

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2018 OF THE CONDITION AND AFFAIRS OF THE

Motor Club Insurance Company

1318 1318 NAIC Company Code 12487 Employer's ID Number

	NAIC Group Code	1318 1318	NAIC Company Code	12487 Employe	r's ID Number	20-3462094	
Organized under the Lav	ws of	(Current) (Prior) Rhode Island	Ste	ate of Domicile or Port of	of Entry	RI	
Country of Domicile		Timode Island	United States of		Ji Linky		
Incorporated/Organized		09/14/2005		Commenced Business	S	01/01/2006	
Statutory Home Office		110 David Links Drive			D	DI UC 00004	
Statutory Home Office	-	(Street and Number)		(Ci		e, RI, US 02904 e, Country and Zip Code)	
			property of the second		i, or tolkin, oldio	, county and hip code;	
Main Administrative Office			3333 Fairview Rd, Ma (Street and Nu				
	Costa Mesa, CA,	US 92626-1698	(Street and No	moer)	714-	850-5111	
(0	City or Town, State, C	ountry and Zip Code)			(Area Code) (T	elephone Number)	
Mail Address	P.O. Box	25001 Mail Stop A357			Santa Ana C	A. US 92799-5001	
Commission of the Commission o		nd Number or P.O. Box)		(Cit		, Country and Zip Code)	
Discoul and in al Davi			0000 5 : :	16. 1057			
Primary Location of Bool	ks and Records		3333 Fairview Rd, Ma (Street and Nu				
	Costa Mesa, CA,	US 92626-1698	(Street and 140	moer)	714-	885-2171	
(0		ountry and Zip Code)			(Area Code) (T	elephone Number)	
Internet Website Address	q		www aga-calif	com			
			www.dda-Cdiii	No.			
Statutory Statement Con	tact	Anita Yin				714-885-2171	
	yim,anita@aa	(Name)			The state of the s	de) (Telephone Number) 885-2179	
	(E-mail A					Number)	
President & C				ce President & General	d		
Executive Offi		John Francis Boyle		Counse		Avery Renaud Brown	
Vice President, CFO	and urer	Raju Thirumala Varma	9	Secretary	v.	Gail Chi-way Louis	
		110,0		coordiary			
Tzechung Eric	Lai #, Assistant Secr	retary	OTHER				
12echang End	Lai #, Assistant Secr	etary					-
	(E)		DIRECTORS OR T			EF N 70 V	
	n Francis Boyle ark Allen Shaw		Christopher Michae	Galvin		Brian Harris Deephouse Francis Xavier Doyle	
State of	California						
County of	Orange	\$	SS:				
all of the herein describe statement, together with condition and affairs of the in accordance with the N rules or regulations req respectively. Furthermore	ed assets were the all related exhibits, schene said reporting entity IAIC Annual Stateme uire differences in rete, the scope of this armatting differences of	bsolute property of the dules and explanations as as of the reporting perint Instructions and Acceptorting not related to attestation by the describ	said reporting entity, free therein contained, annex iod stated above, and of ounting Practices and Pro accounting practices are oed officers also include	e and clear from any li- ed or referred to, is a fu- its income and deduction ocedures manual except and procedures, accord is the related correspon	iens or claims the ull and true states ions therefrom for ept to the extent the ding to the best anding electronic fi	and that on the reporting perior ereon, except as herein state ment of all the assets and liabi r the period ended, and have b hat: (1) state law may differ; or of their information, knowled iling with the NAIC, when required d by various regulators in lieu or d.	d, and that this lities and of the een completed r, (2) that state lge and belief, sired, that is an
M	1/		Kanil	ame	S	Tate Chi-ur	ay Thui
I John Fra	pois Poylo		Baiu Tharmala	Jarma	25	Gail Chi-way Louis	1
	ncis Boyle f Executive Officer		Raju Thirumala Vice President, CFO ar			Secretary	
							10
Subscribed and sworn to	before me this ay of	2019		a. Is this an original fi b. If no, 1. State the amend 2. Date filed	ndment number	***************************************	1
/	1/1			Number of page	es attached		

BRAD TOMA
Commission # 2116117
Notary Public - California
Orange County
My Comm. Expires Jul 2, 2019



EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 1318 BUSIN	ESS IN THE STATE O				LUSSES (otatato. y		RING THE YEAR	R 2018	NAIC Com	pany Code 12	2487
	Gross Premiu 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 Incurred	Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
2.5 Private flood												
Farmowners multiple peril		400 407		4 055 055	04 400	0	400,000		0.700	0.700	005 400	00.047
Homeowners multiple peril	1,665,052	409 , 197		1,255,855	64,423	257,492	193,069		2,726	2,726	335 , 160	33,347
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
Mortgage guaranty												
8. Ocean marine												
9. Inland marine												2,261
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												48
Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(b)												
15.4 Non-renewable for stated reasons only (b)												
15.5 Other accident only												
15.6 Medicare Title XVIII exempt from state taxes or fees												
15.7 All other accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
17.2 Other Liability - claims made												
17.3 Excess workers' compensation												
18. Products liability												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability	1,489,103	723,307		765,796	92,169	569, 103	476,934		12,789	12,789	236,842	29,821
19.3 Commercial auto no-fault (personal injury protection)												,
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	762,888	370, 191		392,697	224,804	370.856	146,052		2.309	2.309	121,362	15.278
21.2 Commercial auto physical damage		, .		,	,		, .		, , ,	,	, .	,
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)	3,917,043	1,502,695		2,414,348	381,396	1, 197, 451	816,055		17,824	17,824	693,364	80,755
DETAILS OF WRITE-INS	5,511,616	.,002,000	1	2,,010	33.,000	.,, 101	2.3,000		,021	,021	333,001	50,700
3401												
3402.												
3403.				İ					İ	†	†	
3498. Summary of remaining write-ins for Line 34 from overflow page			†	İ	†				†	†	†	
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												
3433. Totals (Liftes 3401 tillu 3403 plus 3430)(Lifte 34 800Ve)	22 202	l .			1 1		l		l		I	L

⁽a) Finance and service charges not included in Lines 1 to 35 \$23,303

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



EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

	NAIC Group Code 1318 BUSINESS II	N THE STATE O				LUSSES (RING THE YEAR	R 2018	NAIC Com	pany Code 12	2487
		Gross Premiu 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 Incurred	Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
1.													
	Allied lines												
	Multiple peril crop												
	Federal flood												
	Private crop												
	Private flood												
	Farmowners multiple peril	4 005 050	400 407		4 055 055		0	400,000		0.700	0.700	005 400	00.047
	Homeowners multiple peril	1,665,052	409 , 197		1,255,855	64,423	257,492	193,069		2,726	2,726	335, 160	33,347
	Commercial multiple peril (non-liability portion)												
	Commercial multiple peril (liability portion)												
	Mortgage guaranty									····			
	Ocean marine												
	Inland marine												2,261
	Financial guaranty												
	Medical professional liability												
	Earthquake												
	Group accident and health (b)												48
	Credit accident and health (group and individual)									ļ			
	Collectively renewable accident and health (b)									ļ			
15.2	Non-cancelable accident and health(b)												
15.3	Guaranteed renewable accident and health(b)												
15.4	Non-renewable for stated reasons only (b)												
15.5	Other accident only												
15.6	Medicare Title XVIII exempt from state taxes or fees												
15.7	All other accident and health (b)												
15.8	Federal employees health benefits plan premium (b)												
16.	Workers' compensation												
17.1	Other Liability - occurrence												
	Other Liability - claims made												
17.3	Excess workers' compensation												
	Products liability												
	Private passenger auto no-fault (personal injury protection)												
	Other private passenger auto liability	1,489,103	723,307		765,796	92,169	569, 103	476,934		12,789	12,789	236,842	29,821
19.3	Commercial auto no-fault (personal injury protection)												
19.4	Other commercial auto liability												
	Private passenger auto physical damage	762,888	370, 191		392,697	224,804	370,856	146,052		2,309	2,309	121,362	15,278
	Commercial auto physical damage												
	Aircraft (all perils)												
	Fidelity												
	Surety												
	Burglary and theft												
	Boiler and machinery												
	Credit												
	Warranty					<u> </u>							
	Aggregate write-ins for other lines of business												
	TOTALS (a)	3,917,043	1,502,695		2,414,348	381,396	1,197,451	816,055		17,824	17,824	693,364	80,755
	DETAILS OF WRITE-INS	.,. ,,	, . , ,		, ,,,,,,	. ,,,,,,,	, . ,	, , , , ,		,	,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,120
	DETAILS OF WHITE-ING												
3403.													
	Summary of remaining write-ins for Line 34 from overflow page												
	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	İ											
U-700.	Totals (Lines 3401 tinu 3403 pius 3490)(Line 34 above)	<u> </u>	l	1	l .	1		1	L	I	1	l .	L

⁽a) Finance and service charges not included in Lines 1 to 35 \$23,303

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

SCHEDULE F - PART 1

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

	Assumed Reinsurance as of December 31, Current Tear (\$000 Offitted)												
1	2 3	4	5	Reinsur	ance On	8	9	10	11	12	13	14	15
	NAIC Com-			6 Paid Losses and	7		Contingent	Assumed		Funds Held By or Deposited With		Amount of Assets Pledged or Compensating Balances to	Amount of Assets Pledged
ID	pany	Domiciliary	Assumed	Loss Adjustment			Commissions	Premiums	Unearned	Reinsured	Letters of Credit	Secure Letters of	or Collateral
Number	Code Name of Reinsured	Jurisdiction	Premium		Losses and LAE	Cols. 6 + 7	Payable	Receivable	Premium	Companies	Posted	Credit	Held in Trust
	Total - U.S. Non-Pool												
	Total - Other (Non-U.S.)												
0899999.	Total - Affiliates												
36-6033921		OH	3						2	12			
0999999.	Total Other U.S. Unaffiliated Insurers		3						2	12			
1299999.	Total - Pools and Associations												
													
	·····												
	·····												
9999999 7	Fotals		3						2	12			
0000000	iolais		5	1					2	12			

SCHEDULE F - PART 2

		Premium Portfolio Reinsurance Effected or (Canceled) du 3	ring Current Yea	ar	
1 ID	2 NAIC Com- pany		Date of	5 Original Premium	6 Reinsurance
Number	Code	Name of Company	Contract	Premium	Premium
· · · · · · · · · · · · · · · · · · ·					
·····					
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-					+
					
					
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·					†
	1				†
			·		
					
				ļ	

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable On										Reinsuran	re Pavahle	19	20
'	_	Ŭ	7	3	· ·	7	Ω	a	10	11	12	13	1/	15	16	17	18	Net Amount	
						,	Ü	9	10	''	12	10	14	10		17	10	Recoverable	by
	NAIC														Amount in		Other	From	Company
	Com-				Reinsurance			Known	Known	IBNR	IBNR		Contingent	Columns	Dispute	Ceded	Amounts	Reinsurers	Under
ID	pany		Domiciliary	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 Reinsurer	Jurisdiction	Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	sions	14 Totals	Column 15	Payable	Reinsurers	[17 + 18]	Treaties
	0000	Interinsurance Exchange of the Automobile	ounoulon.	0000	00000	203303	L/\L	reserves	reserves	reserves	110301103	1 Torrilariis	310113	14 10(0)3	00.0	i ayabic	remodicis	[
.95-0865765	15598	Club	CA	2	3.917	100	3	166		650	96	2,414		3,429		1.834		1.596	
		norized - Affiliates - U.S. Non-Pool - Other			3,917	100	3	166		650	96	2,414		3,429		1,834		1,596	
0499999. T	otal Auth	norized - Affiliates - U.S. Non-Pool			3,917	100	3	166		650	96	2,414		3,429		1,834		1,596	
0799999. T	otal Auth	norized - Affiliates - Other (Non-U.S.)										·		· ·					
0899999. T	otal Auth	norized - Affiliates			3,917	100	3	166		650	96	2,414		3,429		1,834		1,596	
1499999. T	otal Auth	norized Excluding Protected Cells (Sum of	0899999, 099	99999,															
	1099999,	, 1199999 and 1299999)		3,917	100	3	166		650	96	2,414		3,429		1,834		1,596		
1899999. T	otal Una	uthorized - Affiliates - U.S. Non-Pool																	
2199999. T	otal Una	uthorized - Affiliates - Other (Non-U.S.)																	
		uthorized - Affiliates																	
		uthorized Excluding Protected Cells (Sum	of 2299999, 2	2399999,															
		, 2599999 and 2699999)																	
		ified - Affiliates - U.S. Non-Pool																	
		ified - Affiliates - Other (Non-U.S.)																	
		ified - Affiliates																	
		ified Excluding Protected Cells (Sum of 36	999,																
		, 399999 and 4099999)																	
		norized, Unauthorized and Certified Exclud	Cells (Sum	3,917															
	of 1499999, 2899999 and 4299999)					100	3	166		650	96	2,414		3,429		1,834		1,596	
		ected Cells (Sum of 1399999, 2799999 ar	nd 4199999)																
9999999 To	otals				3,917	100	3	166		650	96	2,414		3,429		1,834		1,596	

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		Net		Total Amount Recoverable		Funds Held		Total	Stressed Net		Factor	Factor
ID				Issuing or Confirming	Beneficiary Trusts &	Total Funds	Recoverable	Applicable	from	Stressed	(Cols. 17+18+20:		Collateral (Cols. 21+22	Recoverable Net of		Reinsurer	Applicable to Reinsurer
Number		Multiple		Bank	Other	Held.	Net of Funds	Sch. F		Recoverable	,	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 *		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)
.95-0865765	Interinsurance Exchange of the Automobile Club					1,834	1,596		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates - U.S. Non-Pool - Other			XXX		1,834	1,596		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates - U.S. Non-Pool			XXX		1,834	1,596		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates - Other (Non-U.S.)			XXX											XXX		
	otal Authorized - Affiliates			XXX		1,834	1,596								XXX		
	otal Authorized Excluding Protected Cells (Sum of			1001											1001		
	899999, 0999999, 1099999, 1199999 and 1299999)			XXX		1,834	1,596		2007	2007	2007	1004	XXX	2007	XXX	XXX	2007
	otal Unauthorized - Affiliates - U.S. Non-Pool			XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized - Affiliates - Other (Non-U.S.)			XXX											XXX		-
	otal Unauthorized - Affiliates otal Unauthorized Excluding Protected Cells (Sum of			XXX											XXX		
	2299999. 2399999. 2499999. 2599999 and 2699999)			xxx											XXX		
	otal Certified - Affiliates - U.S. Non-Pool			XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Certified - Affiliates - Other (Non-U.S.)			XXX											XXX		
3699999. To	otal Certified - Affiliates			XXX											XXX		
	otal Certified Excluding Protected Cells (Sum of																
	699999, 3799999, 3899999, 3999999 and 4099999)			XXX											XXX		
	otal Authorized, Unauthorized and Certified Excluding																
	Protected Cells (Sum of 1499999, 2899999 and (299999)			XXX		4 004	4 500								V/V/		
				XXX		1,834	1,596								XXX		-
	otal Protected Cells (Sum of 1399999, 2799999 and			XXX											XXX		
9999999 To	tals			XXX		1,834	1,596								XXX		

