



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2023
OF THE CONDITION AND AFFAIRS OF THE

AFFILIATED FM INSURANCE COMPANY

NAIC Group Code 0065 (Current) 0065 (Prior) NAIC Company Code 10014 Employer's ID Number 05-0254496

Organized under the Laws of RI, State of Domicile or Port of Entry RI
Country of Domicile United States of America

Incorporated/Organized 05/06/1949 Commenced Business 06/01/1950

Statutory Home Office 270 Central Avenue, Johnston, RI, US 02919-4923
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 270 Central Avenue, Johnston, RI, US 02919-4923
(Street and Number) (City or Town, State, Country and Zip Code)
401-275-3000 (Area Code) (Telephone Number)

Mail Address 270 Central Avenue, P.O. Box 7500, Johnston, RI, US 02919-4923
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 270 Central Avenue, Johnston, RI, US 02919-4923
(Street and Number) (City or Town, State, Country and Zip Code)
401-275-3000 (Area Code) (Telephone Number)

Internet Website Address www.fmglobal.com

Statutory Statement Contact Michael Gariglio, 401-415-1892
(Name) (Area Code) (Telephone Number)
michael.gariglio@fmglobal.com, 401-946-8306
(E-mail Address) (FAX Number)

OFFICERS

President & CEO Malcolm Craig Roberts
Staff Senior Vice President & Controller Frederick Joseph von Mering #
Senior Vice President & Secretary Jonathan Irving Mishara
Vice President & Treasurer Denise Anastasia Hebert

OTHER

Bret Nils Ahnell, Chief Operating Officer
Kevin Scott Ingram, Senior Executive Vice President & Chief Financial Officer
Sanjay Chawla, Executive Vice President
Deanna Ruth Fidler, Executive Vice President
James Robert Galloway, Executive Vice President
Randall Edward Hodge, Executive Vice President
George John Plesce, Executive Vice President

DIRECTORS OR TRUSTEES

Frank Thomas Connor
Thomas Alan Lawson
John Anderson Luke Jr
Gracia Catherine Martore
Christine Mary McCarthy
Michel Giannuzzi
Glenn Rodney Landau
David Thomas Walton
Colin Day
Malcolm Craig Roberts
Thomas James Quinlan III
Frank John Dellaquila
Christine Kocot McCoy #

State of Rhode Island SS
County of Providence

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

Malcolm Craig Roberts
President & CEO

Jonathan Irving Mishara
Senior Vice President & Secretary

Frederick Joseph von Mering #
Staff Senior Vice President & Controller

Subscribed and sworn to before me this 26 day of February 2024

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

Guilia C. Garcia
Notary Public
May 27, 2026



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns for Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

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(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril, Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto, Commercial Auto, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, and Reins nonproportional assumed property/liability/assumed financial lines.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability and Liability Portions), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind and group, Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX and XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger and Commercial Auto (No-Fault and Physical Damage), Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, and Reins nonproportional assumed property and liability.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF California

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns for Line of Business, Gross Premiums, Dividends, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3403, 3498, 3499).

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns for Line of Business, Gross Premiums, Dividends, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3498).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3498).

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns for Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H (Group and Individual), Vision Only (b), Dental Only (b), Disability Income (b), Medicare Supplement (b), Medicaid Title XIX (b), Medicare Title XVIII (b), Long-Term Care (b), Federal Employees Health Benefits Plan (b), Other Health (b), Workers' Compensation, Other Liability - Occurrence, Other Liability - Claims-Made, Excess Workers' Compensation, Products Liability - Occurrence, Products Liability - Claims-Made, Private Passenger Auto No-Fault (Personal Injury Protection), Other Private Passenger Auto Liability, Commercial Auto No-Fault (Personal Injury Protection), Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft (all perils), Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3498).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

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(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2023

