0	U	U	U	U	l



NAIC Group Code 0088 BUSINESS	IN THE STATE C						טט	RING THE YEAR	<u> 2024</u>		npany Code 10	1212
	Policy and Me Less Return	ums, Including mbership Fees, Premiums and olicies not Taken	3 Dividends Paid	4	5	6	7	8 Direct Defense	9 Direct Defense	Direct Defense	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire		0	0	0	)	)	00	0	0	0	0	
2.1 Allied Lines		0	0	0	)	)	0  0	0	0	0	0	
2.2 Multiple Peril Crop		0	0	0			0  0	0	0	0	0	
2.4. Private Crop		0	0		)		0  0	0	0	0	0	
2.5 Private Flood		0	0		)	1	0	0		٥٥		
Farmowners Multiple Peril		0	0	0	)	)	0	0	0	0	0	
Homeowners Multiple Peril		0	0	0	)	)	00	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)		0	0	0	)	)	00	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)		0	0	0	)	)	00	0	0	0	0	
Mortgage Guaranty	0	0	0	0	)(	)	00	0	0	0	0	
8. Ocean Marine	0	0	0	0	)(	)	00	0	0	0	0	
9.1 Inland Marine		0	0	0	)(	)	00	0	0	0	0	
9.2 Pet Insurance Plans	0	0	0	J0	)	)	0  0	0	0	0	0	ļ
10. Financial Guaranty	0	0	<u>0</u>	J0			0  0	J 0		0	J0	ļ
11.1 Medical Professional Liability - Occurrence	0	0	0	0	)	)	0  0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made		0	0	0			۰ ا	0	0	0	0	·····
12. Earthquake		0	0		)		0  0	0		0		
13.2 Comprehensive (hospital and medical) ind (b)		0	0		)	1	0	0		٥٥		
14. Credit A&H (Group and Individual)		0	0 N		)	1	n			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
15.1 Vision Only (b)		Λ	o		)	1	n			٥٥		
15.2 Dental Only (b)	n	0	0		)	,	n	0	0		0	
15.3 Disability Income (b)	0	0	0	0	)	)	0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	)	)	0	0	0	0	0	
15.5 Medicaid Title XIX (b)		0	0	0	)	í	0	0	0	0	0	
15.6 Medicare Title XVIII (b)		0	0	0	)	)	0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	)	)	00	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	)(	)	00	0	0	0	0	
15.9 Other Health (b)	0	0	0	0	)  (	)	00	0	0	0	0	
16. Workers' Compensation		5,560	0	1,389	9	40	71,453	0	126	385	620	4
17.1 Other Liability - Occurrence	0	0	0	0	)	)	0  0	0	0	0	0	
17.2 Other Liability - Claims-Made		0	0	0	)	)	0  0	0	0	0	0	
17.3 Excess Workers' Compensation		0	0	0			0	0	0	0	0	
18.1 Products Liability - Occurrence		0	0	0			0  0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)		0	0		)		0	0		0		
19.2 Other Private Passenger Auto Liability		Λ	o		)	1	n			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	)	)	0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	0	)	)	0	0	0	0	0	
21.1 Private Passenger Auto Physical Damage		0	0		)	)	0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	)	)	00	0	0	0	0	
22. Aircraft (all perils)		0	0	0	)	)	0  0	0	0	0	0	ļ
23. Fidelity		0	0	0	)	)	0  0	0	0	0	0	
24. Surety	0	0	0	0	)	)	00	0	0	0	0	
26. Burglary and Theft	0	0	0	J0	)	)	0  0	0	0	0	0	ļ
27. Boiler and Machinery	0	0	0	J0	)	)	0  0	ļ0	0	0	0	ļ
28. Credit	<u>0</u>	0	0	J0			υ  0 <u>-</u>	0	0	0	0	·····
29. International	ō	0	J0	J0			u  0	0	<sub>0</sub>	0	J0	·····
30. Warranty	0	0 XXX	0	XXX0	)XXX	)XXX	0	XXX		XXX		XXX
31. Reins nonproportional assumed property	XXXXXX	XXX	XXX	XXX		XXX		XXXXXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXXXXX	XXX	XXXXXX		XXX		XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0			0		)			0			
35. Total (a)	5.987	5.560	0	1.389		40			126	385		4
DETAILS OF WRITE-INS	5,307	0,000		1,000	,		1,400		120	000	020	<u> </u>
01												
02.												
				.							.	ļ
198. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	)  (	)	00	0	0	0	0	
199. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	)   (	) [	0 <b> </b> 0	0	1 0	0	0	I



	NAIC Group Code 0088 BUSINESS II	N THE STATE C	F Nevada				_	DU	RING THE YEAR	R 2024	NAIC Com	pany Code 10	0212
		Gross Premiu Policy and Me Less Return I Premiums on Po	ums, Including mbership Fees, Premiums and plicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire	0	0	0	0	0		00	0	0	0	0	
	Multiple Peril Crop	0	0	0	0	0		00	0	0	0	0	
	Federal Flood	0	0	0	0	0		00	0	0	0	0	
	Private Crop	0	0	0	0	0		00	0	0	0	0	
	Private Flood	0	0	0	0	0		00	0	0	0	0	
3. 4.	Farmowners Multiple Peril	0	0	0	0	0		00	0	0	0	0	
	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0		00	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0		00	0	0	0	0	
6.	Mortgage Guaranty	0	0	0	0	0		00	0	0	0	0	
	Ocean Marine	0	0	0	0	0		00	0	0	0	0	
	Inland Marine	0	0	0	J0	0		00	0	0	0	0	
	Financial Guaranty	n	n			0		0n	0	0		0	
11.1	Medical Professional Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
11.2	Medical Professional Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
12.	Earthquake	0	0	0	0	0		00	0	0	0	0	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0		0  0	0	0	0	0	
	Comprehensive (hospital and medical) group (b)	0	0	0	0	0		00	0	0	0	0	
	Vision Only (b)		0	0		0		0	0	0		0	
	Dental Only (b)	0	0	0	0	0		00	0	0	0	0	
15.3	Disability Income (b)	0	0	0	0	0		00	0	0	0	0	
	Medicare Supplement (b)	0	0	0	0	0		00	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0	0	0		00	0	0	0	0	
	Medicare Title XVIII (b) Long-Term Care (b)		0	0		0		00	0		٠١		
15.8	Federal Employees Health Benefits Plan (b)	0	0	0	0	0		00	0	0	0	0	
	Other Health (b)	0	0	0	0	0		00	0	0	0	0	
	Workers' Compensation	262,211	406,623	0	49,375	94,915	127,07			31, 174	29,065	28,513	4, 12
17.1	Other Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
	Other Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
	Products Liability - Occurrence		0			0		n	0		٠١		
18.2	Products Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		00	0	0	0	0	
	Other Private Passenger Auto Liability	0	0	0	0	0		00	0	0	0	0	
	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		0  0	0	0	0	0	
19.4	Other Commercial Auto Liability	0	0	0	0	0		00	0	0	0	0	
21.1	Commercial Auto Physical Damage	0	0	0		0		0	0	0		0	
22.	Aircraft (all perils)	0	0	0	0	0		00	0	0	0	0	
	Fidelity	0	0	0	0	0		00	0	0	0	0	
	Surety	0	0	0	0	0		00	0	0	0	0	
	Burglary and Theft	0	0	0	0	0		0  0	0	0	0	0	
27. 28.	Boiler and Machinery	u	U	U		0 n		n	0 n	0 n	 n	u	
29.	International	0	0	0		0		00	0	0		0	
30.	Warranty	0	0	0	0			00		0	0	0	
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Reins nonproportional assumed financial lines	XXX0	XXX0	XXX	XXX0	XXX	XXX	XXX	XXX	XXX0	XXX	XXX	XXX
33. 34		262.211		0	49.375		127.07		21.998	31.174	29.065	28.513	4.12
34.	Lotal (a)				.0,070	0.,010	,07	.00,210	,000	Ü., II 4	20,000	20,010	1
34.	Total (a) DETAILS OF WRITE-INS	202,211											
34. 35. 3401.		202,211											
34. 35. 3401. 3402.		202,211											
34. 35. 401. 402. 403.		20121											



	NAIC Group Code 0088 BUSINESS II	N THE STATE C	F New Hamps	shire				DU	RING THE YEAF	R 2024	NAIC Com	pany Code 10	0212
	,	Gross Premiu Policy and Mei Less Return I Premiums on Po	ms, Including nbership Fees, Premiums and blicies not Taken 2	3 Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire	0	0	0	0	0		0  0	0	0	0	0	
	Multiple Peril Crop	0	0	0	0	0		0	0	0	0	0	
	Federal Flood	0	0	0	0	0		00	0	0	0	0	
	Private Crop	0	0	0	0	0		00	0	0	0	0	
	Private Flood	0	0	0	0	0		00	0	0	0	0	
3. 4.	Farmowners Multiple Peril	0	0		0	0		00	0	0	0	0	
	Commercial Multiple Peril (Non-Liability Portion)	0	0	0		0		00	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0		00	0	0	0	0	
6.	Mortgage Guaranty	0	0	0	0	0		00	0	0	0	0	
	Ocean Marine	0	0	0	0	0		00	0	0	0	0	
	Inland Marine	0	0	0	0	0		00	0	0	0	0	
	Financial Guaranty	n	0 N	 n	n	n		n n	0 n	n	0 n	n	
	Medical Professional Liability - Occurrence	0	0	0		0		0	0	0	0	0	
11.2	Medical Professional Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
12.	Earthquake	0	0	0	0	0		00	0	0	0	0	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0		0  0	0	0	0	0	
	Comprehensive (hospital and medical) group (b)	0	0		0	0		00	0	0	0	0	
	Vision Only (b)		0			0		0	0	0	0	0	
	Dental Only (b)	0	0	0	0	0		0	0	0	0	0	
15.3	Disability Income (b)	0	0	0	0	0		00	0	0	0	0	
	Medicare Supplement (b)	0	0	0	0	0		00	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0	0	0		00	0	0	0	0	
	Medicare Title XVIII (b)	0	0			0		00	0		0		
15.8	Federal Employees Health Benefits Plan (b)	0	0	0	0	0		00	0	0	0	0	
	Other Health (b)	0	0	0	0	0		00	0	0	0	0	
	Workers' Compensation	1, 185, 604	1, 108, 813	0	471,734	273,723	537,479			75,513	143,824	126,797	23,6
17.1	Other Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
	Other Liability - Claims-Made  Excess Workers' Compensation	0	0	0	0	0		00	0	0	0	0	
	Products Liability - Occurrence	0	0					n	0				
18.2	Products Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		00	0	0	0	0	
	Other Private Passenger Auto Liability	0	0	0	0	0		00	0	0	0	0	
	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		0  0	0	0	0	0	
19.4	Other Commercial Auto Liability	0	0			0		00	0	0	0	0	
21.1	Commercial Auto Physical Damage	0	0	0	0	0		00	0	0	0	0	
22.	Aircraft (all perils)	0	0	0	0	0		00	0	0	0	0	
	Fidelity	0	0	0	0	0		00	0	0	0	0	
	Surety	0	0	0	0	0		00	0	0	0	0	
	Burglary and Theft	0	0	0	J0	0		n  0	0	J0	0	J	•••••
28.	Credit	n	0 N	 n	n	n		n n	0	0	0	0	
29.	International	0	0	0	0	0		00		0	0	0	
30.	Warranty	0	0	0	0			00		0	0	0	
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXXXXX	XXXXXX	XXX	XXXXXX	XXXXXX	XXXXXX	XXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
33. 34.	Aggregate Write-Ins for Other Lines of Business				0		XXX			0			
	Total (a)	1,185,604	1,108,813	0	471,734				8,548		143,824	126,797	23,66
	DETAILS OF WRITE-INS	, ,,,,,,,			,,,,,	.,,	,	.,,,,,		.,,,,,	.,		,
401.										ļ			
					i .								1
402.													
402. 403.	Summary of remaining write-ins for Line 34 from overflow page	^				n				Λ	······	·····	



NAIC Group Code 0088 BUSINESS	<u>IN THE STATE C</u>						טט	RING THE YEAR	<u> 2024</u>		npany Code 10	1212
	Policy and Me Less Return I	ums, Including mbership Fees, Premiums and plicies not Taken	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	2 Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses ) Incurred	Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0		0	)	0  0	0	0	0	0	
2.1 Allied Lines		0	0		)		0	0	0	0	0	
2.2 Multiple Peril Crop			0		)		0	0		0	0	
2.4. Private Crop			0		)	1	0			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
2.5 Private Flood		Λ	0		)  0	1	n			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	0	
Farmowners Multiple Peril	0	0	0		)	j	00	0	0	0	0	
Homeowners Multiple Peril	0	0	0		)0	)	0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0		00	)	00	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	C	)  0	)	00	00	0	0	0	
Mortgage Guaranty	0	0	0		)  0	)	00	00	0	0	0	
8. Ocean Marine	0	0	0		)  0	)	0  0	00	0	0	0	
9.1 Inland Marine		J	0	ļ	0		0  0	.   <u>0</u>	ŏ	0	0	
9.2 Pet Insurance Plans		0	0	ļ	0		υ  0	0		0	]0	
10. Financial Guaranty	0	0	0	ļ	ا الم		0  0		0	0	0	
11.1 Medical Professional Liability - Occurrence		n	n		۱	í	n	,	n		u	
12. Earthquake	n	n	n		)	í l	n I	n	n		n	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0		)	j	00	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0		)	)	00	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0		)0	)	00	0	0	0	0	
15.1 Vision Only (b)	0	0	0		)  0	)	00	0	0	0	0	
15.2 Dental Only (b)	0	0	0		00	)	00	0	0	0	0	
15.3 Disability Income (b)	0	0	0	C	)  0	)	00	00	0	0	0	
15.4 Medicare Supplement (b)	0	0	0	0	00	)	00	00	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	C	0	)	00	00	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0		)  0	)	0  0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0		0		0	0	0	0	0	
15.9 Other Health (b)	0	0	0		)0		00	0	0	0	0	
16. Workers' Compensation		503.374	0	173.106					51.111	71.601	51.788	24
17.1 Other Liability - Occurrence	0	0	0	170,100	)	)	0		0		0	
17.2 Other Liability - Claims-Made	0	0	0		)0	j	00	0	0	0	0	
17.3 Excess Workers' Compensation	0	0	0		)  0	)	00	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0		)  0	)	00	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0		)  0	)	00	00	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	C	0	)	00	00	0	0	0	
19.2 Other Private Passenger Auto Liability		22	0		)  0	)  1	212	!  0	2	2	91,871	
19.3 Commercial Auto No-Fault (Personal Injury Protection)		0	0		)  0	)	0  0	0	0	0	0	
19.4 Other Commercial Auto Liability		0	0	ļ	0		υ [0	0		0	J	·····
21.1 Private Passenger Auto Physical Damage			0		,		n	,		0		l
22. Aircraft (all perils)		n	0		)  0	1	n	0		0	0	
23. Fidelity	0	0	0		)	)	00	0	0	0	0	
24. Surety	0	0	0		)  0	)	0	0	0	0	0	
26. Burglary and Theft	0	0	0		)  0	)	00	0	0	0	0	
27. Boiler and Machinery	0	0	0		00	)	00	0	0	0	0	
28. Credit	0	0	0	C	)  0	)	0  0	0	0	0	0	
29. International	0	0	0	C	)  0	)	0  0	0	0	0	0	
30. Warranty	0	0	0	J	0	)	0  0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed liability	XXXXXX	XXX	XXXXXX	XXXXXX		XXX		XXX	XXXXXX	XXXXXX	XXXXXX	XXX
33. Reins nonproportional assumed financial lines	0									XXX	XXX	XXX
35. Total (a)	495.336	0 503.396	n	173.106		3 14.53				71.603	143.659	24
DETAILS OF WRITE-INS	733,330	300,090	0	173, 100	7 110,070	, 14,30	7/3,033	+1,021	31,110	11,000	140,000	24
01												
02.												
03				.								
98. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	)  0	)	0  0	0	0	0	0	
199. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	1 0	1 0	0	1 0	ן כ 0	)	υ   0	0	1 0	0	1 0	I



2.1 Allied Li 2.2 Multiple 2.3 Federal 2.4 Private 2.5 Private 3. Farmow 4. Homeov 5.1 Comme 6. Mortgag 8. Ocean i 9.1 Inland N 9.2 Pet Insu 10. Financia 11.1 Medical 11.2 Medical	Line of Business  ines e Peril Crop Il Flood Crop Flood Whers Multiple Peril Ercial Multiple Peril (Non-Liability Portion) Ercial Multiple Peril (Liability Portion) Expression E	Policy and Mer Less Return F	ums, Including mbership Fees, Premiums and oblicies not Taken  2 Direct Premiums Earned  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Joividends Paid or Credited to Policyholders on Direct Business 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Direct Unearned Premium Reserves	Direct Losses Paics (deducting salvage)	Direct Losses	Direct Losses Unpaid 0	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
2.1 Allied Li 2.2 Multiple 2.3 Federal 2.4 Private 2.5 Private 3. Farmow 4. Homeov 5.1 Comme 6. Mortgag 8. Ocean i 9.1 Inland N 9.2 Pet Insu 10. Financia 11.1 Medical	ines e Peril Crop Il Flood Crop Flood Where Multiple Peril Everial Multiple Peril (Non-Liability Portion) Eroal Multiple Peril (Liability Portion)		Direct Premiums	Policyholders		Direct Losses Paic (deducting salvage	Direct Losses ) Incurred		Containment	Containment	Expense	and Brokerage	
2.1 Allied Li 2.2 Multiple 2.3 Federal 2.4 Private 2.5 Private 3. Farmow 4. Homeov 5.1 Comme 6. Mortgag 8. Ocean i 9.1 Inland N 9.2 Pet Insu 10. Financia 11.1 Medical 11.2 Medical	ines e e Peril Crop	0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0		)	)	0 0 0 0 0	0	0	0	0	
2.2 Multiple 2.3 Federal 2.4. Private 2.5 Private 3. Farmow 4. Homeov 5.1 Comme 6. Mortgac 8. Ocean f 9.1 Inland N 9.2 Pet Insu 10. Financia 11.1 Medical 11.2 Medical	e Peril Crop Il Flood I Flood Crop Flood Flood Whers Multiple Peril Whers W	0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0	0	)( )( )(	)	)0 )0	0	0	0	0	l
2.3 Federal 2.4. Private 2.5 Private 3. Farmow 4. Homeov 5.1 Comme 6. Mortgag 8. Ocean 1 9.1 Inland N 9.2 Pet Insu 10. Financia 11.1 Medical 11.2 Medical	Il Flood Crop Crop Flood wners Multiple Peril wners Multiple Peril wners Multiple Peril Grecial Multiple Peril (Non-Liability Portion) ge Guaranty Marine Marine	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0	0	)( )(	)(	)0					1
2.4. Private 2.5 Private 3. Farmow 4. Homeov 5.1 Comme 6. Mortgac 8. Ocean i 9.1 Inland N 9.2 Pet Insu 10. Financia 11.1 Medical	Crop Flood wners Multiple Peril wners Multiple Peril ercial Multiple Peril (Non-Liability Portion) ercial Multiple Peril (Liability Portion) ge Guaranty Marine Marine		0 0	0	0	)	J   (			J	0		
2.5 Private 3. Farmow 4. Homeov 5.1 Comme 5.2 Comme 6. Mortgag 8. Ocean I 9.1 Inland N 9.2 Pet Insu 10. Financia 11.1 Medical 11.2 Medical	Flood  whers Multiple Peril  whers Multiple Peril  ercial Multiple Peril (Non-Liability Portion)  ercial Multiple Peril (Liability Portion)  ge Guaranty  Marine  Marine	0 0 0 0 0 0 0 0	0	0	0	,   t		,  0	0	0	0	0	
3. Farmow 4. Homeov 5.1 Comme 5.2 Comme 6. Mortgag 8. Ocean I 9.1 Inland I 9.2 Pet Insu 10. Financia 11.1 Medical 11.2 Medical	wners Multiple Peril	0 0 0 0	0	0		1		,			٠٠	0	
4. Homeov 5.1 Comme 5.2 Comme 6. Mortgag 8. Ocean I 9.1 Inland M 9.2 Pet Insu 10. Financia 11.1 Medical 11.2 Medical	owners Multiple Peril	0	0	0		)	)	)	0	0		0	
5.1 Comme 5.2 Comme 6. Mortgag 8. Ocean I 9.1 Inland M 9.2 Pet Insu 10. Financia 11.1 Medical 11.2 Medical	ercial Multiple Peril (Non-Liability Portion)ercial Multiple Peril (Liability Portion)	0	0		0	)	)	)0	0	0	0	0	
6. Mortgag 8. Ocean I 9.1 Inland I 9.2 Pet Insu 10. Financia 11.1 Medical 11.2 Medical	ge Guaranty Marine Marine	0	n	0	0	)	)	00	0	0	0	0	
6. Mortgag 8. Ocean I 9.1 Inland I 9.2 Pet Insu 10. Financia 11.1 Medical 11.2 Medical	ge Guaranty Marine Marine	0	L U	0	0	)	)	)0	0	0	0	0	
9.1 Inland N 9.2 Pet Insu 10. Financia 11.1 Medical 11.2 Medical	Marine	0	0	0	0	)(	)  (	)0	0	0	0	0	
9.2 Pet Insu 10. Financia 11.1 Medical 11.2 Medical	Marine		0	0	0	)(	)  (	)0	0	0	0	0	
<ul><li>10. Financia</li><li>11.1 Medical</li><li>11.2 Medical</li></ul>	urance Plans	0	0	0	0	)  (	)  (	)  0	0	0	0	0	
<ul><li>11.1 Medical</li><li>11.2 Medical</li></ul>		0	0	0	0	)	)	)  0	0	0	0	0	·····
11.2 Medical	ial Guaranty	ō	0	0	ļ0			0	0	0	0	0	
	al Professional Liability - Occurrence	0	0	0	0			0	0	0	0	0	
	al Professional Liability - Claims-Made	0	0	0	ļ0				0	0	0	0	
12.1 Compre	uakeehensive (hospital and medical) ind (b)		0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠		)	,	,			٠٠	0	
	ehensive (hospital and medical) group (b)		0	٠٥		)		,			٠٠	0	
	A&H (Group and Individual)	n	0	٠٥		)	)	)  0	0	0	٠٥	n	
	Only (b)	0	0	0	0	)	)	0	0	0	0	0	
	Only (b)	0	0	0	0	)	)	0	0	0	0	0	
	ity Income (b)		0	0	0	)	j	)	0	0	0	0	
15.4 Medicar	are Supplement (b)	0	0	0	0	)	)	)0	0	0	0	0	
15.5 Medicai	aid Title XIX (b)	0	0	0	0	)	)	)0	0	0	0	0	
15.6 Medicar	are Title XVIII (b)	0	0	0	0	)(	)(	)0	0	0	0	0	
15.7 Long-Te	erm Care (b)	0	0	0	0	)(	)  (	)0	0	0	0	0	
	Il Employees Health Benefits Plan (b)	0	0	0	0	)  (	)  (	)  0	0	0	0	0	
	Health (b)	0	0	0	0	)	)  (	)  0	0	0	0	0	
	rs' Compensation	29,960	27,488	0	8,097	7	2,534	46, 168	0	926	2, 182	3, 123	7
17.1 Other L	_iability - Occurrence	0	0	0	0			0	0	0	0	0	
	S Workers' Compensation		0	0	0	)	,	,  0	0	0	0	0	
17.3 EXCESS	ts Liability - Occurrence		0	٠٥		)		,			٠٠	0	
18.2 Product	ts Liability - Occurrence	n		۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		)	)	)  0		0	٠٠	n	
	Passenger Auto No-Fault (Personal Injury Protection)	0	0		0	)	)	0	0	0		0	
	Private Passenger Auto Liability	0	0	0	0	)	)	0	0	0	0	0	
19.3 Comme	ercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	)	)	00	0	0	0	0	
19.4 Other C	Commercial Auto Liability	0	0	0	0	)	)	)0	0	0	0	0	
21.1 Private	Passenger Auto Physical Damage	0	0	0	0	)  (	)  (	)  0	0	0	0	0	
21.2 Comme	ercial Auto Physical Damage	0	0	0	0	)	)	)  0	0	0	0	0	
	t (all perils)	0	0	0	0	)	)	)  0	0	0	0	0	
	/	J	J0	0	ļ0	)		)  0	0	J 0	0	J	
		]ō	0	0	0			0	0	[0	0	0	
	ry and Theftand Machinery		0	0	ļ0				0	0	0	0	
	апо маспіпету	ū	J0	0		,	,	,  0	0	J0	0	0	
	tional	n	u	u		,	,	,  0		n		n	
30. Warrant		n	n	n	n	)	,	,	n	n	n	n	
	nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins n	nonproportional assumed liability	XXX	XXX	XXX	XXX		XXX		XXX	XXX	XXX	XXX	XXX
33. Reins n	nonproportional assumed financial lines	XXX	XXX	XXX	XXX		XXX		XXX	XXX	XXX	XXX	XXX
	gate Write-Ins for Other Lines of Business	0	0		0	)(	)  (	)0	0	0	0	0	
35. Total (a	a)	29,960	27,488	0	8,097		2,534		0	926	2,182	3, 123	7
	LS OF WRITE-INS												1
					.								
402													
					·								
198. Summai 199. Totals (I	ary of remaining write-ins for Line 34 from overflow page(Lines 3401 through 3403 plus 3498)(Line 34 above)	I	0	0	ļ0		<u> </u>	۱۵	0	0			