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

	(Aging of Ceded Reinsurance) Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses 44 45 46 47 48 49 50 51 52 53																	
		Rein	surance Reco	verable on Pa	id Losses and	Paid Loss Adj	ustment Exper	nses	44	45	46	47	48	49	50	51	52	53
		37			Overdue			43										
			38	39	40	41	42					Recoverable						
									Total	Recoverable		on Paid			Percentage			
									Recoverable	on Paid	Total	Losses &			of Amounts			
									on Paid	Losses &	Recoverable	LAE Over 90			More Than			Amounts in
									Losses &	LAE Over 90		Days Past			90 Days	Percentage		Col. 47 for
								Total Due	LAE	Days Past		Due Amounts			Overdue Not	More Than	Is the	Reinsurers
ID							Total	Cols. 37+42		Due Amounts		Not in	Amounts		in Dispute	120 Days	Amount in	with Values
Number							Overdue	(In total	Dispute		Amounts Not		Received	Percentage	(Col.	Overdue	Col. 50 Less	
From	Name of Reinsurer		1 - 29	30 - 90	91 - 120	Over 120		should equal		Included in	in Dispute	(Cols. 40 +	Prior	Overdue Col.	47/[Cols.	(Col. 41/	Than 20%?	20% in
Col. 1	From Col. 3	Current	Davs	Davs	Davs	Davs	+40+41	Cols. 7+8)			(Cols 43-44)		90 Days	42/Col. 43	46+481)	Col. 43)	(Yes or No)	Col. 50
	Interinsurance Exchange of the Automobile Club	103	Dayo	Buyo	Dayo	Dayo	110111	103			103	,	00 - 0,0	12,000	101101/		YES	
	otal Authorized - Affiliates - U.S. Non-Pool -																	
	Other	103						103			103						XXX	
	otal Authorized - Affiliates - U.S. Non-Pool	103						103			103						XXX	
	otal Authorized - Affiliates - Other (Non-U.S.)							100									XXX	
	otal Authorized - Affiliates	103						103			103						XXX	
	otal Authorized Excluding Protected Cells (Sum																7001	
	of 0899999, 0999999, 1099999, 1199999 and																	
	299999)	103						103			103						XXX	
	otal Unauthorized - Affiliates - U.S. Non-Pool	100						100			100						XXX	
	otal Unauthorized - Affiliates - Other (Non-U.S.)																XXX	
	otal Unauthorized - Affiliates													-			XXX	
	otal Unauthorized Excluding Protected Cells																////	
	Sum of 2299999, 2399999, 2499999, 2599999																	
	and 2699999)																xxx	
	otal Certified - Affiliates - U.S. Non-Pool																XXX	
	otal Certified - Affiliates - Other (Non-U.S.)																XXX	
	otal Certified - Affiliates - Other (Non-0.3.)																XXX	
	otal Certified - Affiliates otal Certified Excluding Protected Cells (Sum of																^^^	
	oral Certified Excluding Protected Cells (Sum of 1699999, 3799999, 3899999, 3999999 and																	
	.099999)																XXX	
	otal Authorized, Unauthorized and Certified																***	
	Excluding Protected Cells (Sum of 1499999, 899999 and 4299999)	103						100			103						XXX	
		103						103			103						***	
4499999. 10	otal Protected Cells (Sum of 1399999, 2799999										1						VVV	
	and 4199999)																XXX	
9999999 To	tais	103						103			103						XXX	

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

						(Provision for	Reinsurand	e for Certified									
									Provision for C	ertified Reinsu	rance						
		54	55	56	57	58	59	60	61	62	63	64	65	Complete it	f Col. 52 = "No"	, Otherwise	69
								Percent of							Enter 0		
								Collateral						66	67	68	Provision for
								Provided for	Percent Credit				20% of			i	Overdue
								Net	Allowed on	20% of		Provision for				i	Reinsurance
						Net		Recoverables	Net	Recoverable		Reinsurance		Total		i	Ceded to
						Recoverables		Subject to	Recoverables	on Paid	Amount of	with Certified		Collateral	Net	i	Certified
				Percent		Subject to		Collateral	Subject to		Credit Allowed		Over 90 Days	Provided (Col.	Unsecured	i	Reinsurers
		Certified	Effective	Collateral	Catastrophe			nt Requirements		Over 90 Days	for Net	Due to		20 + Col. 21 +	Recoverable	i	(Greater of
ID		Reinsurer		Required for	Recoverables	Requirements	of Collateral	([Col. 20 +	Requirements		Recoverables	Collateral	Amounts Not	Col. 22 +	for Which	i	[Col. 62 + Col.
Number		Rating	Certified	Full Credit		for Full Credit		Col. 21 + 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		(0% through	Collateral	(Col. 19 -	(Col. 56 *	22 + Col. 24] /	56, not to	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)	Col. 58)	exceed 100%)	45 * 20%)	Col. 61])	Col. 63)	20%)	Col. 63)	63 - Col. 66)	Col. 67	Col. 63)
_95-0865765	Interinsurance Exchange of the Automobile Club	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
0899999. T	otal Authorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized Excluding Protected Cells (Sum of 08	899999, 0999	999,													i	,
	1099999, 1199999 and 1299999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1899999. T	otal Unauthorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. T	otal Unauthorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2299999. T	otal Unauthorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2899999. T	otal Unauthorized Excluding Protected Cells (Sum of	f 2299999, 23	399999,													·	
	2499999, 2599999 and 2699999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3299999. T	otal Certified - Affiliates - U.S. Non-Pool			XXX				XXX	XXX							·	
3599999. T	otal Certified - Affiliates - Other (Non-U.S.)			XXX				XXX	XXX							·	
3699999. T	otal Certified - Affiliates			XXX				XXX	XXX							·	
4299999. T	otal Certified Excluding Protected Cells (Sum of 369)	9999, 379999	9, 3899999,														
	3999999 and 4099999)				ĺ		ĺ	XXX	XXX					ĺ		ı	1
4399999. T	399999. Total Authorized, Unauthorized and Certified Excluding Protected Cells (Sur															1	
	1499999, 2899999 and 4299999)				ĺ		ĺ	XXX	XXX					ĺ		ı	
4499999. T	99999. Total Protected Cells (Sum of 1399999, 2799999 and 4199999)							XXX	XXX							1	1
9999999 To			XXX				XXX	XXX								1	

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

	(10tal Provision for Reinsurance) 70 Provision for Unauthorized Reinsurance Provision for Overdue Authorized Reinsurance Total Provision for Reinsurance Total Provision												
		70	Provision for Unauth	horized Reinsurance	Provision for Overdue	Authorized 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							
		Losses & LAE Over	Reinsurance with	Unauthorized	Not in Dispute + 20%	Losses & LAE Over 90		Provision for Amounts					
ID		90 Days past Due	Unauthorized	Reinsurers and	of Amounts in	Days Past Due	Provision for Amounts	Ceded to Unauthorized	Provision for Amounts				
Number		Amounts Not in	Reinsurers Due to	Amounts in Dispute	Dispute	(Greater of Col. 26 *	Ceded to Authorized	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)			
.95-0865765	Interinsurance Exchange of the Automobile Club		XXX	XXX				XXX	XXX				
0399999. T	otal Authorized - Affiliates - U.S. Non-Pool - Other		XXX	XXX				XXX	XXX				
0499999. T	otal Authorized - Affiliates - U.S. Non-Pool		XXX	XXX				XXX	XXX				
0799999. T	otal Authorized - Affiliates - Other (Non-U.S.)		XXX	XXX				XXX	XXX				
******	otal Authorized - Affiliates		XXX	XXX				XXX	XXX				
	otal Authorized Excluding Protected Cells (Sum of 0899999,												
(0999999, 1099999, 1199999 and 1299999)		XXX	XXX				XXX	XXX				
	otal Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX		XXX				
	otal Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX		XXX				
	otal Unauthorized - Affiliates				XXX	XXX	XXX		XXX				
	otal Unauthorized Excluding Protected Cells (Sum of 2299999,												
	2399999, 2499999, 2599999 and 2699999)				XXX	XXX	XXX		XXX				
	otal Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
	otal Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
3699999. T	otal Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
	otal Certified Excluding Protected Cells (Sum of 3699999, 3799999,												
	3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
	otal Authorized, Unauthorized and Certified Excluding Protected												
	Cells (Sum of 1499999, 2899999 and 4299999)												
	otal Protected Cells (Sum of 1399999, 2799999 and 4199999)												
9999999 To	otals												

SCHEDULE F - PART 4

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

	_		T	
1	2	3	4	5
Issuing or Confirming Bank Reference				
Donk Deference				
Bank Reference				
Number Used				
in Col. 23 of	Letters of	American Bankers Association		
Number Used in Col. 23 of Sch F Part 3	0		Insuita a Confirmina Dank Nova	Latters of Ossalit Assaurat
Sch F Part 3	Credit Code	(ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
				·
				<u> </u>
				<u> </u>
Total				
Total				

. .

В.

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Motor Club 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 Name of Reinsurer	2 Commission Rate	3 Ceded Premium	
1.	- Name of Name of	<u></u>	<u> </u>	
2				
3				
4				
5				
Report the five largest reinsurance recoverables reporte affiliated insurer.	d 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 pren	nium, and indicate whether the re	ecoverables are due from a
	1	2	3	4
	Name of Reinsurer	<u>Total Recoverables</u>	Ceded Premiums	<u>Affiliated</u>
6. Interinsurance Exchange of the Automobile Club		3,429	3,917	Yes [X] No []
7				Yes [] No []
8				Yes [] No []
9				Yes [] No []
0				l l oN l l ooV

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

ASSETS (Page 2, Col. 3) 1. Cash and invested assets (Line 12)		Restatement of Balance Sheet to Identify Net	1	2	3
1. Cash and invested assets (Line 12) 52,514,831 52,514			As Reported (Net of Ceded)	Restatement Adjustments	Restated (Gross of Ceded)
1. Cash and invested assets (Line 12) 52,514,831 52,514				•	,
2. Premiums and considerations (Line 15)		ASSETS (Page 2, Col. 3)			
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	1.	Cash and invested assets (Line 12)	52,514,931		52,514,931
4. Funds held by or deposited with reinsured companies (Line 16.2)	2.	Premiums and considerations (Line 15)	780,030		780,030
5. Other assets	3.	Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	102,714	(102,714)	
6. Net amount recoverable from reinsurers	4.	Funds held by or deposited with reinsured companies (Line 16.2)	11,934		11,934
7. Protected cell assets (Line 27)	5.	Other assets	962,288		962,288
7. Protected cell assets (Line 27)	6.	Net amount recoverable from reinsurers		1.595.510	1.595.510
8. Totals (Line 28)	0.				
LIABILITIES (Page 3) Losses and loss adjustment expenses (Lines 1 through 3)	7.	Protected cell assets (Line 27)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	8.	Totals (Line 28)	54,371,897	1,492,796	55,864,693
10. Taxes, expenses, and other obligations (Lines 4 through 8)		LIABILITIES (Page 3)			
11. Unearned premiums (Line 9) 2,130 2,414,348 2,416,478 12. Advance premiums (Line 10) 103,982 103,982 13. Dividends declared and unpaid (Line 11.1 and 11.2) 1,833,866 (1,833,866) 15. Funds held by company under reinsurance treaties (Line 13) 8,095 8,095 16. Amounts withheld or retained by company for account of others (Line 14) 8,095 8,095 17. Provision for reinsurance (Line 16) 737,781 737,781 19. Total liabilities 737,781 737,781 20. Protected cell liabilities (Line 27) 1,492,796 4,889,868 21. Surplus as regards policyholders (Line 37) 50,974,825 XXX 50,974,825	9.	Losses and loss adjustment expenses (Lines 1 through 3)	5,943	912,314	918,257
12. Advance premiums (Line 10) .103,982 .103,982 13. Dividends declared and unpaid (Line 11.1 and 11.2) .1,833,866 .1,833,866 14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) .1,833,866 .1,833,866 15. Funds held by company under reinsurance treaties (Line 13) .8,095 .8,095 16. Amounts withheld or retained by company for account of others (Line 14) .8,095 .8,095 17. Provision for reinsurance (Line 16) .737,781 .737,781 18. Other liabilities .737,781 .737,781 19. Total liabilities excluding protected cell business (Line 26) .3,397,072 .1,492,796 .4,889,868 20. Protected cell liabilities (Line 27) .50,974,825 .xxx .50,974,825 21. Surplus as regards policyholders (Line 37) .50,974,825 .xxx .50,974,825	10.	Taxes, expenses, and other obligations (Lines 4 through 8)	705,275		705,275
13. Dividends declared and unpaid (Line 11.1 and 11.2)	11.	Unearned premiums (Line 9)	2,130	2,414,348	2,416,478
13. Dividends declared and unpaid (Line 11.1 and 11.2)	12.	Advance premiums (Line 10)	103,982		103,982
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	13.				
15. Funds held by company under reinsurance treaties (Line 13)					
16. Amounts withheld or retained by company for account of others (Line 14) 8,095 8,095 17. Provision for reinsurance (Line 16)					
17. Provision for reinsurance (Line 16)					
18. Other liabilities	16.	Amounts withheld or retained by company for account of others (Line 14)			8,095
19. Total liabilities excluding protected cell business (Line 26) 3,397,072 1,492,796 4,889,868 20. Protected cell liabilities (Line 27) 50,974,825 XXX 50,974,825 21. Surplus as regards policyholders (Line 37) 50,974,825 XXX 50,974,825	17.	Provision for reinsurance (Line 16)			
20. Protected cell liabilities (Line 27)	18.	Other liabilities	737,781		737,781
21. Surplus as regards policyholders (Line 37) 50,974,825 XXX 50,974,825	19.	Total liabilities excluding protected cell business (Line 26)	3,397,072	1,492,796	4,889,868
	20.	Protected cell liabilities (Line 27)			
22. Totals (Line 38) 54.371.897 1.492.796 55.864.693	21.	Surplus as regards policyholders (Line 37)	50,974,825	XXX	50,974,825
, , , , , , , , , , , , , , , , , , ,	22.	Totals (Line 38)	54,371,897	1,492,796	55,864,693

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

If yes, give full explanation: Motor Club Insurance Company entered into a 100% quota share reinsurance agreement with the Interinsurance Exchange of the Automobile Club effective January 1, 2018.