NAIC Company Code 10014

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	7,837,766	7,121,461	0	3,630,366	2,957,553	1,690,081	2,720,240	631	(118,971)	39,178	759,901	195,748
2.1 Allied Lines	11,885,434	11,740,336	0	5,618,271	42,463,274	63,164,162	22,517,966	13,641	395,459	384,228	1,144,358	294,821
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	55,869	60,663	16,569	29,549	0	0	0	0	0	0	0	1,394
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	865,550	867,570	0	274,769	2,875,787	2,442,048	2,193,186	0	(22,636)	35,309	83,811	21,592
9. Inland Marine	5,930,875	5,570,125	0	2,502,836	938,076	(13,473,706)	3,180,522	237,762	(447,853)	284,585	564,667	145,475
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	1,063	1,449	0	383	0	0	0	0	0	0	103	27
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	6	6	0	0	1	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	(1)	11	0	0	2	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	2,068,637	1,898,278	0	948,854	163,162	(10,401)	0	0	(2,916)	0	193,483	49,847
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0
30. Warrantly	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	28,645,194	27,259,882	16,569	13,005,028	49,397,852	53,812,188	30,611,931	252,034	(196,917)	743,303	2,746,324	708,904
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

19 GA



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2023

NAIC Company Code 10014

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	194,525	172,549	0	85,485	500,000	3,527,953	3,027,953	0	43,222	43,222	18,660	4,807
2.1 Allied Lines	400,152	463,519	0	186,707	19,783	(14,220)	0	0	(700)	0	38,526	9,925
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	55,345	53,922	0	21,895	0	0	0	0	0	0	5,338	1,375
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	510,914	463,703	0	353,859	0	0	0	0	0	0	49,472	12,745
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	18,861	17,577	0	10,979	0	0	0	0	0	0	1,772	457
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0
30. Warrantly	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	1,179,797	1,171,269	0	658,925	519,783	3,513,733	3,027,953	0	42,522	43,222	113,768	29,310
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

19.HI



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19.1D



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc., and a 'DETAILS OF WRITE-INS' section at the bottom.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

19.1L



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril, Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto, Commercial Auto, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, and Reins nonproportional assumed property.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19.IN



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Auto, and Marine, ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H (Group and Individual), Vision Only (b), Dental Only (b), Disability Income (b), Medicare Supplement (b), Medicaid Title XIX (b), Medicare Title XVIII (b), Long-Term Care (b), Federal Employees Health Benefits Plan (b), Other Health (b), Workers' Compensation, Other Liability - Occurrence, Other Liability - Claims-Made, Excess Workers' Compensation, Products Liability - Occurrence, Products Liability - Claims-Made, Private Passenger Auto No-Fault (Personal Injury Protection), Other Private Passenger Auto Liability, Commercial Auto No-Fault (Personal Injury Protection), Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft (all perils), Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

19 KS

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns for Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, and Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple Peril Crop, Federal Flood, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

19 KY



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril, Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

191A

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns for Line of Business, Gross Premiums, Dividends, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H (Group and Individual), Vision Only (b), Dental Only (b), Disability Income (b), Medicare Supplement (b), Medicaid Title XIX (b), Medicare Title XVIII (b), Long-Term Care (b), Federal Employees Health Benefits Plan (b), Other Health (b), Workers' Compensation, Other Liability - Occurrence, Other Liability - Claims-Made, Excess Workers' Compensation, Products Liability - Occurrence, Products Liability - Claims-Made, Private Passenger Auto No-Fault (Personal Injury Protection), Other Private Passenger Auto Liability, Commercial Auto No-Fault (Personal Injury Protection), Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft (all perils), Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3498).

19 ME

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products

19 MD



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3498).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products

19 MA



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc., ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

19.MI



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Auto, and Marine, ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19 MN



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

19 MS



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns for Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple Peril Crop, Federal Flood, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

19 MO



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19 MT



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3403, 3498, 3499).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19 NIE



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3498).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19 NV



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc., and a 'TOTAL (a)' row.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19 NH



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability and Liability Portions), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind and group, Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX and XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger and Commercial Auto, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, and Reins nonproportional assumed property and liability.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

19 NJ



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability - Occurrence, Medical Professional Liability - Claims-Made, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H (Group and Individual), Vision Only (b), Dental Only (b), Disability Income (b), Medicare Supplement (b), Medicaid Title XIX (b), Medicare Title XVIII (b), Long-Term Care (b), Federal Employees Health Benefits Plan (b), Other Health (b), Workers' Compensation, Other Liability - Occurrence, Other Liability - Claims-Made, Excess Workers' Compensation, Products Liability - Occurrence, Products Liability - Claims-Made, Private Passenger Auto No-Fault (Personal Injury Protection), Other Private Passenger Auto Liability, Commercial Auto No-Fault (Personal Injury Protection), Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft (all perils), Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19 NM