NAIC Group Code 0088 BUSINE	ESS IN THE STATE C	OF New York				_	ĎU	RING THE YEAR	R 2024	NAIC Com	pany Code 10	0212
	Gross Premii Policy and Me Less Return	ums, Including mbership Fees, Premiums and olicies not Taken	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0		0		00	0	0	0	0	
2.2 Multiple Peril Crop			0 n				0	1	0	0		
2.3 Federal Flood	0	0	0				0	0	0	0	0	
2.4. Private Crop	0	0	0		0		00	00	0	0	0	
2.5 Private Flood	0	0	0		C		00	00	0	0	0	
Farmowners Multiple Peril	0	0	0				00	00	0	0	0	
4. Homeowners Multiple Peril	0	0	0		0		0  0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0				0	)  0	0	0	0	
6. Mortgage Guaranty	0						n	,	0	0		
8. Ocean Marine		0	0				0	0	0	0	0	
9.1 Inland Marine	0	0	0		0		00	)0	0	0	0	
9.2 Pet Insurance Plans	0	0	0		C		00	0	0	0	0	
10. Financial Guaranty	<u>0</u>	0	0			······	00	0  0	0	0	0	
11.1 Medical Professional Liability - Occurrence		0	0		0		00	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made		0	0				0		0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0		0				0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0				0	0	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0		0		00	)0	0	0	0	
15.1 Vision Only (b)	0	0	0		C		00	00	0	0	0	
15.2 Dental Only (b)	0	0	0		0		00	00	0	0	0	
15.3 Disability Income (b)	0	0	0		0		00	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0				0  0	)  0	0	0	0	
15.6 Medicare Title XVIII (b)			n				0	1	0	0		
15.7 Long-Term Care (b)	0	0	0				0	)0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0				00	00	0	0	0	
15.9 Other Health (b)		0	0		C		00	00	0	0	0	
16. Workers' Compensation		4,946,509	0	1,907,345					348,377	647,529	496,694	103,3
17.1 Other Liability - Occurrence		0	0				00	0	0	0	0	
17.2 Other Liability - Claims-Made		0	0				0  0	)  0	0	0	0	
18.1 Products Liability - Occurrence	0						n	,	0	0		
18.2 Products Liability - Claims-Made	0	0	0				0	)0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)			0	4,442,175						919, 176		186, 1
19.2 Other Private Passenger Auto Liability		42,893,401	0	25,344,056			58,331,724	2,459,088	3,342,556	6,736,034	7, 123, 767	1,049,5
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0				00	00	0	0	0	
19.4 Other Commercial Auto Liability			0	28,747,347		30.041.28		7 847	18 564	44 476	0	1 198 5
21.2 Commercial Auto Physical Damage		47,222,400	n	20,141,041			n 1, 144,223		10,304	44,470	, 300, 300	
22. Aircraft (all perils)	0	0	0				00	)0	0	0	0	
23. Fidelity	0	0	0		C		00	)0	0	0	0	
24. Suretý	0	0	0		0		00	00	0	0	0	
26. Burglary and Theft	0	0	0				00	00	0	0	0	
27. Boiler and Machinery	0	0	ō	ļ	J		u  0	,  ŏ	ļ0	J 0	0	
28. Credit	0	0	0		C		0		0	0	0	
30. Warranty	n	n	n				0	, ) [	0	0	0	
31. Reins nonproportional assumed property	xxx	xxx	XXX	xxx	XXX	xxx	xxx	xxx	xxx	XXX	xxx	xxx
32. Reins nonproportional assumed liability	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0		0		0  0	0.462.252	0	0	0	
35. Total (a)	116,268,804	102,844,578	0	60,440,923	67,551,016	69,276,36	66 71,757,851	3,196,053	4,561,974	8,347,215	17,210,395	2,537,6
DETAILS OF WRITE-INS 01.												
02.												
03.												
98. Summary of remaining write-ins for Line 34 from overflow page	0	0	0		0		00	)0	0	0	0	
99. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0		1 0	) [	0 I 0	0	0	1 0	1 0	



NAIC Group Code 0088 BUSINES	SS IN THE STATE O				LUSSES			RING THE YEAR	R 2024	NAIC Com	npany Code 10	)212
,	Gross Premi Policy and Me Less Return Premiums on P	ums, Including embership Fees, Premiums and olicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	C	0		0  0	0	0	0	0	
2.2 Multiple Peril Crop	0	0	0				00	)0	0	0	0	
2.3 Federal Flood	0	0	0		0		00	00	0	0	0	
2.4. Private Crop	0	0	0	0	0		00	00	0	0	0	
2.5 Private Flood	0	0	0	0	0		00	00	0	0	0	
Farmowners Multiple Peril	0	0	0	0	0		00	0  0	0	0	0	
Homeowners Multiple Peril		0	0		0		0  0	)  0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)		0	0 N		0		n	1		0		
Mortgage Guaranty	0	0	0				0	)0	0	0	0	
8. Ocean Marine	0	0	0		0		00	00	0	0	0	
9.1 Inland Marine	0	0	0		0		00	00	0	0	0	
9.2 Pet Insurance Plans	0	0	0		0		00	)  0	0	0	0	
0. Financial Guaranty			0	ļ	0		0  0	.  ō	0	ō	0	
Medical Professional Liability - Occurrence		0	0		0		0		0	0	0	
11.2 Medical Professional Liability - Claims-Made			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		0		n	1	0	0		
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0		0		0	)0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0		0		00	00	0	0	0	
Credit A&H (Group and Individual)		0	0		0		00	00	0	0	0	
5.1 Vision Only (b)	0	0	0	0	0		00	00	0	0	0	
5.2 Dental Only (b)	0	0	0		0		00	)  0	0	0	0	
5.3 Disability Income (b)	0	0	0		0		0  0	0	0	0	0	
5.4 Medicare Supplement (b)	u		0		0		0	)				
5.6 Medicare Title XVIII (b)	0	0			0		0	)0	0	0	0	
5.7 Long-Term Care (b)	0	0	0		0		0	00	0	0	0	
5.8 Federal Employees Health Benefits Plan (b)	0	0	0		0		00	00	0	0	0	
15.9 Other Health (b)		0	0	0	0		00	0	0	0	0	
6. Workers' Compensation		2,493,128	0	1,007,116	240,403	480,57			82,108	200,847	260,925	121,7
7.1 Other Liability - Occurrence	0	0	0		0		00	)  0	0	0	0	
7.2 Other Liability - Claims-Made		0	0 N				0	)				
18.1 Products Liability - Occurrence		0	0		0		0	)0	0	0	0	
8.2 Products Liability - Claims-Made	0	0	0		0		00	00	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0		0		00	00	0	0	0	
19.2 Other Private Passenger Auto Liability		0	0	0	0		00	00	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)		0	0	0	0		00	0  0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0		0		0  0	0	0	0	0	
11.2 Commercial Auto Physical Damage	0	0	0 N		0		n	1		0		
21.2 Commercial Auto Physical Damage	0	0	0				ŏ	)0	0	0	0	
3. Fidelity	0	0	0		0		00	00	0	0	0	
4. Surety	0	0	0	0	0		00	)0	0	0	0	
26. Burglary and Theft	0	0	0	0	0		00	)  0	0	0	0	
7. Boiler and Machinery	0	0	0		0		0  0	)  ō	0	0	0	
28. Credit	0	0	0	ļ			۰  0	0	0	0	0	
29. International	U		۰۰۰۰				00	)0	0 n	n	u	·····
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	xxx	xxx	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0		0			)  0	0		0	
35. Total (a)	2,548,814	2,493,128	0	1,007,116	240,403	480,57	3 868,564	22,791	82,108	200,847	260,925	121,
DETAILS OF WRITE-INS												
02					-							·····
03.												
98. Summary of remaining write-ins for Line 34 from overflow page	0	0	0		0		00	0	0	0	0	
99. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0		0 0	0	0	0	0	



	NAIC Group Code 0088 BUSINESS	<u>IN THE STATE C</u>						DOI	RING THE YEAF	2024	INAIC COII	pany Code 1	<u>JZ 1Z</u>
		Policy and Me Less Return	ums, Including mbership Fees, Premiums and olicies not Taken	3 Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, License and Fees
	Fire	0	0	0	0	0	0	0	0	0	0	0	
	Allied Lines		0	0	0	0	0	0	0	0	0	0	
	Federal Flood		0	0	0	0		0	0	0	0	0	
	Private Crop		0	0	0	0	0	0	0	0	0	0	
	Private Grop		0	0	0	0		0	0	0	0	0	
	Farmowners Multiple Peril		0	0	0	0		0		0	0	0	
	Homeowners Multiple Peril				٥		n			۰۰	٥		
	Commercial Multiple Peril (Non-Liability Portion)		0 n		o		n	n	Λ	0	n		
	Commercial Multiple Peril (Non-Liability Portion)		0	0	0	0	0	0	0	0	0	0	
	Mortgage Guaranty			0	0	0	0	0	0	0	0		
8.	Ocean Marine		0	0	0	0	0	0	0	0	0		
	Inland Marine		0	0	0	0	0	0	0	0	0	0	
	Pet Insurance Plans	n	n	n	n		n	n	n	n	n	n	
	Financial Guaranty	n	n	n	n		n	n	n	n	n	n	. [
	Medical Professional Liability - Occurrence		0			0		0				0	[
	Medical Professional Liability - Claims-Made		0	0	0	0	0	0	0	0	0	0	
	Earthquake		0	0	0	0	0	0	0	0	0	0	
3.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	
3.1	Comprehensive (hospital and medical) group (b)		0	0	0	0	0	0	0	0	0	0	
	Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	
	Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	
	Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	
5.3	Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	
	Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	
	Medicare Title XVIII (b)		0	0	0	0	0	0	0	0	0	0	
	Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	
5.8	Federal Employees Health Benefits Plan (b)		0	0	0	0	0	0	0	0	0	0	
	Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	
	Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	
	Other Liability - Occurrence		0	0	0	0	0	0	0	0	0	0	
17.2	Other Liability - Claims-Made		0	0	0	0	0	0	0	0	0	0	
	Excess Workers' Compensation		0	0	0	0	0	0	0	0	0	0	
	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	
18.2	Products Liability - Claims-Made		0	0	0	0	0	0	0	0	0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	
9.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	
19.3	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	
19.4	Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	
1.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	
22.	Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	
	Surety	0	0	0	0	0	0	0	0	0	0	0	
	Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	
27.	Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	
28.	Credit	0	0	0	0	0	0	0	0	0	0	0	
29.	International	0		0			0	0		0	0	0	
	Warranty				0		0			0	0	0	
	Reins nonproportional assumed property		XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business		0	0	0	0	0	0	0	0	0	0	
35.	Total (a)	0	0	0	0	0	0	0	0	0	0	0	
	DETAILS OF WRITE-INS												
01.													
02.													
)3.													
98.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	



117 110 01	roup Code 0088 BUSINESS II	N THE STATE C			1				RING THE YEAR	2024		npany Code 10	72 12
		Policy and Mer Less Return I	Premiums and plicies not Taken	Dividends Paid	4	5	6	7	Direct Defense	9 Direct Defense	Direct Defense and Cost	11	12
	Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)		Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licens and Fees
		0	0	0		0  0		0  0	0	0	0	0	
		0	0	0		0  0	· · · · · · · · · · · · · · · · · · ·	0  0	0	0	0	0	
	il Cropd		0	0		J		J	0	0	0	0	
2.4. Private Crop			0	0		J		J	0	0	0	0	
	d			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		n		n	0		٥٥		
	Multiple Peril			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		n		n			۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
	s Multiple Peril	0	0			n		n	0	0	0	0	
	Multiple Peril (Non-Liability Portion)	0	0	0		0		00	0	0	0	0	
	Multiple Peril (Liability Portion)	0	0	0		0		00	0	0	0	0	
Mortgage Gu	uaranty	0	0	0		00		00	0	0	0	0	
8. Ocean Marin	ne	0	0	0		00		00	0	0	0	0	
9.1 Inland Marine	ıe	0	0	0		0		00	0	0	0	0	
9.2 Pet Insuranc	ce Plans	0	0	0		0		0  0	0	0	0	0	
<ol><li>Financial Gu</li></ol>	Jaranty	0	0	0		0  0		0  0	0	0	0	0	
11.1 Medical Prof	fessional Liability - Occurrence	0	0	0		0  0		0  0	0	0	0	0	
	fessional Liability - Claims-Made	0	0	0		0  0		0  0	0	0	0	J0	
<ol><li>Earthquake .</li></ol>		0	0	0		0  0		0  0	0	0	0	0	
	sive (hospital and medical) ind (b)	0	0	0		0  0		0  0	0	0	0	0	
	sive (hospital and medical) group (b)	0	0	0		0  0		0  0	0	0	0	0	
	(Group and Individual)	0	0	0		J  0		J [0	0	0	0	0	
	(b)		0	0		J		J	0	0	0	0	
	come (b)		0	0		J		0	0	0	0	0	
5.3 Disability Inc	upplement (b)		0	0		J		0	0	0	0	0	
	le XIX (b)		0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		)		n		0	٥٥		
5.5 Medicalu IIII 5.6 Medicare Titl	tle XVIII (b)	n	Λ	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		n		n			0		
5.7 Long-Term (	Care (b)	0	0		(	0		0	0	0	0	0	
5.8 Federal Emp	oloyees Health Benefits Plan (b)	0	0	0		0		00	0	0	0	0	
	ı (b)	0	0	0		0		0	0	0	0	0	
<ol><li>Workers' Cor</li></ol>	mpensation		0	0		00		00	0	0	0	0	
7.1 Other Liabilit	ty - Occurrence	0	0	0		00		00	0	0	0	0	
	ty - Claims-Made	0	0	0		0		00	0	0	0	0	
7.3 Excess Work	kers' Compensation	0	0	0		0  0		00	0	0	0	0	
8.1 Products Lia	ability - Occurrence	0	0	0		0		00	0	0	0	0	
8.2 Products Lia	ability - Claims-Made	0	0	0		0   0		00	0	0	0	0	
	senger Auto No-Fault (Personal Injury Protection)	0	0	0		0  0		0  0	0	0	0	0	
9.2 Other Private	e Passenger Auto Liability	0	0	0		0  0		0  0	0	0	0	0	
9.3 Commercial	Auto No-Fault (Personal Injury Protection)	0	0	0		J  0		0  0	0	0	0	0	
9.4 Other Comm	nercial Auto Liability	0	0	0	······	J  0	[ ]·······	u  0	0	0	0	0	
1.1 PIIVATE PASS	senger Auto Physical Damage			U	······	,  u		n  0			0		
	Auto Physical Damage perils)	n	n	o		n		n	0 n	n	0 n	n	
	Defils)	n	n	o		n		n	n	n		n	
		n	n	n		n n		n	n	n	o	n	
	d Theft	0	0	0		0		0	0	0	0	0	
<ol> <li>Boiler and M</li> </ol>	Machinery		0	0		0		0	0	0	0	0	
			0	0		00		0	0	0	0	0	
	l	0	0	0		00		00	0	0	0	0	
0. Warranty		0	0	0		0  0		0  0	0	0	0	0	
<ol> <li>Reins nonpro</li> </ol>	oportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx
	oportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
<ol><li>Reins nonpro</li></ol>	oportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Vrite-Ins for Other Lines of Business	0	0	0		0  0		0  0	0	0	0	0	
5. Total (a)		0	0	0	(	0	(	0	0	0	0	0	
	F WRITE-INS				ĺ							1	
1					· <del> </del> · · · · · · · · · · · · · · · · · · ·		· ····					· <del> </del> · · · · · · · · · · · · · · · · · · ·	
23.		·····			·		· ·····					·	
1.5													
	remaining write-ins for Line 34 from overflow page	^	^	^		n		n   ^	^	^	^	^	



	NAIC Group Code 0088 BUSINESS IN		ıms, Including	3	4	5	6	7	RING THE YEAF	a	10	pany Code 10	
		Less Return F Premiums on Po 1	mbership Fees, Premiums and plicies not Taken 2	Dividends Paid or Credited to					Direct Defense and Cost	Direct Defense and Cost	Direct Defense and Cost Containment	Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire	0	0	0	0	0		0  0	0	0	0	0	
	Multiple Peril Crop	0	0	0	0	0		0	0	0	0	0	
	Federal Flood	0	0	0	0	0		00	0	0	0	0	
	Private Crop	0	0	0	0	0		00	0	0	0	0	
	Private Flood	0	0	0	0	0		00	0	0	0	0	
3. 4.	Farmowners Multiple Peril	0	0		0	0		J	0	0	0	0	
	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0		0	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0		00	0	0	0	0	
6.	Mortgage Guaranty	0	0	0	0	0		00	0	0	0	0	
	Ocean Marine	0	0	0	0	0		0  0	0	0	0	0	
	Inland Marine	0	0	0	J0	0	ļ	, Iŏ	0	0	0	0	
	Financial Guaranty	n	0		n	0		j	0	n	n	0	
11.1	Medical Professional Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
11.2	Medical Professional Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
12.	Earthquake	0	0	0	0	0		00	0	0	0	0	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0		0  0	0	0	0	0	
	Comprehensive (hospital and medical) group (b)	0	0		0	0		J0	0	0	0	0	
	Vision Only (b)	0	0		0	0		0	0	0	0	0	
	Dental Only (b)	0	0	0	0	0		00	0	0	0	0	
15.3	Disability Income (b)	0	0	0	0	0		00	0	0	0	0	
	Medicare Supplement (b)	0	0	0	0	0		00	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0	0	0		0  0	0	0	0	0	
	Medicare Title XVIII (b)		0		0	0		n  0		0	0 n		
15.7	Federal Employees Health Benefits Plan (b)	0	0	0	0	0		00	0	0	0	0	
	Other Health (b)	0	0	0	0	0		00	0	0	0	0	
	Workers' Compensation	56,916	43,652	0	25, 182	0	2,586		0	1,617	3,749	6,080	21,01
17.1	Other Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
	Other Liability - Claims-Made  Excess Workers' Compensation	0	0	0	0	0		0  0	0	0	0	0	
	Products Liability - Occurrence	0 n	0		0	0		n		0	0		
18.2	Products Liability - Claims-Made	0	0	0	0	0		0	0	0	0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		00	0	0	0	0	
	Other Private Passenger Auto Liability	0	0	0	0	0		00	0	0	0	0	
	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		0  0	0	0	0	0	
19.4	Other Commercial Auto Liability	0	0		0	0		J0	0	0	0	0	
21.1	Commercial Auto Physical Damage	0	0		0	0		0	0	0	0	0	
22.	Aircraft (all perils)	0	0	0	0	0		0	0	0	0	0	
23.	Fidelity	0	0	0	0	0		00	0	0	0	0	
	Surety	0	0	0	0	0		0  0	0	0	0	0	
	Burglary and Theft	0	0	0	J0	0	ļ	, Iō	0	0	0	J	
	Credit	u	0 n	 n	u	0 n		n  0	0 n	0 n	n	u	
	International	0	0	0	0	0		00	0	0	0	0	
30.	Warranty	0	0	0	0			00			0	0	
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX		XXX		XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXXXXX	XXXXXX	XXX	XXXXXX	XXXXXX	XXXXXX	XXX	XXXXXX
33. 34.	Reins nonproportional assumed financial lines	XXX0	XXX0	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
	Total (a)	56.916	43.652	0	25.182	0	2.586	9,660	0	1.617	3.749	6.080	21.01
	DETAILS OF WRITE-INS	55,510	10,302		20,102		2,000	2,000		.,017	3,140	5,000	21,01
3401.	-												
3402.	·	i e					i .	•	i contract of the contract of	1	1	1	L
3402. 3403.	Summary of remaining write-ins for Line 34 from overflow page	^	^		^			n ^	^	^	^	^	



NAIC Group Code 0088 BUSINESS	<u>IN THE STATE C</u>			•			טט	RING THE YEAR	<u> 2024</u>		npany Code 10	1212
	Policy and Me Less Return I	ums, Including mbership Fees, Premiums and olicies not Taken	3 Dividends Paid	4	5	6	7	8 Direct Defense	9 Direct Defense	Direct Defense	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses
1. Fire	0	0	0		0  0		0  0	0	0	0	0	
2.1 Allied Lines		0	0		)		0	0	0	0	0	
2.2 Multiple Peril Crop		0	0		)		0	0	0	0		
2.4. Private Crop			0		)		0			٥٥	0	
2.5 Private Flood		Λ	0		)  0	,	n			0 N		
Farmowners Multiple Peril	0	0	0		)	)	00	0	0	0	0	
Homeowners Multiple Peril	0	0	0		)0		0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)		0	0		00	)	00	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	C	)  0	)(	00	00	0	0	0	
Mortgage Guaranty	0	0	0		)  0	)(	00	00	0	0	0	
8. Ocean Marine	0	0	0		)  0	)  (	0  0	00	0	0	0	
9.1 Inland Marine	0	0	J0	C	0		ŭ  0	<u> </u>  0	0	ō	J0	
9.2 Pet Insurance Plans	·· ······0	ļ0	0	ļ	0		v  0	.  0	J	0	J0	
10. Financial Guaranty	0	0	0	ļ	0	: [:	υ [0	0	0	0	l0	
11.1 Medical Professional Liability - Occurrence			u		۱۰۰۰	`	n		n	u		
12. Earthquake		Λ	0		)  0	,	n	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0		)		0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0		)		00	0	0	0	0	
14. Credit A&H (Group and Individual)		0	0		)0		0	0	0	0	0	
15.1 Vision Only (b)	0	0	0		)		00	0	0	0	0	
15.2 Dental Only (b)	0	0	0		)  0	)	0	0	0	0	0	
15.3 Disability Income (b)	0	0	0		)  0	)	00	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0		00	)(	00	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	0	)  0	)	00	00	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0	C	)  0	)	00	00	0	0	0	
15.7 Long-Term Care (b)	0	0	0		0  0	)	0  0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0		)		0	0	0	0	0	
16. Workers' Compensation		98.185	0	54.737	719.730	41.72			14.058	27 .139		2
17.1 Other Liability - Occurrence			0		1	1	n		14,030	27 , 10 <del>9</del>	12,302	
17.2 Other Liability - Claims-Made		0	0		)	)	0	0	0	0	0	
17.3 Excess Workers' Compensation	0	0	0		)  0		ō	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0		)  0	)	00	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0		00	)(	00	00	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)		0	0	0	)  0	)	00	00	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0		)  0	)	00	00	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)		0	0		)  0	)	0  0	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	ļ	0		u  0	0		0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0		١٥	<u> </u>	n  0			0	0	
21.2 Commercial Auto Physical Damage		0	U		۱۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	;  ;	n			J0		
23. Fidelity		Λ	0		)  0	,	n			0 N		
24. Surety			0		)		0			0		
26. Burglary and Theft	0	0	0		)		0	0	0	0	0	
27. Boiler and Machinery		0	0		)  0		0	0	0	0	0	
28. Credit	0	0	0		)0	)	00	0	0	0	0	
29. International	0	0	0	0	00	)	00	0	0	0	0	
30. Warranty	0	0	0		)  0	)	0  0	0	0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability		XXX	XXX	XXX		XXX		XXX		XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX				xxx		XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business		0 98.185	0		)0 7 19.730			2.018	0	27.139	12.502	2
35. I otal (a)  DETAILS OF WRITE-INS	122,531	98, 185	U	34,/3/	19,730	41,72	01,800	2,018	14,058	21, 139	12,502	2
01												
02.												
03												
98. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	)	0  0	0	0	0	0	
99. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	) [	0   0	0	0	0	0	