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

			1			Credit		_ 						Other Individual	Contracts				
				Group Accid	ent	Accident and								Non-Renewable	for Stated				
	-	Total		and Healt		(Group and Ind		Collectively Re		Non-Cance		Guaranteed Re		Reasons (Other Accider		All Other	
		1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	/ Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
	-						Γ 1 AN	ALYSIS OF UN			TIONS								
1.	Premiums written	133	XXX	133	XXX		XXX		xxx		XXX		XXX		XXX		XXX		XXX
2.	Premiums earned	4,511	XXX	3,417	XXX		XXX		XXX		XXX		XXX		XXX		XXX	1,094	XXX
3.	Incurred claims	18,379	407.4	15,096	441.8													3,283	300.1
4.	Cost containment expenses																		
5.	Incurred claims and cost containment expenses (Lines 3 and 4)	18,379	407.4	15,096	441.8													3,283	300.1
6.	Increase in contract reserves																		
7.	Commissions (a)	(241)	(5.3)	(241)	(7.1)														
8.	Other general insurance expenses																		
9.	Taxes, licenses and fees																		
10.	Total other expenses incurred	(241)	(5.3)	(241)	(7.1)														
11.	Aggregate write-ins for deductions																		
12.	Gain from underwriting before dividends or refunds	(13,627)	(302.1)	(11,438)	(334.7)													(2, 189)	(200.1)
13.	Dividends or refunds																		
14.	Gain from underwriting after dividends or refunds	(13,627)	(302.1)	(11,438)	(334.7)													(2,189)	(200.1)
	DETAILS OF WRITE-INS																		
1101.														-			4		
1102.														-					
1103.																	-		
1198.	Summary of remaining write-ins for Line 11 from overflow page																		
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)																		

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

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

COLLEGE	-	100IDEI1	. , ,	, <u>, , , , , , , , , , , , , , , , , , </u>		itiiiaoa,			
	1	2	3	4			Other Individual Contrac	ts	
			Credit		5	6	7	8	9
			Accident and Health				Non-Renewable		
		Group Accident	(Group and	Collectively		Guaranteed	for Stated	Other Accident	
To the state of th	otal	and Health	Individual)	Renewable	Non-Cancelable	Renewable	Reasons Only	Only	All Other
		PART 2.	- RESERVES AND	LIABILITIES	<u> </u>		-	<u>. </u>	
A. Premium Reserves:									
Unearned premiums	169	169							
2. Advance premiums									
Reserve for rate credits									
Total premium reserves, current year	169	169							
Total premium reserves, prior year	4,546	3,453							1,093
Increase in total premium reserves	(4,377)	(3,284)							(1,093)
B. Contract Reserves:									
Additional reserves (a)									
Reserve for future contingent benefits									
Total contract reserves, current year									
4. Total contract reserves, prior year.									
Increase in contract reserves									
C. Claim Reserves and Liabilities:									
Total current year	530	512							18
2. Total prior year	6,316	5,506							810
3. Increase	(5,786)	(4,994)							(792)

	PART	3 TEST OF PRIOR YEAR'S CLAIM	RESERVES AND LIABILITIES		
Claims paid during the year:					
1.1 On claims incurred prior to current year	24, 165	20,090		 	4,075
1.2 On claims incurred during current year				 	
Claim reserves and liabilities, December 31, current year:					
2.1 On claims incurred prior to current year	530	512		 	18
2.2 On claims incurred during current year				 	
3. Test:					
3.1 Line 1.1 and 2.1	24,695	20,602		 	4,093
3.2 Claim reserves and liabilities, December 31, prior year	6,316	5,506		 	810
3.3 Line 3.1 minus Line 3.2	18,379	15,096			3,283

		PART 4 REINSU	RANCE		
A. Reinsurance Assumed:					
Premiums written	133	133		 	
2. Premiums earned	4,511	3,417		 	 1,094
3. Incurred claims	18,379	15,096		 	 3,283
4. Commissions	(241)	(241)			
B. Reinsurance Ceded:					
Premiums written				 	
Premiums earned				 	
Incurred claims				 	
4. Commissions					

(a) Includes \$ _____ premium deficiency reserve.

SCHEDULE H - PART 5 - HEALTH CLAIMS

		1 Medical	2 Dental	3 Other	4 Total
A. Direc	pt:				
1.	Incurred Claims				
2.	Beginning claim reserves and liabilities				
3.	Ending claim reserves and liabilities				
4.	Claims paid				
B. Assu	med Reinsurance:				
5.	Incurred Claims			18,379	18,379
6.	Beginning claim reserves and liabilities			6,316	6,316
7.	Ending claim reserves and liabilities			530	530
8.	Claims paid			24,165	24, 165
C. Cede	ed Reinsurance:				
9.	Incurred Claims				
10.	Beginning claim reserves and liabilities				
11.	Ending claim reserves and liabilities				
12.	Claims paid				
D. Net:					
13.	Incurred Claims.			18,379	18,379
14.	Beginning claim reserves and liabilities			6,316	6,316
15.	Ending claim reserves and liabilities			530	530
16.	Claims paid			24,165	24, 165
E. Net I	ncurred Claims and Cost Containment Expenses:				
17.	Incurred claims and cost containment expenses				
18.	Beginning reserves and liabilities				
19.	Ending reserves and liabilities				
20.	Paid claims and cost containment expenses				

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

		Pre	emiums Earn	ed		(+	Loss	,	cpense Payme	ents			12
Year Wh		1	2	3	Loss Pa	yments	Defense a		Adjusting Paym		10	11	Number of
Premiun Earne Losses Incu	ed and s Were	Direct and Assumed	Ceded	Net (1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Claims Reported Direct and Assumed
1. I	Prior	XXX	XXX	XXX									XXX
2. 2	2009	2,189		2, 189	1,523		144		121		98	1,788	827
3. 2	2010												
4. 2	2011												
5. 2	2012												
6. 2	2013												
7. 2	2014	•											
8. 2	2015												
9. 2	2016												
10. 2	2017												
11. 2	2018	409	409		64	64			42	42	0		18
12.	Totals	XXX	XXX	XXX	1,587	64	144		163	42	98	1,788	XXX

			Losses	Unpaid		Defens	e and Cost (Containment	Unpaid	Adjusti	ng and	23	24	25
		Case	Basis	Bulk +	- IBNR	Case			- IBNR	Other I				
		13 Direct	14	15 Direct	16	17 Direct	18	19 Direct	20	21 Direct	22	Salvage and	Total Net Losses and	Number of Claims Outstand-
		and		and		and		and		and		Subrog- ation	Expenses	ing Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated		Assumed
1.	Prior													
2.	2009													
3.	2010													
4.	2011													
5.														
6.	2013													
7.	2014													
8.	2015													
9.	2016													
10.	2017													
11.	2018	7	7	186	186			3	3	20	20			5
12.	Totals	7	7	186	186			3	3	20	20			5

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	nce Sheet
		Losses and	d Loss Expense			d /Premiums E			r Discount			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			XXX		
2.	2009	1,788		1,788	81.7		81.7					
3.	2010											
4.	2011											
5.	2012											
6.	2013											
7.	2014											
8.	2015											
9.	2016											
10.	2017											
11.	2018	323	323		78.9	78.9						
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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

		Pre	emiums Earne	ed		(+	Loss		pense Payme	ents			12
	ears in	1	2	3				and Cost	Adjusting		10	11	
	Vhich				Loss Pa			t Payments	Paym		4		Number of
	ums Were				4	5	6	7	8	9	L	Total Net	Claims
	ned and	Discret and			Discret and		Discret and		Discret and		Salvage and		Reported
	es Were	Direct and	Cadad	Not (1 2)	Direct and	Cadad	Direct and	Codod	Direct and	Cadad	Received	(4 - 5 + 6 - 7	
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX									XXX
2.	2009	9,228		9,228	5,970		377		385		2,341	6,732	8,368
3.	2010	•											
4.	2011												
5.	2012												
6.	2013												
7.	2014	•											
8.	2015	•											
9.	2016												
10.	2017	•											
11.	2018	723	723		92	92			35	35	0		53
12.	Totals	XXX	XXX	XXX	6,062	92	377		420	35	2,341	6,732	XXX

			Losses	Unpaid		Defens	e and Cost (Containment	Unpaid	Adjusti	ng and	23	24	25
		Case		Bulk +	· IBNR	Case		Bulk +		Other				
		13	14	15	16	17	18	19	20	21	22			Number
												Salvage	Total Net	of Claims
		Direct		Direct		Direct		Direct		Direct		and Subrog-	Losses and	Outstand-
		and		and		and		and		and		ation	Expenses	ing Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior													
2.														
3.	2010													
4.	2011													
5.	2012													
6.	2013													
7.	2014													
8.														
9.	2016													
10.	2017													
11.	2018	118	118	359	359			13	13	45	45			33
12.	Totals	118	118	359	359			13	13	45	45			33

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	nce Sheet
			Loss Expense	s Incurred		d /Premiums E			r Discount			fter Discount
		26 Direct	27	28	29 Direct	30	31	32	33	Inter- Company Pooling	35	36 Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.	2009	6,732		6,732	73.0		73.0					
3.	2010											
4.	2011											
5.	2012											
6.	2013											
7.												
8.												
9.	2016	-							····			
10.	2017											
11.	2018	662	662		91.5	91.5						
12.	Totals	xxx	xxx	XXX	xxx	XXX	XXX			xxx		

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

		Pro	emiums Earn	ed		,	Los	s and Loss Ex	cpense Payme	ents			12
Year	-	1	2	3				and Cost	Adjusting		10	11	
Wh	-				Loss Pa			t Payments	Payn		_		Number of
Premium					4	5	6	7	8	9		Total Net	Claims
Earne		5			5		5				Salvage and		Reported
Losses		Direct and	0-4-4	N=+ (4 O)	Direct and	0-4-4	Direct and	0-4-4	Direct and	0-4-4		(4 - 5 + 6 - 7	
Incu	irrea	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1. I	Prior	XXX	XXX	XXX									XXX
2. 2	2009	722		722	323		20		15		33	358	339
3. 2	2010												
4. 2	2011												
5. 2	2012												
6. 2	2013												
7. 2	2014												
8. 2	2015												
9. 2	2016												
10. 2	2017												
11. 2	2018												
12.	Totals	XXX	XXX	XXX	323		20		15		33	358	XXX

			Losses	Unpaid		Defens	e and Cost (Containment	Unpaid	Adjusti	ng and	23	24	25
		Case	Basis	Bulk +	- IBNR	Case	Basis	Bulk +	- IBNR	Other	Unpaid			
		13 Direct	14	15 Direct	16	17 Direct	18	19 Direct	20	21 Direct	22	Salvage and Subrog-	Total Net Losses and	Number of Claims Outstand- ing
		and		and		and		and		and		ation	Expenses	Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Únpaid	Assumed
1.	Prior													
2.	2009													
3.	2010													
4.	2011													
5.	2012													
6.	2013													
7.	2014													
8.	2015													
9.	2016													
10.	2017													
11.	2018													
12.	Totals													

			Total			oss Expense F				34	Net Balar	nce Sheet
			d Loss Expense			d /Premiums E		Nontabula				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			XXX		
2.	2009	358		358	49.6		49.6					
3.	2010											
4.	2011											
5.	2012											
6.	2013											
7.	2014											
8.	2015											
9.	2016											
10.	2017											
11.	2018											
12.	Totals	xxx	XXX	XXX	XXX	XXX	XXX			xxx		

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

					(\$00	<u>0 OMITTED</u>)					
	Pro	emiums Earn	ied			Loss	s and Loss Ex	cpense Payme	ents			12
Years in	1	2	3				and Cost		and Other	10	11	
Which				Loss Pa	yments	Containmen	nt Payments	Payn	nents			Number of
Premiums We				4	5	6	7	8	9		Total Net	Claims
Earned and										Salvage and		Reported
Losses Wer				Direct and		Direct and		Direct and			(4 - 5 + 6 - 7)	Direct and
Incurred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2009												
3. 2010												
4. 2011												
5. 2012											+	
6. 2013												
7. 2014						<i></i>						
8. 2015												
10. 2017												
11. 2018												

			Losses	Unpaid		Defens	e and Cost (Containment	Unnaid	Adjusti	ng and	23	24	25
		Case		Bulk +	IBNR	Case		Bulk +		Other I				
		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 and Assumed
1.	Prior													
2.	2009	-												
3.	2010													
4.	2011													
5.	2012													
6.	2013													
7.	2014													
8.	2015													
9.	2016													
10.	2017													
11.	2018													
12.	Totals													

			Total			oss Expense F				34	Net Bala	nce Sheet
		Losses and	d Loss Expense	es Incurred		ed /Premiums E		Nontabula	ar Discount			fter Discount
		26 Direct	27	28	29 Direct	30	31	32	33	Inter- Company Pooling	35	36 Loss
		and Assumed	Ceded	Net	and Assumed	Ceded	Net	Loss	Loss Expense	Participation Percentage	Losses Unpaid	Expenses Unpaid
1.	Prior	xxx	XXX	XXX	XXX	XXX	XXX			xxx		
2.	2009											
3.	2010	<u></u>										
4.	2011								<u> </u>			
5.	2012	-										
6.	2013											
7.												
8.	2015											
9.	2016											
10.	2017											
11.	2018									1		
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

		Pr	emiums Earn	ed		(+	Los		xpense Payme	ents			12
	ears in	1	2	3				and Cost	Adjusting		10	11	
	Vhich				Loss Pa		Containmer	nt Payments	Payn				Number of
	ums Were				4	5	6	7	8	9		Total Net	Claims
	ned and	5:			6		D:		5		Salvage and		Reported
	es Were	Direct and	0-4-4	N-+ (4 O)	Direct and	0-4-4	Direct and	0-4-4	Direct and	0-4-4		(4 - 5 + 6 - 7	
inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX									XXX
2.	2009	197		197	37		6		3		13	46	44
3.	2010												
4.	2011												
5.	2012												
6.													
7.	2014												
8.	2015												
9.	2016												
10.	2017												
11.	2018												
12.	Totals	XXX	XXX	XXX	37		6		3		13	46	XXX

			Losses	Unpaid		Defens	e and Cost (Containment	Unpaid	Adjusti	ng and	23	24	25
		Case	Basis	Bulk +	- IBNR	Case	Basis	Bulk +	- IBNR	Other	Unpaid			
		13 Direct	14	15 Direct	16	17 Direct	18	19 Direct	20	21 Direct	22	Salvage and Subrog-	Total Net Losses and	Number of Claims Outstand- ing
		and		and		and		and		and		ation	Expenses	Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Únpaid	Assumed
1.	Prior													
2.	2009													
3.	2010													
4.	2011													
5.	2012													
6.	2013													
7.	2014													
8.	2015													
9.	2016													
10.	2017													
11.	2018													
12.	Totals													

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	nce Sheet
		Losses and	d Loss Expense			d /Premiums E		Nontabula				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			XXX		
2.	2009	46		46	23.4		23.4					
3.	2010											
4.	2011											
5.	2012											
6.	2013											
7.	2014											
8.	2015											
9.	2016											
10.	2017											
11.	2018											
12.	Totals	xxx	XXX	xxx	XXX	XXX	XXX			XXX		

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

		Pre	emiums Earn	ed		(+	Loss		cpense Payme	ents			12
	ars in	1	2	3				and Cost	Adjusting		10	11	
	/hich				Loss Pa		Containmen	t Payments	Payn				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									XXX
2.	2009	30		30	15		7					22	
3.	2010												
4.	2011												
5.	2012												
6.	2013												
7.	2014	3		3	2							2	2
8.	2015	13		13	12				1			13	9
9.	2016	16		16	4				1			5	5
10.	2017	13		13	7							7	8
11.	2018	2		2									
12.	Totals	XXX	XXX	XXX	40		7		2			49	XXX