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF New York

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns for Line of Business, Gross Premiums, Dividends, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

19.NY

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc., ending with a Total (a) row and a DETAILS OF WRITE-INS section.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19 NC



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability - Occurrence, Medical Professional Liability - Claims-Made, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H (Group and Individual), Vision Only (b), Dental Only (b), Disability Income (b), Medicare Supplement (b), Medicaid Title XIX (b), Medicare Title XVIII (b), Long-Term Care (b), Federal Employees Health Benefits Plan (b), Other Health (b), Workers' Compensation, Other Liability - Occurrence, Other Liability - Claims-Made, Excess Workers' Compensation, Products Liability - Occurrence, Products Liability - Claims-Made, Private Passenger Auto No-Fault (Personal Injury Protection), Other Private Passenger Auto Liability, Commercial Auto No-Fault (Personal Injury Protection), Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft (all perils), Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3403, 3498, 3499).

19 ND

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc., and a 'DETAILS OF WRITE-INS' section at the bottom.

19 OH

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3498).

19 OK

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2023

NAIC Company Code 10014

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	3,674,090	3,128,505	0	1,996,989	2,541,226	1,101,087	859,548	0	(23,155)	12,270	347,562	89,542
2.1 Allied Lines	5,977,204	5,647,911	0	3,278,697	6,461,922	7,990,563	3,317,558	0	10,550	47,374	566,887	146,047
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	3,635	2,759	911	2,473	0	0	0	0	0	0	0	91
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	1,066,092	(2,004,266)	0	0	(48,452)	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	1,658,419	1,562,285	0	954,228	167,191	(508,265)	538,119	24,309	6,102	8,873	160,585	41,372
9. Inland Marine	2,554,435	2,279,307	0	1,377,278	439,381	(746,114)	50,001	3,955	(6,559)	793	244,087	62,884
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	7,761,136	7,157,419	0	4,117,414	0	0	0	0	0	0	746,346	192,281
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	34	128	0	0	0	0	0
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	967,810	958,828	0	544,478	0	0	0	0	0	0	92,395	23,804
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0
30. Warrantly	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	22,596,729	20,737,015	911	12,171,557	10,675,813	5,833,039	4,765,354	28,264	(61,514)	69,318	2,157,861	556,020
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

19 OR



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns for Line of Business, Gross Premiums, Dividends, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

19 PA



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns: Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products

19.RI



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX, Medicare Title XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger Auto No-Fault, Other Private Passenger Auto Liability, Commercial Auto No-Fault, Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3403, 3498, 3499).

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19 SC



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability - Occurrence, Medical Professional Liability - Claims-Made, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H (Group and Individual), Vision Only (b), Dental Only (b), Disability Income (b), Medicare Supplement (b), Medicaid Title XIX (b), Medicare Title XVIII (b), Long-Term Care (b), Federal Employees Health Benefits Plan (b), Other Health (b), Workers' Compensation, Other Liability - Occurrence, Other Liability - Claims-Made, Excess Workers' Compensation, Products Liability - Occurrence, Products Liability - Claims-Made, Private Passenger Auto No-Fault (Personal Injury Protection), Other Private Passenger Auto Liability, Commercial Auto No-Fault (Personal Injury Protection), Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft (all perils), Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), and DETAILS OF WRITE-INS (3401-3403, 3498, 3499).

19 SD

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc., and a 'DETAILS OF WRITE-INS' section at the bottom.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19.TN



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns for Line of Business, Gross Premiums, Dividends, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

19.TX



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple Peril Crop, Federal Flood, etc., ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19 UT



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns for Line of Business, Gross Premiums, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19.VT