	NAIC Group Code 0088 BUSINESS II	N THE STATE C	F Pennsylvan	ia				DU	RING THE YEAR	R 2024	NAIC Com	pany Code 10	0212
		Gross Premiu Policy and Me Less Return I Premiums on Po	ums, Including mbership Fees, Premiums and blicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8  Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire	0	0	0	0	0		0  0	0	0	0	0	
	Multiple Peril Crop		0			0		n	0		0	0	
	Federal Flood	0	0	0	0	0		00	0	0	0	0	
	Private Crop	0	0	0	0	0		00	0	0	0	0	
	Private Flood	0	0	0	0	0	(	00	0	0	0	0	
	Farmowners Multiple Peril	0	0	0	0	0		00	0	0	0	0	
4.	Homeowners Multiple Peril  Commercial Multiple Peril (Non-Liability Portion)	. 0	0	0	0	0	······································	0  0	0	0	0	0	
	Commercial Multiple Peril (Non-Liability Portion)		0 n	0		0		00	0		۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	0	
6.	Mortgage Guaranty	0	0	0	0	0		0	0	0	0	0	
8.	Ocean Marine	0	0	0	0	0		00	0	0	0	0	
9.1	Inland Marine	0	0	0	0	0		0  0	0	0	0	0	
	Pet Insurance Plans	0	0	0	0	0		0  0	0	0	0	0	
	Financial Guaranty  Medical Professional Liability - Occurrence	·0	0	0	J	0	[ ]	0  0	0	ō	0	0	
11.1	Medical Professional Liability - Occurrence			0		0		00	0	0	0	0	
	Earthquake	n	0		o	n		0		n	n	n	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0		00	0	0	0	0	
13.2	Comprehensive (hospital and medical) group (b)	0	0	0	0	0		00	0	0	0	0	
	Credit A&H (Group and Individual)	0	0	0	0	0		00	0	0	0	0	
	Vision Only (b)	0	0	0	0	0	(	00	0	0	0	0	
	Dental Only (b)	0	0	0	0	0		0  0	0	0	0	0	
	Disability Income (b)	0	0	0		0		00	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0		0		0	0	0	0	0	
	Medicare Title XVIII (b)	0	0	0	0	0		00	0	0	0	0	
15.7	Long-Term Care (b)	0	0	0	0	0		00	0	0	0	0	
	Federal Employees Health Benefits Plan (b)	0	0	0	0	0		00	0	0	0	0	
	Other Health (b)	0 1.047.548	0	0	404.821			0 0 5 492 695	0	0		0	48.0
	Workers' Compensation	1,047,548	946,743	0	404,821	563,984	/35,05	50		59,999	/5,/68	108,762	48,0
17.1	Other Liability - Occurrence Other Liability - Claims-Made		0	0		0		0	0	0	0	0	
	Excess Workers' Compensation	0	0	0	0	0		00	0	0	0	0	
18.1	Products Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
18.2	Products Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		0  0	0	0	0	0	
	Other Private Passenger Auto Liability	30	30	0	0	0		00	0	0	0	6	
	Other Commercial Auto No-Fault (Personal Injury Protection)	o	0 n	0		0		00	0		۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	0	
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0		00	0	0	0	0	
21.2	Commercial Auto Physical Damage	0	0	0	0	0		00	0	0	0	0	
22.	Aircraft (all perils)	0	0	0	0	0		0  0	0	0	0	0	
23.	Fidelity	0	0	0	J	0	[	0  0	0	0	0	0	
	Surety Burglary and Theft	0	0	0	J0	J0	[]······	u  0	0	J	0	J	
26. 27.	Boiler and Machinery	n	n	 n	n	n		0	n	n	n	n	
28.	Credit	0	0	0		0		0	0	0	0	0	
29.	International	0	0	0	0	0		00		0	0	0	
30.	Warranty	0	0	0	0	0		00		0	0	0	
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
32. 33.	Reins nonproportional assumed liability	XXXXXX	XXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXX
33. 34.	Aggregate Write-Ins for Other Lines of Business		0				XXX			0			············
<b>υ</b> -τ.	Total (a)	1,047,578	946,773	0	404,821	563,984			36,955		75,768	108,768	48,0
	DETAILS OF WRITE-INS	, .,	,		- 1,12	,		72,133	22,000	,	7,1.22	-,,,,,	,
35.													1
35. 401.													
35. 401. 402.													
35. 401.	Summary of remaining write-ins for Line 34 from overflow page	n		n				n n		n	n	n	



	NAIC Group Code 0088 BUSINESS II	N THE STATE C	F Rhode Islan	ıd				DU	RING THE YEAR	R 2024	NAIC Com	pany Code 10	)212
		Gross Premiu Policy and Me Less Return I	ums, Including mbership Fees, Premiums and blicies not Taken	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire	0	0	0	0	0		00	0	0	0	0	
	Multiple Peril Crop	0	0	0	0	0		00	0	0	0	0	
	Federal Flood	0	0	0	0	0		00	0	0	0	0	
	Private Crop	0	0	0	0	0		00	0	0	0	0	
	Private Flood	0	0	0	0	0		00	0	0	0	0	
3. 4.	Farmowners Multiple Peril	0	0	0	0	0		00	0	0	0		
	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0		00	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0		00	0	0	0	0	
	Mortgage Guaranty	0	0	0	0	0		00	0	0	0	0	
8.	Ocean Marine	0	0	0	0	0		00	0	0	0	0	
	Inland Marine	0	0	0	0	0		00	0	0	0	0	
	Financial Guaranty	n	0 n		o	0		0n	0	n	n	n	
	Medical Professional Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
11.2	Medical Professional Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
12.	Earthquake	0	0	0	0	0		00	0	0	0	0	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0		0  0	0	0	0	0	
	Comprehensive (hospital and medical) group (b)	0	0			0		00	0	0	0		
	Vision Only (b)		0			0		0	0	0	0	0	
	Dental Only (b)	0	0	0	0	0		00	0	0	0	0	
	Disability Income (b)	0	0	0	0	0		00	0	0	0	0	
	Medicare Supplement (b)	0	0	0	0	0		00	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0	0	0		00	0	0	0	0	
	Medicare Title XVIII (b)		0	0 n		0		00	0		0 n	l	
15.8	Federal Employees Health Benefits Plan (b)	0	0	0	0	0		00	0	0	0	0	
	Other Health (b)	0	0	0	0	0		00	0	0	0	0	
	Workers' Compensation	139,813		0	48,342	116, 188	330,29			27,441	29,589	14,721	9,9
17.1	Other Liability - Occurrence	0	0	0	0	0		00	0	0	0	0	
	Other Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
	Products Liability - Occurrence	0	0	٠١		0		n	0		0	n	
18.2	Products Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		00	0	0	0	0	
	Other Private Passenger Auto Liability	0	0	0	0	0		00	0	0	0	0	
	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		0  0	0	0	0	0	
19.4	Other Commercial Auto Liability	0	0	0	0	0		00	0	0	0	0	
21.1	Commercial Auto Physical Damage	0	0			0		0	0	0	0	0	
22.	Aircraft (all perils)	0	0	0	0	0		00	0	0	0	0	
	Fidelity	0	0	0	0	0		00	0	0	0	0	
	Surety	0	0	0	0	0		00	0	0	0	0	
26. 27.	Burglary and Theft	ł0	0	0	J	0		u  0	0	J	0	J	····
27. 28.	Credit	u	u			0 n		n	0 n	0 n	n	l	
29.	International	0	0			0		00	0	0	0	0	
30.	Warranty	0	0	0	0			00		0	0	0	
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX0	XXX0	XXX	XXX	XXX0	XXX	XXX	XXX	xxx0	XXX	XXX	XXX
34	Total (a)	139.813	136.567	0	48.342				15.485		29.589	14.721	9.97
34. 35.		.00,010	100,001	•	.5,012	1.0,100	555,20	200,007	10,100	,	20,000	1.,,721	0,0
34. 35.	DETAILS OF WRITE-INS												
35. 3401.	DETAILS OF WRITE-INS												
35. 401. 402.	DETAILS OF WRITE-INS												
35.	DETAILS OF WRITE-INS  Summary of remaining write-ins for Line 34 from overflow page												



NAIC	Group Code 0088 BUSINESS IN	N THE STATE O	F South Carol	ina				DU	RING THE YEAR	R 2024	NAIC Com	npany Code 10	)212
-		Gross Premiu Policy and Mer Less Return F Premiums on Po	ims, Including mbership Fees, Premiums and plicies not Taken 2	3 Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	es	0	0	0		0		0  0	0	0	0	0	
	es Peril Crop	0	0			)		0	0	0	0	0	
	lood	0	0	0		)		00	0	0	0	0	
	rop	0	0	0		)  0		00	0	0	0	0	
	lood	0	0	0	0	)  0		00	0	0	0	0	
<ol> <li>Farmowne</li> <li>Homeowne</li> </ol>	ers Multiple Peril	0	0	0		)  0		0  0	0	0	0	0	
	ial Multiple Peril (Non-Liability Portion)		0 N	٠١		)		n		0	0		
	ial Multiple Peril (Non-clability Portion)	0	0	0		)0		00	0	0	0	0	
<ol><li>Mortgage</li></ol>	Guaranty	0	0	0		)0		00	0	0	0	0	
8. Ocean Ma	arine	0	0	0		)  0		00	0	0	0	0	
	arine	0	0	0	0	)  0		00	0	0	0	0	
	ance Plans	0	0	0	J	0		0  0	0	0	0	0	·····
	Guaranty Professional Liability - Occurrence	0	0	0	J	.  0		u  0	0	J0	J0	0	
11.1 Medical Pi	Professional Liability - Occurrence Professional Liability - Claims-Made	n	0 n			,		n  u	0	0 n	0		····
	ke		0	0		)		0	0	0	0	0	
13.1 Comprehe	ensive (hospital and medical) ind (b)	0	0	0	C	)  0		0	0	0	0	0	
13.2 Comprehe	ensive (hospital and medical) group (b)	0	0	0		)  0		00	0	0	0	0	
	H (Group and Individual)	0	0	0	C	)  0		00	0	0	0	0	
	ıly (b)	0	0	0		)  0		00	0	0	0	0	
	nly (b)	0	0	0	C	0		0  0	0	0	0	0	
	Income (b)	0	0	0		)  0		00	0	0	0	0	
	Title XIX (b)	0	0 N			)		n	0	0	0		
	Title XVIII (b)	0	0	0		)		00	0	0	0	0	
15.7 Long-Tern	m Care (b)	0	0	0	C	0		00	0	0	0	0	
15.8 Federal Er	Employees Health Benefits Plan (b)	0	0	0	C	)  0		00	0	0	0	0	
	alth (b)	0	0	0	C	)  0		00	0	0	0	0	
	Compensation	1,135,049	1,133,550	0	444,532	2 260,266	250,48			41, 182	82,426	116,487	55,6
17.1 Other Liab	bility - Occurrencebility - Claims-Made	0	0			)		00	0	0	0	0	
	/orkers' Compensation		0 N			)		n	0	0	0		
	Liability - Occurrence	0	0	0		)		00	0	0	0	0	
18.2 Products L	Liability - Claims-Made	0	0	0	C	0		00	0	0	0	0	
19.1 Private Pa	assenger Auto No-Fault (Personal Injury Protection)	0	0	0	C	)  0		00	0	0	0	0	
	vate Passenger Auto Liability	0	0	0		)  0		00	0	0	0	0	
	cial Auto No-Fault (Personal Injury Protection)	0	0	0	C	0		0  0	0	0	0	0	
19.4 Other Con	mmercial Auto Liabilityassenger Auto Physical Damage	0	0	0	J	)		0	0	0	0	0	
21.1 FIIVale Fa	ial Auto Physical Damage		o			)		n	0	0	0		
22. Aircraft (al	all perils)		0	0		)		00	0	0	0	0	
	F /	0	0	0	C	)0		00	0	0	0	0	
24. Surety		0	0	0	C	)  0		00	0	0	0	0	
	and Theft	0	0	0	[	)  0		0  0	0	0	0	0	
	d Machinery	ō	0	0	J	.  0		u  0	0	J	J 0	<u>0</u>	····
<ol> <li>Credit</li> <li>Internation</li> </ol>	nal	0	0	0	J	0		00	0	0	0	0	
	nai	n	n	 n	l	, )		00		0	0	0	
31. Reins non	nproportional assumed property	XXX	XXX	XXX	XXX	xxx	xxx		XXX	XXX	XXX	XXX	XXX
32. Reins non	proportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
<ol><li>Reins non</li></ol>	nproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	e Write-Ins for Other Lines of Business	0	0	0		000.000		0  0	0	0	0	0	
35. Total (a)	OF WRITE IN	1,135,049	1, 133, 550	0	444,532	2 260,266	250,48	7 392,475	21,590	41, 182	82,426	116,487	55,6
<b>DETAILS</b> 401	OF WRITE-INS												
401 402													
403													
198. Summary	of remaining write-ins for Line 34 from overflow page	0	0	0	C	)0		00	0	0	0	0	
499. Totals (Lir	nes 3401 through 3403 plus 3498)(Line 34 above)				1	\	. 1	o I o	1	1			ı



	NAIC Group Code 0088 BUSINESS I	N THE STATE C						DUI	RING THE YEAR	2024	NAIC COM	pany Code 10	J212
		Policy and Mer Less Return I	ums, Including mbership Fees, Premiums and blicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire	0	0	0	0	0	0	0	0	0	0	0	
	Allied Lines		0	0	0	0	0	0	0	0	0	0	
	Federal Flood		Λ	0	0	0		0		0	0	n	
	Private Crop		0 n	0	0	0		0		0	0	n	
	Private Flood		0	0	0	0	0	0	0	0	0	0	
	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	
	Homeowners Multiple Peril		0	0	0	0	0	0	0	0	0	0	
	Commercial Multiple Peril (Non-Liability Portion)		0	0	0	0	0	0	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)		0	0	0	0	0	0	0	0	0	0	
6.	Mortgage Guaranty		0	0	0	0	0	0	0	0	0	0	
	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	
	Inland Marine		0	0	0	0	0	0	0	0	0	0	
	Pet Insurance Plans		0	0	0	0	0	0	0	0	0	0	
	Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	
	Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	
	Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0		
12.	Earthquake	. 0	0	0	0	0	0	0	0	0	0	J0	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	
	Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	
	Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	
	Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	
15.2	Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	
	Disability Income (b)		0	0	0	0	0	0	0	0	0	0	
	Medicaid Title XIX (b)		0	0	0	0	0	0		0	0	0	
	Medicare Title XVIII (b)			0	0	0	0	0			0	u	
	Long-Term Care (b)		0	0	0	0	0	0	0	0	0	0	
15.7 15.Ω	Federal Employees Health Benefits Plan (b)		Λ				n	Λ		o		n	
	Other Health (b)		o		0		0	0	0	o	0		
	Workers' Compensation	3.048	3.017	0	956	0	389	708	0	102	189	480	12
	Other Liability - Occurrence		0	0	0	0	0	0	0	0	0	0	12,
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	
	Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	
	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	
18.2	Products Liability - Claims-Made		0	0	0	0	0	0	0	0	0	0	
	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	
19.2	Other Private Passenger Auto Liability		0	0	0	0	0	0	0	0	0	0	
19.3	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	
19.4	Other Commercial Auto Liability		0	0	0	0	0	0	0	0	0	0	
21.1	Private Passenger Auto Physical Damage		0	0	0	0	0	0	0	0	0	0	
21.2	Commercial Auto Physical Damage		0	0	0	0	0	0	0	0	0	0	
	Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	
	Fidelity		0	0	0	0	0	0	0	0	0	0	
	Surety		0	0	0	0	0	0	0	0	0	0	
	Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	
	Boiler and Machinery	0	0	0	0	0	J0	J	0	0	0	<u>0</u>	
	Credit	0	0	0	0	0	J0	0	0	0	0	J0	·····
	International	0		0			0	0		0		0	
	Warranty	0		0	0		0	0				0	
	Reins nonproportional assumed property	XXX	XXX	XXXXXX	XXX	XXXXXX	XXX	XXX		XXX	XXXXXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXXXXX	XXX	XXXXXX	XXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXX	XXX
33. 34.	Aggregate Write-Ins for Other Lines of Business	XXX	0										······································
	Aggregate write-ins for Other Lines of Business	3.048	3.017	U	956		389	708	U	102	189	U	12.
JU.	DETAILS OF WRITE-INS	3,040	3,017	U	930	U	309	700	U	102	109	400	12,
101.	DETAILS OF WATE-ING						1	1					
02.							l	l					
03.													
	Summary of remaining write-ins for Line 34 from overflow page	0	n	n	0	0	n	n	0	n	n	l	[
98.													



NAIC Group Code 0088 BUSIN	ESS IN THE STATE C				LOSSES			RING THE YEAR	R 2024	NAIC Com	npany Code 10	212
	Gross Premiu Policy and Me Less Return I Premiums on Po	ums, Including mbership Fees, Premiums and plicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0		)  0		00	0	0	0	0	
2.2 Multiple Peril Crop		0	0		)		0	0	0	0	0	
2.3 Federal Flood	0	0	0		)		0	0	0	0	0	
2.4. Private Crop	0	0	0		)		00	0	0	0	0	
2.5 Private Flood	0	0	0		)  0		00	0	0	0	0	
Farmowners Multiple Peril	0	0	0		0  0		00	0	0	0	0	
Homeowners Multiple Peril		0	0		)		0  0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)		0 n	0 N		)		0	0		0		
6. Mortgage Guaranty	0	0	0		)		0	0	0	0	0	
8. Ocean Marine	0	0	0		)		00	0	0	0	0	
9.1 Inland Marine	0	0	0		)		00	0	0	0	0	
9.2 Pet Insurance Plans	0	0	0		)		00	0	0	0	0	
<ul><li>10. Financial Guaranty</li></ul>		ō	ō	ļ	ر ا۔۔۔۔۔۔ ر		0  0	.  0	J	ō	0	
11.1 Medical Professional Liability - Occurrence			0		)		0		0	0		
12. Earthquake		n	n		)		0	)	n		n	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0		)		0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)	0	0	0		)		00	0	0	0	0	45
14. Credit A&H (Group and Individual)	0	0	0	(	)		00	0	0	0	0	
15.1 Vision Only (b)	0	0	0		)  0		00	00	0	0	0	
15.2 Dental Only (b)	0	0	0		)		0  0	0	0	0	0	
15.3 Disability Income (b)	0	0	0		)		0  0	0	0	0	0	
15.5 Medicaid Title XIX (b)		0 0	0 n		)		0	0		0		
15.6 Medicare Title XVIII (b)	0	0	0		)		0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0		)		00	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)		0	0	(	)		00	0	0	0	0	
15.9 Other Health (b)		0	0		)  0		00	0	0	0	0	
16. Workers' Compensation		1,159,912	0	477 , 470		(41,02			51,388	99,382	124,535	32,82
17.1 Other Liability - Occurrence		0	0		)		00		0	0		
17.3 Excess Workers' Compensation		0	0		)		0	0	0	0	0	
18.1 Products Liability - Occurrence		0	0		)		0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0		)		00	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0				00	0	0	0	0	
19.2 Other Private Passenger Auto Liability		10,629,096	0	5,092,19				295,389	548,309	1,360,804	1,383,120	272,5
19.3 Commercial Auto No-Fault (Personal Injury Protection)		0	0					0	0	0	0	
<ul><li>19.4 Other Commercial Auto Liability</li><li>21.1 Private Passenger Auto Physical Damage</li></ul>			0		0		0		7 529	12 658	1.653.922	
21.2 Commercial Auto Physical Damage	0	0	0		)		00		0	0	0	
22. Aircraft (all perils)	0	0	0		)		00	0	0	0	0	
23. Fidelity	0	0	0	(	)		00	0	0	0	0	
24. Surety	0	0	0		)		00	00	0	0	0	
26. Burglary and Theft	0	0	0		0  0		00	0	0	0	0	
27. Boiler and Machinery	0	0	0	······································			0	0	0	0	0	
29. International		n	u		,		0	,	n	n	n	
30. Warranty	0	0	0		)		00	0	0	0	0	
31. Reins nonproportional assumed property		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	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	23,229,926	22.926.643	ļ0	11,562,22	)	11,993,57	00 '2 11,056,179	351.062	607.226	1.472.844	3, 161,577	625.12
35. Total (a)  DETAILS OF WRITE-INS	23,229,926	22,920,043	U	11,002,223	13,800,23/	11,993,5/	11,000,1/9	301,062	007,226	1,4/2,844	3, 101,5//	025, 12
101												
102.												
103.												
198. Summary of remaining write-ins for Line 34 from overflow page	0	0	0		)		00	0	0	0	0	
199. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0		) [	1	U <b>J</b> 0	0	0	0	0	



NAIC Group Code 0088 BUSINESS	IN THE STATE C						טט	RING THE YEAR	7 2024		pany Code 10	12 12
	Policy and Me Less Return I	ums, Including mbership Fees, Premiums and plicies not Taken	3  Dividends Paid or Credited to	4	5	6	7	8  Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0		)  0	)	00	0	0	0	0	
2.1 Allied Lines		0	0		)  0		0  0	0	0	0	0	
2.2 Multiple Peril Crop		0	0		)		0  0	0	0	0	0	
2.4. Private Crop		0	0		)		0  0	0	0	0	0	
2.5 Private Flood			0		1		0	0	0	٥٥		
Farmowners Multiple Peril		0	0		)		0	0		0	0	
Homeowners Multiple Peril	0	0	0		)		00	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0		0		00	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)		0	0		)  0	)	00	0	0	0	0	
Mortgage Guaranty	0	0	0		)  0	)	00	0	0	0	0	
8. Ocean Marine	0	0	0		)  0	)	00	0	0	0	0	
9.1 Inland Marine	0	0	0		)  0	)	0  0	0	0	0	0	
9.2 Pet Insurance Plans	0	0	0	C	)  0	)	0  0	0	0	0	0	
10. Financial Guaranty	0	0	0	ļ	0		υ  0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0		)  0		0  0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made	0	0	0		١٥		0  0	0	0	0	0	
12. Earthquake		0	0		)		0	0	0	٥٥		
13.1 Comprehensive (hospital and medical) ind (b)			0		1		0	0	0	٥٥		
14. Credit A&H (Group and Individual)		0	0		)  0		n	0	0	0		
15.1 Vision Only (b)	0	0	0		)		0	0	0	0	0	
15.2 Dental Only (b)	0	0	0		)		0	0	0	0	0	
15.3 Disability Income (b)		0	0		)0		0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0		)0		0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0		)  0	)	00	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0		)  0	)	00	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	C	)  0	)	00	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	)  0	)	00	0	0	0	0	
15.9 Other Health (b)	0	0	0		0  0		00		0	0	0	
16. Workers' Compensation		2,024,736	0	745,391	1204,739	237, 16			101,858	198,855	191,976	72
17.1 Other Liability - Occurrence	0	0	0		0		0  0	0	0	0	0	
17.2 Other Liability - Glaims-Made		0	0		)		0  0	0	0	0	0	
18.1 Products Liability - Occurrence			0		1		0	0	0	٥٥	0	
18.2 Products Liability - Occurrence		Λ	o		)  0	1	n	Λ		۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0		)		0	0	0	0	0	
19.2 Other Private Passenger Auto Liability		0	0		)		00	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0		)0		00	0	0	0	0	
19.4 Other Commercial Auto Liability		0	0		)  0	)	00	0	0	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0	C	)  0	)	00	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0		)  0	)	0  0	0	0	0	0	
22. Aircraft (all perils)	0	0	0		)  0	)	0  0	0	0	0	0	
23. Fidelity	0	0	0	C	)  0	)	0  0	0	0	0	0	
24. Surety	0	0	0	<u>C</u>	0		ŭ  0	0	0	0	0	
26. Burglary and Theft		0	0	C	0		0  0	0	0	0	0	
27. Boiler and Machinery		0	0		ا السال		0  0	0	0	0		
28. Gredit		0	0		١٥	`	n  0			0		
30. Warranty	n	n	n		)	,	n	n	n	0 N	n	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed property		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
34. Aggregate Write-Ins for Other Lines of Business	0	0			)0	)	0  0	0	0	0	0	
35. Total (a)	1,815,663	2,024,736	0	745,391		237, 16		73,904		198,855	191,976	72
DETAILS OF WRITE-INS												
01												
02.												
03												
98. Summary of remaining write-ins for Line 34 from overflow page		0	0		٥٠٠٠		u  0	0	0	0	0	
9. I otals (Lines 3401 through 3403 pius 3498)(Line 34 above)	0	0	1 0	<u> </u>	ן כ	<u>'                                    </u>	υ [ 0	0	0	0	1 0	I