				Unpaid				Containment			ng and	23	24	25
		Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	- IBNR	Other	Unpaid			
		13 Direct	14	15 Direct	16	17 Direct	18	19 Direct	20	21 Direct	22	Salvage and Subrog-	Total Net Losses and	Number of Claims Outstand- ing
		and Assumed	Ceded	and Assumed	Ceded	and Assumed	Ceded	and Assumed	Ceded	and Assumed	Ceded	ation Anticipated	Expenses	
1.	Prior													
2.	2009													
3.	2010													
4.	2011													
5.	2012													
6.														
7.														
8.														
9.														
10.														
11.	2018			1				0					1	
12.	Totals			1				0					1	

			Total		Loss and L	oss Expense l	Percentage			34	Net Balar	nce Sheet
		Losses and	d Loss Expense	es Incurred		ed /Premiums I		Nontabula	ar Discount		Reserves A	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			XXX		
2.	2009	22		22	73.3		73.3					
3.	2010											
4.	2011											
5.	2012											
6.	2013											
7.	2014	2		2	66.7		66.7					
8.	2015	13		13	100.0		100.0					
9.	2016	5		5	31.3		31.3					
10.	2017	7		7	53.8		53.8					
11.	2018	1		1	37.3		37.3				1	0
12.	Totals	xxx	XXX	XXX	XXX	XXX	xxx			xxx	1	0

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

						(Φυ	JU OIVII I ED	,					
		Pre	emiums Earn	ied			Loss	s and Loss Ex	kpense Payme	ents			12
Years		1	2	3				and Cost	Adjusting		10	11	
Whic					Loss Pa			t Payments					Number o
Premiums					4	5	6	7	8	9	0-1	Total Net	Claims
Earned Losses		Direct and			Direct and		Direct and		Direct and		Salvage and	Paid Cols (4 - 5 + 6 - 7	Reported Direct and
Incurr		Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+8-9)	Assumed
1 D	rior	XXX	XXX	XXX									XXX
2. 20	009	•		-			-						
3. 20	010												
4. 20	011												
5. 20	012												
7. 20	014	•											
8. 20	015												
9. 20	016												
11. 20	018												
12. To	otals	XXX	XXX	XXX									XXX

			Losses	Unpaid		Defens	e and Cost (Containment	Unpaid	Adjusti	ng and	23	24	25
		Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	IBNR	Other I	Jnpaid			
		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 and Assumed
1.	Prior													
2.	2009													
3.	2010													
4.	2011													
5.	2012													
6.														
7.														
8.														
9.														
10. 11.	2017 2018													
12.	Totals													

			Total		Loss and L	oss Expense F	Percentage			34	Net Bala	nce Sheet
		Losses and	d Loss Expense	s Incurred	(Incurre	ed /Premiums E	arned)	Nontabula	ar Discount		Reserves A	fter Discount
		26 Direct	27	28	29 Direct and	30	31	32	Loss	Inter- Company Pooling Participation	35 Losses	Loss Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.	2009	-								-		
3.	2010											
4.	2011									-		
5.	2012									-		
6.	2013	-		·					-			
7.	2014											
8.	2015								-	-		
9.	2016									-		
10.	2017											
11.	2018											
12.	Totals	xxx	xxx	XXX	xxx	XXX	XXX			xxx		

SCHEDULE P - PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT) (\$000 OMITTED)

		Pro	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	Containmer	nt Payments	Payn	nents			Number of
Premiu	ıms Were				4	5	6	7	8	9		Total Net	Claims
Earr	ned and										Salvage and		Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7)	Direct and
Ind	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	xxx									XXX
2.	2017	1,403		1,403	5,516		612		42		1	6, 170	XXX
3.	2018	104		104	112		6					118	XXX
4.	Totals	XXX	XXX	XXX	5,627		618		42		1	6,288	XXX

			Losses	Unpaid		Defens	e and Cost (Containment	Unnaid	Adiusti	ng and	23	24	25
		Case		Bulk +	· IBNR	Case		Bulk +		Other	ng and Unpaid			
		13	14	15	16	17	18	19	20	21	22			Number
												Salvage and	Total Net Losses	of Claims Outstand-
		Direct and		Direct and		Direct and		Direct and		Direct and		Subrog- ation	and Expenses	ing Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior													
2.	2017	<u></u>		1									1	
3.	2018			4				0					4	
4.	Totals			5				0					5	

			Total			oss Expense F				34		nce Sheet
		Losses an	d Loss Expense	es Incurred	(Incurre	ed /Premiums I	Earned)	Nontabula	r Discount		Reserves Af	ter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
										Company		
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1	Prior .	xxx	XXX	XXX	XXX	XXX	XXX			XXX		
2	2017	6, 171		6, 171	439.8		439.8				1	
3	2018	121		121	116.3		116.3				4	0
4	Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	5	0

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

	Pr	emiums Earn	ed		•	Los	s and Loss Ex	cpense Payme	ents			12
Years in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
Which	Were and Vere Direct and			Loss Pa	ayments	Containmer	nt Payments	Payn	nents			Number of
Premiums Were				4	5	6	7	8	9		Total Net	Claims
Earned and										Salvage and Subrogation	Paid Cols	Reported
Losses Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7)	Direct and
Incurred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1. Prior	xxx	XXX	xxx									XXX
2. 2017												
3. 2018	370	370		225	225			21	21	3		123
4. Totals	XXX	XXX	XXX	225	225			21	21	3		XXX

												23	24	25
			Losses	Unpaid		Defens	e and Cost C	Containment	Unpaid	Adjusti	ng and Jnpaid			
		Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	- IBNR	Other I	Jnpaid			
		13	14	15	16	17	18	19	20	21	22			Number
												Salvage	Total Net	of Claims
												and	Losses	Outstand-
		Direct		Direct		Direct		Direct		Direct		Subrog-	and	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													
2.	2017													
3.	2018	41	41	105	105			2	2	13	13			40
4.	Totals	41	41	105	105			2	2	13	13			40

			Total			oss Expense F				34		nce Sheet
		Losses and	d Loss Expense	es Incurred	(Incurre	ed /Premiums E	arned)	Nontabula	r Discount		Reserves Af	ter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
										Company		
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.	2017											
3.	2018	408	408		110.2	110.2						
4.	Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

SCHEDULE P - PART 1K - FIDELITY/SURETY

	Pr	emiums Earn	ed		, ,	Los	s and Loss Ex	cpense Payme	ents			12
Years in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
Which				Loss Pa	ayments	Containmer	nt Payments	Payn	nents			Number of
Premiums Were				4	5	6	7	8	9		Total Net	Claims
Earned and										Salvage and		Reported
Losses Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7)	Direct and
Incurred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2017						7						XXX
3. 2018												XXX
4. Totals	XXX	XXX	XXX									XXX

												23	24	25
				Unpaid				Containment		Adjusti Other I	ng and			
		Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	· IBNR	Other I	Jnpaid			
		13	14	15	16	17	18	19	20	21	22			Number
												Salvage	Total Net	of Claims
												and	Losses	Outstand-
		Direct		Direct		Direct		Direct		Direct		Subrog-	and	ing
		and		and		and		and		and		ation	Expenses	Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Coded	Assumed	Ceded	Assumed	Ceded	Anticipated		Assumed
4	Drion													
1.	Prior													
2.	2017													
-						7 111 7								
3.	2018													
	T													
4.	Totals													

			Total			oss Expense F				34		nce Sheet
		Losses and	d Loss Expense	es Incurred	(Incurre	ed /Premiums E	arned)	Nontabula	r Discount		Reserves A	fter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
										Company		
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	X		XXX			XXX		
2.	2017											
3.	2018											
4.	Totals	XXX	XXX	XXX	4 7	VV	xxx			XXX		

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

	Pr	emiums Earn	ed			Los	s and Loss Ex	cpense Paymo	ents			12
Years in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
Which				Loss Pa	yments	Containmer	nt Payments	Payn	nents			Number of
Premiums Were				4	5	6	7	8	9		Total Net	Claims
Earned and										Salvage and	Paid Cols	Reported
Losses Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7)	Direct and
Incurred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1. Prior	xxx	xxx	xxx									xxx
2. 2017	57		57	43				2			45	xxx
3. 2018	5		5	24		1					25	XXX
4. Totals	XXX	XXX	XXX	67		1		2			70	XXX

												23	24	25
			Losses	Unpaid		Defens	e and Cost (Containment	Unpaid	Adjusti	ing and			
		Case	Basis	Bulk +	· IBNR	Case	Basis	Bulk +	- IBNR	Other	ing and Unpaid			
		13	14	15	16	17	18	19	20	21	22			Number
												Salvage	Total Net	of Claims
												and	Losses	Outstand-
		Direct		Direct		Direct		Direct		Direct		Subrog-	and	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													
2.	2017													
3.	2018			1				0					1	
4.	Totals			1				0					1	

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	nce Sheet
		Losses and	d Loss Expense	es Incurred	(Incurre	ed /Premiums E	Earned)	Nontabula	r Discount		Reserves Af	ter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
										Company		
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.	2017	45		45	78.9		78.9					
3.	2018	26		26	575.0		575.0				1	0
4.	Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	1	0

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
NONE

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Υe	ears in	INCURRED	NET LOSSES	AND DEFEN	NSE AND CO	ST CONTAIN	MENT EXPE	NSES REPO	RTED AT YE	AR END (\$00	0 OMITTED)	DEVELO	PMENT
Whic	h Losses	1	2	3	4	5	6	7	8	9	10	11	12
Were	Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	One Year	Two Year
1.	Prior	8	214	204	208	212	212	212	212	212	212		
2.	2009		1,704	1,675	1,667	1,667	1,667	1,667	1,667	1,667	1,667		
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	XXX									
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX							
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals		

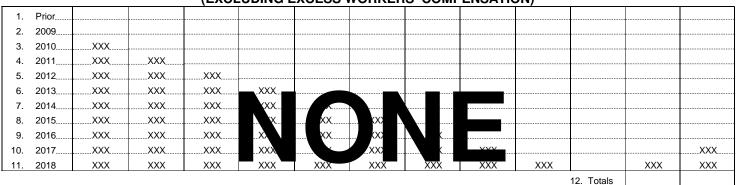
SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

			_								-	_	
1.	Prior	3,350	4,026	3,819	3,816	3,948	3,948	3,948	3,948	3,948	3,948		
2.	2009	6,944	6,236	6,250	6,280	6,347	6,347	6,347	6,347	6,347	6,347		
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	XXX									
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX							
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals		

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

1.	Prior	548	466	425	458	488	488	488	488	488	488		
2.	2009	739	385	344	326	343	343	343	343	343	343		
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	XXX									
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX							
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals		

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



SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

						`			• =				
1.	Prior	20	58	55	71	70	70	70	70	70	70		
2.	2009	56	50	48	43	43	43	43	43	43	43		
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX		XXX									***************************************
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX							
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals		

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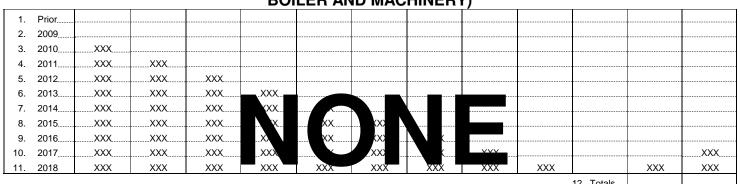
SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Ye	ears in	INCURRED	NET LOSSES	S AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPO	RTED AT YEA	AR FND (\$00	0 OMITTED)	DEVELO	PMENT
	h Losses	1	2	3	4	5	6	7	8	9	10	11	12
	Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	One Year	Two Year
1.	Prior												
2.	2009												
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	XXX									
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	.X.	XX							
8.	2015	XXX	XXX	XXX	X	XX	💢						
9.	2016	XXX	XXX	XXX	XXX		XXX						
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals		

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

							_						
1.	Prior												
2.	2009											<u> </u>	ļ
3.	2010	XXX											L
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	xxx									ļ
6.	2013	XXX	XXX	XXX	.XXX								ļ
7.	2014	XXX	XXX	XXX	ξ ΧΧ			\					l
8.	2015	XXX	XXX	XXX	X	XX	(XX						
9.	2016	XXX	XXX	XXX	X	XX	(XX						L
10.	2017	XXX	XXX	XXX	×xx		XXX		VVV				XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
						•					12. Totals		

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



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

		SCHE	DULL	- PAN	211-3		1 1 - O 1	HEN LI	ADILII	1 - 000	UNNEI	ICE	
1.	Prior	14	9	(14)	19	12	12	12	12	12	12		
2.	2009	5	(2)	18	19	22	22	22	22	22	22		
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	XXX									
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX	3	2	2	2	2		
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	11	12	12	12		
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	4	4		(2)
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	7	(1)	XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	XXX	XXX
											12 Totals	(1)	(2)

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

		00112		1 / 111		0_0110				. 01/	11110		
1.	Prior												
2.	2009												
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	XXX									
6.	2013	XXX	XXX	XXX	.XXX								
7.	2014	XXX	XXX	XXX	XXX		.	\					
8.	2015	XXX	XXX	XXX	. X	×x	\						
9.	2016	XXX	XXX	XXX	X	××	(XX						
10.	2017	XXX	XXX	XXX	xxx		.XXX						XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals		

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

					, -		,		,			
Years in	INCURRED	NET LOSSES	AND DEFEN	NSE AND CO	ST CONTAIN	IMENT EXPE	NSES REPO	RTED AT YEA	AR END (\$000	OMITTED)	DEVELO	PMENT
Which Losses	1	2	3	4	5	6	7	8	9	10	11	12
Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	One Year	Two Year
4 Delen	V/V/	V/V/	V/V/V	V/V/V	V/V/	V/V/	V/V/	4,881	4.801	95	(4,706)	(4 706)
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,001	4,801	95	(4,706)	(4,780)
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	976	6,129	5 , 153	XXX
0 0040	VVV	V/V/	VVV	VVV	V//V	VVV	V//V	VVV	VVV	121	V/V/	
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	121	XXX	XXX
											4.47	(4.700)

4. Totals 447 (4,786)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
2.	2017		XXX	XXX	XXX	XXX	XXX	XXX	XXX				xxx
3	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
<u>J.</u>	2010	7000	7000	7000	7000	7000	7000	7000	7000	7000	4 Totals	7001	7000

SCHEDULE P - PART 2K - FIDELITY/SURETY

1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
2.	2017	XXX	xxx	xxx	xxx		XXX					xxx
3.	2018	XXX	XXX	XXX		XX	×××		 XXX		XXX	XXX
	2010	7000	7000	7000		700			•	4. Totals	7///	7000
										4. Totals		

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

					<i>-</i>		(,			<u> </u>	
Ī	1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	2	1	(1)	(6)
	2.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	49	43	(6)	xxx
	3	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26	XXX	XXX
1											ı	4. Totals	(7)	(6)