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2023

NAIC Company Code 10014

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	5,523,181	4,633,233	0	3,258,848	3,064,135	9,698,187	7,100,588	10,633	134,708	133,145	544,318	137,002
2.1 Allied Lines	8,486,839	7,653,642	0	5,145,083	4,018,209	3,422,113	1,125,434	0	(19,831)	15,605	815,263	210,051
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	27,186	26,965	7,654	14,365	0	78,000	78,000	0	0	0	0	678
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	282,447	252,275	0	86,551	6,149	(375,371)	0	0	(8,352)	0	27,349	7,047
9. Inland Marine	3,565,688	3,151,086	0	2,127,324	284,129	(436,554)	133,098	7,729	6,553	1,833	347,836	89,619
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	381	365	0	207	0	0	0	0	0	0	37	10
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	859,096	695,916	0	523,214	124,550	1,300,784	1,176,234	0	20,193	20,193	83,592	21,537
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0
30. Warrantly	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	18,744,818	16,413,481	7,654	11,155,592	7,497,172	13,687,159	9,613,353	18,362	133,270	170,776	1,818,395	465,944
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

19 VA



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple Peril Crop, Federal Flood, etc., ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19/WA



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2023

NAIC Company Code 10014

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	894,967	582,868	0	508,982	51,574	51,574	0	0	0	0	86,660	22,468
2.1 Allied Lines	1,598,021	1,086,774	0	970,178	501,860	880,357	378,497	0	5,141	5,141	154,737	40,119
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	457,439	345,812	0	204,727	0	0	0	0	0	0	44,294	11,484
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	195,260	124,589	0	114,210	0	0	0	0	0	0	18,907	4,902
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	3,145,687	2,140,043	0	1,798,097	553,434	931,931	378,497	0	5,141	5,141	304,598	78,973
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

19.WV



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability and Liability Portions), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind and group, Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicare Title XIX and XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger and Commercial Auto (No-Fault and Physical Damage), Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, and Reins nonproportional assumed property and liability.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19.WI



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc., ending with a Total (a) row and a DETAILS OF WRITE-INS section.

19.WV

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc., and a 'DETAILS OF WRITE-INS' section at the bottom.

19AS

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Guam

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance types like Fire, Multiple Peril Crop, Federal Flood, etc., and a 'DETAILS OF WRITE-INS' section at the bottom.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

19 GU



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2023

NAIC Company Code 10014

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	30,327	25,606	0	15,678	0	0	0	0	0	0	2,937	812
2.1 Allied Lines	69,553	64,854	0	37,896	0	0	0	0	0	0	6,735	1,861
2.2 Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland Marine	5,408	4,652	0	3,238	0	0	0	0	0	0	524	145
10. Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake	29,017	21,755	0	20,966	0	0	0	0	0	0	2,810	776
13.1 Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery	3,575	3,196	0	2,164	0	0	0	0	0	0	346	96
28. Credit	0	0	0	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	137,880	120,063	0	79,942	0	0	0	0	0	0	13,351	3,690
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

19 PR



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF U.S. Virgin Islands

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc., and a section for Write-ins (3401-3499).

19.VI

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Northern Mariana Islands

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc., and a 'DETAILS OF WRITE-INS' section at the bottom.

19 MP

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Canada

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Gross Premiums (Direct Written, Direct Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability and Liability Portions), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind and group, Credit A&H, Vision Only, Dental Only, Disability Income, Medicare Supplement, Medicaid Title XIX and XVIII, Long-Term Care, Federal Employees Health Benefits Plan, Other Health, Workers' Compensation, Other Liability, Excess Workers' Compensation, Products Liability, Private Passenger and Commercial Auto (No-Fault and Physical Damage), Aircraft, Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property and liability, Aggregate Write-Ins, and Details of Write-Ins (3401-3403, 3498, 3499).

19 CN

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Other Aliens

DURING THE YEAR 2023

NAIC Company Code 10014

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Marine, Auto, and Health, ending with a Total (a) row and a DETAILS OF WRITE-INS section.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0065

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2023

NAIC Company Code 10014

Table with columns: Line of Business, Gross Premiums (Written/Earned), Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid/Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Multiple Peril Crop, Federal Flood, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$0
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 1