	NAIC Group Code 0088 BUSINESS II	N THE STATE C				LOSSES			RING THE YEAR	R 2024	NAIC Com	npany Code 10	)212
		Gross Premiu Policy and Mei Less Return I Premiums on Po	ums, Including mbership Fees, Premiums and blicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire	0	0	0		0		00	0	0	0	0	0
	Multiple Peril Crop	0	0	0		)		0	0	0	0	0	
	Federal Flood	0	0	0	C	0		00	0	0	0	0	
	Private Crop	0	0	0	C	)  0		00	00	0	0	0	C
	Private Flood	0	0	0		0		00	0	0	0	0	
3. 4.	Farmowners Multiple Peril	0	0	0		)  0		00	0	0	0	0	
	Commercial Multiple Peril (Non-Liability Portion)	0	0	0		)0	,	00	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)	0	0	0	C	0		00	0	0	0	0	
6.	Mortgage Guaranty	0	0	0	C	)  0		00	0	0	0	0	
8.	Ocean Marine	0	0	0		)  0	)	00	00	0	0	0	
	Inland Marine Pet Insurance Plans	0	0	0	J	0		U  0	.  0	0	0	0	
	Financial Guaranty	n	0			, )	,	0	,	n	n	o	
	Medical Professional Liability - Occurrence	0	0	0		)0		0	0	0	0	0	
	Medical Professional Liability - Claims-Made	0	0	0	C	)  0		00	0	0	0	0	
12.	Earthquake	0	0	0		)  0	)	00	00	0	0	0	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0		)  0		00	0	0	0	0	
	Credit A&H (Group and Individual)	0	0	0		)  0		0  0	)  0 	0	0	0	
	Vision Only (b).	10	0	0		)0		0	0	0	0	0	
	Dental Only (b)	0	0	0	C	0		00	0	0	0	0	
	Disability Income (b)	0	0	0	C	)  0	)	00	0	0	0	0	C
	Medicare Supplement (b)	0	0	0		0		00	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0		)  0		0  0	0	0	0	0	
	Long-Term Care (b)	0	0	0		)   0		0	0	0	0	0	
15.8	Federal Employees Health Benefits Plan (b)	0	0	0		)0		0	0	0	0	0	
	Other Health (b)	0	0	0	C	)  0		00	0	0	0	0	C
	Workers' Compensation	101,622	131,783	0	55 , 167	73,327	750,01	-		2,261	16,702	10,688	2,361
17.1	Other Liability - Occurrence	0	0	0		)  0		00	0	0	0	0	
	Excess Workers' Compensation	0	0	0		)   0		0	0	0	0	0	
	Products Liability - Occurrence	0	0	0		)0		0	0	0	0	0	
18.2	Products Liability - Claims-Made	0	0	0	C	)  0		00	00	0	0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0		)  0	)	00	00	0	0	0	
	Other Private Passenger Auto Liability	0	0	0		)  0		0  0	0	0	0	0	
	Other Commercial Auto Liability		0			)		n	0		0		
21.1	Private Passenger Auto Physical Damage	0	0	0		)0		00	0	0	0	0	
21.2	Commercial Auto Physical Damage	0	0	0		)0		00	0	0	0	0	0
	Aircraft (all perils)	0	0	0		)  0		00	0	0	0	0	
23.	Fidelity	0	0	0		0		0  0	0	0	0	0	
24. 26.	Surety Burglary and Theft	0 n	0 n	0 n		)  0	,	0		0 n	0 n	0 n	
20. 27.	Boiler and Machinery	10	0	0		)0	)	0	0	0	0	0	
28.	Credit	0	0	0	C	)0		0	0	0	0	0	
29.	International	0	0	0	C	)  0	)	00		0	0	0	C
30.	Warranty	0	0	0	0		)	00		0 xxx	0 XXX	0	0
31. 32.	Reins nonproportional assumed property	XXXXXX	XXX	XXX	XXXXXX	XXXXXX	XXXXXX		XXXXXX	XXX	XXX	XXXXXX	XXX
33.	Reins nonproportional assumed financial lines	xxx	XXX	XXX	XXX	XXX	XXX		XXX	xxx	XXX	xxx	XXX
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0		)  0	)	00	0	0	0	0	
35.	Total (a)	101,622	131,783	0	55, 167	3,327	50,01	5 88,937	1,193	2,261	16,702	10,688	2,36
	DETAILS OF WRITE-INS												
3401. 3402.		·····								·····		-	
3402. 3403.													
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0		)  0	)	00	0	0	0	0	
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	1	I	0	1	1	1 I	0	1	1	1	1	1



NAIC Group Code 0088 BUSINESS	IN THE STATE O				LOSSES	,		RING THE YEAR	R 2024	NAIC Com	npany Code 10	212
	Gross Premi Policy and Me Less Return	ums, Including embership Fees, Premiums and olicies not Taken	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10  Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0		00	0	0	0	0	
2.2 Multiple Peril Crop			0		)   )		0	1				
2.3 Federal Flood		0	0		0		0	0	0	0	0	
2.4. Private Crop	0	0	0		0		00	00	0	0	0	
2.5 Private Flood	0	0	0	0	00		00	00	0	0	0	
3. Farmowners Multiple Peril	0	0	0	0	0		00	0  0	0	0	0	
Homeowners Multiple Peril     Commercial Multiple Peril (Non-Liability Portion)		0	0				0  0	)  0	0	0	0	
5.2 Commercial Multiple Peril (Non-Elability Portion)							n	1	0			
Mortgage Guaranty		0	0		0		0	0	0	0	0	
8. Ocean Marine	0	0	0		0		00	00	0	0	0	
9.1 Inland Marine		0	0	C	) 0		00	00	0	0	0	
9.2 Pet Insurance Plans	0	0	0	C	<u> </u>  0		0  0	0	0	0	0	
10. Financial Guaranty		0	0	J	0		۰  0		J0	0	0	
11.1 Medical Professional Liability - Occurrence	<sup>U</sup>		n		,		n	,  0	0 n			
11.2 Medical Professional Liability - Claims-Made					)		0	)	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0		0		0	)0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)		0	0	C	)0		00	00	0	0	0	
14. Credit A&H (Group and Individual)	0	0	0	0	00		00	00	0	0	0	
15.1 Vision Only (b)	0	0	0	C	0		0  0	0  0	0	0	0	
15.2 Dental Only (b)	0	0	0		0		00	)  0	0	0	0	• • • • • • • • • • • • • • • • • • • •
15.4 Medicare Supplement (b)			0				0	0	0			
15.5 Medicaid Title XIX (b)	0	0	0		0		0	)0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0		0		00	00	0	0	0	
15.7 Long-Term Care (b)	0	0	0	C	) 0		00	00	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0		0		00	)  0	0	0	0	
15.9 Other Health (b)			0			67.00	00	0 0 2 5.458	0			
16. Workers' Compensation		459,291	0	595,391	52,741		00		33,249		96,240	37,5
17.2 Other Liability - Claims-Made		0	0		0		0	0	0	0	0	
17.3 Excess Workers' Compensation		0	0				0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0		)  0		00	00	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	00		00	00	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0		0		0  0	)  0	0	0	0	
19.2 Other Private Passenger Auto Liability		0	0		0		00	0	0	0	0	• • • • • • • • • • • • • • • • • • • •
19.4 Other Commercial Auto Liability			0				0	1	0			
21.1 Private Passenger Auto Physical Damage	0	0	0				0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0		0		00	)0	0	0	0	
22. Aircraft (all perils)	0	0	0	0	)  0		00	0	0	0	0	
23. Fidelity	0	0	0	C	<u> </u>  0		0  0	0	0	0	0	
24. Surety		0	0	J	0		۰  0		J0	0	0	
26. Burglary and Theft			n		,		n	,  0	0 n			
28. Credit		0	0		0		0	)0	0	0	0	
29. International	0	0	0		0		0		0	0	0	
30. Warranty	0	0	0				00		0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXXXXX	XXX	XXX	XXXXXX	XXX		XXXXXX	XXXXXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	xxx	XXX	XXX	XXX		XXX	XXX	0	XXX	XXX	XXX
35. Total (a)	897.265		n	595.391	52.741	67.00	01 247.132	5.458			96.240	37.5
DETAILS OF WRITE-INS	557,205	100,201		550,001	JE,741	57,00	247,102	0,400	55,240	00,014	00,240	37,0
01												
02.												
03												
98. Summary of remaining write-ins for Line 34 from overflow page		0	0				0		U	0		
oo. Totalo (Elitos ofo i tillough ofoo plus ofso)(Elite of above)	1 0		U	1		1	· 0	, 0	U	U	1 0	



NAIC Group Code 0088 BUSINESS	IN THE STATE C						טט	RING THE YEAR	7 2024		npany Code 10	1414
	Policy and Me Less Return	ums, Including mbership Fees, Premiums and plicies not Taken	3 Dividends Paid	4	5	6	7	8 Direct Defense	9 Direct Defense	Direct Defense	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage	Direct Losses Incurred	Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0		0	)	00	0	0	0	0	
2.1 Allied Lines		0	0		)		0  0	0	0	0	0	
Multiple Peril Crop		0	0		J		0  0	0	0	0	0	
2.4. Private Crop		0	0		J		0  0	0	0	0	0	
2.5 Private Flood			0		)  t		0	0		٥٥		
Farmowners Multiple Peril		0	0		)	,	0	0	0	0	0	
Homeowners Multiple Peril		0	0		)		00	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0		0		00	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0		)	)	00	0	0	0	0	
Mortgage Guaranty	0	0	0	(	0	)(	00	0	0	0	0	
8. Ocean Marine	0	0	0		0	)	00	0	0	0	0	
9.1 Inland Marine		0	0		0	)	00	0	0	0	0	
9.2 Pet Insurance Plans		0	0		0	)	0  0	0	0	0	0	
10. Financial Guaranty	···	Jō	0	ļ	j		u  0	ļ 0	<sub>0</sub>	ō	J	·····
11.1 Medical Professional Liability - Occurrence	0	0	0		J		0	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made		0	0		J		0  0	0	0	0	0	
12. Earthquake		0	0		J		0	0		٥٥		
13.2 Comprehensive (hospital and medical) group (b)		Λ	0		n	,	n			0 N		
14. Credit A&H (Group and Individual)		n	0		n	,	n			0	0	
15.1 Vision Only (b)	0	0	0		)	)	0	0	0	0	0	
15.2 Dental Only (b)	0	0	0		)	)	0	0	0	0	0	
15.3 Disability Income (b)			0		0		0	0	0	0	0	
15.4 Medicare Supplement (b)		0	0		D	)	0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0		0	)	00	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0		)	)	00	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0		0	)(	00	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0		0	)	00	0	0	0	0	
15.9 Other Health (b)	0	0	0		0		00		0	0	0	
16. Workers' Compensation		3,855,324	0	1,773,106	6 736,029	954,90			132,496	273, 185	396,900	113
17.1 Other Liability - Occurrence	0	0	0		J		0  0	0	0	0	0	
17.2 Other Liability - Claims-Made		0	0		J		0  0	0	0	0	0	
18.1 Products Liability - Occurrence		Λ	0		n	,	n			0 N		
18.2 Products Liability - Occurrence		0	0		n		n	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0		0		00	0	0	0	0	
19.2 Other Private Passenger Auto Liability		55.481	0		0428.589	(119.83	7) 171.805			36.999	(134)	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0		)d		0	0	0	0	0	
19.4 Other Commercial Auto Liability		0	0		0		00	0	0	0	0	
21.1 Private Passenger Auto Physical Damage	(491)	29,673	0		017,820				(233)	86	(71)	
21.2 Commercial Auto Physical Damage	0	0	0		0	)	00	0	0	0	0	
22. Aircraft (all perils)		0	0	ļ	0	)	0  0	0	0	0	0	
23. Fidelity		J	ļ0		Ü		0  0	0	0	J 0	0	
24. Surety	0	ō	0	ļ	j		0  0	0	<sub>0</sub>	0	J0	
26. Burglary and Theft		0	0		,	<u> </u>	0		0	0	0	
27. Boiler and Machinery	0	0	0		,  ,	<u> </u>	n  0	0	0	0	0	·····
29. International		n	n		n	;	n	n	n	n	n	
30. Warranty	n	n	n		)		0		n	n	n	
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
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX				XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0			)	)	00	0	0	0	0	
35. Total (a)	3,872,605	3,940,478	0	1,773,106		843,356	6 1,818,822	74,851	102,365	310,270	396,695	113
DETAILS OF WRITE-INS												
01		ļ									.	
02		·····									· ·····	ļ
03		······		·							·	·····
98. Summary of remaining write-ins for Line 34 from overflow page		l0	0		,  ,	: [::	0 ا	0	0	0	ļ0	·····
is. Totals (Lines 340 Fthlough 3403 plus 3490)(Line 34 a00Ve)			U	1	J L	<u>'                                       </u>	U   U	0	0		1	1



#### **EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0088 BUSINESS IN THE STATE OF Washington DURING THE YEAR 2024 NAIC Company Code 10212 Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Direct Defense Premiums on Policies not Taken Dividends Paid Direct Defense Direct Defense and Cost or Credited to and Cost and Cost Containment Commissions Direct Premiums Policyholders Direct Unearned Direct Losses Paid Direct Losses Direct Containment Containment Expense and Brokerage Taxes, Licenses Direct Premiums Premium Reserves Line of Business Written Earned on Direct Business (deducting salvage) Incurred Losses Unpaid Expense Paid Expense Incurred Unpaid Expenses and Fees 2.1 Allied Lines .. 2.2 Multiple Peril Crop .... 2.3 Federal Flood . 2.4. Private Crop .. 2.5 Private Flood . 3. Farmowners Multiple Peril . 4. Homeowners Multiple Peril 5.1 Commercial Multiple Peril (Non-Liability Portion) 5.2 Commercial Multiple Peril (Liability Portion) ... 6. Mortgage Guaranty ..... 8. Ocean Marine ... 9.1 Inland Marine . 9.2 Pet Insurance Plans .. 10. Financial Guaranty ... 11.1 Medical Professional Liability - Occurrence 11.2 Medical Professional Liability - Claims-Made 12. Earthquake ...... 13.1 Comprehensive (hospital and medical) ind (b) 13.2 Comprehensive (hospital and medical) group (b) 14. Credit A&H (Group and Individual) . 15.1 Vision Only (b)..... 15.2 Dental Only (b) .. 15.3 Disability Income (b) ... 15.4 Medicare Supplement (b) 15.5 Medicaid Title XIX (b) .... 15.6 Medicare Title XVIII (b).... 15.7 Long-Term Care (b) ...... 15.8 Federal Employees Health Benefits Plan (b) 15.9 Other Health (b) .... 16. Workers' Compensation .. 17.1 Other Liability - Occurrence ... 17.2 Other Liability - Claims-Made . 17.3 Excess Workers' Compensation . 18.1 Products Liability - Occurrence ... 18.2 Products Liability - Claims-Made 19.1 Private Passenger Auto No-Fault (Personal Injury Protection) 19.2 Other Private Passenger Auto Liability .... 19.3 Commercial Auto No-Fault (Personal Injury Protection) 19.4 Other Commercial Auto Liability 21.1 Private Passenger Auto Physical Damage 21.2 Commercial Auto Physical Damage ... 22. Aircraft (all perils) .. 23. Fidelity ... 24. Surety ... Burglary and Theft Boiler and Machinery . 27 28. Credit ... International 29. 30. Warranty .. Reins nonproportional assumed property 31. XXX. XXX.. XXX. XXX. .XXX. XXX. XXX. Reins nonproportional assumed liability .XXX .XXX .XXX. XXX. .XXX. XXX XXX. .XXX .XXX .XXX .XXX. .XXX. Reins nonproportional assumed financial lines . XXX. .xxx. .XXX. XXX. .XXX. Aggregate Write-Ins for Other Lines of Business 34 35. Total (a) 500 DETAILS OF WRITE-INS 3401. 3402. 3403. Summary of remaining write-ins for Line 34 from overflow page Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)

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



NAIC Group Code 0088 BUS	SINESS IN THE STATE C				LUSSES			RING THE YEAR	R 2024	NAIC Com	npany Code 10	)212
	Gross Premiu Policy and Me Less Return Premiums on Po	ums, Including mbership Fees, Premiums and plicies not Taken 2	3  Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	0	0	0	0	0		00	0	0	0	0	
2.2 Multiple Peril Crop	0	0	0	0			00	0	0	0	0	
2.3 Federal Flood	0	0	0	0	0		00	0	0	0	0	
2.4. Private Crop	0	0	0	0	0		00	0	0	0	0	
2.5 Private Flood	0	0	0	0	0		00	0	0	0	0	
Farmowners Multiple Peril	0	0	0	0	0		0  0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)			0 0				0	0				
5.2 Commercial Multiple Peril (Non-Liability Portion)		0	0	0			00	0	0	0	0	
Mortgage Guaranty	0	0	0	0	0		00	0	0	0	0	
8. Ocean Marine	0	0	0	0	0		00	0	0	0	0	
9.1 Inland Marine		0	0	0	0		00	0	0	0	0	
9.2 Pet Insurance Plans		0	0	J0	0		0  0	0	0	0	0	·····
<ul><li>10. Financial Guaranty</li></ul>		0	0	0	0		0  0	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	n	n		n	n		0	n	n	n	n	
12. Earthquake							0n	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0		00	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)		0	0	0	0		00	0	0	0	0	
14. Credit A&H (Group and Individual)		0	0	0	0		00	0	0	0	0	
15.1 Vision Only (b)		0	0	0	0		00	0	0	0	0	
15.2 Dental Only (b)		0	0	0	0		0  0	0	0	0	0	
15.3 Disability Income (b)		0			0		00	0	0	0	0	
15.5 Medicaid Title XIX (b)		0	0 N		0		n		0	0		
15.6 Medicare Title XVIII (b)		0	0	0	0		00	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0	0	0		00	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0		00	0	0	0	0	
15.9 Other Health (b)		0	0	0	0		00	0	0	0	0	
16. Workers' Compensation		50,887	0	33,209	0	6,98	213,094	0	1,252	3,041	6,860	9,6
17.1 Other Liability - Occurrence		0			0		00	0	0	0	0	
17.3 Excess Workers' Compensation		0			0		0	0	0	0	0	
18.1 Products Liability - Occurrence		0	0	0	0		00	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0	0	0		00	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0		00	0	0	0	0	
19.2 Other Private Passenger Auto Liability		0	0	0	0		00	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)		0	0	0	0		0  0	0	0	0	0	
<ul><li>19.4 Other Commercial Auto Liability</li><li>21.1 Private Passenger Auto Physical Damage</li></ul>	0	0			0		00	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	٠١		0		n		0	0		
22. Aircraft (all perils)	0	0	0	0	0		00	0	0	0	0	
23. Fidelity	0	0	0	0	0		00	0	0	0	0	
24. Surety	0	0	0	0	0		00	0	0	0	0	
26. Burglary and Theft	0	0	0	0	0		00	0	0	0	0	
27. Boiler and Machinery		J	0	J	0		u  0	ļ0	J	J 0	<u>0</u>	····
28. Credit	0	0	0	0	0		00	0	0	0	0	
30. Warranty		n			n		00		0	0	0	
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX		xxx		XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33 Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0			0	0		0	
35. Total (a)	67,068	50,887	0	33,209	0	6,98	2 13,094	0	1,252	3,041	6,860	9,6
DETAILS OF WRITE-INS												
101. 102.		l			-							·····
103.												
198. Summary of remaining write-ins for Line 34 from overflow page.	0	0	0	0	0		00	0	0	0	0	
199. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	1 0	· I 0	1	0 0	0	0	0	1 0	l



NAIC Group Code 0088 BUSIN	ESS IN THE STATE O				T		D0	RING THE YEAR	2024		npany Code 10	1212
	Policy and Mer	Premiums and plicies not Taken	3 Dividends Paid	4	5	6	7	8 Direct Defense	9 Direct Defense	Direct Defense and Cost	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, License and Fees
1. Fire	0	0	0		)  0		00	0	0	0	0	
2.1 Allied Lines	0	0	0		0		0  0	0	0	0	0	
2.2 Multiple Peril Crop	0	0	0		0		0	0	0	0	0	
2.4. Private Crop		0	0		)  0		0  0	0	0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	0	
2.5 Private Flood		Λ	٥٥		)		0	0		۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
Farmowners Multiple Peril	0	0 n	o		1		n	n	0 n	٥٥		
Homeowners Multiple Peril		0	0		0		0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)		0	0		0		0	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)		0	0		)0		0	0	0	0	0	
6. Mortgage Guaranty	0	0	0		)0		0	0	0	0	0	
8. Ocean Marine	0	0	0		)0		00	0	0	0	0	
9.1 Inland Marine	0	0	0		)  0		00	0	0	0	0	
9.2 Pet Insurance Plans	0	0	0	C	)  0		00	0	0	0	0	
10. Financial Guaranty	0	0	0	C	)  0		00	0	0	0	0	
11.1 Medical Professional Liability - Occurrence	0	0	0		00		00	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made		0	0	0	)  0		0  0	0	0	0	0	
12. Earthquake	0	0	0	0	)  0		00	0	0	0	0	
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0		0		0  0	0	0	0	0	
13.2 Comprehensive (hospital and medical) group (b)		0	0		00		00	0	0	0	0	
14. Credit A&H (Group and Individual)		0	0		)  0		0  0	0	0	0	0	
15.1 Vision Only (b)		0	0		0		0  0	0	0	0	0	
15.2 Dental Only (b)		0	0		)  0		0  0	0	0	0	0	
15.3 Disability Income (b)	0	0	0		0		0  0	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0		0		0  0	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0		0		0	0	0	0	0	
15.6 Medicare Title XVIII (b)		0	0		)  0		0	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0		0		0	0	0	0	0	
15.9 Other Health (b)		0	٥		1		00	0	0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
16. Workers' Compensation			٥	37.041	19.293	24,60			1.926	21.667		21
17.1 Other Liability - Occurrence		130,400	0		10,200	24,00	n		1,320		0, 130	
17.2 Other Liability - Claims-Made	0	0	0		0		0	0	0	0	0	
17.3 Excess Workers' Compensation		0	0		0		0	0	0	0	0	
18.1 Products Liability - Occurrence	0	0	0		)0		0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0		)0		0	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0		)0		00	0	0	0	0	
19.2 Other Private Passenger Auto Liability	0	0	0		)0		00	0	0	0	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	C	)0		00	0	0	0	0	
19.4 Other Commercial Auto Liability	0	0	0	C	)  0		00	0	0	0	0	
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0		0  0	0	0	0	0	
21.2 Commercial Auto Physical Damage	0	0	0	0	0		0  0	0	0	0	0	
22. Aircraft (all perils)	0	0	0	C	)  0		0  0	0	0	0	0	
23. Fidelity		0	0	C	)  0		0  0	0	0	0	J0	
24. Surety		0	<u>0</u>	<u>C</u>	0  0		υ  0 <u>-</u>	<u>0</u>	0	0	J0	
26. Burglary and Theft		0	J0	C	0		υ  0	0	0	0	0	·····
27. Boiler and Machinery		0	J0	C	0		υ  0	0	0	0	J	·····
28. Credit		ō	ō	ļ	<u> </u>		u  0	0	J 0	0	]0	·····
29. International	0	0	0	C	0	<u> </u>	0  0	0	0	0	0	
	0	0	0		J0		U0	0	0	0	0	
31. Reins nonproportional assumed property	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXX	XXXXXX	XXX	XXX
33. Reins nonproportional assumed financial lines		XXX	XXX	XXX		XXXXXX		XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business		0							0		^^^	
35. Total (a)	128.284	158.486	n	37.041					1.926	21.667	13.190	21
DETAILS OF WRITE-INS	120,204	150,400	0	37,041	19,290	24,00	30,317	202	1,920	21,007	10, 190	21
01												
02.												
03.												
		1				1	. 1		1			l
98. Summary of remaining write-ins for Line 34 from overflow page		0	l	L	)   U		U <b> </b>	U	U	U		