SCHEDULE P - PART 2M - INTERNATIONAL

				SCH	EDULE	P - PAF	KI 2IVI -	INIEKN	IAHON	AL			
1.	Prior												
2.	2009										-		
3.	2010	xxx											
4.	2011	xxx	XXX										
5.	2012	xxx	XXX	xxx									
6.	2013	xxx	XXX	xxx	XXX			·····					
7.	2014	xxx	XXX	xxx	X X	xx	<u> </u>	\					
8.	2015	xxx	XXX	xxx	x	XX	(XX						
9.	2016	xxx	XXX	xxx	XXX.		XX		_				
10.	2017	xxx	XXX	xxx	XXX	XXX	xxx	xxx	xxx				XXX.
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx	XXX		XXX	XXX
											12. Totals		

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 3A - HOMEOWNERS/FARMOWNERS

		CUMUL	ATIVE PAID N	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR 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 Vere											With Loss	Without
	curred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Payment	Loss Payment
4				155	181	212			212			1.863	1 dymone
1.	Prior		100				212	212		212	212	,	
2.	2009	1,265	1,558	1,620	1,636	1,667	1,667	1,667	1,667	1,667	1,667	624	203
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	XXX									
6.	2013	xxx	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX							
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		10	3

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

1.	Prior	000	1,712	2,861	3,499	3,948	3,948	3,948	3,948	3,948	3,948	18,454	
2.	2009	3,833	5,073	5,653	6,046	6,347	6,347	6,347	6,347	6,347	6,347	6,426	1,942
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	XXX									
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX							
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		17	3

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

1.	Prior	000	156	300	438	488	488	488	488	488	488	888	
2.													68
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	XXX									
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX							
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

				(=::0=		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. •			,		
1.	Prior	000									 	
2.	2009											
3.	2010	XXX									 	
4.	2011	XXX	XXX									
5.	2012	XXX	XXX	XXX							 	
6.	2013	XXX	XXX	XXX	.XXX						 	
7.	2014	XXX	XXX	XXX	XXX						 	
8.	2015	XXX	XXX	XXX	X	xx	(XX).	.				
9.	2016	XXX		XXX	X	XX						
10.	2017	XXX	XXX	XXX	xxx		YYY		VVV		 	
11.	2018	xxx	XXX	xxx	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1.	Prior	000	35	59	69	70	70	70	70	70	70	97	
2.	2009	26	33	36	41	43			43	43	43	27	17
3.	2010												
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	XXX									
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX							
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

		CUMUL	ATIVE PAID I	NET LOSSES	AND DEFEN	NSE AND CO (\$000 O		MENT EXPE	NSES REPOR	RTED AT YEA	AR END	11 Number of	12 Number of
V Lo	ears in Vhich osses Vere	1	2	3	4	5	6	7	8	9	10	Claims Closed With Loss	Claims Closed Without Loss
Ind	curred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Payment	Payment
1.	Prior	000											
2.	2009												
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	XXX									
6.	2013	XXX	XXX	XXX	X.		7						
7.	2014	XXX	XXX	XXX	X	XX							
8.	2015	XXX	XXX	XXX	xxx		XX						
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

1.	Prior	000									 	
2.	2009										 	
3.	2010	XXX									 	
4.	2011	XXX	XXX								 	
5.	2012	XXX	XXX	XXX							 	
6.	2013	XXX	XXX	XXX	.XXX						 	
7.	2014	XXX	XXX	XXX	XXX						 	
8.	2015	XXX	XXX	XXX	.X X	XX	(xx).				 	
9.	2016	XXX	XXX	XXX	X	XX	XX				 	
10.	2017	XXX	XXX	XXX	xxx		XXX		VVV		 	
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

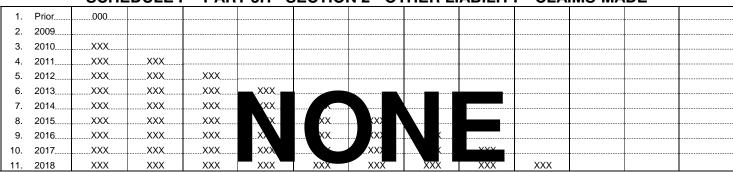
SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

									,			
1.	Prior	000									 XXX	XXX
2.	2009										 XXX	XXX
3.	2010	XXX									 XXX	XXX
4.	2011	XXX	XXX								 XXX	XXX
5.	2012	XXX	XXX	XXX							 XXX	XXX
6.	2013	XXX	XXX	XXX	.XXX						 XXX	XXX
7.	2014	XXX	XXX	XXX	XXX						 XXX	XXX
8.	2015	XXX	XXX	XXX	X	XX	🗴				 XXX	XXX
9.	2016	XXX	XXX	XXX	_X	XX	(XX				 XXX	XXX
10.	2017	XXX	XXX	XXX	XXX		XXX		XXX		 XXX	XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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

1.	Prior	000	2	(26)	2	12	12	12	12	12	12		
2.	2009	(1)	(1)	2	9	22	22	22	22	22	22		
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	XXX									
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX		2	2	2	2	2	
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	9	12	12	12	9	
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4	4	3	2
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	7	7	1
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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



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

	CUMUL	ATIVE PAID	AR END	11	12							
					(\$000 OI	MITTED)					Number of	Number of
Years in	1	2	3	4	5	6	7	8	9	10	Claims	Claims
Which											Closed	Closed
Losses											With	Without
Were											Loss	Loss
Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Payment	Payment
1. Prior	xxx	xxx	xxx	XXX	xxx	xxx	xxx	000	95	95	xxx	xxx
2. 2017	xxx	xxx	xxx	XXX	xxx	xxx	xxx	XXX	839	6, 128	xxx	XXX
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	xxx	XXX	XXX	118	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000		 	
2.	2017	XXX	XXX	XXX	xxx	XXX	xxx	XXX	xxx		 	
3.	2018	XXX	XXX	XXX	XXX	XXX	XXX	xxx	XXX	XXX	56	27

SCHEDULE P - PART 3K - FIDELITY/SURETY

1.	Prior	XXX	XXX	XXX	XXX	X	XXX	 			XXX	XXX
2.	2017	XXX	XXX	XXX	XX		\sim	 XXX			XXX	xxx
3.	2018	XXX	XXX	xxx		xx	(XX	XXX	XXX		XXX	xxx
3.	2018	XXX	XXX	XXX	×	- XX		XXX	XXX	<u> </u>	XXX	

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

1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	1	1	XXX	XXX
2	2017	XXX	XXX	XXX	XXX	XXX	XXX	xxx	VVV	43	12	XXX	VVV
3	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25	XXX	XXX

SCHEDULE P - PART 3M - INTERNATIONAL

				0011	LDOLL	<u> </u>	t i Jivi -	1141 - 1111				
1.	Prior	000									 xxx	xxx
2.	2009										 XXX	XXX
3.	2010	XXX									xxx	XXX
4.	2011	xxx	XXX								 xxx	XXX
5.	2012	XXX	XXX	xxx							 XXX	XXX
6.	2013	XXX	XXX	XXX	XXX						 XXX	XXX
7.	2014	xxx	XXX	xxx	x x	(X					 xxx	XXX
8.	2015	xxx	XXX	xxx	λ	xx	XX				 xxx	xxx
9.	2016	XXX	XXX	xxx	XXX.		XXX				 XXX	XXX
10.	2017	xxx	XXX	xxx	XXX	xxx	xxx	xxx	XXX		 xxx	XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property NONE

Schedule P - Part 3O - 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 4A - HOMEOWNERS/FARMOWNERS

		BULK AND IE	NR RESERVES	ON NET LOSS	SES AND DEFE	NSE AND COS	T CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	00 OMITTED)
V L	ears in Vhich osses Vere	1	2	3	4	5	6	7	8	9	10
	curred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior	(204)	(116)	(86)	(60)						
2.	2009	276	(64)	(54)	(39)						
3.	2010	XXX									
4.	2011	xxx	XXX								
5.	2012	xxx	xxx	XXX							
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	xxx	xxx	XXX	XXX	XXX	xxx				
9.	2016	xxx	xxx	XXX	XXX	XXX	xxx	xxx			
10.	2017	XXX	XXX	XXX	XXX	XXX	xxx	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

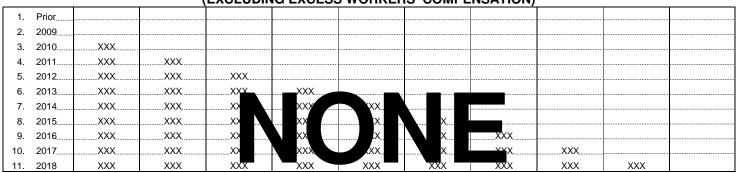
SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1.	Prior	(300)	(754)	(495)	(303)						
2.	2009	1,096	(333)	(261)	(215)						
3.	2010										
4.	2011	XXX	XXX								
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1.	Prior	109	(23)	(67)	(31)						
2.	2009		30	12							
3.	2010	XXX									
4.	2011	XXX	XXX								
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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



SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1.	Prior	(55)	(43)	(43)	(16)						
2.	2009	2	(4)	(10)	(6)						
3.	2010	XXX									
4.	2011	XXX	XXX								
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	xxx				
9.	2016	XXX	XXX	XXX	XXX	XXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

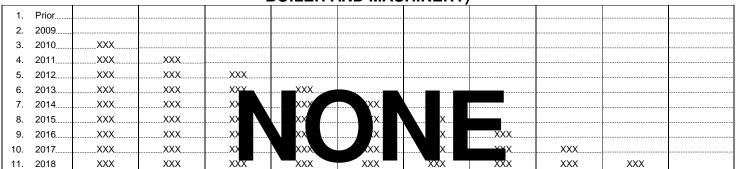
SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

		BULK AND I	BNR RESERVES	ON NET LOS	SES AND DEFE	NSE AND COST	T CONTAINMEN	NT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
V Le	ears in Vhich osses Vere	1	2	3	4	5	6	7	8	9	10
In	curred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior										
2.	2009										
3.	2010	xxx									
4.	2011	xxx	XXX								
5.	2012	xxx	XXX	XX				 			
6.	2013	xxx	XXX	XX	××						
7.	2014	xxx	XXX	XX	××	X.					
8.	2015	xxx	XXX	XX	XXX		X				
9.	2016	xxx	XXX	XXX	xxx	XXX	XXX	XXX			
10.	2017	xxx	XXX	XXX	xxx	XXX	xxx	xxx	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1.	Prior										
2.	2009										
3.	2010	XXX									
4.	2011	XXX	XXX								
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XX	XXX	XX.	` \				
8.	2015	XXX	XXX	XX	××	X.	X				
9.	2016	XXX	XXX	XX	××		X	XXX			
10.	2017	XXX	XXX	XX	XXX	XX	X	YY X	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

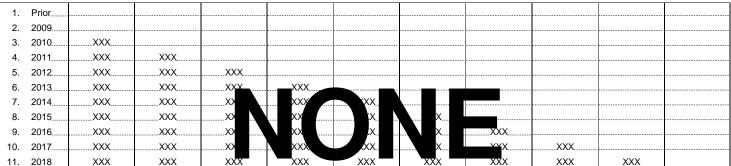
SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)



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

1	Prior	1	(5)		3						
2	2009				1						
2.			(3)	(2)							
3.	2010	XXX									
4.	2011	XXX	XXX								
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	xxx	XXX	XXX	XXX	xxx	3				
8			XXX					2			
0.											
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2		
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

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



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

				, -		,				
	BULK AND I	BNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
Years in Which Losses	1	2	3	4	5	6	7	8	9	10
Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior 2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX XXX	175	137	1
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4

SCHEDULE P - PARTAL - AUTO PHYSICAL DAMAGE

					_	_	 	_					
1.	Prior	XXX	XXX	XX		xx	CX		X	xxx			
2.	2017	YYY	XXX	YY.		XX	,		X	XXX	VVV		
3.	2018	XXX	XXX	XX		XX	XXX		X	X	XXX	XXX	

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior XXX XX					,		111 712 1		OUNEIL			
2. 2017XXXXXXXXXXXX	1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
	2				~	VVV	· · · ·		· · ·	xxx		
	3.					XX	×	X	~~		XXX	
										•	ı	

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

											,
1.	Prior	XXX	XXX	xxx	xxx	XXX	XXX	xxx	7	1	
2						XXX				_	
3	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SCHEDULE P - PART 4M - INTERNATIONAL

				SCHEDU	<u> </u>	7111 TIVI -	1141 - 11117	TITOITAL			
1.	Prior					-					
2.	2009										
3.	2010	xxx									
4.	2011	xxx	XXX								
5.	2012	xxx	xxx	XXX							
6.	2013	XXX	xxx	XX	XXX.						
7.	2014	xxx	xxx	XX	××	X	.				
8.	2015	xxx	xxx	XX	XX	x.	X				
9.	2016	xxx	XXX	XX	XXX.	XXX.	X	X			
10.	2017	xxx	xxx	XXX	XXX	XXX	xxx	xxx	xxx		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx	

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 5A - HOMEOWNERS/FARMOWNERS SECTION 1

			CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LO	SS PAYMENT I	DIRECT AND AS	SSUMED AT YE	AR END	
	in Which	1	2	3	4	5	6	7	8	9	10
Were	miums Earned Losses										
	Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior	472	466	468	469	460					
2.	2009	107	236	366	496	624	624	624	624	624	624
3.	2010	xxx									
4.	2011	xxx	XXX								
5.	2012	xxx	XXX	XXX							
6.	2013	xxx	xxx	xxx	XXX						
7.	2014	xxx	xxx	xxx	XXX	XXX					
8.	2015	xxx	XXX	XXX	XXX	XXX	XXX				
9.	2016	xxx	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	xxx	xxx	xxx	xxx	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10

SECTION 2

						LC HON					
				NUMBER	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	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior	4	3	2	1						
2.	2009	13	2	1	1						
3.	2010	XXX									
4.	2011	xxx	XXX								
5.	2012	xxx	xxx	XXX							
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	xxx	XXX	XXX	XXX	XXX					
8.	2015	xxx	xxx	XXX	XXX	XXX	xxx				
9.	2016	xxx	xxx	XXX	XXX	XXX	XXX	xxx			
10.	2017	xxx	XXX	XXX	XXX	xxx	xxx	xxx	xxx		
11.	2018	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

	1		OLINALII ATIVE		LUTION		ID 4001 IMED 4	T.VEAD END		
						TED DIRECT AN	ID ASSUMED A			
Years in Which Premiums Were Earned and Losses	1	2	3	4	5	6	7	8	9	10
Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior	521	616	619	620	609					
2. 2009	154	314	485	658	827	827	827	827	827	82
3. 2010	xxx									
4. 2011	xxx	XXX								
5. 2012	xxx	XXX	XXX							
6. 2013	xxx	xxx	XXX	XXX						
7. 2014	xxx	XXX	XXX	XXX	XXX					
8. 2015	xxx	XXX	XXX	XXX	XXX	XXX				
9. 2016	xxx	xxx	XXX	XXX	XXX	XXX	XXX			
10. 2017	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018	xxx	xxx	xxx	xxx	xxx	xxx	xxx	XXX	xxx	18

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

			CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LO	SS PAYMENT I	DIRECT AND AS	SSUMED AT YE	AR END	
	in Which	1	2	3	4	5	6	7	8	9	10
Were	miums Earned										
	Losses Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior	4,458	4,583	4,635	4,657	4,579					
2.	2009	879	2,220	3,613	5,029	6,426	6,426	6,426	6,426	6,426	6,426
3.	2010	xxx									
4.	2011	xxx	XXX								
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	xxx	XXX	xxx	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	xxx	xxx	xxx	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17