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8 Cols. 6 + 7	9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE								
05-0316605	.21482	FACTORY MUTUAL INSURANCE COMPANY	RI	68,504	(5,687)	674	(5,013)	0	22,244	4,039	0	0	0	0
0399999. Affiliates - U.S. Non-Pool - Other				68,504	(5,687)	674	(5,013)	0	22,244	4,039	0	0	0	0
0499999. Total - U.S. Non-Pool				68,504	(5,687)	674	(5,013)	0	22,244	4,039	0	0	0	0
AA-2730043	.00000	FM GLOBAL de MEXICO S.A. de C.V.	MEX	2,876	140	583	723	0	4,062	1,433	0	0	0	0
AA-1120610	.00000	FM INSURANCE COMPANY LIMITED	GBR	0	0	65	65	0	0	0	0	0	0	0
0699999. Affiliates - Other (Non-U.S.) - Other				2,876	140	648	788	0	4,062	1,433	0	0	0	0
0799999. Total - Other (Non-U.S.)				2,876	140	648	788	0	4,062	1,433	0	0	0	0
0899999. Total - Affiliates				71,380	(5,547)	1,322	(4,225)	0	26,306	5,472	0	0	0	0
95-2801326	.22179	REPUBLIC INDEMNITY CO OF AMERICA	CA	0	0	55	55	0	0	0	0	0	0	0
31-4423946	.10952	TRANSAMERICA CASUALTY INS CO	IA	0	0	29	29	0	0	0	0	0	0	0
0999999. Total Other U.S. Unaffiliated Insurers				0	0	84	84	0	0	0	0	0	0	0
AA-9991300	.00000	ALABAMA BEACH PLAN	AL	88	109	3	112	0	377	81	0	0	0	0
AA-9991202	.00000	CONNECTICUT FAIR PLAN	CT	4	3	0	3	0	8	2	0	0	0	0
AA-9991203	.00000	DELAWARE FAIR PLAN	PA	1	(2)	0	(2)	0	1	1	0	0	0	0
AA-9991204	.00000	DISTRICT OF COLUMBIA FAIR PLAN	DC	3	(49)	0	(49)	0	1	2	0	0	0	0
42-0941910	.15775	IOWA FAIR PLAN	IA	1	4	0	4	0	6	1	0	0	0	0
AA-9991209	.00000	KANSAS FAIR PLAN	KS	2	1	0	1	0	3	1	0	0	0	0
AA-9991212	.00000	MARYLAND JOINT INSURANCE ASSOCIATION	MD	3	0	1	1	0	4	2	0	0	0	0
AA-9991217	.00000	MISSOURI FAIR PLAN	MO	3	3	0	3	0	7	2	0	0	0	0
AA-9992118	.00000	NATIONAL WORKERS COMP REINS POOL	IL	0	4	57	61	0	0	0	0	0	0	0
AA-9991222	.00000	OHIO FAIR PLAN	OH	39	402	11	413	0	490	27	0	0	0	0
AA-9991224	.00000	PENNSYLVANIA FAIR PLAN	PA	13	1	1	2	0	41	9	0	0	0	0
AA-9991225	.00000	RHODE ISLAND FAIR PLAN	RI	70	493	31	524	0	653	42	0	0	0	0
57-0629683	.34134	SOUTH CAROLINA BEACH PLAN	SC	63	5	0	5	0	81	79	0	0	0	0
AA-9991227	.00000	WASHINGTON FAIR PLAN	WA	6	(2)	0	(2)	0	0	2	0	0	0	0
AA-9991228	.00000	WEST VIRGINIA FAIR PLAN	WV	0	0	0	0	0	0	0	0	0	0	0
AA-9991229	.00000	WISCONSIN FAIR PLAN	WI	2	1	0	1	0	6	2	0	0	0	0
1099999. Total Pools, Associations or Other Similar Facilities - Mandatory Pools				298	973	104	1,077	0	1,678	253	0	0	0	0
AA-9995011	.00000	AMERICAN NUCLEAR INSURERS	CT	0	0	0	0	0	0	0	13	0	0	0
AA-9995030	.00000	MARINE OFFICE OF AMERICA CORPORATION	NJ	0	0	6	6	0	0	0	0	0	0	0
1199999. Total Pools, Associations or Other Similar Facilities - Voluntary Pools				0	0	6	6	0	0	0	13	0	0	0
1299999. Total - Pools and Associations				298	973	110	1,083	0	1,678	253	13	0	0	0
AA-1120810	.00000	ACE EUROPEAN GRP LTD	GBR	0	0	55	55	0	0	0	0	0	0	0
AA-1320040	.00000	LA MUTUELLE DE ARCHITECTES FRANCAIS	FRA	0	0	8	8	0	0	0	0	0	0	0
AA-1121390	.00000	STRONGHOLD INSURANCE LTD	GBR	0	0	10	10	0	0	0	0	0	0	0
1399999. Total Other Non-U.S. Insurers				0	0	73	73	0	0	0	0	0	0	0
9999999 Totals				71,678	(4,574)	1,589	(2,985)	0	27,984	5,725	13	0	0	0