NAIC Group Code 0088 BUSINESS	IN THE STATE C						טט	RING THE YEAR	<u> </u>		npany Code 10	1414
	Policy and Me Less Return	ums, Including embership Fees, Premiums and olicies not Taken	3 Dividends Paid	4	5	6	7	8 Direct Defense	9 Direct Defense	Direct Defense and Cost	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licens and Fees
1. Fire		0	0	)	0	)	0	00	0	0	0	
2.1 Allied Lines		0	0		)		0  0	0	0	0	0	
2.2 Multiple Peril Crop		0	0		J		۷  u	0	0	0	0	
2.4. Private Crop		0	0		J		0	0	0	0	0	
2.5 Private Flood		0	0		)  t		0	1	0	0		
Farmowners Multiple Peril	n		0		)	,	n	1		0		
Homeowners Multiple Peril		0	0		)		0	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)		0	0		0		ō	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)		0	0		)		o	0	0	0	0	
6. Mortgage Guaranty	0	0	0		D		o  a	00	0	0	0	
8. Ocean Marine	0	0	0	)	0	)	o  a	)  0	0	0	0	
9.1 Inland Marine	0	0	0	)	0		0	)  0	0	0	0	
9.2 Pet Insurance Plans	0	0	0	)	0		00	00	0	0	0	
Financial Guaranty	0	0	0	)	0	)	0	)  0	0	0	0	
1.1 Medical Professional Liability - Occurrence	0	0	0	)  (	0	)	0 <b> </b>	)  0	0	0	0	ļ
1.2 Medical Professional Liability - Claims-Made		0	0	(	0		0	)  0	0	0	0	
2. Earthquake	0	0	0		0		0	0  0	0	0	0	
3.1 Comprehensive (hospital and medical) ind (b)	0	0	0	)	0	)	0  0	)  0	0	0	0	
3.2 Comprehensive (hospital and medical) group (b)		0	0		0		0  0	0	0	0	0	
4. Credit A&H (Group and Individual)	0	0	0		)		0	0	0	0	0	
5.1 Vision Only (b)	0	0	0		)		0  0	0	0	0	0	
5.2 Dental Only (b)		0	0		)		0	)  0	0	0	0	
5.3 Disability Income (b)		0	0		J		0	)  0	0	0	0	
		0	0		J		0	)  0	0	0		
5.5 Medicaid Title XIX (b)		0	0		J		0		0	0	0	
5.6 Medicare Title XVIII (b)		0	0		J		0	)	0	0		
5.8 Federal Employees Health Benefits Plan (b)		0	0		)  t		0	1	0	0		
5.9 Other Health (b)			0		)	,	n	1		0		
6. Workers' Compensation		0	0		n		0	0	0	0	0	
7.1 Other Liability - Occurrence		0	0	)	)		0	0	0	0	0	
7.2 Other Liability - Claims-Made		0	0		)		0	0	0	0	0	
7.3 Excess Workers' Compensation		0	0		0		ō	0	0	0	0	
8.1 Products Liability - Occurrence	0	0	0		)		o	0	0	0	0	
8.2 Products Liability - Claims-Made		0	0		)		o	0	0	0	0	
9.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	)	0	)	o  a	)  0	0	0	0	
9.2 Other Private Passenger Auto Liability	0	0	0	)	0	)	o  a	)  0	0	0	0	
9.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	)(	0	)	O	00	0	0	0	
9.4 Other Commercial Auto Liability		0	0	)(	0		O	00	0	0	0	
1.1 Private Passenger Auto Physical Damage	0	0	0	)	0	)	0  0	0  0	0	0	0	
1.2 Commercial Auto Physical Damage	0	0	0	)	0	)	0	)  0	0	0	0	
2. Aircraft (all perils)		0	0	(	0		0	)  0	0	0	0	
3. Fidelity	0	0	0	· ····································	j	· ·····	ŭ  ū	0	0	0	0	
4. Surety	··· ō	ļ0	0	.   <u>.</u>	j	.	ر ا ر	.  0	0	0	0	·
6. Burglary and Theft	···- ········ō	0	0	;  ;	,		ر ر	0	0	0	ļ0	
7. Boiler and Machinery		0	0	<u> </u>	,		0  ū	0	0	0	0	
8. Credit		0	0	{ <b> </b>	,  ,	`\  ·····	n  u	,  0		0		
9. International				`	,   ,	<u> </u>	n	,  0		0		
Warranty     Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	,xxx	XXX	,	XXX	XXX	XXX	XXX.
2. Reins nonproportional assumed liability		xxx	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX.
Reins nonproportional assumed financial lines		XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
Aggregate Write-Ins for Other Lines of Business		0		)	)		0	)	0			
5. Total (a)	0	0	0		0	) [	0	0	0	0	0	
DETAILS OF WRITE-INS	Ť	1		1	1		1		<u> </u>		1	1
1												L
2												
3												
98. Summary of remaining write-ins for Line 34 from overflow page		0	0	)	0		o	)  0	0	0	0	
99. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	)	0	)	0   0	0	0	0	0	1



NAIC Group Code 0088 BUSINI	<u>ESS IN THE STATE C</u>				1	1	טט	RING THE YEAR	1 2024		npany Code 10	
	Policy and Mer Less Return F	Premiums and plicies not Taken	Dividends Paid	4	5	6	7	Direct Defense	9 Direct Defense	Direct Defense and Cost	11	12
Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage		Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, License and Fees
1. Fire	0	0	0		0		00	0	0	0	0	
2.1 Allied Lines	0	0	0		0	· · · · · · · · · · · · · · · · · · ·	0  0	0	0	0	0	
2.2 Multiple Peril Crop		0	0				J	0	0	0	0	
2.4. Private Crop		0	0				J	0	0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	0	
2.5 Private Flood		٥	٥٥				n	0	0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
Farmowners Multiple Peril	0	0	0		0		0	0	0		0	
Homeowners Multiple Peril		0	0		0		00	0	0	0	0	
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0		0		00	0	0	0	0	
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0		)  0		00	0	0	0	0	
Mortgage Guaranty	0	0	0		) 0	(	00	0	0	0	0	
8. Ocean Marine	0	0	0		00		0	0	0	0	0	
9.1 Inland Marine		0	0		ِ		0  0	0	0	0	J	
9.2 Pet Insurance Plans	0	0	J0		<u> </u>  0		D  0	0	0	0	0	
10. Financial Guaranty	0	J	ļ0	;	.  0	[]······	, Iō	0	ļ0	0	J0	
11.1 Medical Professional Liability - Occurrence		0	0				J	0	0	0	0	
11.2 Medical Professional Liability - Claims-Made			0				)u	0	0	٠٠٠٠		
13.1 Comprehensive (hospital and medical) ind (b)		Λ	0 N		0		n		Λ	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
13.2 Comprehensive (hospital and medical) group (b)	0	0	0		0		n	0	0	٥٥	0	1
14. Credit A&H (Group and Individual)		0	0		0		0	0	0	0	0	
15.1 Vision Only (b)	0	0	0		0		00	0	0	0	0	
15.2 Dental Only (b)	0	0	0		0		00	0	0	0	0	
15.3 Disability Income (b)		0	0				00	0	0	0	0	
15.4 Medicare Supplement (b)	0	0	0		0		00	0	0	0	0	
15.5 Medicaid Title XIX (b)	0	0	0	(	)  0	(	00	0	0	0	0	
15.6 Medicare Title XVIII (b)	0	0	0		) 0	(	00	0	0	0	0	
15.7 Long-Term Care (b)	0	0	0		0		0	0	0	0	0	
15.8 Federal Employees Health Benefits Plan (b)		0	0		0		0  0	0	0	0	0	
15.9 Other Health (b)		0	0				00		0	0	0	
16. Workers' Compensation	34, 166, 947	33,241,358	0	13,765,768	8,026,478	11, 445, 10	724,011,005		1,707,215	3,335,410	3,562,187	1,407
17.1 Other Liability - Occurrence			0				)u	0	0	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠		
17.3 Excess Workers' Compensation							n		n	٠٥		
18.1 Products Liability - Occurrence		0	0	(	0		0	0	0	0	0	
18.2 Products Liability - Claims-Made	0	0	0		0		00	0	0	0	0	
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)		7,782,183	0	4,442,175	4,790,858	5,480,669	94,430,516	598,794	852,477	919, 176	1,283,546	186
19.2 Other Private Passenger Auto Liability	92,075,805		0	47,114,935	60,391,348	56,865,765	5 105,234,150			12,696,173		1,852
19.3 Commercial Auto No-Fault (Personal Injury Protection)		0	0		) 0	(	•			0	0	
19.4 Other Commercial Auto Liability	0	0	0						0	0	0	
21.1 Private Passenger Auto Physical Damage	102,271,519	93,994,905	0	52,303,600		55,698,96			30,577	96,874	14,685,107	2,072
21.2 Commercial Auto Physical Damage	0	<sub>0</sub>	ļ0	ļ	0	[]······	00	0	0	0	0	
22. Aircraft (all perils)	0	0	0	ļ			, Iō	0	ļ0	0	I	
23. Fidelity 24. Surety			u				n  0	0		٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠		
24. Surety		n	u		,  u		n  0	0		 n		
27. Boiler and Machinery		n	n		)		0	n	n	n	n	
28. Credit			n		)n		0	0	0		0	
29. International		0	0		0		0	0	0	0	0	
30. Warranty	0	0	0		0		00	0	0	0	0	
31. Reins nonproportional assumed property		XXX	XXX	XXX	XXX	xxx	xxx	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	xxx	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines		XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business		0	0		0				0	0		
35. Total (a)	237,046,786	223,627,608	0	117,626,484	131,272,672	129,490,508	8 135,374,020	5,233,176	8,081,532	17,047,633	32,617,649	5,520
DETAILS OF WRITE-INS												
01											·	
UZ 03		·····									· ····	
							n		0	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰		
98. Summary of remaining write-ins for Line 34 from overflow page												

## Schedule F - Part 1 - Assumed Reinsurance **NONE**

Schedule F - Part 2 - Premium Portfolio Reinsurance Effected or (Canceled)

NONE

#### N

#### ANNUAL STATEMENT FOR THE YEAR 2024 OF THE ALLMERICA FINANCIAL ALLIANCE INSURANCE COMPANY

### **SCHEDULE F - PART 3**

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

	1					Ocucu	Ciriourano	c as of Dece	illibel 51, Cu			u)						т	
1	2 3		4	5	6					ance Recover					16	Reinsuran		19	20
						7	8	9	10	11	12	13	14	15		17	18	Net Amount	
																		Recoverable	. ,
	NAIC														Amount in		Other	From	Company
	Com-				Reinsurance			Known	Known	IBNR	IBNR		Contingent	Columns	Dispute	Ceded	Amounts	Reinsurers	Under
ID	pany			Special	Premiums	Paid	Paid	Case Loss	Case LAE	Loss	LAE	Unearned	Commis-	7 through	included in	Balances	Due to	Cols. 15 -	Reinsurance
Number	Code Name of Reinsu			Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	sions	14 Totals	Column 15	Payable	Reinsurers	[17 + 18]	Treaties
13-5129825	THE HANOVER INSURANCE COMPANY				237,047	0 .	0	74,530	3,216	60,844	16,738	117,626	0	272,954	0	0	0	272,954	0
	Total Authorized - Affiliates - U.S. Nor				237,047	0	0	74,530	3,216	60,844	16,738	117,626	0	272,954	0	0	0	272,954	0
	Total Authorized - Affiliates - U.S. Nor				237,047	0	0	7 1,000	3,216	60,844	16,738	117,626	0	272,954	0	0	0	272,954	0
	Total Authorized - Affiliates - Other (N	on-U.S.)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0899999. T	Total Authorized - Affiliates				237,047	0	0	74,530	3,216	60,844	16,738	117,626	0	272,954	0	0	0	272,954	0
	Total Authorized Excluding Protected	Cells (Sum of 08999	999, 099999	9,															
	1099999, 1199999 and 1299999)				237,047	0	0	74,530	3,216	60,844	16,738	117,626	0	272,954	0	0	0	272,954	0
1899999. T	Total Unauthorized - Affiliates - U.S. N	Ion-Pool			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2199999. T	Total Unauthorized - Affiliates - Other	(Non-U.S.)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2299999. T	Total Unauthorized - Affiliates				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2899999. T	otal Unauthorized Excluding Protect	ed Cells (Sum of 229	99999, 2399	9999,															
	2499999, 2599999 and 2699999)				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3299999. T	Total Certified - Affiliates - U.S. Non-F	'ool			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3599999. T	otal Certified - Affiliates - Other (Nor	-U.S.)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3699999. T	Total Certified - Affiliates	,			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4299999. T	Total Certified Excluding Protected Co	ells (Sum of 3699999	9, 3799999,																
	3899999, 3999999 and 4099999)	(	, ,		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4699999. T	Total Reciprocal Jurisdiction - Affiliate	s - U.S. Non-Pool			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4999999. T	otal Reciprocal Jurisdiction - Affiliate	s - Other (Non-U.S.)	.)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5099999. T	otal Reciprocal Jurisdiction - Affiliate	s	,		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total Reciprocal Jurisdiction Excludin		Sum of 50999	999.		-			_				_		-				
	5199999, 5299999, 5399999 and 54			,	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5799999. T	Total Authorized, Unauthorized, Recip	rocal Jurisdiction ar	nd Certified I	Excludina		j													
	Protected Cells (Sum of 1499999, 28				237,047	0	0	74,530	3,216	60,844	16,738	117,626	0	272,954	0	0	0	272,954	0
5899999. T	Total Protected Cells (Sum of 139999	9, 2799999, 419999	99 and 5599	999)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9999999 T					237.047	0	0	74.530	3.216	60.844	16.738	117.626	0	272.954	0	0	0	272.954	0

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

							(Credit Ris	sk)									
			Colla	ateral		25	26	27				Ceded F	Reinsurance Cr	edit Risk			
		21	22	23	24				28	29	30	31	32	33	34	35	36
																	Credit Risk
																Credit Risk on	
																Collateralized	
											Reinsurance						Recoverables
											Payable &					(Col. 32 *	(Col. 33 *
					Single				Total Amount		Funds Held		Total	Stressed Net		Factor	Factor
				Issuing or	Beneficiary		Net		Recoverable		(Cols.		Collateral	Recoverable			
ID				Confirming	Trusts &	Total Funds	Recoverable	Applicable	from	Stressed	17+18+20;		(Cols. 21+22	Net of		Reinsurer	Reinsurer
Number		Multiple		Bank	Other	Held,	Net of Funds	Sch. F	Reinsurers	Recoverable	but not in	Stressed Net	+ 24, not in	Collateral	Reinsurer	Designation	Designation
From	Name of Reinsurer	Beneficiary	Letters of	Reference	Allowable	Payables &	Held &	Penalty	Less Penalty	(Col. 28 *	excess of	Recoverable	Excess of	Offsets	Designation		Equivalent in
Col. 1	From Col. 3	Trusts	Credit	Number	Collateral	Collateral	Collateral	(Col. 78)	(Cols. 15-27)	120%)	Col. 29)	(Cols. 29-30)	Col. 31)	(Cols. 31-32)	Equivalent	Col. 34)	Col. 34)
	THE HANOVER INSURANCE COMPANY	0	0		0	0	272,954	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates - U.S. Non-Pool - Other	0	0	XXX	0	0	272,954	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	272,954	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
	otal Authorized - Affiliates	0	0	XXX	0	0	272,954	0	0	0	0	0	0	0	XXX	0	0
	otal Authorized Excluding Protected Cells (Sum of																
	0899999, 0999999, 1099999, 1199999 and 1299999)	0	0	XXX	0	0	272,954	0	0	0	0	0	0	0	XXX	0	0
	otal Unauthorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
	otal Unauthorized - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
	otal Unauthorized Excluding Protected Cells (Sum of																
	299999, 2399999, 2499999, 2599999 and 2699999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
	otal Certified - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Certified - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3699999. To	otal Certified - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
	otal Certified Excluding Protected Cells (Sum of																
3	3699999, 3799999, 3899999, 3999999 and 4099999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4699999. To	otal Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Reciprocal Jurisdiction - Affiliates - Other (Non-																
	J.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5099999. To	otal Reciprocal Jurisdiction - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
	otal Reciprocal Jurisdiction Excluding Protected Cells																
	Sum of 5099999, 5199999, 5299999, 5399999 and																
	549999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5799999. To	otal Authorized, Unauthorized, Reciprocal Jurisdiction																
	and Certified Excluding Protected Cells (Sum of																
	499999, 2899999, 4299999 and 5699999)	0	0	XXX	0	0	272,954	0	0	0	0	0	0	0	XXX	0	0
	otal Protected Cells (Sum of 1399999, 2799999,																
	199999 and 5599999)	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 To	tals	0	0	XXX	0	0	272.954	0	0	0	0	0	0	0	XXX	0	0

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

							(Aging of (	Ceded Reins	urance)									
		Reir	nsurance Reco	overable on Pai	d Losses and	Paid Loss Adj	ustment Expe	nses	44	45	46	47	48	49	50	51	52	53
		37			Overdue	•	•	43										1
			38	39	40	41	42					Recoverable						1
									Total	Recoverable		on Paid			Percentage			I
									Recoverable	on Paid	Total	Losses &			of Amounts			1
									on Paid	Losses &	Recoverable	LAE Over 90			More Than			Amounts in
									Losses &	LAE Over 90	on Paid	Days Past			90 Days	Percentage		Col. 47 for
								Total Due	LAE	Days Past	Losses &	Due Amounts			Overdue Not	More Than	Is the	Reinsurers
ID							Total	Cols. 37+42	Amounts in	Due Amounts		Not in	Amounts		in Dispute	120 Days	Amount in	with Values
Number							Overdue	(In total	Dispute	in Dispute	Amounts Not	Dispute	Received	Percentage	(Col.	Overdue	Col. 50 Less	Less Than
From	Name of Reinsurer		1 - 29	30 - 90	91 - 120	Over 120	Cols. 38+39	should equal	Included in	Included in	in Dispute	(Cols. 40 +	Prior	Overdue Col.	47/[Cols.	(Col. 41/	Than 20%?	20% in
Col. 1	From Col. 3	Current	Days	Days	Days	Days	+40+41	Cols. 7+8)	Col. 43	Cols. 40 & 41	(Cols 43-44)	41 - 45)	90 Days	42/Col. 43	46+48])	Col. 43)	(Yes or No)	Col. 50
13-5129825	THE HANOVER INSURANCE COMPANY	0	0	0	0	0	0	0	0	0	Ó	0	0	0.0	0.0		YES	0
0399999. To	otal Authorized - Affiliates - U.S. Non-Pool -																-	1
	Other	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	. 0
0499999. To	otal Authorized - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	otal Authorized - Affiliates - Other (Non-U.S.)	0	0	0	0		0	0	0	0		0	0	0.0	0.0	0.0	XXX	0
	otal Authorized - Affiliates	0	0	0	0		0	0	0	0		0	0	0.0	0.0	0.0	XXX	0
	otal Authorized Excluding Protected Cells (Sum		·	<u> </u>		-				·				0.0	0.0	0.0	7000	
	of 0899999, 0999999, 1099999, 1199999 and																	ı
	(1299999)	0	0	0	0	0	٥	0	0	0	0	0	0	0.0	0.0	0.0	xxx	۱ 0
	otal Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	otal Unauthorized - Affiliates - O.S. Non-Poor	0	0	·	0		0	0	0	0		0	0		0.0	0.0	XXX	0
	otal Unauthorized - Affiliates - Other (Nori-0.3.)	0	0	0	0		0	0	0	0		0	0	0.0	0.0	0.0	XXX	0
	otal Unauthorized - Affiliates  Stal Unauthorized Excluding Protected Cells	U	U	U	U	U	U	U	U	U	U	U	U	0.0	0.0	0.0	^^^	U
2099999. 10	Sum of 2299999, 2399999, 2499999, 2599999																	I
	and 2699999)	0	0	0	0	0	0			_	0	0	0	0.0	0.0	0.0	XXX	۱ ۵
	otal Certified - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
			ŭ	·	0		0	0	0	0							XXX	0
	otal Certified - Affiliates - Other (Non-U.S.)	0	_	0	0		0	0	0	0	0		0		0.0	0.0		0
	otal Certified - Affiliates	0	0	U	0	U	0	0	U	U	U	0	0	0.0	0.0	0.0	XXX	0
	otal Certified Excluding Protected Cells (Sum of																	1
	3699999, 37999999, 38999999, 3999999 and	•		_								•					2001	1
	1099999)	0	0	0	0	U	0	0	0	0	0	U	0	0.0	0.0	0.0	XXX	0
	otal Reciprocal Jurisdiction - Affiliates - U.S.									l .								1
<u> </u>	Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	otal Reciprocal Jurisdiction - Affiliates - Other	_	_		_	_	_	_	_	_	_	_	_		[		2001	1 -
	Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	otal Reciprocal Jurisdiction - Affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	otal Reciprocal Jurisdiction Excluding Protected																	l
	Cells (Sum of 5099999, 5199999, 5299999,														[ [		1001	1
	5399999 and 5499999)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	otal Authorized, Unauthorized, Reciprocal								1	1								l .
	Jurisdiction and Certified Excluding Protected																	l
	Cells (Sum of 1499999, 2899999, 4299999 and								1	1								l .
	569999)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	otal Protected Cells (Sum of 1399999,								1	1								1
	2799999, 4199999 and 5599999)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
9999999 To	tals	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	. 0

SCHEDULE F - PART 3 (Continued)

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

(Provision for Reinsurance for Certified Reinsurers)

						Provision for	remourance			ertified Reinsur	ance						
		54	55	56	57	58	59	60	61	62	63	64	65	Complete i	f Col. 52 = "No"	; Otherwise	69
								Percent of							Enter 0		
								Collateral	Doroont Cradit				20% of	66	67	68	Provision for
								Net	Percent Credit Allowed on	20% of		Provision for	Recoverable				Overdue Reinsurance
						Net		Recoverables	Net	Recoverable		Reinsurance	on Paid	Total			Ceded to
						Recoverables		Subject to	Recoverables	on Paid	Amount of	with Certified	Losses & LAE		Net		Certified
				Percent		Subject to		Collateral	Subject to		Credit Allowed	Reinsurers	Over 90 Days	Provided (Col.	Unsecured		Reinsurers
		Certified	Effective	Collateral	Catastrophe	Collateral	Dollar Amount	Requirements	Collateral	Over 90 Days	for Net	Due to		20 + Col. 21 +	Recoverable		(Greater of
ID		Reinsurer	Date of		Recoverables		of Collateral	([Col. 20 +	Requirements		Recoverables	Collateral	Amounts Not	Col. 22 +	for Which		[Col. 62 + Col.
Number		Rating	Certified		Qualifying for		Required		(Col. 60 / Col.	Amounts in	(Col. 57 +	Deficiency	in Dispute	Col. 24, not	Credit is	20% of	65] or Col.68;
From	Name of Reinsurer	(1 through	Reinsurer	(0% through	Collateral	(Col. 19 -	(Col. 56 *	22 + Col. 24] /		Dispute (Col.	[Col. 58 *	(Col. 19 -	(Col. 47 *	to Exceed	Allowed (Col.	Amount in	not to Exceed
Col. 1	From Col. 3	6)	Rating	100%)	Deferral	Col. 57)	Col. 58)		exceed 100%)	45 * 20%)	Col. 61])	Col. 63)	20%)	Col. 63)	63 - Col. 66)	Col. 67	Col. 63)
	THE HANOVER INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates - U.S. Non-Pool - Other			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized Excluding Protected Cells (Sum of 089 099999. 1199999 and 1299999)	9999, 09999	999,	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized - Affiliates - U.S. Non-Pool Otal Unauthorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized - Affiliates - Other (Nori-0.5.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized Excluding Protected Cells (Sum of 2	2200000 23	00000	^^^	^^^	***		***	^^^	***	***		***	***	***		
	499999. 2599999 and 2699999)	2299999, 20	33333,	XXX	xxx	XXX	XXX	xxx	xxx	xxx	XXX	XXX	XXX	XXX	XXX	xxx	XXX
	otal Certified - Affiliates - U.S. Non-Pool			XXX	0		0	XXX	XXX	0	0	0	0	7000		0	
	otal Certified - Affiliates - Other (Non-U.S.)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	
	otal Certified - Affiliates			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0
	otal Certified Excluding Protected Cells (Sum of 36999	999. 379999	9. 3899999.														
	999999 and 4099999)		., ,	XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0
4699999. To	otal Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999. To	otal Reciprocal Jurisdiction - Affiliates - Other (Non-U.S	S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5099999. To	otal Reciprocal Jurisdiction - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Reciprocal Jurisdiction Excluding Protected Cells	(Sum of 509	99999,														
	199999, 5299999, 5399999 and 5499999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized, Unauthorized, Reciprocal Jurisdiction																
	Protected Cells (Sum of 1499999, 2899999, 4299999) a			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	
	otal Protected Cells (Sum of 1399999, 2799999, 4199	999 and 559	99999)	XXX	0	•	0	XXX	XXX	0	0	0	0	0		0	
9999999 To	tals			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0