SECTION 2

						LUTION					
				NUMBER	R OF CLAIMS O	<u>UTSTANDING I</u>	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	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior	132	109	46	18						
2.	2009	607			17						
3.	2010	XXX									
4.	2011	xxx	XXX								
5.	2012	xxx	XXX	XXX							
6.	2013	xxx	XXX	XXX	XXX						
7.	2014	xxx	XXX	XXX	XXX	XXX					
8.	2015	xxx	XXX	XXX	XXX	XXX	XXX				
9.	2016	xxx	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33

					LOTIOI					
			CUMULATIVE	NUMBER OF C	LAIMS REPOR	TED DIRECT AN	<u>ID ASSUMED A</u>	T YEAR END		
Years in Which Premiums Were Earned and Losses	1	2	3	4	5	6	7	8	9	10
Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior	4,577	5,872	5,895	5,958	5,868					
2. 2009	1,766	3,017	4,761	6,574	8,368	8,368	8,368	8,368	8,368	8,36
3. 2010	XXX									
4. 2011	XXX	XXX								
5. 2012	XXX	XXX	XXX							
6. 2013	XXX	XXX	XXX	XXX						
7. 2014	XXX	XXX	XXX	XXX	XXX					
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016	xxx	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

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

			CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT I	DIRECT AND AS	SSUMED AT YE	AR END	
	in Which	1	2	3	4	5	6	7	8	9	10
	miums										
	e Earned Losses										
	Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
				-	-						
1.	Prior	213	219	223	225	221					
2.	2009	37	93	152	212	271	271	271	271	271	271
3.	2010	XXX									
4.	2011	xxx	XXX								
5.	2012	XXX	XXX	XXX							
6.	2013	xxx	xxx	XXX	XXX						
7.	2014	xxx	XXX	XXX	XXX	XXX					
8.	2015	xxx	XXX	XXX	XXX	XXX	XXX				
9.	2016	xxx	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	xxx	xxx	XXX	XXX	XXX	xxx	xxx	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

						LC HON					
				NUMBER	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	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior	13	6	3	1						
2.	2009	17	4	2	1						
3.	2010	xxx									
4.	2011	xxx	XXX								
5.	2012	xxx	XXX	XXX							
6.	2013	xxx	XXX	XXX	XXX						
7.	2014	xxx	XXX	XXX	XXX	XXX					
8.	2015	xxx	XXX	XXX	XXX	XXX	xxx				
9.	2016	xxx	XXX	XXX	XXX	XXX	xxx	xxx			
10.	2017	xxx	XXX	XXX	XXX	XXX	xxx	xxx	xxx		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

			01184111 ATD/F		LUTION		ID A COLUMED A	TVEAD END		
						TED DIRECT AN	ND ASSUMED A			
Years in Which Premiums Were Earned and Losses	1	2	3	4	5	6	7	8	9	10
Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior	241	274	237	289	284					
2. 2009	65	124	186	263	339	339	339	339	339	33
3. 2010	xxx									
4. 2011	xxx	XXX								
5. 2012	xxx	xxx	XXX							
6. 2013	xxx	xxx	XXX	XXX						
7. 2014	XXX	XXX	XXX	XXX	XXX					
8. 2015	xxx	XXX	XXX	XXX	XXX	XXX				
9. 2016	xxx	xxx	XXX	XXX	XXX	XXX	XXX			
10. 2017	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

NONE

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2 **NONE**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 3 **NONE**

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

			CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT I	DIRECT AND AS	SSUMED AT YE	AR END	
	in Which	1	2	3	4	5	6	7	8	9	10
	miums										
	e Earned										
	Losses Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
******	rinounou	2000	2010	2011	2012	2010	2011	2010	2010	2017	2010
1.	Prior	22	23	24	25	25					
2.	2009	4	9	15	21	27	27	27	27	27	27
3.	2010	XXX									
4.	2011	xxx	XXX								
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	xxx	XXX	XXX	XXX	XXX	XXX	XXX	xxx		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

					<u> </u>	ECTION !					
				NUMBER	OF CLAIMS C	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	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior	3	2	1							
2.	2009	2									
3.	2010	XXX									
4.	2011	xxx	XXX								
5.	2012	xxx	XXX	XXX							
6.	2013	xxx	XXX	XXX	XXX						
7.	2014	xxx	XXX	XXX	XXX	XXX					
8.	2015	xxx	XXX	XXX	XXX	XXX	XXX				
9.	2016	xxx	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	xxx	XXX	XXX	XXX	XXX	xxx	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

					LOTION					
			CUMULATIVE	NUMBER OF C	CLAIMS REPOR	TED DIRECT AN	ND ASSUMED A	AT YEAR END		
Years in Which Premiums Were Earned and Losses	1	2	3	4	5	6	7	8	9	10
Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior	30	31	36	37	38					
2. 2009	8	14	24	34	44	44	44	44	44	
3. 2010	xxx									
4. 2011	xxx	XXX								
5. 2012	xxx	XXX	XXX							
6. 2013	xxx	XXX	XXX	XXX						
7. 2014	XXX	XXX	XXX	XXX	XXX					
8. 2015	XXX	XXX	XXX	XXX	xxx	XXX				
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

Ye	ears in		CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END 1 2 3 4 5 6 7 8 9 10													
	in Which	1	2	3	4	5	6	7	8	9	10					
	miums															
	Earned Losses															
	Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018					
										-						
1.	Prior															
2.	2009															
		2007														
3.	2010	XXX														
4.	2011	xxx	XXX													
5.	2012	XXX	XXX	XXX												
5.	2012															
6.	2013	XXX	XXX	XXX	XXX											
7.	2014	XXX	XXX	XXX	XXX	YYY	2	2	2	2	2					
/.	2014								<i>E</i>		£					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	8	9	9	9					
9.	2016	xxx	xxx	XXX	XXX	xxx	XXX	xxx	3	3	3					
										_	_					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	7					
11.	2018	XXX	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX						

SECTION 2A

					O.	_C 2					
Υe	ears in			NUMBE	R OF CLAIMS C	OUTSTANDING I	DIRECT AND AS	SSUMED AT YE	AR END		
Pre Were	in Which emiums e Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior										
2.	2009										
3.	2010	XXX									
4.	2011	xxx	XXX								
5.	2012	xxx	xxx	XXX							
6.	2013	xxx	XXX	XXX	XXX						
7.	2014	xxx	XXX	XXX	XXX	XXX					
8.	2015	xxx	xxx	XXX	XXX	XXX	XXX	1			
9.	2016	xxx	xxx	XXX	XXX	xxx	XXX	XXX			
10.	2017	xxx	xxx	xxx	XXX	xxx	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A

				31	ECTION 3	PA				
Years in			CUMULATIVE	NUMBER OF C	CLAIMS REPOR	TED DIRECT AN	ID ASSUMED A	T YEAR END		
Years in Which Premiums Were Earned and Losses	1	2	3	4	5	6	7	8	9	10
Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior										
2. 2009										
3. 2010	xxx	-								
4. 2011	XXX									
5. 2012	XXX	XXX	XXX							
6. 2013	XXX									
7. 2014	XXX						2	2	2	
8. 2015							9	9	9	
9. 2016	XXX		XXX		XXX		XXX	5	5	
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX		XXX	8	
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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 **NONE**

Schedule P - Part 5T - Warranty - Section 3 **NONE**

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

Υe	ars in Which		CUMU	LATIVE PREM	IIUMS EARNE	ED DIRECT A	ND ASSUMED	O AT YEAR EN	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	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Earned
1.	Prior											
2.	2009	722	722	722	722	722	722	722	722	722	722	
3.	2010	XXX										
4.	2011	XXX	XXX									
5.	2012	xxx	XXX	XXX								
6.	2013	XXX	XXX	XXX	XXX							
7.	2014	XXX	XXX	XXX	XXX	XXX						
8	2015	XXX	XXX	XXX	XXX	XXX	XXX					
9	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned	······										
13.	Premiums											
	(Sch P-Pt. 1)	722										XXX

SECTION 2

Ye	ears in Which		CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										
V	Premiums Vere Earned and Losses	1	2	3	4	5	6	7	8	9	10	Current Year Premiums	
V	/ere Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Earned	
1.	Prior												
2.	2009												
3.	2010	XXX											
4.	2011	XXX	XXX										
5.	2012	XXX	XXX	X <u>XX</u>									
6.	2013	XXX	XXX		XXX								
7.	2014	XXX	XXX		XXX								
8.	2015	XXX	XXX		××	X	🗱						
9.	2016	XXX	XXX		XX	X		XXX					
10.	2017	XXX	XXX		XXX		X		XXX				
11.	2018	XXX	XXX	XX	XXX	XXX	XXX		XXX	XXX			
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13.	Earned												
	Premiums (Sch P-Pt. 1)											XXX	

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

							NI					
Υe	ears in Which		CUML	ILATIVE PRE	MIUMS EARNI	ED DIRECT A	ND ASSUMEI	O AT YEAR E	ND (\$000 OMI	TTED)		11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
	Vere Earned											Year
	and Losses				0010	2242			0010			Premiums
V	ere Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Earned
1.	Prior											
2.	2009									ļ		
3.	2010	XXX										
4.	2011	XXX	XXX									
5.	2012	XXX	XXX	XXX				<u></u>				
6.	2013	XXX	XXX		XXX							
7.	2014	XXX	XXX		×xx							
8.	2015	XXX	XXX		××	×	XX					
9.	2016	XXX	XXX		XX	×		XXX		1		1
10.	2017		XXX		XXX		X	YYY	XXX			
11.	2018	XXX	XXX		XXX		XXX		XXX	XXX		
12.	Totals	T	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned											
	Premiums											1
	(Sch P-Pt. 1)											XXX

					S	SEC HO	N 2					
Υe	ears in Which			CUMULATI	VE PREMIUM	S EARNED C	EDED AT YEA	AR END (\$000	OMITTED)			11
V	Premiums Vere Earned and Losses	1	2	3	4	5	6	7	8	9	10	Current Year Premiums
	ere Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Earned
1.	Prior											
2.	2009											
3.	2010	XXX										
4.	2011	XXX	XXX									
5.	2012	XXX	XXX	X <u>XX</u>	··· <u></u>							
6.	2013	XXX	XXX		XXX							
7.	2014	XXX	XXX		XXX							
8.	2015	XXX	XXX		××	X	XX					
9.	2016	XXX	XXX		XX	X		XXX				
10.	2017	XXX	XXX		XXX	,	X	XXX	XXX			
11.	2018	XXX	XXX		XXX	AXX	XXX		XXX	XXX		
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned											
	Premiums (Sch P-Pt. 1)											XXX

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

Ye	ears in Which		CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)									
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	Vere Earned											Year
	and Losses											Premiums
W	ere Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Earned
1.	Prior											
2.	2009	197	197	197	197	197	197	197	197	197	197	
3.	2010	XXX										
4.	2011	XXX	XXX									
5.	2012	XXX	XXX	XXX								
6.	2013	XXX	XXX	XXX	XXX							
7.	2014	XXX	XXX	XXX	XXX	XXX						
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX					
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12.	Totals		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned											
	Premiums											
	(Sch P-Pt. 1)	197										XXX

SECTION 2

Ye	ears in Which	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										
	Premiums Vere Earned	1	2	3	4	5	6	7	8	9	10	Current Year
	and Losses /ere Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Premiums Earned
1.	Prior											
2.	2009											
3.	2010	XXX										
4.	2011	XXX	XXX									
5.	2012	XXX	XXX	XXX	<u></u>			<u></u>				
6.	2013	XXX	XXX		XXX							
7.	2014	XXX	XXX		XXX							
8.	2015	XXX	XXX		××	X	XX					
9.	2016	XXX	XXX		XX	X		XXX				ļ
10.	2017	XXX	XXX		XXX	,	X		XXX			
11.	2018	XXX	XXX	, , , , , , , , , , , , , , , , ,	XXX	XXX	XXX		XXX	XXX		
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned											
	Premiums (Sch P-Pt. 1)											XXX

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

Υe	ears in Which		CUMUI	LATIVE PREM	IIUMS EARNE	D DIRECT A	ND ASSUMED	AT YEAR EN	ID (\$000 OMI	TTED)		11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	Vere Earned											Year
	and Losses											Premiums
V	/ere Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Earned
1.	Prior											
2.	2009	30	30	30	30	30	30	30	30	30	30	
3.	2010	XXX										
4.	2011	XXX	XXX									
5.	2012	XXX	XXX	XXX								
6.	2013	XXX	XXX	XXX	XXX							
7.	2014	XXX	XXX	XXX	XXX	XXX	3	3	3	3	3	
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	13	13	13	13	
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	16	16	
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2
13.	Earned											
	Premiums											
	(Sch P-Pt. 1)	30					3	13	16	13	2	XXX

SECTION 2A

					S	ECTION	1 2A					
Ye	ears in Which			CUMULATI	/E PREMIUM	S EARNED C	EDED AT YEA	AR END (\$000	OMITTED)			11
V	Premiums Vere Earned	1	2	3	4	5	6	7	8	9	10	Current Year
	and Losses /ere Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Premiums Earned
1.	Prior											
2.	2009											
3.	2010	XXX										
4.	2011	XXX	XXX									
5.	2012	XXX	XXX	X <u>XX</u>			<u></u>					
6.	2013	XXX	XXX		XXX							
7.	2014	XXX	XXX		XXX							
8.	2015	XXX	XXX		××	X	XX					
9.	2016	XXX	XXX		XX	X		XXX			<u> </u>	
10.	2017	XXX	XXX		XXX		X	YYY	XXX			
11.	2018	XXX	XXX	X	XXX	XXX	XXX		XXX	XXX		
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned Premiums											
	(Sch P-Pt. 1)											XXX

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

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B **NONE**

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 - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED) SECTION 1

		1	2	3	4	5	6
			Net Losses and	J	7	Net Premiums	O
		Total Net Losses	Expenses Unpaid	Loss Sensitive	Total Net	Written on	Loss Sensitive
	0	and Expenses	on Loss Sensitive	as Percentage	Premiums	Loss Sensitive	as Percentage
	Schedule P - Part 1	Unpaid	Contracts	of Total	Written	Contracts	of Total
1.	Homeowners/Farmowners	•					
2.	Private Passenger Auto Liability/ Medical						
3.	Commercial Auto/Truck Liability/ Medical						
4.	Workers' Compensation						
5.	Commercial Multiple Peril						
6.	Medical Professional Liability - Occurrence						
7.	Medical Professional Liability - Claims - Made						
8.	Special Liability						
9.	Other Liability - Occurrence	1			0		
10.	Other Liability - Claims-Made						
11.	Special Property	5			3		
12.	Auto Physical Damage						
13.	Fidelity/Surety						
14.	Other	1			0		
15.	International	•					
16.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX	xxx	XXX
17.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX	xxx	XXX
18.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX	xxx	XXX
19.	Products Liability - Occurrence						
20.	Products Liability - Claims-Made						
21.	Financial Guaranty/Mortgage Guaranty						
22.	Warranty						
23.	Totals	6			3		

SECTION 2

	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)											
Years in	1	2	3	4	5	6	7	8	9	10		
Which												
Policies Were Issued	2009	2010	2011	2012	2013	2014	2015	2016	2017	2019		
	2009	2010	2011	2012	2013	2014	2013	2010	2017	2018		
1. Prior												
2. 2009												
3. 2010	XXX											
4. 2011	xxx	xxx										
5. 2012	xxx	xxx	××			\						
6. 2013	XXX	xxx	××	XX								
7. 2014	XXX	xxx	XX	××	x.							
8. 2015	xxx	xxx	XX	XXX	.XX.	X						
9. 2016	xxx	xxx	XXX	xxx	xxx	XXX	XXX					
10. 2017	xxx	xxx	XXX	XXX	xxx	xxx	XXX	xxx				
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

				S	ECHON	3				
	BULK AND	O INCURRED BU	JT NOT REPOR	TED RESERVE		S AND DEFENS MITTED)	E AND COST C	ONTAINMENT	EXPENSES AT \	EAR END
Years in Which Policies	1	2	3	4	5	6	7	8	9	10
Were Issued	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior										
2. 2009										
3. 2010	xxx									
4. 2011	xxx	xxx								
5. 2012	XXX	xxx	XX			\				
6. 2013	XXX	xxx	XX	××						
7. 2014	xxx	xxx	XX	××						
8. 2015	xxx	xxx	XX	A XXX	XX.	×				
9. 2016	xxx	xxx	XXX	XXX	XXX	XXX	XXX			
10. 2017	xxx	xxx	xxx	xxx	XXX	xxx	xxx	xxx		
11. 2018	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	

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 - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED) SECTION 1

		1	2	3	4	5	6
		Total Net Losses	Net Losses and Expenses Unpaid	Loss Sensitive	Total Net	Net Premiums Written on	Loss Sensitive
		and Expenses	on Loss Sensitive	as Percentage	Premiums	Loss Sensitive	as Percentage
	Schedule P - Part 1	Unpaid	Contracts	of Total	Written	Contracts	of Total
1.	Homeowners/Farmowners						
2.	Private Passenger Auto Liability/Medical						
3.	Commercial Auto/Truck Liability/Medical						
4.	Workers' Compensation						
5.	Commercial Multiple Peril						
6.	Medical Professional Liability - Occurrence						
7.	Medical Professional Liability - Claims - Made						
8.	Special Liability						
9.	Other Liability - Occurrence	1			0		
10.	Other Liability - Claims-Made						
11.	Special Property	5			3		
12.	Auto Physical Damage						
13.	Fidelity/Surety						
14.	Other	1			0		
15.	International	•					
16.	Reinsurance - Nonproportional Assumed Property						
17.	Reinsurance - Nonproportional Assumed Liability						
18.	Reinsurance - Nonproportional Assumed Financial Lines						
19.	Products Liability - Occurrence						
20.	Products Liability - Claims-Made						
21.	Financial Guaranty/Mortgage Guaranty						
22.	Warranty						
23.	Totals	6			3		

SECTION 2

SECTION 2													
		INCURRED LO	SSES AND DEF	FENSE AND CO	ST CONTAINM	ENT EXPENSE:	S REPORTED A	T YEAR END (000 OMITTED)				
Years in Which Policies	1	2	3	4	5	6	7	8	9	10			
Were Issued	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018			
1. Prior 2. 2009													
3. 2010	xxx												
4. 2011	xxx	xxx											
5. 2012	xxx	xxx	XX			` 							
6. 2013	xxx	xxx	XX	××									
7. 2014	xxx	xxx	XX	××	X.								
8. 2015	XXX	xxx	XX	. XXX	XX.	X							
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

				3		ა				
	BULK AND) INCURRED BU	JT NOT REPOR	RTED RESERVE		S AND DEFENSE	AND COST C	ONTAINMENT E	EXPENSES AT Y	EAR END
					(\$000 C	OMITTED)				
Years in	1	2	3	4	5	6	7	8	9	10
Which Policies										
Were Issued	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior	2003	2010	2011	2012	2010	2014	2010	2010	2017	2010
2. 2009										····
3. 2010	XXX									
4. 2011	XXX	XXX								
5. 2012	XXX	XXX	XX			\				
6. 2013	xxx	xxx	XX	××						
7. 2014	xxx	xxx	XX	××						
8. 2015	xxx	xxx	XX	XXX	XX.	x				
9. 2016	xxx	xxx	XXX	XXX	XXX	XXX	XXX			
10. 2017	xxx	xxx	xxx	xxx	xxx	xxx	XXX	xxx		
11 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	ĺ

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts **NONE**

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

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts ${f N}$ ${f O}$ ${f N}$ ${f E}$

SCHEDULE P INTERROGATORIES

1.	The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Dr. Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to		OR) provisions in Medical
1.1	Yes [] No [X]		
1.2	What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsew dollars)?		;
1.3	Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65?		. Yes [] No [X]
1.4	Does the company report any DDR reserve as loss or loss adjustment expense reserve?		Yes [] No [X]
1.5	If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on 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 [X
1.6	If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the follow in Schedule P:	ring table corresponding to where	these reserves are reported
		DDR Reserve Schedule P, Part 1F, Medic Column 24: Total Net Losse	al Professional Liability s and Expenses Unpaid
	Years in Which Premiums Were Earned and Losses Were Incurred	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior		
	2009		
	2010		
1.604	2011		
	2012		
	2013		
	2014		
	2015		
	2016		
	2017		
	Totals		
2.	The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment experience of the definition of allocated loss adjustment experience of the definition of the definition applies to both paid and unpaid expenses. Are these of the definition of	expenses (now reported as " n this statement? es were incurred based on the expense between companies in a loss amounts and the claim ance contract. For Adjusting and	Yes [X] No []
	expense should be allocated by a reasonable method determined by the company and described in Interrogreported in this Statement?		Yes [X] No []
4.	Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future net of such discounts on Page 10?		
	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 Stabeing 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 Fidelii	ty	
	5.2 Suret	y	
6.	Claim count information is reported per claim or per claimant (Indicate which).	p	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 currer 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	
7.2	(An extended statement may be attached.)		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN Allocated by States and Territories Direct Business Only 5 2 3 6 Disability Income Long-Term Care Annuities Life (Group and Individual) (Group and (Group and (Group and Deposit-Type States, Etc. Individual) Individual) Individual) Contracts Totals 1. Alabama 3. 4. AR 5. California ... CA 6 Colorado CO Connecticut CT 7. 8. _____ DE Delaware 9. 10. Florida FL 11. Georgia GA Hawaii HI 13.ID 14.IL Indiana 15IN 16. lowaIA 17. Kansas KS 18. Kentucky KY 19. Louisiana LA 20. Maine ME 21. MD Maryland 22. Massachusetts MA 23. Michigan MI 24. Minnesota... MN 25. Mississippi MS 26. Missouri MO MT 27. Montana 28. Nebraska 29. Nevada 32. New Mexico 33. New York 34. North Carolina NC ND 35. North Dakota OH 36. Ohio 37. Oklahoma OK 38.OR Oregon 39. Pennsylvania 40. Rhode Island RI 41. South Carolina _____ SC 42. 43 Tennessee TN 44 Texas TX Utah UT 45. VermontVT 46. 47. Virginia VA 48. Washington WA 49. West Virginia WV 50. Wisconsin WI 51. Wyoming WY 52. American Samoa AS 53 Guam GU PR 54. Puerto Rico 55. U.S. Virgin Islands _____ VI 56. Northern Mariana Islands MP

57.

59.

Total

Canada CAN Aggregate Other Alien OT

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

	PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	_			Ŭ		·	ŭ	O		'''	Type	If	' '		
											of Control	Control			
														1	
									5		(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		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)	(Y/N)	*
	Auto Club Enterprises Insurance Group									Interinsurance Exchange of the Automobile					
1318		12487	20-3462094				Motor Club Insurance Company	RI	RE	Club	Ownership	50.000	See Note Below	N	4
	Auto Club Enterprises Insurance Group										•				
1318		12487	20-3462094				Motor Club Insurance Company	RI	RE	AAA Northeast Holding, Inc.	Ownership	50.000	See Note Below	N	4
			47-1842331				AAA Northeast	DE	JIP					N	
							Automobile Club Insurance Agency, Inc. d/b/a								
			05-0146230				AAA Insurance Agency, Inc.	RI	NI A	AAA Northeast	Ownership	100.000	AAA Northeast	N	
			54-0971805				AAA Northeast Insurance Agency, Inc	MA	NI A	AAA Northeast	Ownership	100.000	. AAA Northeast	N	
			20-3166530				AAA Northeast Holding, Inc.	RI	UDP	AAA Northeast	Ownership	100.000	AAA Northeast	N	
			05-0498630				AAA Northeast Mortgage Corporation	RI	NI A	AAA Northeast	Ownership	100.000	AAA Northeast	N	
			05-0495594				AAA Northeast Bank	RI	NI A	AAA Northeast Mortgage Corporation	Ownership	100.000	AAA Northeast	N	·
							AAA New Jersey Division Financial Services,					1	l	1	
			46-2807629				Inc	NJ	NI A	AAA Northeast Bank	Ownership	100.000	AAA Northeast	N	
			20-1094252				AAA Auto Glass, Inc.	RI	NI A	AAA Northeast	Ownership	100.000	AAA Northeast	N	
			20-3026333				Blue Hen Investment Company, Inc.	DE	NI A	AAA Northeast	Ownership	100.000	AAA Northeast	N	
			26-2346231				AAA Driver Training School, Inc.	MA	NI A	AAA Northeast	Ownership	100.000	AAA Northeast	N	
			27-4504941				American AutoGlass Administrators, Inc.	RI	NI A	AAA Northeast	Ownership	100.000	AAA Northeast	N	
			06-0997474				AAA Car Care, Inc.	CT	NI A	AAA Northeast	Ownership	100.000	AAA Northeast	N	
			00 0070740				Safety Educators, Inc d/b/a AAA Driver	RI	NIA		0 1:	400 000	*** ** **	.,	
			38-3879742 16-1546378				TrainingAAA Driver Training School, Inc.	NY	NIA	AAA Northeast	Ownership	100.000	AAA Northeast	N	
			61-1858763				Motor Club Insurance Captive, LLC	VT	NIA	AAA Northeast		100.000	AAA Northeast	IV	
	Auto Club Enterprises Insurance Group		61-1838/63			***************************************	Interinsurance Exchange of the Automobile	VI	IA	AAA NOTINeasi	Ownership	100.000	Automobile Club of Southern California	N	
1318	Auto Club Enterprises Insurance Group	15598	95-0865765				Club	CA	UDP	Automobile Club of Southern California	Board of Directors		Automobile club of Southern California	N	4
1010	Auto Club Enterprises Insurance Group	13336	. 95-0005705				Club	UA		Interinsurance Exchange of the Automobile	Board of Directors	·····	Automobile Club of Southern California		
1318	Auto Club Enterprises insurance droup	15512	43-6029277				Automobile Club Inter-Insurance Exchange	MO	IA	Club	Board of Directors		Automobile club of Southern Carriotina	N	1
1010	Auto Club Enterprises Insurance Group	10012	140 0023211				Automobile orab inter insurance Exchange	mo		Oldb	Board of Directors		Automobile Club of Southern California		
1318	nate orab Enterprises mountaine droup	27235	43-1453212				Auto Club Family Insurance Company	MO	IA	Automobile Club Inter-Insurance Exchange	Ownership	100.000	Natomobile elab el coathern carrierna	N	
	Auto Club Enterprises Insurance Group						nate orab raminy modranes company			Interinsurance Exchange of the Automobile			Automobile Club of Southern California		1
1318	nate crab zinterprices mearanes creap	11009	76-0603355				Auto Club Casualty Company	TX	IA	Club	Ownership	100.000	The composition of the control of th	N	
	Auto Club Enterprises Insurance Group									Interinsurance Exchange of the Automobile			Automobile Club of Southern California		1
1318		11008	76-0603356				Auto Club Indemnity Company	TX	IA	Club	Ownership	100.000		N	.]
	Auto Club Enterprises Insurance Group									Interinsurance Exchange of the Automobile	·		Automobile Club of Southern California		
1318		29327	74-1107185				Auto Club County Mutual Insurance Company	TX	IA	Club	Management			N	
	Auto Club Enterprises Insurance Group						Automobile Club of Southern California Life			Interinsurance Exchange of the Automobile			Automobile Club of Southern California		
1318		60256	33-0815346				Insurance Company	CA	IA	Club	Ownership	50.000		N	
	Auto Club Enterprises Insurance Group						Automobile Club of Southern California Life						Automobile Club of Southern California		
1318		60256	33-0815346				Insurance Company	CA	IA	Automobile Club of Southern California	Ownership	50.000		N	l
	AAA Life Group	71854	52-0891929				AAA Life Insurance Company	MI	IA	ACLI Acquisition Company	Ownership	100.000	ACLI Acquisition Company	N	
	AAA Life Group	13738	27-1269555				Life Alliance Reassurance Corporation	HI	IA	AAA Life Insurance Company	Ownership	100.000	ACLI Acquisition Company	N	·[
4853	AAA Life Group	15282	45-0668011				AAA Life Insurance Company of New York	NY	IA	AAA Life Insurance Company	Ownership	100.000	ACLI Acquisition Company	N	
			05 0550000				ACSC Management Services, Inc. (Attorney-in-	CA	NI A	Automobile Club of Southern California	O	100.000	Automobile Club of Southern California	, i	
			95-2553663				Fact)			AUTOMOBILE CLUB OF SOUTHERN CALIFORNIA	Ownership	100.000	M/A	N	
			95-0514585				Automobile Club of Southern California	CA	NI A	Interiorumenea Frances of the Automobile		····· 	- NV A	N	
			38-3416375				ACLI Acquisition Company	DE	NIA	Interinsurance Exchange of the Automobile	Ownership	13.150	See Note Below	N	
			38-3416375				ACLI Acquisition Company	DE	NIA	Automobile Club of Southern California	Ownership	13. 150	See Note Below	N	2
			38-3416375				ACLI Acquisition Company	DE	NIA	Automobile Club of Missouri	Ownership	0.100	See Note Below	N	2
			30-34 103/3				Club Exchange Corporation (Attorney-in-Fact)	VE	NI A	Automobile club of WISSoull	owner sittp	۱۰۰۰ . لا	Automobile Club of Southern California	IV	4
			43-0783626				Trab Exchange outpotation (Attorney-III-1 act)	MO	NI A	Automobile Club of Missouri	Ownership	100.000	The composite of the or obtained the oall for the	N	
			0,00020							The Composition of the Compositi	551 GIT P		Automobile Club of Southern California		
			33-0835940				Pleasant Travel Holding Company, LLC	DE	NIA	Automobile Club of Southern California	Ownership	90.000	Juliania di Santiania di Indiana	N	5
										The state of the s			Automobile Club of Southern California		
L		l	33-0835940	l			Pleasant Travel Holding Company, LLC	DE	NI A	AAA Northern New England	Ownership	2.000		N	J