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

				(Total Provision for I	Tellisulatice)					
		70			Provision for Over	due Authorized and				
			Provision for Unauth	norized Reinsurance	Reciprocal Jurisd	ction Reinsurance		Total Provision	for Reinsurance	
			71	72	73	74	75	76	77	78
					Complete if	Complete if				
					Col. 52 = "Yes";	Col. 52 = "No";				
					Otherwise Enter 0	Otherwise Enter 0				
						Greater of 20% of Net				
					20% of Recoverable	Recoverable Net of				
					on Paid Losses &	Funds Held &				
		20% of		Provision for Overdue	LAE Over 90 Days	Collateral, or 20% of				
		Recoverable on Paid	Provision for	Reinsurance from	Past Due Amounts	Recoverable on Paid	Provision for Amounts			
		Losses & LAE Over	Reinsurance with	Unauthorized	Not in Dispute + 20%	Losses & LAE Over 90	Ceded to Authorized	Provision for Amounts		
ID		90 Days past Due	Unauthorized	Reinsurers and	of Amounts in	Days Past Due	and Reciprocal	Ceded to Unauthorized	Provision for Amounts	
Number		Amounts Not in	Reinsurers Due to	Amounts in Dispute	Dispute	(Greater of Col. 26 *	Jurisdiction	Reinsurers	Ceded to Certified	Total Provision for
From	Name of Reinsurer	Dispute	Collateral Deficiency	(Col. 70 + 20% of the	([Col. 47 * 20%] +	20% or	Reinsurers	(Cols. 71 + 72 Not in	Reinsurers	Reinsurance
Col. 1	From Col. 3	(Col. 47 * 20%)	(Col. 26)	Amount in Col. 16)	[Col. 45 * 20%])	Cols. [40 + 41] * 20%)	(Cols. 73 + 74)	Excess of Col. 15)	(Cols. 64 + 69)	(Cols. 75 + 76 + 77)
13-5129825 THE HA	HANOVER INSURANCE COMPANY	0	XXX	XXX	0	0	0	XXX	XXX	0
0399999. Total Ar	Authorized - Affiliates - U.S. Non-Pool - Other	0	XXX	XXX	0	0	0	XXX	XXX	0
0499999. Total Ar	Authorized - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
0799999. Total Ar	Authorized - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
0899999. Total A	Authorized - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
1499999. Total A	Authorized Excluding Protected Cells (Sum of 0899999,									
	999, 1099999, 1199999 and 1299999)	0	XXX	XXX	0	0	0	XXX	XXX	0
1899999. Total U	Jnauthorized - Affiliates - U.S. Non-Pool	0	0	0	XXX	XXX	XXX	0	XXX	0
2199999. Total U	Jnauthorized - Affiliates - Other (Non-U.S.)	0	0	0	XXX	XXX	XXX	0	XXX	0
2299999. Total U	Jnauthorized - Affiliates	0	0	0	XXX	XXX	XXX	0	XXX	0
2899999. Total U	Jnauthorized Excluding Protected Cells (Sum of 2299999,									
	999, 2499999, 2599999 and 2699999)	0	0	0	XXX	XXX	XXX	0	XXX	0
	Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3599999. Total C	Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	Certified Excluding Protected Cells (Sum of 3699999, 3799999),									
	999. 3999999 and 4099999)	XXX	XXX	XXX	xxx	xxx	xxx	XXX	0	0
	Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
	Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
	Reciprocal Jurisdiction - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
	Reciprocal Jurisdiction Excluding Protected Cells (Sum of		,,,,,	,,,,,	·			,,,,,	,,,,,	Ů
	999. 5199999. 5299999. 5399999 and 5499999)	n	XXX	XXX	n	n	n	XXX	XXX	n
	Authorized, Unauthorized, Reciprocal Jurisdiction and Certified	Ť	,,,,,	,,,,,	Ť		Ů	,,,,,	,,,,,	Ů
	ding Protected Cells (Sum of 1499999, 2899999, 4299999 and									
569999		0	0	0	0	0	0	0	0	0
	Protected Cells (Sum of 1399999, 2799999, 4199999 and	•	•		Ů	·			•	- ·
559999		0	0	0	0	0	0	0	0	0
9999999 Totals	/	-	0	i i	· ·	0	<u> </u>	· ·	,	·

## **SCHEDULE F - PART 4**

		Is	suing or Confirming Banks for Letters of Credit from Schedule F, Part 3 (\$000 Omitted)	
1 Issuing or Confirming	2	3	4	5
Issuing or Confirming Bank Reference Number Used				
in Col. 23 of	Letters of	American Bankers Association		
Sch F Part 3	Credit Code	(ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount

#### N

#### ANNUAL STATEMENT FOR THE YEAR 2024 OF THE ALLMERICA FINANCIAL ALLIANCE INSURANCE COMPANY

#### **SCHEDULE F - PART 5**

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	1	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1.		0.000	0
2.		0.000	0
3.		0.000	0
4.		0.000	0
5.		0.000	0

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

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	<u>Affiliated</u>
6.	THE HANOVER INSURANCE COMPANY	272,954	237,047	Yes [ X ] No [ ]
7.		0	0	Yes [ ] No [ ]
8.		0	0	Yes [ ] No [ ]
9.		0	0	Yes [ ] No [ ]
10.		0	0	Yes [ ] 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

	Restatement of Balance Sheet to Identify Net	1	2 Destatement	3 Destated
		As Reported (Net of Ceded)	Restatement Adjustments	Restated (Gross of Ceded)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)	28,400,784	0	28,400,784
2.	Premiums and considerations (Line 15)	0	0	0
3.	Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	0	0	0
4.	Funds held by or deposited with reinsured companies (Line 16.2)	0	0	0
5.	Other assets	216,997	0	216,997
6.	Net amount recoverable from reinsurers	0	272,954,000	272,954,000
7.	Protected cell assets (Line 27)	0	0	0
8.	Totals (Line 28)	28,617,781	272,954,000	301,571,781
	LIABILITIES (Page 3)			
9.	Losses and loss adjustment expenses (Lines 1 through 3)	0	155,328,000	155,328,000
10.	Taxes, expenses, and other obligations (Lines 4 through 8)	25,914	0	25,914
11.	Unearned premiums (Line 9)	0	117,626,000	117,626,000
12.	Advance premiums (Line 10)	0	0	0
13.	Dividends declared and unpaid (Line 11.1 and 11.2)	0	0	0
14.	Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	0	0	0
15.	Funds held by company under reinsurance treaties (Line 13)	0	0	0
16.	Amounts withheld or retained by company for account of others (Line 14)	0	0	0
17.	Provision for reinsurance (Line 16)	0	0	0
18.	Other liabilities	5,142	0	5,142
19.	Total liabilities excluding protected cell business (Line 26)	31,056	272,954,000	272,985,056
20.	Protected cell liabilities (Line 27)	0	0	0
21.	Surplus as regards policyholders (Line 37)	28,586,725	XXX	28,586,725
22.	Totals (Line 38)	28,617,781	272,954,000	301,571,781

	ls the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?	Yes [ X	] No [	[	]
I	f yes, give full explanation: The Company ceded 100% of its insurance business to The Hanover Insurance Company, an affiliated insurer.				

## Schedule H - Part 1 - Analysis of Underwriting Operations

## NONE

Schedule H - Part 2 - Reserves and Liabilities

## NONE

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

NONE

Schedule H - Part 4 - Reinsurance

NONE

Schedule H - Part 5 - Health Claims

NONE

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

						(400	0 OMITTED	')					
		Pr	emiums Earn	ed			Los	s and Loss Ex	cpense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
V	/hich				Loss Pa	yments	Containmen	nt Payments	Payn	nents			Number of
Premiu	ums Were				4	5	6	7	8	9		Total Net	Claims
	ned and										Salvage and	Paid Cols	Reported
	es Were	Direct and			Direct and		Direct and		Direct and			(4 - 5 + 6 - 7	
Ind	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX									XXX
2.	2015												
3.	2016												
4.								<b>\</b>					•••••
5.	2018							<b></b>					
6.	2019						<b>4</b> 7						
7.	2020												
8.	2021												
9.	2022												
10.	2023												
11.	2024												
12.	Totals	XXX	XXX	XXX									XXX

			Losses	Unpaid		Defens	e and Cost 0	Containment	Unpaid	Adjusti	ng and	23	24	25
		Case		Bulk +	· IBNR	Case		Bulk +		Other l				
		13	14	15	16	17	18	19	20	21	22	Salvage and	Total Net Losses	Number of Claims Outstand
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Subrog- ation Anticipated	and Expenses Unpaid	ing Direct an Assumed
1.	Prior													
2.	2015													
3.	2016													
4.														
5.	2018					<b>,</b>								
6.	2019						J							
7.	2020				·····									
8.	2021													
9.	2022													
10.	2023													
11.	2024													
12.	Totals													

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	ice Sheet
		Losses and	d Loss Expense	es Incurred		ed /Premiums E		Nontabula	r Discount		Reserves Af	
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.	2015											
3.	2016											
4.	2017											
5.	2018											
6.	2019											
7.	2020								<del>_</del>			
8.	2021											
9.	2022											
10.	2023											
11.	2024											
12.	Totals	xxx	xxx	XXX	XXX	XXX	XXX			xxx		

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

		Pr	emiums Earn	ed		(+	Los		cpense Paymo	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
V	/hich				Loss Pa	yments	Containmer	t Payments	Payn				Number of
	ums Were				4	5	6	7	8	9		Total Net	Claims
	ned and										Salvage and		Reported
	es Were	Direct and			Direct and		Direct and		Direct and		Subrogation	`	Direct and
Ind	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	xxx	XXX	XXX	3	3	7	7	2	2	0	0	XXX
2.	2015	67,500	67,500	0	47,855	47,855	2,862	2,862	5,910	5,910	0	0	10 , 115
3.	2016	72,422	72,422	0	57,401	57,401	3,548	3,548	6,414	6,414	0	0	10,550
4.	2017	77,748	77,748	0	61,334	61,334	4,025	4,025	7 , 136	7, 136	0	0	10,613
5.	2018	82,703	82,703	0	64 , 109	64 , 109	4,255	4,255	6,600	6,600	0	0	10,409
6.	2019	84,895	84,895	0	54,565	54,565	3,840	3,840	6,553	6,553	0	0	9,759
7.	2020	81,051	81,051	0	34,030	34,030	2,078	2,078	5,090	5,090	0	0	5,738
8.	2021	79,451	79,451	0	40,058	40,058	1,925	1,925	5,131	5, 131	0	0	5,885
9.	2022	84 , 497	84,497	0	45,095	45,095	1,703	1,703	5,031	5,031	0	0	6,708
10.	2023	95,231	95,231	0	40,578	40,578	1,247	1,247	5,626	5,626	0	0	7,962
11.	2024	96,391	96,391	0	19,272	19,272	225	225	5,423	5,423	0	0	6,569
12.	Totals	XXX	XXX	XXX	464,300	464,300	25,716	25,716	58,915	58,915	0	0	XXX

										1		00	0.4	0.5
			Losses	Unpaid		Defens	e and Cost (	Containment	Unpaid	Adjust	ing and	23	24	25
		Case	Basis	Bulk +	· IBNR	Case	Basis	Bulk +	+ IBNR	Other	Unpaid			
		13	14	15	16	17	18	19	20	21	22	Salvage	Total Net	Number of Claims
		Direct and		Direct and		Direct and		Direct and		Direct and		and Subrog- ation	Losses and Expenses	Outstand- ing Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior	105	105	29	29	0	0	79	79	4	4	0	0	6
2.	2015	851	851	4	4	64	64	2	2	2	2	0	0	3
3.	2016	820	820	6	6	40	40	5	5	8	8	0	0	11
4.	2017	740	740	12	12	27	27	27	27	8	8	0	0	12
5.	2018	2 , 153	2 , 153	152	152	153	153	86	86	16	16	0	0	22
6.	2019	3,428	3,428	385	385	208	208	141	141	30	30	0	0	43
7.	2020	2,701	2,701	493	493	130	130	236	236	23	23	0	0	33
8.	2021	6,397	6,397	1,802	1,802	562	562	679	679	49	49	0	0	70
9.	2022	7,742	7,742	5,302	5,302	531	531	1,318	1,318	114	114	0	0	162
10.	2023	17,366	17,366	12,889	12,889	603	603	3,335	3,335	327	327	0	0	463
11.	2024	16,729	16,729	29,559	29,559	370	370	5,018	5,018	1,205	1,205	0	0	1,708
12.	Totals	59,032	59,032	50,632	50,632	2,689	2,689	10,927	10,927	1,788	1,788	0	0	2,533

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	nce Sheet
		Losses and	d Loss Expense	es Incurred		ed /Premiums [		Nontabula	r Discount			fter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	xxx	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	2015	57,549	57,549	0	85.3	85.3	0.0	0	0	0.0	0	0
3.	2016	68,242	68,242	0	94.2	94.2	0.0	0	0	0.0	0	0
4.	2017	73,310	73,310	0	94.3	94.3	0.0	0	0	0.0	0	0
5.	2018	77,524	77,524	0	93.7	93.7	0.0	0	0	0.0	0	0
6.	2019	69 , 150	69 , 150	0	81.5	81.5	0.0	0	0	0.0	0	0
7.	2020	44,781	44,781	0	55.3	55.3	0.0	0	0	0.0	0	0
8.	2021	56,603	56,603	0	71.2	71.2	0.0	0	0	0.0	0	0
9.	2022	66,838	66,838	0	79.1	79.1	0.0	0	0	0.0	0	0
10.	2023	81,971	81,971	0	86.1	86.1	0.0	0	0	0.0	0	0
11.	2024	77,802	77,802	0	80.7	80.7	0.0	0	0	0.0	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE ALLMERICA FINANCIAL ALLIANCE INSURANCE COMPANY SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

						(ΨΟΟ	U OMITTED	)					
		Pr	emiums Earn	ed			Los	s and Loss Ex	cpense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
V	Vhich				Loss Pa	ayments	Containmer	nt Payments	Payn	nents			Number of
Premi	ums Were				4	5	6	7	8	9		Total Net	Claims
	ned and										Salvage and		Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7	Direct and
In	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	xxx
2.	2015	0	0	0	0	0	0	0	0	0	0	0	0
3.	2016	0	0	0	0	0	0	0	0	0	0	0	0
4.	2017	0	0	0	0	0	0	0	0	0	0	0	0
5.	2018	0	0	0	0	0	0	0	0	0	0	0	0
6.	2019	0	0	0	0	0	0	0	0	0	0	0	0
7.	2020	0	0	0	0	0	0	0		0	0	0	0
8.	2021	0	0	0	0	0	0	0	0	0	0	0	0
9.	2022	0	0	0	0	0	0	0	0	0	0	0	0
10.	2023	0	0	0	0	0	0	0	0	0	0	0	0
11.	2024	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

												23	24	25
				Unpaid			e and Cost C				ng and			
		Case			BNR		Basis		+ IBNR	Other				
		13	14	15	16	17	18	19	20	21	22	Salvage and	Total Net Losses	Number of Claims Outstand-
		Direct		Direct		Direct		Direct		Direct		Subrog-	and	ing
		and		and		and		and		and		ation	Expenses	Direct and
1		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2015	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2016	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	2017	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	2018	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	2019	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	2020	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	2021	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	2022	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	2023	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	2024	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

		ı	<b>-</b>					ı				
			Total			oss Expense F		N1 1 . 1 .		34	Net Balar	
			Loss Expense			ed /Premiums E		Nontabula			Reserves Af	
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	2015	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	2016	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	2017	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	2018	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	2019	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	2020	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	2021	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	2022	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	2023	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	2024	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

## SCHEDULE P - PART 1D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

(\$000 OMITTED)

		Pr	emiums Earn	ed		,	Los	s and Loss Ex	pense Payme	ents			12
	ears in	1	2	3				and Cost		and Other	10	11	
-	/hich				Loss Pa			nt Payments	,	nents			Number of
-	ums Were				4	5	6	7	8	9		Total Net	Claims
-	ned and	l <u>_</u>									Salvage and		Reported
	es Were	Direct and	0.1.1	N (4 O)	Direct and	0.4.4	Direct and	0.1.1	Direct and	0.4.4		(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX	32	32	11	11	1	1	0	0	XXX
2.	2015	1,817	1,817	0	164	164	29	29	132	132	0	0	125
3.	2016	3,731	3,731	0	741	741	86	86	254	254	0	0	239
4.	2017	5,855	5,855	0	1,402	1,402	219	219	345	345	0	0	320
5.	2018	9,448	9,448	0	2,118	2,118	316	316	523	523	0	0	557
6.	2019	14,569	14,569	0	4,514	4,514	393	393	735	735	0	0	734
7.	2020	18,113	18,113	0	4,644	4,644	409	409	777	777	0	0	681
8.	2021	20 , 489	20 , 489	0	6 , 193	6 , 193	758	758	1,090	1,090	0	0	1,037
9.	2022	23,883	23,883	0	5,872	5,872	598	598	1,054	1,054	0	0	1,003
10.	2023	27,402	27,402	0	3,953	3,953	363	363	1,266	1,266	0	0	1,110
11.	2024	33,241	33,241	0	2,794	2,794	182	182	1,264	1,264	0	0	1,076
12.	Totals	XXX	XXX	XXX	32,427	32,427	3,364	3,364	7,442	7,442	0	0	XXX

						5.6						23	24	25
		Case		Unpaid Bulk +	IDND		e and Cost ( Basis	Containment	Unpaid - IBNR		ing and Unpaid			
		13	14	15	16	17	18	19	20	21	22	1		Number
		Direct		Direct		Direct		Direct		Direct		Salvage and Subrog-	Total Net Losses and	of Claims Outstand- ing
		and		and		and		and		and		ation	Expenses	Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior	766	766	72	72	0	0	9	9	157	157	0	0	146
2.	2015	0	0	41	41	0	0	7	7	0	0	0	0	0
3.	2016	0	0	80	80	0	0	15	15	0	0	0	0	0
4.	2017	117	117	137	137	16	16	28	28	6	6	0	0	6
5.	2018	128	128	265	265	0	0	56	56	2	2	0	0	2
6.	2019	2,999	2,999	487	487	85	85	105	105	13	13	0	0	12
7.	2020	331	331	637	637	27	27	165	165	6	6	0	0	6
8.	2021	1,014	1,014	682	682	40	40	268	268	24	24	0	0	22
9.	2022	1,690	1,690	1,100	1,100	72	72	392	392	39	39	0	0	36
10.	2023	1,447	1,447	1,778	1,778	88	88	584	584	77	77	0	0	71
11.	2024	4,574	4,574	5,668	5,668	198	198	1,182	1,182	356	356	0	0	330
12.	Totals	13,065	13,065	10,946	10,946	527	527	2,808	2,808	681	681	0	0	631

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	nce Sheet
		Losses and	d Loss Expense	es Incurred	(Incurre	ed /Premiums E	,	Nontabula	r Discount		Reserves Af	ter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	2015	373	373	0	20.5	20.5	0.0	0	0	0.0	0	0
3.	2016	1, 175	1, 175	0	31.5	31.5	0.0	0	0	0.0	0	0
4.	2017	2,269	2,269	0	38.8	38.8	0.0	0	0	0.0	0	0
5.	2018	3,408	3,408	0	36.1	36.1	0.0	0	0	0.0	0	0
6.	2019	9,332	9,332	0	64.1	64.1	0.0	0	0	0.0	0	0
7.	2020	6,996	6,996	0	38.6	38.6	0.0	0	0	0.0	0	0
8.	2021	10,070	10,070	0	49.1	49.1	0.0	0	0	0.0	0	0
9.	2022	10,816	10,816	0	45.3	45.3	0.0	0	0	0.0	0	0
10.	2023	9,555	9,555	0	34.9	34.9	0.0	0	0	0.0	0	0
11.	2024	16,218	16,218	0	48.8	48.8	0.0	0	0	0.0	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

### Schedule P - Part 1E - Commercial Multiple Peril

## NONE

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence **NONE** 

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made NONE

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

NONE

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

		Pr	emiums Earn	ed		(+++	Los		kpense Payme	ents			12
Ye	ars in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
	/hich				Loss Pa	yments	Containmer	t Payments		nents			Number of
	ıms Were				4	5	6	7	8	9		Total Net	Claims
	ned and										Salvage and		Reported
	es Were	Direct and			Direct and		Direct and		Direct and			(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	xxx	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2.	2015	0	0	0	0	0	0	0	0	0	0	0	0
3.	2016	0	0	0	0	0		0	0	0	0	0	0
4.	2017	0	0	0	0	0	0	0	0	0	0	0	0
5.	2018	0	0	0	0	0	0	0	0	0	0	0	0
6.	2019	0	0	0	0		0			0	0	0	0
7.	2020	0	0	0	0	0		0		0	0	0	0
8.	2021	0	0	0	0	0	0	0	0	0	0	0	0
9.	2022	0	0	0	0	0	0	0	0	0	0	0	0
10.	2023	0	0	0	0	0	0	0	0	0	0	0	0
11.	2024	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

			l neese	Unpaid		Defens	e and Cost (	Containment	Unnaid	Δdiueti	ng and	23	24	25
		Case			· IBNR		Case Basis Bulk + IBNR				Unpaid			
		13	14	15	16	17	18	19	20	21	22	Salvage	Total Net	Number of Claims
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	and Subrog- ation Anticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	
2.	2015	0	0	0	0	0	0	0	0	0	0	0	0	(
3.	2016	0	0	0	0	0	0	0	0	0	0	0	0	(
4.	2017	0	0	0	0	0	0	0	0	0	0	0	0	(
5.	2018	0	0	0	0	0	0	0	0	0	0	0	0	(
6.	2019	0	0	0	0	0	0	0	0	0	0	0	0	
7.	2020	0	0	0	0	0	0	0	0	0	0	0	0	(
8.	2021	0	0	0	0	0	0	0	0	0	0	0	0	
9.	2022	0	0	0	0	0	0	0	0	0	0	0	0	C
10.	2023	0	0	0	0	0	0	0	0	0	0	0	0	C
11.	2024	0	0	0	0	0	0	0	0	0	0	0	0	C
12.	Totals	0	0	0	0	0	0	0	0	0	0	0	0	(

		<u> </u>	Total		Loss and I	oss Expense F	Porcontago	1		34	Net Balar	nco Shoot
		Losses and	d Loss Expense	es Incurred		ed /Premiums E		Nontabula	r Discount	34		ter Discount
		26	27	28	29	30	31	32	33	Inter- Company	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
		Assumed	Ceded	INCL	Assumed	Ceded	INCL	L055	Lxperise	Fercentage	Oripaid	Oripaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	2015	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	2016	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	2017	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	2018	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	2019	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	2020	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	2021	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	2022	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	2023	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	2024	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

# Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made ${f N}$ ${f O}$ ${f N}$ ${f E}$

Schedule P - Part 1I - Special Property (Fire, Allied Lines...) **N O N E** 

#### SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 OMITTED)

Premiums Earned Loss and Loss Expense Paym								cpense Payme	ents			12	
Ye	ears in	1	2	3				and Cost	Adjusting	and Other	10	11	
	/hich				Loss Pa			nt Payments		nents			Number of
	ıms Were				4	5	6	7	8	9		Total Net	Claims
_	ned and										Salvage and		Reported
	es Were	Direct and			Direct and		Direct and		Direct and		-	(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	xxx	XXX	XXX	(2)	(2)	0	0	0	0	0	0	XXX
2.	2015	50,329	50 , 329	0	30,296	30,296	20	20	8 , 387	8 , 387	0	0	22,259
3.	2016	54,538	54,538	0	33,810	33,810	3	3	9,245	9,245	0	0	23,942
4.	2017	59 , 180	59 , 180	0	37,583	37,583	7	7	9,047	9,047	0	0	25,671
5.	2018	63,625	63,625	0	40,784	40,784	1	1	8,668	8,668	0	0	28,555
6.	2019	66,310	66,310	0	40,390	40,390	15	15	8,723	8,723	0	0	27,315
7.	2020	62,321	62,321	0	31,612	31,612	8	8	7,589	7,589	0	0	18,851
8.	2021	61,336	61,336	0	36,301	36,301	7	7	6,968	6,968	0	0	19,597
9.	2022	68,972	68,972	0	53,361	53,361	9	9	8,001	8,001	0	0	24,561
10.	2023	83,481	83,481	0	62,266	62,266	17	17	9,144	9,144	0	0	26,520
11.	2024	93,995	93,995	0	55,907	55,907	8	8	8,781	8,781	0	0	21,503
12.	Totals	XXX	XXX	XXX	422,310	422,310	95	95	84,553	84,553	0	0	XXX

												23	24	25
		0	Losses		IDNID		e and Cost (				ing and			
		Case 13		Bulk +	16	17	Basis 18	19	- IBNR	Otner 21	Unpaid 22			Number
		Direct and Assumed	14 Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	Salvage and Subrog- ation Anticipated	Total Net Losses and Expenses Unpaid	of Claims Outstanding Direct and Assumed
		Assumed	Ceded	Assumed	Ceded	Assumed	Cedeu	Assumed	Ceded	Assumed	Cedeu	Anticipated	Oripaid	Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2015	3	3	0	0	0	0	0	0	0	0	0	0	1
3.	2016	0	0	(1)	(1)	0	0	0	0	0	0	0	0	0
4.	2017	0	0	1	1	0	0	0	0	0	0	0	0	0
5.	2018	0	0	(3)	(3)	0	0	0	0	0	0	0	0	0
6.	2019	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	2020	0	0	(9)	(9)	0	0	0	0	0	0	0	0	0
8.	2021	3	3	(20)	(20)	0	0	1	1	0	0	0	0	1
9.	2022	2	2	(56)	(56)	0	0	2	2	1	1	0	0	2
10.	2023	9	9	(542)	(542)	0	0	15	15	1	1	0	0	3
11.	2024	2,415	2,415	(102)	(102)	0	0	78	78	434	434	0	0	1,072
12.	Totals	2,432	2,432	(734)	(734)	0	0	97	97	437	437	0	0	1,079

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	nce Sheet
		Losses and	d Loss Expense	es Incurred		ed /Premiums E		Nontabula	r Discount			fter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	xxx	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	2015	38,706	38,706	0	76.9	76.9	0.0	0	0	0.0	0	0
3.	2016	43,057	43,057	0	78.9	78.9	0.0	0	0	0.0	0	0
4.	2017	46,638	46,638	0	78.8	78.8	0.0	0	0	0.0	0	0
5.	2018	49,449	49,449	0	77.7	77.7	0.0	0	0	0.0	0	0
6.	2019	49,128	49, 128	0	74.1	74.1	0.0	0	0	0.0	0	0
7.	2020	39,201	39,201	0	62.9	62.9	0.0	0	0	0.0	0	0
8.	2021	43,260	43,260	0	70.5	70.5	0.0	0	0	0.0	0	0
9.	2022	61,321	61,321	0	88.9	88.9	0.0	0	0	0.0	0	0
10.	2023	70,911	70,911	0	84.9	84.9	0.0	0	0	0.0	0	0
11.	2024	67,521	67,521	0	71.8	71.8	0.0	0	0	0.0	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

## Schedule P - Part 1K - Fidelity/Surety NONE

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

NONE

Schedule P - Part 1M - International

NONE

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

NONE

Schedule P - Part 10 - Reinsurance - Nonproportional Assumed Liability

NONE

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

NONE

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

NONE

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made NONE

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

NONE

Schedule P - Part 1T - Warranty **N O N E** 

Schedule P - Part 1U - Pet Insurance Plans **N O N E** 

Schedule P - Part 2A - Homeowners/Farmowners

NONE

Schedule P - Part 2B - Private Passenger Auto Liability/Medical **NONE** 

Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical **N O N E** 

Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation)

#### NONE

Schedule P - Part 2E - Commercial Multiple Peril

#### NONE

Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence

#### NONE

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

#### NONE

Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

#### NONE

Schedule P - Part 2H - Section 1 - Other Liability - Occurrence

#### NONE

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

#### NONE

Schedule P - Part 2I - Special Property

#### NONE

Schedule P - Part 2J - Auto Physical Damage

### NONE

Schedule P - Part 2K - Fidelity/Surety

#### NONE

Schedule P - Part 2L - Other (Including Credit, Accident and Health)

#### NONE

Schedule P - Part 2M - International

#### NONE

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property

#### NONE

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

#### NONE

# Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines **NONE**

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence **NONE** 

Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made NONE

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 2T - Warranty
NONE

Schedule P - Part 2U - Pet Insurance Plans **N O N E** 

#### SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

		CUMUL	ATIVE PAID I	NET LOSSES	AND DEFEN			MENT EXPE	NSES REPOR	RTED AT YEA	AR END	11	12
Ve	ars in	1	2	3	1	(\$000 OI	WITTED) 6	7	8	9	10	Number of Claims	Number of Claims
_	/hich			3	7	3	O	,	O	3	10	Closed	Closed
Lo	osses											With	Without
I .	Vere											Loss	Loss
Inc	curred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	Payment	Payment
1.	Prior	000											
2.	2015												
3.	2016	XXX											
4.	2017	XXX	XXX					<b></b>					
5.	2018	XXX	XXX	XXX	Α			<b>\</b>					
6.	2019	XXX	XXX	XXX	X								
7.	2020	XXX	XXX	XXX	XXX		<b>47</b>						
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

1.	Prior	000	0	0	0	0	0	0	0	0	0	1,212	0
2.	2015	0	0	0	0	0	0	0	0	0	0	7,045	3,067
3.	2016	XXX	0	0	0	0	0	0	0	0	0	7,401	3 , 138
4.	2017	XXX	XXX	0	0	0	0	0	0	0	0	7,486	3,115
5.	2018	XXX	XXX	XXX	0	0	0	0	0	0	0	7,237	3, 150
6.	2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	6,580	3 , 136
7.	2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	3,920	1,785
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	4,115	1,700
9.	2022	XXX	0	0	0	4,742	1,804						
10.	2023	XXX	0	0	4,689	2,810							
11.	2024	XXX	0	2,889	1,972								

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

1.	Prior	000									 	
2.	2015										 	
3.	2016	XXX									 	
4.	2017	XXX	XXX								 	
5.	2018	XXX	XXX	XXX			······				 	
6.	2019	XXX	XXX	XXX	XXX			<b></b>			 	
7.	2020	XXX	XXX	XXX	. X	XX					 	
8.	2021	XXX	XXX	XXX	X	XX	🕸				 	
9.	2022	XXX	XXX	XXX	XXX		XXX	X			 	
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		 	
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

				(=210=	.0D10 E	,		• • • • • • • • • • • • • • • • • • • •		,			
1.	Prior	000	0	0	0	0	0	0	0	0	0	338	0
2.	2015	0	0	0	0	0	0	0	0	0	0	41	84
3.	2016	XXX	0	0	0	0	0	0	0	0	0	165	74
4.	2017	XXX	XXX	0	0	0	0	0	0	0	0	228	86
5.	2018	XXX	XXX	XXX	0	0	0	0	0	0	0	341	214
6.	2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	497	225
7.	2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	444	231
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	675	340
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	579	388
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	627	412
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	426	320

#### SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1.	Prior	000									 	
2.	2015										 	
3.	2016	XXX									 	
4.	2017	XXX	XXX								 	
5.	2018	XXX	XXX	XXX							 	
6.	2019	XXX	XXX	XXX	XXX			<b></b>			 	
7.	2020	XXX	XXX	XXX	.\ X	XX	1				 	
8.	2021	XXX	XXX	XXX	X	XX	(XX)				 	
9.	2022	XXX	XXX	XXX	XXX		XXX	X			 	
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		 	
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE P	- PART 3F - SECTION 1	<ul> <li>MEDICAL PROFESSIONAL</li> </ul>	LIABILITY - OCCURRENCE

		CUMUL	ATIVE PAID I	NET LOSSES	AND DEFEN			MENT EXPE	NSES REPOR	RTED AT YEA	AR END	11	12
						(\$000 OI	MITTED)					Number of	Number of
-	ars in	1	2	3	4	5	6	7	8	9	10	Claims	Claims
W	/hich											Closed	Closed
	sses											With	Without
V	Vere											Loss	Loss
Inc	curred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	Payment	Payment
1.	Prior	000											
2.	2015												
3.	2016	XXX											
4.	2017	XXX	XXX		<b></b>			<b></b>					
5.	2018	XXX	XXX	XXX				<b></b>					
6.	2019	XXX	XXX	XXX	X								
7.	2020	XXX	XXX	XXX	XXX		<b>5</b>						
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

1.	Prior	000									 	
2.	2015										 	
3.	2016	XXX									 	
4.	2017	XXX	XXX								 	
5.	2018	XXX	XXX	XXX								
6.	2019	XXX	XXX	XXX	XXX		<b></b>	ţ			 	
7.	2020	XXX	XXX	XXX	. X	XX	\ \	<b></b>			 	
8.	2021	XXX	XXX	XXX	X	XX	\infty				 	
9.	2022	XXX	XXX	XXX	xxx		XXX	X			 	
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		 	
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

									' /			
1.	Prior	000									 XXX	XXX
2.	2015										 XXX	XXX
3.	2016	XXX									 XXX	XXX
4.	2017	XXX	XXX								 XXX	XXX
5.	2018	XXX	XXX	XXX							 XXX	XXX
6.	2019	XXX	XXX	XXX	XXX		<b></b>	·····			 XXX	XXX
7.	2020	XXX	XXX	XXX	Λ (X	xx	\ \ \ \	<b>\</b>			 XXX	XXX
8.	2021	XXX	XXX	XXX	X	XX	\infty				 XXX	XXX
9.	2022	XXX	XXX	XXX	XX		.XXX	X			 XXX	XXX
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		 XXX	XXX
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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

1.	Prior	000									 	
2.	2015										 	
3.		VVV										
4.	2017	XXX	XXX								 	
5.	2018	XXX	XXX	XXX							 	
6.	2019	XXX	XXX	XXX	XXX		<b></b>	<b></b>			 	
7.	2020	XXX	XXX	XXX	.X X	XX	1				 	
8.	2021	XXX	XXX	XXX	<b>X</b>	×x	🗴`				 	
9.	2022	XXX	XXX	XXX	XXX		<b>YY</b> Y	X			 	
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		 	
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

				. ,					<i>,</i>		 	
1.	Prior	000									 	
2.	2015										 	
3.	2016	XXX									 	
4.	2017	XXX	XXX								 	
5.	2018	XXX	XXX	XXX							 	
6.	2019	XXX	XXX	XXX	XXX			<b></b>			 	
7.	2020	XXX	XXX	XXX	. X		\	<b></b>			 	
8.	2021	XXX	XXX	XXX	X	XX	🗱`				 	
9.	2022	XXX	XXX	XXX	XXX		<b>YY</b> Y	\ X			 	
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		 	
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

				<b>—/</b> \	VIII WOR	,	,,,o <u> </u>	,	·	• ,			
		CUMUL	ATIVE PAID I	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	R END	11	12
						(\$000 OI	MITTED)					Number of	Number of
	ears in	1	2	3	4	5	6	7	8	9	10	Claims	Claims
	Vhich											Closed	Closed
	osses											With	Without
	Nere .	0045	0040	004=	0040	0040	0000	2004		0000		Loss	Loss
Inc	curred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	Payment	Payment
1.	Prior	000										XXX	XXX
2.	2015											XXX	XXX
3.	2016	XXX										XXX	XXX
4.	2017	XXX	XXX				<b></b>	<b></b>				XXX	XXX
5.	2018	XXX	XXX	XXX	<b></b>		1	<b></b>				XXX	XXX
6.	2019	XXX	XXX	XXX	X							XXX	XXX
7.	2020	XXX	XXX	XXX	XX		<b>47</b>					XXX	XXX
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

#### SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1.	Prior	000	0	0	0	0	0	0	0	0	0	0	0
2.	2015	0	0	0	0	0	0	0	0	0	0	19,691	2,567
3.	2016	XXX	0	0	0	0	0	0	0	0	0	21,344	2,598
4.	2017	XXX	XXX	0	0	0	0	0	0	0	0	22,993	2,678
5.	2018	XXX	XXX	XXX	0	0	0	0	0	0	0	25,537	3,018
6.	2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	24 , 189	3, 126
7.	2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	17,014	1,837
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	17,557	2,039
9.	2022	XXX	0	0	0	21,234	3,325						
10.	2023	XXX	0	0	22,884	3,633							
11.	2024	XXX	0	17,831	2,600								

#### SCHEDULE P - PART 3K - FIDELITY/SURETY

1.	Prior	000									 XXX	XXX
2.	2015										 XXX	XXX
3.	2016	XXX									 XXX	XXX
4.	2017	XXX	XXX								 XXX	XXX
5.	2018	XXX	XXX	XXX							 XXX	XXX
6.	2019	XXX	XXX	XXX	XXX			<b></b>			 XXX	XXX
7.	2020	XXX	XXX	XXX	.\ X		1	<b></b>			 XXX	XXX
8.	2021	XXX	XXX	XXX	<b>x</b>		\infty				 XXX	XXX
9.	2022	XXX	XXX	XXX	XXX		XXX	K			 XXX	XXX
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		 XXX	XXX
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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

	•	· · · — — • ·		<i>,</i>	. •	(		· • · · · – –	,,		,	- <i>,</i>	
1.	Prior	000										XXX	XXX
2.	2015											XXX	XXX
3.	2016	XXX										XXX	XXX
4.	2017	XXX	XXX									XXX	XXX
5.	2018	XXX	XXX	XXX								XXX	XXX
6.	2019	XXX	XXX	XXX	XXX		<b></b>					XXX	XXX
7.	2020	XXX	XXX	XXX	.X X		1					XXX	XXX
8.	2021	XXX	XXX	XXX	X	XX	\infty					XXX	XXX
9.	2022	XXX	XXX	XXX	XXX		XXX	\ K				XXX	XXX
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

#### **SCHEDULE P - PART 3M - INTERNATIONAL**

1.	Prior	000									 XXX	XXX
2.	2015										 XXX	XXX
3.	2016	XXX									 XXX	XXX
4.	2017	XXX	XXX								 XXX	XXX
5.	2018	XXX	XXX	XXX							 XXX	XXX
6.	2019	XXX	XXX	XXX	XXX						 XXX	XXX
7.	2020	XXX	XXX	XXX	X.	xx		<b></b>			 XXX	XXX
8.	2021	XXX	XXX	XXX	<b>x</b>	XX	🟻				 XXX	XXX
9.	2022	XXX	XXX	XXX	XXX		XXX	K			 XXX	XXX
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		 XXX	XXX
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 30 - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence

NONE

Schedule P - Part 3R - Section 2 - Product Liability - Claims-Made **NONE** 

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 3T - Warranty
NONE

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

Schedule P - Part 4A - Homeowners/Farmowners **NONE** 

Schedule P - Part 4B - Private Passenger Auto Liability/Medical

NONE

Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical NONE

Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation) **NONE** 

Schedule P - Part 4E - Commercial Multiple Peril

NONE

Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence

NONE

Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made

NONE

Schedule P - Part 4G - Special Liability

NONE

Schedule P - Part 4H - Section 1 - Other Liability - Occurrence

NONE

Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made

NONE

Schedule P - Part 4I - Special Property

NONE

Schedule P - Part 4J - Auto Physical Damage

NONE

Schedule P - Part 4K - Fidelity/Surety

NONE

Schedule P - Part 4L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 4M - International

NONE

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence

NONE

Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made

NONE

### Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty

#### NONE

Schedule P - Part 4T - Warranty
NONE

Schedule P - Part 4U - Pet Insurance Plans **N O N E** 

Schedule P - Part 5A - Homeowners/Farmowners - Section 1 **NONE** 

Schedule P - Part 5A - Homeowners/Farmowners - Section 2 **NONE** 

Schedule P - Part 5A - Homeowners/Farmowners - Section 3 **NONE** 

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

			CUMULA	ATIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT	DIRECT AND AS	SSUMED AT YE	AR END	
	in Which	1	2	3	4	5	6	7	8	9	10
Were	emiums e Earned Losses										
	Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior	2,452	660	281	113	75	35	23	17	5	3
2.	2015	4,821	6,522	6,813	6,917	6,971	7,015	7,035	7,039	7,042	7,045
3.	2016	XXX	4,871	6,790	7, 129	7,258	7,309	7,352	7,386	7,393	7,401
4.	2017	XXX	XXX	4,985	6,886	7,176	7,307	7,381	7,439	7,474	7,486
5.	2018	XXX	XXX	XXX	4,763	6,580	6,922	7,066	7,155	7,208	7,237
6.	2019	XXX	XXX	XXX	XXX	4,331	6,049	6,326	6,467	6,534	6,580
7.	2020	XXX	XXX	XXX	XXX	XXX	2,691	3,647	3,801	3,883	3,920
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	2,471	3,758	3,997	4,115
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,857	4,481	4,742
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3, 155	4,689
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,889

#### **SECTION 2**

							_				
				NUMBER	R OF CLAIMS O	UTSTANDING I	DIRECT AND AS	SSUMED AT YE	AR END		
	in Which	1	2	3	4	5	6	7	8	9	10
_	emiums										
	e Earned										
	Losses	2045	0040	0047	0040	2040	2020	2004	2000	2000	2004
vvere	Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior	855	407	184	98	49	30	22	11	7	6
2.	2015	1,850	422	178	98	48	23	11	6	5	3
3.	2016	XXX	2,052	478	215	114	69	42	19	14	11
4.	2017	XXX	XXX	2,021	447	233	137	91	52	21	12
5.	2018	XXX	XXX	XXX	1,984	535	277	141	69	37	22
6.	2019	XXX	XXX	XXX	XXX	1,948	460	230	131	82	43
7.	2020	XXX	XXX	XXX	XXX	XXX	1,028	273	145	66	33
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	1,261	348	174	70
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,514	366	162
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,824	463
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,708

					U		<b>.</b>				
				CUMULATIVE	NUMBER OF (	CLAIMS REPOR	TED DIRECT A	ND ASSUMED A	AT YEAR END		
Prei	in Which	1	2	3	4	5	6	7	8	9	10
and	Earned Losses Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
were	incurred	2015	2016	2017	2016	2019	2020	2021	2022	2023	2024
1.	Prior	1,356	341	139	52	42	24	16	7	1	
2.	2015	8,862	9,862	9,997	10,060	10,081	10 , 102	10,111	10,112	10,114	10,11
3.	2016	XXX	9,082	10,258	10,418	10,488	10,504	10,524	10,541	10,544	10,55
4.	2017	XXX	XXX	9,119	10,317	10,463	10,535	10,572	10,597	10,609	10,6
5.	2018	XXX	XXX	XXX		10 , 105	10,267	10,330	10,364	10,390	10,40
6.	2019	XXX	XXX	XXX	XXX	8,497	9,512	9,649	9,712	9,743	9,75
7.	2020	XXX	XXX	XXX	XXX	XXX	5,044	5,627	5,692	5,722	5,73
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	4,846	5,713	5,836	5,88
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,445	6,560	6,70
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,922	7,96
11	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6 56

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

			CUMULA	ATIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT	DIRECT AND AS	SSUMED AT YE	AR END	
	in Which	1	2	3	4	5	6	7	8	9	10
	miums										
	Earned Losses										
	Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
110.0		20.0	20.0	2011	20.0	20.0					
1.	Prior	6	0	0	0	0	0	0	0	0	0
2.	2015	0	0	0	0	0	0	0	0	0	0
3.	2016	XXX	0	0	0	0	0	0	0	0	0
4.	2017	XXX	XXX	0	0	0	0	0	0	0	0
5.	2018	XXX	XXX	XXX	0	0	0	0	0	0	0
6.	2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7.	2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

#### **SECTION 2**

					3	ECTION !	_				
				NUMBER	R OF CLAIMS C	OUTSTANDING I	DIRECT AND AS	SSUMED AT YE	AR END		
Years in Premi Were E and Lo	iums arned	1	2	3	4	5	6	7	8	9	10
Were In		2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
	Prior										
3. 2	2016	XXX									
4. 2	2017	XXX	XXX								
5. 2	2018	XXX	XXX	××	<b>V</b>						
6. 2	2019	XXX	XXX	XX	. XXX						
7. 2	2020	XXX	XXX	XXX	XXX	XXX					
8. 2	2021	XXX	XXX	XXX	XXX	XXX	XXX		•		
9. 2	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	•		
10. 2	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

						LC HON					
					NUMBER OF (	CLAIMS REPOR		ND ASSUMED A	AT YEAR END	_	
Prer Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior										
2.	2015										
3.	2016	XXX									
4.	2017	XXX	XXX				<b>\</b>				
5.	2018	XXX	XXX	××	\.						
			XXX		.xxx.						
7.		XXX			XXX	XXX					
8.			XXX		XXX		XXX				
9.	2022				XXX	XXX	XXX		XXX		
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

# SCHEDULE P - PART 5D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION) SECTION 1

	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END													
			CUMULA	ATIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT I	DIRECT AND AS	SSUMED AT YE	AR END				
Years	in Which	1	2	3	4	5	6	7	8	9	10			
Pre	emiums													
Were	e Earned													
	Losses													
Were	Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024			
1.	Prior	35	15	9	60	8	160	23	16	45	2			
2.	2015	24	36	38	38	41	41	41	41	41	41			
3.	2016	XXX	91	147	156	163	164	165	165	165	165			
4.	2017	XXX	XXX	132	192	211	216	222	223	223	228			
5.	2018	XXX	XXX	XXX	176	287	311	326	335	341	341			
6.	2019	XXX	XXX	XXX	XXX	238	413	468	491	493	497			
7.	2020	XXX	XXX	XXX	XXX	XXX	208	379	427	438	444			
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	274	529	629	675			
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	288	516	579			
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	401	627			
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	426			

#### **SECTION 2**

					3	ECTION !	_				
				NUMBE	R OF CLAIMS O	UTSTANDING I	DIRECT AND AS	SSUMED AT YE	AR END		
Pre Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior	270	255	249	277	358	203	174	191	147	146
2.	2015	17	6	4	2	0	0	0	0	0	0
3.	2016	XXX	59	16	6	0	0	0	0	0	0
4.	2017	XXX	XXX	91	37	20	15	9	8	8	6
5.	2018	XXX	XXX	XXX	121	47	28	17	6	2	2
6.	2019	XXX	XXX	XXX	XXX	221	83	37	17	16	12
7.	2020	XXX	XXX	XXX	XXX	XXX	231	76	20	9	6
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	346	133	48	22
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	301	92	36
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	269	71
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	330

					3	ECHON.	၁				
				CUMULATIVE	NUMBER OF C	CLAIMS REPOR	TED DIRECT AI	ND ASSUMED A	AT YEAR END		
Pre Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1.	Prior	3	0	3	88	89	6	(6)	32	1	1
2.	2015	114	121	124	124	125	125	125	125	125	125
3.	2016	XXX	202	233	235	237	238	239	239	239	239
4.	2017	XXX	XXX	266	309	314	315	317	317	317	320
5.	2018	XXX	XXX	XXX	452	532	546	555	555	557	557
6.	2019	XXX	XXX	XXX	XXX	605	708	725	731	732	734
7.	2020	XXX	XXX	XXX	XXX	XXX	575	662	673	676	681
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	808	978	1,013	1,037
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	848	986	1,003
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	998	1,110
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,076

Schedule P - Part 5E - Commercial Multiple Peril - Section 1

NONE

Schedule P - Part 5E - Commercial Multiple Peril - Section 2

NONE

Schedule P - Part 5E - Commercial Multiple Peril - Section 3 **N O N E** 

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A **NONE** 

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

NONE

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A NONE

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B **NONE** 

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B **NONE** 

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B **NONE** 

Schedule P - Part 5H - Other Liability - Occurrence - Section 1A **NONE** 

Schedule P - Part 5H - Other Liability - Occurrence - Section 2A

NONE

Schedule P - Part 5H - Other Liability - Occurrence - Section 3A NONE

Schedule P - Part 5H - Other Liability - Claims-Made - Section 1B **NONE** 

Schedule P - Part 5H - Other Liability - Claims-Made - Section 2B NONE

# Schedule P - Part 5H - Other Liability - Claims-Made - Section 3B NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 1A **NONE** 

Schedule P - Part 5R - Products Liability - Occurrence - Section 2A NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 3A NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B **NONE** 

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B NONE

Schedule P - Part 5T - Warranty - Section 1 **NONE** 

Schedule P - Part 5T - Warranty - Section 2 **N O N E** 

Schedule P - Part 5T - Warranty - Section 3 **N O N E** 

### SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL SECTION 1

Υe	ears in Which		CUMU	LATIVE PREM	IIUMS EARNE	ED DIRECT A	ND ASSUMED	AT YEAR E	ND (\$000 OMI	TTED)		11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	Vere Earned											Year
6	and Losses											Premiums
W	/ere Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	Earned
1.	Prior	0	0	0	0	0	0	0	0	0	0	0
2.	2015	0	0	0	0	0	0	0	0	0	0	0
3.	2016	XXX	0	0	0	0	0	0	0	0	0	0
4.	2017	XXX	XXX	0	0	0	0	0	0	0	0	0
5.	2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6.	2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7.	2020	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13.	Earned											
	Premiums											
	(Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

#### **SECTION 2**

					_							
Ye	ars in Which			CUMULATI	VE PREMIUM	S EARNED C	EDED AT YEA	AR END (\$000	OMITTED)			11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	ere Earned											Year
á	and Losses											Premiums
W	ere Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	Earned
1.	Prior	0	0	0	0	0	0	0	0	0	0	0
2.	2015	0	0	0	0	0	0	0	0	0	0	0
3.	2016	XXX	0	0	0	0	0	0	0	0	0	0
4.	2017	XXX	XXX	0	0	0	0	0	0	0	0	0
5.	2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6.	2019	XXX	XXX	xxx	XXX	0	0	0	0	0	0	0
7.	2020	XXX	XXX	xxx	XXX	XXX	0	0	0	0	0	0
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10.	2023	XXX	XXX	xxx	XXX	XXX	XXX	xxx	XXX	0	0	0
11.	2024	XXX	XXX	xxx	XXX	XXX	XXX	xxx	XXX	XXX	0	0
12.	Totals	XXX	XXX	xxx	XXX	XXX	XXX	xxx	XXX	XXX	XXX	0
13.	Earned											
	Premiums											
	(Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

# SCHEDULE P - PART 6D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION) SECTION 1

Υe	ears in Which		CUMU	LATIVE PREM	MIUMS EARNI	ED DIRECT A	ND ASSUME	O AT YEAR EN	ND (\$000 OMI	TTED)		11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	Vere Earned											Year
	and Losses											Premiums
W	ere Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	Earned
1.	Prior	11	(9)	0	0	0	0	0	0	0	0	0
2.	2015	1,807	1,898	1,881	1,881	1,881	1,881	1,881	1,881	1,881	1,881	0
3.	2016	XXX	3,649	3,791	3,769	3,769	3,770	3,770	3,770	3,770	3,770	0
4.	2017	XXX	XXX	5,730	5,974	5,993	5,995	5,995	5,995	5,995	5,995	0
5.	2018	XXX	XXX	xxx	9,226	9,898	9,876	9,876	9,875	9,872	9,872	0
6.	2019	XXX	XXX	XXX	XXX	13,879	14,318	14, 151	14 , 140	14 , 128	14,128	0
7.	2020	XXX	XXX	XXX	XXX	XXX	17,691	17,762	17,767	17,755	17,753	(3)
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	20,585	21,769	21,810	21,799	(11)
9.	2022	XXX	XXX	xxx	XXX	XXX	XXX	XXX	22,706	24,719	24,866	146
10.	2023	XXX	XXX	xxx	XXX	XXX	XXX	XXX	XXX	25,375	28,090	2,716
11.	2024	XXX	XXX	xxx	XXX	XXX	XXX	XXX	XXX	XXX	30,393	30,393
12.	Totals	XXX	XXX	XXX	XXX	xxx	XXX	XXX	XXX	xxx	xxx	33,241
13.	Earned Premiums											
	(Sch P-Pt. 1)	1,817	3,731	5,855	9,448	14,569	18,113	20,489	23,883	27,402	33,241	XXX