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

				PP	MI L	A - DE I AI	L OF INSURAN		TOLL	ING COMPANT	SISIEM				
1	2	3	4	5	6	7	8	9	10	11	12 Type of Control (Ownership,	13 If Control is	14	15 Is an	16
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
0		NAIC	ın	F11		if Publicly Traded	Names of	ciliary	to	Discrete Occupando de la composición dela composición dela composición dela composición dela composición de la composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición dela compos	Attorney-in-Fact,	Provide	Lillaine et a Comptentiin e	Re-	
Group Code	Group Name	Company Code	ID Number	Federal RSSD	CIK	(U.S. or International)	Parent, Subsidiaries Or Affiliates	Loca- tion	Reporting Entity	Directly Controlled by (Name of Entity/Person)	Influence, Other)	Percen- tage	Ultimate Controlling Entity(ies)/Person(s)	quired? (Y/N)	*
0000	Croup Hame	0000	rambor	TROOP	Oiit	international)	OI 7 IIIIII COO		Littly	(Hame of Emaly) Glocily	Outlot)	lago	Automobile Club of Southern California	(1/11)	
			. 77-0495728				Pleasant Holidays, LLC	DE	NI A	Pleasant Travel Holding Company, LLC	Ownership	100.000		N	
			94-2446918				Hawaii World LLC	CA	NI A	Pleasant Holidays, LLC	Ownership	100.000	Automobile Club of Southern California	N	
											-		Automobile Club of Southern California		
			71-0919095				Auto Club Enterprises	CA	NI A	Automobile Club of Southern California	Other		Automobile Club of Southern California	N	3
			43-0166020				Automobile Club of Missouri	MO	NI A	Auto Club Enterprises	Other			N	3
			. 25-1114373				AAA East Central	PA	NIA	Auto Club Enterprises	Other		Automobile Club of Southern California	A.	0
			. 20-1114373				AAA East Central	PA	NI A	Auto Club Enterprises	. other		Automobile Club of Southern California	N.	3
			63-0003500				Alabama Motorists Association, Inc.	AL	NI A	Auto Club Enterprises	Other			N	3
			01-0112750				AAA Northern New England	ME	NI A	Auto Club Enterprises	Other		Automobile Club of Southern California	N	3
										·			Automobile Club of Southern California		
			33-0945342				Auto Club Services, LLC	CA	NI A	Automobile Club of Southern California	Ownership	100.000		N	
			76-0664740				AAA Texas, LLC	TX	NI A	Auto Club Services, LLC	Ownership	100.000	Automobile Club of Southern California	N	
										·	·		Automobile Club of Southern California		
			74-2982988				AAA New Mexico, LLC	NM	NI A	Auto Club Services, LLC	Ownership	100.000	Automobile Club of Southern California	N	
			33-0939557				AAA Hawaii, LLC	HI	NI A	Auto Club Services, LLC	Ownership	100.000		N	
			00.000000					НІ	NIA		0 1.	400,000	Automobile Club of Southern California	.,	
			. 00-0000000				Automobile Club of Hawaii, Inc.	HI	NI A	Auto Club Services, LLC	Ownership	100.000	Automobile Club of Southern California	N	
			. 00-0000000				Automobile Club of New Mexico, Inc.	NM	NI A	Auto Club Services, LLC	Ownership	100.000		N	
			01-1855420				Automobile Club of Texas, Inc.	TX	NIA	Auto Club Services, LLC	Ownership	100,000	Automobile Club of Southern California	N	
			. 01 1000420				Automobile orab of lexas, file.	//		Auto orab ocryrocs, EEO	owner strip.	100.000	Automobile Club of Southern California		
			25-0951930				AAA East Central Insurance Agency, Inc	PA	NI A	AAA East Central	Ownership	100.000		N	
			25-1846506				Auto Club Driving Schools, Inc	PA	NIA	AAa-East Central	Ownership	100.000	Automobile Club of Southern California	N	
											·		Automobile Club of Southern California		_
			34-0074310				The Ashland County Automobile Club	OH	NI A	AAA East Central	Other		Automobile Club of Southern California	N	3
			34-0383238				The Massillon Automobile Club	OH	NI A	AAA East Central	Other			N	3
			05 0007000				ALL 014 T		A11 A		0 1.	400,000	Automobile Club of Southern California	.,	
			. 85-0267099				All-City Towing, Inc.	NM	NI A	AAA New Mexico, LLC	Ownership	100.000	Automobile Club of Southern California	NL	
			01-0518954				AAA Car Care Center	ME	NI A	AAA Northern New England	Ownership	100.000		N	
			54-2106828				AAA Driving School, Inc.	ME	NI A	AAA Northern New England	Ownership	100.000	Automobile Club of Southern California	N	
			. 34-2 100020				AAA DITVING SCHOOT, INC.	ME	NI A	AAA NOI LIIETTI NEW ENGLAND	. Towner Strip		Automobile Club of Southern California	IVL	
			01-0022895				AAA Northern New England Insurance	ME	NI A	AAA Northern New England	Ownership	100.000		N	ļ
			. 00-0000000				Hewins Travel LLC	ME	NI A	AAA Northern New England	Ownership	100.000	Automobile Club of Southern California	N	
										,	·		Automobile Club of Southern California		
			01-0411376				Triple A Leasing	ME	NI A	AAA Northern New England	Ownership	100.000	Automobile Club of Southern California	N	
			52-0958851				AAA Arkansas Insurance Agency, Inc	AR	NI A	Automobile Club of Missouri	Ownership	100.000	AUTOMODITE CIUD OI SOUTHETH CATITOTHIA	N	
											·	400.00-	Automobile Club of Southern California		
			. 43-0822493				Club Insurance Agency, Inc.	MO	NI A	Automobile Club of Missouri	Ownership	100.000	Automobile Club of Southern California	N	
			00-0000000				Automobile Club of California	CA	NI A	Automobile Club of Southern California	Ownership	100.000		N	

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management.	ship		Filina	
		NAIG						-	- 1			- 1			
		NAIC				if Publicly Traded	Names of	ciliary	to	5 6	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)	(Y/N)	*
							Tidewater Automobile Association of Virginia						Automobile Club of Southern California		
			54-0465700				Incorporated	VA	NI A	Auto Club Enterprises	0ther			N	3
		1								Tidewater Automobile Association of			Automobile Club of Southern California		
			54-2040600				AAA Tidewater Virginia Car Care Center, LLC	VA	NI A	Virginia, Incorporated	Ownership	100.000		N	
							AAA Tidewater Virginia Fleet Operations, LLC			Tidewater Automobile Association of			Automobile Club of Southern California		
			27-2311305					VA	NI A	Virginia, Incorporated	Ownership	100.000		N	
										Tidewater Automobile Association of			Automobile Club of Southern California		
			00-000000				TAA Chesapeake Branch Office Property, LLC .	VA	NI A	Virginia, Incorporated	Ownership	100.000		N	
										Tidewater Automobile Association of			Automobile Club of Southern California		
			00-000000				TAA Corporate Center Office Property, LLC	VA	NI A	Virginia, Incorporated	Ownership	100.000		N	
							TAA Greenbrier Car Care Center Property, LLC			Tidewater Automobile Association of			Automobile Club of Southern California		
			00-0000000					VA	NI A	Virginia, Incorporated	Ownership	100.000		N	
							TAA Hampton Branch/Car Care Center Property,			Tidewater Automobile Association of			Automobile Club of Southern California		
			00-000000				LLC	VA	NI A	Virginia, Incorporated	Ownership	100.000		N	
										Tidewater Automobile Association of			Automobile Club of Southern California		
			00-000000				TAA Newport News Branch Property, LLC	VA	NI A	Virginia, Incorporated	Ownership	100.000		N	
		1	l							Tidewater Automobile Association of	1		Automobile Club of Southern California	l	
			00-0000000				TAA Norfolk Car Care Center Property, LLC	VA	NI A	Virginia, Incorporated	Ownership	100.000		N	
		1					TAA Suffolk Branch Car Care Center Property,			Tidewater Automobile Association of	1		Automobile Club of Southern California	l	
			00-0000000				LLC	VA	NI A	Virginia, Incorporated	Ownership	100.000		N	
										Tidewater Automobile Association of	l	400 000	Automobile Club of Southern California	l	
			00-0000000				TAA Virginia Beach Branch Property, LLC	VA	NI A	Virginia, Incorporated	Ownership	100.000		N	
		1								Tidewater Automobile Association of	l	400.000	Automobile Club of Southern California	l	
			00-0000000				TAA Williamsburg Branch Property, LLC	VA	NI A	Virginia, Incorporated	Ownership	100.000		N	
		1					TAA Williamsburg Branch/Car Care Center			Tidewater Automobile Association of	l	400.000	Automobile Club of Southern California	l	
			00-0000000				Property, LLC	VA	NI A	Virginia, Incorporated	Ownership	100.000		N	
												- 			
												- 			
								1			1	1			

Asterisk	Explanation Explanation
1	ACSC Management Services, Inc. serves as the attorney-in-fact for Interinsurance Exchange of the Automobile Club. Club Exchange Corporation serves as the attorney-in-fact for Automobile Club Inter-Insurance Exchange.
2	Interinsurance Exchange of the Automobile Club and Automobile Club of Southern California each own 13.15% of ACLI Acquisition Company. Automobile Club of Missouri owns 0.1% of ACLI Acquisition Company. The remainder is owned by several non-affilated entities.
3	Possession of voting interests in nonprofit corporation.
4	Interinsurance Exchange of the Automobile Club and AAA Northeast Holding, Inc. each own a 50% interest in Motor Club Insurance Company.
5	Effective August 23, 2018, a non-affiliated entity acquired 2% ownership interest in Pleasant Travel Holding Company, LLC (PTHC) and the Automobile Club of Southern California's ownership interest in PTHC decreased to 90%

SCHEDULE Y

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

1	2	3	4	5	6	7 Income/ (Disbursements)	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
		ACSC Management Services, Incorporated, (Attorney-in-Fact)					664,647,197				664,647,197	
15598		Interinsurance Exchange of the Automobile					(664,647,197)		*		(664,647,197)	
11008	76-0603356	Auto Club Indemnity Company						(83,071,163)		.1	(83,071,163)	83,468,85
	95-0865765	Interinsurance Exchange of the Automobile						83,071,163	*		83,071,163	(83,468,85
29327		Auto Club County Mutual Insurance Company					(112,579,743)	(91,987,849)			(204,567,591)	209 , 125 , 470
15598		Interinsurance Exchange of the Automobile					112,579,743	91,987,849	*		204,567,591	(209, 125, 470
71854		Club										
							76,285,523	(120,449,047)		-+	(44, 163, 524)	1, 199, 048, 535
		Automobile Club of Southern California Life Insurance Company					(76,285,523)	120,449,047		<u> </u>	44 , 163 , 524	(1,199,048,535
15598		Interinsurance Exchange of the Automobile		(17,150,000)					*		(17, 150,000)	
60256		Automobile Club of Southern California Life Insurance Company		17,150,000							17.150.000	
00000		Automobile Club of Southern California		(17, 150,000)							(17, 150,000)	
	33-0815346	Automobile Club of Southern California										
		Life Insurance Company		17,150,000						- 	17, 150,000	
	20-3462094	Motor Club Insurance Company										1,595,510
15598		Interinsurance Exchange of the Automobile							*			(1,595,510
										-		
0000000	ntrol Totals								XXX			

Intercompany Pooling Percentages:

Interinsurance Exchange of the Automobile Club - 95%

Automobile Club Inter-Insurance Exchange - 4%

Auto Club Family Insurance Company - 1%

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

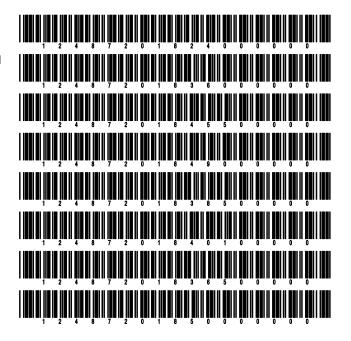
The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted 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
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
	AUGUST FILING	
11.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES
ne fol	lowing supplemental reports are required to be filed as part of your annual statement filing if your company is engaged in the type of business co	vered 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.

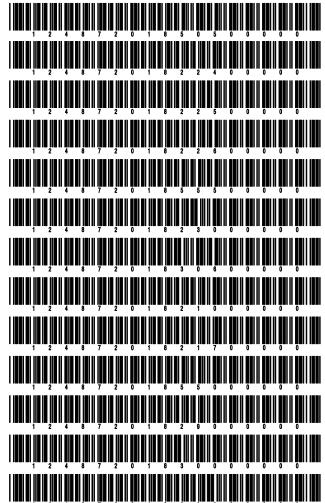
EXPLA	NATION and provide an explanation following the interrogatory questions
12.	MARCH FILING Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?
14.	Will the Medicare Supplement Insurance Exhibit be filed by March 1?
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?
25.	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?
26.	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
27.	electronically with the NAIC by March 1?
28.	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?
	APRIL FILING
29.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?
30.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?
31.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?
32.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?
33.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?
34.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?
35.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?
36.	Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1?
	AUGUST FILING
37.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?

- The data for this supplement is not required to be filed.
- The data for this supplement is not required to be filed. The data for this supplement is not required to be filed.
- 16.
- The data for this supplement is not required to be filed. The data for this supplement is not required to be filed. The data for this supplement is not required to be filed. 18.
- The data for this supplement is not required to be filed. The data for this supplement is not required to be filed. 19
- 24
- The data for this supplement is not required to be filed. The data for this supplement is not required to be filed. The data for this supplement is not required to be filed. 25
- 26. 27
- The data for this supplement is not required to be filed. The data for this supplement is not required to be filed.
- 29.
- The data for this supplement is not required to be filed. The data for this supplement is not required to be filed. The data for this supplement is not required to be filed. 30. 31.
- The data for this supplement is not required to be filed.
 The data for this supplement is not required to be filed. 33
- 34 35. The data for this supplement is not required to be filed.
- 36
- 37. Bar Codes
- 13. Financial Guaranty Insurance Exhibit [Document Identifier 240]
- Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]
- 15. Supplement A to Schedule T [Document Identifier 455]
- Trusteed Surplus Statement [Document Identifier 490] 16.
- Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]
- Reinsurance Summary Supplemental Filing [Document Identifier 401]
- 19 Medicare Part D Coverage Supplement [Document Identifier 365]
- 23. Bail Bond Supplement [Document Identifier 500]



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 24. Director and Officer Insurance Coverage Supplement [Document Identifier 505]
- 25. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- 26. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 27. Relief from the Requirements for Audit Committees [Document Identifier 226]
- 28. Reinsurance Counterparty Reporting Exception Asbestos and Pollution Contracts [Document Identifier 555]
- 29. Credit Insurance Experience Exhibit [Document Identifier 230]
- 30. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 31. Accident and Health Policy Experience Exhibit [Document Identifier 210]
- 33. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
- Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]
- 35 Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 290]
- 36 Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 300]
- 37 Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]



NONE

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

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General Interrogatories	
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Liabilities, Surplus and Other Funds	
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