SECTION 2												
Ye	ears in Which			CUMULATI	VE PREMIUM	S EARNED C	EDED AT YEA	AR END (\$000	OMITTED)			11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	Vere Earned											Year
	and Losses											Premiums
V	/ere Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	Earned
1.	Prior	11	(9)	0	0	0	0	0	0	0	0	0
2.	2015	1,807	1,898	1,881	1,881	1,881	1,881	1,881	1,881	1,881	1,881	0
3.	2016	XXX	3,649	3,791	3,769	3,769	3,770	3,770	3,770	3,770	3,770	0
4.	2017	xxx	xxx	5,730	5,974	5,993	5,995	5,995	5,995	5,995	5,995	0
5.	2018	xxx	xxx	XXX	9,226	9,898	9,876	9,876	9,875	9,872	9,872	0
6.	2019	xxx	xxx	xxx	XXX	13,879	14,318	14 , 151	14 , 140	14 , 128	14, 128	0
7.	2020	xxx	xxx	xxx	XXX	xxx	17,691	17,762	17,767	17,755	17,753	(3)
8.	2021	xxx	xxx	XXX	xxx		xxx	20,585	21,769	21,810	21,799	(11)
9.	2022	xxx	xxx	xxx	XXX	xxx	xxx	xxx	22.706	24,719	24.866	146
10.	2023	xxx	xxx	xxx	XXX	xxx	xxx	xxx	xxx	25 . 375	28 . 090	2.716
11	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30.393	30,393
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33.241
13.	Earned	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	50,211
10.	Premiums											
	(Sch P-Pt. 1)	1,817	3,731	5,855	9,448	14,569	18,113	20,489	23,883	27,402	33,241	XXX

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

Υe	ars in Which		CUMU	LATIVE PREM	MIUMS EARNE	ED DIRECT A	ND ASSUMED	O AT YEAR E	ND (\$000 OMI	TTED)		11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	/ere Earned											Year
6	and Losses											Premiums
W	ere Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	Earned
1.	Prior											
2.	2015											
3.	2016	XXX										
4.	2017	XXX	XXX									
5.	2018	XXX	XXX									
6.	2019	XXX	XXX	,	XX							
7	2020	XXX	XXX		××	Y						
8	2021	XXX	XXX		XX XX	····· 🔾						
9	2022	XXX	XXX		XXX		3					
		XXX	XXX			XXX	XX					
10.	2023			XXX	XXX			XXX	XXX			
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned											
	Premiums											
	(Sch P-Pt. 1)											XXX

#### **SECTION 2**

					•		<b>1</b>					
Ye	ears in Which			CUMULATI	VE PREMIUM	S EARNED C	EDED AT YEA	AR END (\$000	OMITTED)			11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	Vere Earned											Year
	and Losses											Premiums
V	/ere Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	Earned
1.	Prior											
2.	2015											
3.	2016	XXX										
4.	2017	xxx	XXX									
5.	2018	xxx	xxx									
6.	2019	xxx	xxx		xx							
7	2020	XXX			XX	X						
8	2021	XXX			XX	×						
9	2022	XXX		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	XXX	<b>X</b>	×					
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2024	XXX	XXX	XXX		XXX		XXX		~~~		
11.								XXX				
12.	Totals		XXX	****	****	****	****	****	****	XXX	****	
13.	Earned											
	Premiums (Sch P-Pt. 1)											xxx
	(SCn P-Pt. 1)											XXX

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

Υe	ears in Which		CUMU	LATIVE PREM	IIUMS EARNI	ED DIRECT A	ND ASSUME	O AT YEAR EI	ND (\$000 OMI	TTED)		11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	Vere Earned											Year
	and Losses											Premiums
W	/ere Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	Earned
1.	Prior	0	0	0	0	0	0	0	0	0	0	0
2.	2015	0	0	0	0	0	0	0	0	0	0	0
3.	2016	XXX	0	0	0	0	0	0	0	0	0	0
4.	2017	XXX	XXX	0	0	0	0	0	0	0	0	0
5.	2018	XXX	xxx	XXX	0	0	0	0	0	0	0	0
6.	2019	XXX	xxx	XXX	XXX	0	0	0	0	0	0	0
7.	2020	XXX	xxx	XXX	XXX	XXX	0	0	0	0	0	0
8.	2021	XXX	xxx	XXX	XXX	XXX	XXX	0	0	0	0	0
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	xxx	0	0	0	0
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12.	Totals	XXX	XXX		= =			XXX			XXX	0
13.	Earned		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
10.	Premiums											
	(Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

#### SECTION 2A

					S	ECHON	2A					
Υe	ars in Which			CUMULATI	VE PREMIUM	S EARNED C	EDED AT YEA	AR END (\$000	OMITTED)			11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
	/ere Earned											Year
	and Losses											Premiums
W	ere Incurred	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	Earned
1.	Prior	0	0	0	0	0	0	0	0	0	0	0
2.	2015	0	0	0	0	0	0	0	0	0	0	0
3.	2016	XXX	0	0	0	0	0	0	0	0	0	0
4.	2017	XXX	XXX	0	0	0	0	0	0	0	0	0
5.	2018	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6.	2019	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7.	2020	XXX	XXX	xxx	XXX	XXX	0	0	0	0	0	0
8.	2021	XXX	XXX	xxx	XXX	XXX	XXX	0	0	0	0	0
9.	2022	xxx	xxx	xxx	XXX	xxx	xxx	xxx	0	0	0	0
10.	2023	xxx	xxx	xxx	XXX	xxx	xxx	xxx	xxx	0	0	0
11.	2024	xxx	xxx	XXX	XXX	XXX	xxx	XXX	XXX	xxx	0	0
12.	Totals	xxx	xxx	xxx	XXX	xxx	xxx	xxx	XXX	xxx	xxx	0
13.	Earned											
	Premiums											
	(Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B **NONE** 

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B **N O N E** 

Schedule P - Part 6M - International - Section 1

NONE

Schedule P - Part 6M - International - Section 2

NONE

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1 **NONE** 

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2 **NONE** 

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

NONE

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2 **NONE** 

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

NONE

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

NONE

Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B **NONE** 

Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B **NONE** 

Schedule P - Part 7A - Section 1 - Primary Loss Sensitive Contracts **NONE** 

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

NONE

# Schedule P - Part 7A - Section 3 - Primary Loss Sensitive Contracts NONE

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

NONE

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts **NONE** 

Schedule P - Part 7B - Section 1 - Reinsurance Loss Sensitive Contracts **N O N E** 

Schedule P - Part 7B - Section 2 - Reinsurance Loss Sensitive Contracts **NONE** 

Schedule P - Part 7B - Section 3 - Reinsurance Loss Sensitive Contracts **NONE** 

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts **N O N E** 

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts **N O N E** 

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts **NONE** 

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts **NONE** 

#### **SCHEDULE P INTERROGATORIES**

1.	The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from D Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to the contract of the contra		)R) provisions in M	edical
1.1	Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "ye questions:	or at no additional cost?		[ X ]
1.2	What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsev dollars)?	vhere in this statement (in	i	0
1.3	Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65?		Yes [ ] No	[ ]
1.4	Does the company report any DDR reserve as loss or loss adjustment expense reserve?		. Yes [ ] No	[ ]
1.5	If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2?	the Underwriting and Yes	; [ ] No [ ]	N/A [
1.6	If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the follow in Schedule P:	ing table corresponding to where	these reserves are	reported
		DDR Reserve I Schedule P, Part 1F, Medic Column 24: Total Net Losse	al Professional Liab	
	Years in Which Premiums Were Earned and Losses Were Incurred	1 Section 1: Occurrence	2 Section 2: Claims	-Made
	Prior	0		0
	2015			
	2016			
	2017       2018			
	2019			
	2020			
	2021			
	2022			
	2023			
	Totals	0		0 0
3.	The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment experience of the state of the	expenses (now reported as " in this statement?  es were incurred based on the expense between companies in a loss amounts and the claim rance contract. For Adjusting and vailable, Adjusting and Other gatory 7, below. Are they so		
4.	Do any lines in Schedule P include reserves that are reported gross of any discount to present value of futur net of such discounts on Page 10?			[ X ]
	If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular 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 States filed.	discounting. Work papers		
5.	What were the net premiums in force at the end of the year for:			
	(in thousands of dollars) 5.1 Fideli	ity		0
	5.2 Suret	ty		0
6.	Claim count information is reported per claim or per claimant (Indicate which).	р	er claimant	
7.1	If not the same in all years, explain in Interrogatory 7.  The information provided in Schedule P will be used by many persons to estimate the adequacy of the curre among other things. Are there any especially significant events, coverage, retention or accounting changes considered when making such analyses?	s that have occurred that must be	. Yes [ X ] No	[ ]
7.2	(An extended statement may be attached.)  Lower than expected personal auto losses were experienced in accident year 2020 due to fewer accidents a result of the Pandemic	and decreased claim activity		

#### **SCHEDULE T - PART 2**

**INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN** Allocated by States and Territories Direct Business Only 2 3 5 6 Disability Income Long-Term Care Annuities Life (Group and Individual) (Group and Individual) (Group and (Group and Deposit-Type States, Etc. Individual) Individual) Contracts Totals Alabama ...... AL 1. 3. 4. 5. California CA 6 Colorado CO CT 7. Connecticut 8. DE Delaware ..... 9. District of Columbia ..... DC 10. ..... FL 11. GΑ 12. 13. .... ID 14. ... IL 15 Indiana IN 16. lowa ..... ... IA 17. .... KS Kansas ..... 18. ..... KY Kentucky ..... 19. ..... LA Louisiana ... 20. Maine ...... ME 21. 22. Massachusetts ... MA 23. Michigan ... MI 24 Minnesota MN 25. Mississippi ...... MS 26. Missouri ...... MO 27. Montana ..... 28. Nebraska ..... 29. Nevada ..... 30. 31. New Jersey .. 32. New Mexico .. 33. New York ... 34. North Carolina .... NC 35. North Dakota .... ..... ND 36. Ohio ..... ..... OH 37. Oklahoma ..... OK 38. Oregon ...... OR 39. Pennsylvania ..... 40. RI 41. South Carolina ... SC 42 South Dakota . SD 43 Tennessee ..... TN 44 Texas TX ......UT 45. Utah ..... ..... VT 46. Vermont ..... 47. Virginia ..... ..... VA 48. Washington ..... 49. ..... WV 50. WI 51. Wyoming ..... .... WY 52. American Samoa ..... ..... AS 53 Guam ...... ..... GU ..... PR 54. Puerto Rico ..... U.S. Virgin Islands ...... VI

55. 56.

57.

59.

Total

Northern Mariana Islands ..... MP

Canada ...... CAN Aggregate Other Alien ...... OT

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control		'	
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management.	ship		Filina	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
	The Hanover Insurance Group		80-0266582				440 Lincoln Street Holding Company LLC	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	. 100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		84-3300049				AIXHI LLC	MA	NIA	Nova Casualty Company	Ownership, Board, Management	. 100.000	The Hanover Insurance Group, Inc	NO	
. 0088	The Hanover Insurance Group	12833	20-5233538				AIX Specialty Insurance Company	DE	IA	Nova Casualty Company	Ownership, Board, Management	. 100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		20-3051651				AIX, Inc	DE	NIA	The Hanover Insurance Company	Ownership, Board, Management	. 100.000	The Hanover Insurance Group, Inc	NO	
. 0088	The Hanover Insurance Group	10212	04-3272695				Allmerica Financial Alliance Insurance Co	NH	RE	The Hanover Insurance Company	Ownership, Board, Management	100 .000	The Hanover Insurance Group, Inc	NO	
. 0088	The Hanover Insurance Group	41840	23-2643430				Allmerica Financial Benefit Insurance Co	MI	I A	The Hanover Insurance Company	Ownership, Board, Management	100 . 000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		04-3194493				Allmerica Plus Insurance Agency, Inc	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100 . 000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		54-1632456				Campania Holding Company, Inc	VA	NIA	The Hanover Insurance Group, Inc	Ownership, Board, Management	100 . 000	The Hanover Insurance Group, Inc	NO	
. 0088	The Hanover Insurance Group	12260	52-1827116				Campmed Casualty & Indemnity Co. Inc	NH	I A	The Hanover Insurance Company	Ownership, Board, Management	100 . 000	The Hanover Insurance Group, Inc	NO	
. 0088	The Hanover Insurance Group	31534	38-0421730				Citizens Insurance Company of America	MI	IA	The Hanover Insurance Company	Ownership, Board, Management	100 . 000	The Hanover Insurance Group, Inc	NO	
. 0088	The Hanover Insurance Group	10714	36-4123481				Citizens Insurance Company of Illinois	IL	IA	Opus Investment Management, Inc	Ownership, Board, Management	100 . 000	The Hanover Insurance Group, Inc	NO	
. 0088	The Hanover Insurance Group	10176	38-3167100				Citizens Insurance Company of Ohio	OH	IA	The Hanover Insurance Company	Ownership, Board, Management	100 . 000	The Hanover Insurance Group, Inc	NO	
. 0088	The Hanover Insurance Group	10395	35-1958418				Citizens Insurance Company of the Midwest	IN	I A	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		27-1652700				CitySquare II Development Co., L.L.C	MA	NI A	Opus Investment Management, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		27-2400275				Educators Insurance Agency, Inc	MA	NI A	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		52-1172293				Hanover Specialty Insurance Brokers, Inc	VA	NI A	Verlan Holdings, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
. 0088	The Hanover Insurance Group	22306	04-2217600				Massachusetts Bay Insurance Company	NH	I A	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		84-3309673				NAG Merger LLC	MA	NI A	AIXHI LLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
. 0088	The Hanover Insurance Group	42552	16-1140177				NOVA Casualty Company	NY	I A	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		04-2854021				Opus Investment Management, Inc	MA	UIP	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		38-3324634				Professionals Direct, Inc.	MI	NI A	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
. 0088	The Hanover Insurance Group	36064	04-3063898				The Hanover American Insurance Company	NH	I A	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		98-1303999				The Hanover Atlantic Insurance Company Ltd.	BMU	I A	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	YES	
. 0088	The Hanover Insurance Group	41602	75-1827351				The Hanover Casualty Company	TX	I A	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group	22292	13-5129825				The Hanover Insurance Company	NH	UDP	Opus Investment Management, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
. 0088	The Hanover Insurance Group		04-3263626			New York Stock Exchange .	The Hanover Insurance Group, Inc	DE	UIP			0.000		NO	
. 0088	The Hanover Insurance Group	13147	74-3242673				The Hanover National Insurance Company	NH	I A	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		04-2448927				VeraVest Investments, Inc.	MA	NIA	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group	10815	52-0903682				Verlan Fire Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		52-2044133				Verlan Holdings, Inc.	MD	NIA	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
L				<b>I</b>									l .		

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	 	 <b>4</b>		. · · ·	

#### SCHEDULE Y

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

		1 /111 /	- SOIVIIVIAI	· · · · · · · · · · · · · · · · · · ·	DUNEN 3		VIIONO VV		71 1 IL	IAILJ		
1	2	3	4	5	6	7 Income/	8	9	10	11	12	13
						(Disbursements)						
					Purchases, Sales	` Incurred in '						Reinsurance
					or Exchanges of	Connection with		Income/		Any Other Material		Recoverable/
					Loans, Securities,	Guarantees or	l	(Disbursements)		Activity Not in the		(Payable) on
NAIC Company	ID	Names of Insurers and Parent.	Shareholder	Capital	Real Estate, Mortgage Loans or	Undertakings for the Benefit of any	Management Agreements and	Incurred Under Reinsurance		Ordinary Course of the Insurer's		Losses and/or Reserve Credit
Cofficient	Number	Subsidiaries or Affiliates	Dividends	Capital	Other Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
		AIX Specialty Insurance Co.		1,000,000	0	7 timate(3)	0	0		0	1.000.000	384.214.972
		Allmerica Financial Alliance Ins Co			0	0	0	0		0	(1.000.000)	272,953,749
41840		Allmerica Financial Benefit Ins Co					0	(143, 336, 066)		0	` ' ' '	1.177.641.594
		Allmerica Plus Insurance Agency, Inc		0		0		0		0	(200.000)	0
		Campmed Casualty & Indemnity Company.										•
		Inc.	(400.000)	0	0	l0	0	0		0	(400.000)	2.691.785
31534	38-0421730	Citizens Insurance Co. of America	(59,000,000)	0		0		5,801,207		0		(477,061,784)
10714	36-4123481	Citizens Insurance Co. of Illinois	(900,000)	0	0	0		0			(900,000)	
	38-3167100	Citizens Insurance Co. of Ohio	(750,000)	0	0	0	0	0		0		6,256,218
	35-1958418	Citizens Insurance Co. of the Midwest	(3,000,000)	0	0	0	0	(109,790,825)		0	(112,790,825)	1,438,584,462
36064	04-3063898	The Hanover American Insurance Co	(2,600,000)	0	0	0	0	(92,322,520)		0	(94,922,520)	518,948,594
	98-1300399	The Hanover Atlantic Insurance Company	0	0	0	0	0	(72,989,229)		0	(72,989,229)	180,597,897
22292	13-5129825	The Hanover Insurance Company	(30,550,000)	(10,000,000)	0	0	(29,072,818)	682,846,843		(125,000,000)		(5,376,956,325)
	75-1827351	The Hanover Casualty Company	(700.000)	0	0	0	0	0		0		79,379,582
	04-2217600	Massachusetts Bay Insurance Company	(1,000,000)	0	0					0		1,027,100,455
	16-1140177	NOVA Casualty Co	0	(1,000,000)	0		0			0		569,737,131
	04-3263626	The Hanover Insurance Group, Inc	100,900,000	0	0	0				125,000,000		0
13147	74-3242673	The Hanover National Insurance Company	(250,000)	0	0	0		0		0	(250,000)	
10815	52-0903682	Verlan Fire Insurance Co	(550,000)	0	0	0	0	(88,900,053)		0	(89,450,053)	
	04-2854021	Opus Investment Management, Inc	0	0		0	0	0		0		0
9999999 Cor	atrol Totals		0	Λ		0	0			0		
5555555 COI	וווטו וטומוס		0	U	l 0	U	L U	U	XXX	U	U	U

#### **SCHEDULE Y**

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

PARI 3 - ULTIMATE CONTROL	LING PARTY AND LISTING OF O	THER U.S. INS	UKANCI	E GROUPS OR ENTITIES UNDER	INAI ULIIMAIE CONTROLLING F	ARITSCON	IRUL
1	2	3	4	5	6	7	8
			Granted			1	Granted
			Disclaimer			1	Disclaimer
			of Control\			1	of Control\
			Affiliation of			1 - '	Affiliation of
		Ownership	Column 2			Ownership	Column 5
		Percentage	Over			Percentage	Over
leasure in Halding Comment	Owners with Oreston Theory 400/ Ownership	Column 2 of	Column 1	Lillian ata Cantasilia a Dart.	U.S. Insurance Groups or Entities Controlled	(Column 5 of	Column 6
Insurers in Holding Company	Owners with Greater Than 10% Ownership	Column 1	(Yes/No)	Ultimate Controlling Party	by Column 5	Column 6)	(Yes/No)
AIX Specialty Insurance Insurance Company	NOVA Casualty Company	100.000		The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	
Allmerica Financial Alliance Insurance Co				The Hanover Insurance Group, Inc.	The Hanover Insurance Group		
Allmerica Financial Benefit Insurance Co					The Hanover Insurance Group		
Campmed Casualty & Indemnity Co. Inc	The Hanover Insurance Company	100.000		The Hanover Insurance Group, Inc	The Hanover Insurance Group		
Citizens Insurance Company of America				The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	
Citizens Insurance Company of Illinois	Opus Investment Management, Inc		NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
Citizens Insurance Company of Ohio					The Hanover Insurance Group		
Citizens Insurance Company of the Midwest	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
Massachusetts Bay Insurance Company	The Hanover Insurance Company	100.000	NO		The Hanover Insurance Group		NO
NOVA Casualty Company	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
The Hanover American Insurance Company	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc	The Hanover Insurance Group	100.000	NO
The Hanover Atlantic Insurance Company	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
The Hanover Casualty Company	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
The Hanover Insurance Company	Opus Investment Management, Inc.	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
The Hanover National Insurance Company	The Hanover Insurance Company	100.000		The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
Verlan Fire Insurance Company	The Hanover Insurance Company	100.000	NO	The Hanover Insurance Group, Inc.	The Hanover Insurance Group	100.000	NO
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						<u> </u>	

#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

#### **REQUIRED FILINGS**

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

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

#### SUPPLEMENTAL FILINGS

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

MARCH FILING

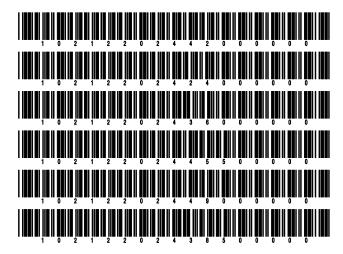
	WARCHFILING	
11.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
12.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the 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?	NO
21.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
22.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
23.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed	
	electronically with the NAIC by March 1?	NO.
25.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed	
	electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically	
	with the NAIC by March 1?	NO
27.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state	
	of domicile and the NAIC by March 1?	NO
28.	Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?	NO
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

#### Bar Codes:

11. 12. 13. 14. 15. 16. 17. 18. 20. 21. 22. 23. 24. 25. 26. 27. 28. 30. 31. 32. 33. 34. 35.

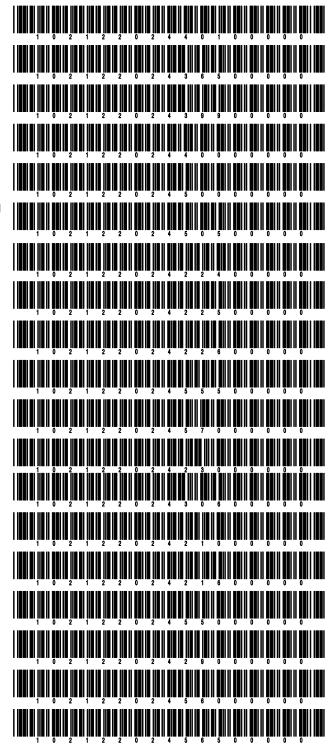
36. 37.

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



#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 17. Reinsurance Summary Supplemental Filing [Document Identifier 401]
- 18. Medicare Part D Coverage Supplement [Document Identifier 365]
- 20. Reinsurance Attestation Supplement [Document Identifier 399]
- 21. Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]
- 22. Bail Bond Supplement [Document Identifier 500]
- 23. Director and Officer Insurance Coverage Supplement [Document Identifier 505]
- Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- 25. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 26. Relief from the Requirements for Audit Committees [Document Identifier 226]
- 27. Reinsurance Counterparty Reporting Exception Asbestos and Pollution Contracts [Document Identifier 555]
- 28. Exhibit of Other Liabilities by Lines of Business [Document Identifier 570]
- 30. Credit Insurance Experience Exhibit [Document Identifier 230]
- 31. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 32. Accident and Health Policy Experience Exhibit [Document Identifier 210]
- 33. Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]
- Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]
- Life, Health & Annuity Guaranty Association Assessable Premium Exhibit -Parts 1 and 2 [Document Identifier 290]
- 36. Private Flood Insurance Supplement [Document Identifier 560]
- 37. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]



# NONE



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

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

#### FOR THE STATE OF:

| NAIC Group Code 0088 |  | NAIC Company        | Code10212                                       |
|----------------------|--|---------------------|---|
|                      | МС                                       | AS LINE OF BUSINESS | MCAS Reportable Premium/Considerations (Yes/No) |
| 1.                   | Disability Income                        |                     |   |
| 2.                   | Health                                   |                     |   |
| 3.                   | Homeowners                               |                     |   |
| 4.                   | Individual Annuity                       |                     |   |
| 5.                   | Individual Life                          |                     |   |
| 6.                   | Lender-Placed Home and Auto              |                     |   |
| 7.                   | Long-Term Care                           |                     |   |
| 8.                   | Other Health                             |                     |   |
| 9.                   | Private Flood                            |                     |   |
| 10.                  | Private Passenger Auto                   |                     |   |
| 11.                  | Short-Term Limited Duration Health Plans |                     |   |
| 12.                  | Travel                                   |                     |   |