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

1 ID Number	2 NAIC Com- pany Code	3 Name of Company	4 Date of Contract	5 Original Premium	6 Reinsurance Premium
NONE					

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers				
05-0316605	21482	FACTORY MUTUAL INSURANCE COMPANY	RI		406,584	90,869	0	0	0	0	0	0	0	0	90,869	0	108,202	0	(17,333)	0	
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling					406,584	90,869	0	0	0	0	0	0	0	0	90,869	0	108,202	0	(17,333)	0	
05-0316605	21482	FACTORY MUTUAL INSURANCE COMPANY	RI		13,235	8	0	3,153	0	0	0	0	0	0	3,161	0	0	0	3,161	0	
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other					13,235	8	0	3,153	0	0	0	0	0	0	3,161	0	0	0	3,161	0	
0499999. Total Authorized - Affiliates - U.S. Non-Pool					13,235	8	0	3,153	0	0	0	0	0	0	3,161	0	0	0	3,161	0	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0899999. Total Authorized - Affiliates					419,819	90,877	0	3,153	0	0	0	0	0	0	94,030	0	108,202	0	(14,172)	0	
95-2371728	22667	ACE AMERICAN INSURANCE COMPANY	PA		52	0	0	0	0	0	0	24	0	24	0	41	0	(17)	0		
06-0237820	20699	ACE PROPERTY & CASUALTY INS CO	PA		0	29	3	488	85	1,833	337	0	0	2,775	0	0	0	2,775	0		
95-3187355	35300	ALLIANZ GLOBAL RISKS US INSURANCE COMPAN	IL		25	0	0	0	25	0	0	0	9	9	0	0	0	9	0		
36-0719665	19232	ALLSTATE INSURANCE COMPANY	IL		0	68	0	2,069	85	1,833	337	0	0	4,392	0	0	0	4,392	0		
36-2661954	10103	AMERICAN AGRICULTURAL INSURANCE COMPANY	IN		195	83	0	100	0	0	0	0	0	183	0	49	0	134	0		
13-5124990	19380	AMERICAN HOME ASSURANCE COMPANY	NY		0	0	0	0	85	1,833	337	0	0	2,255	0	0	0	2,255	0		
06-1430254	10348	ARCH REINSURANCE COMPANY	DE		10,050	0	2	0	0	0	0	4,621	0	4,623	0	1,473	0	3,150	0		
94-1390273	19801	ARGONAUT INSURANCE COMPANY	IL		0	1	0	233	85	1,833	337	0	0	2,489	0	0	0	2,489	0		
75-2344200	43460	ASPEN AMERICA INS CO	TX		133	0	0	0	0	0	0	61	0	61	0	63	0	(2)	0		
06-1463851	10717	ASPEN SPECIALTY INSURANCE COMP	ND		11	0	0	0	0	0	0	2	0	2	0	0	0	2	0		
51-0434766	20370	AXIS REINSURANCE COMPANY	NY		342	0	0	188	0	0	0	0	0	188	0	0	0	188	0		
47-0574325	32603	BERKLEY INSURANCE COMPANY	DE		1,132	124	4	341	0	0	0	337	0	806	0	103	0	703	0		
63-0202590	22276	BERKSHIRE HATHAWAY SPECIALTY INSURANCE	NE		13	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
39-0971527	10472	CAPITOL INDEMNITY CORPORATION	WI		0	0	0	0	85	1,833	337	0	0	2,255	0	0	0	2,255	0		
31-0542366	10677	CINCINNATI INSURANCE CO	OH		917	148	0	48	0	0	0	0	0	196	0	107	0	89	0		
36-2114545	20443	CONTINENTAL CASUALTY COMPANY	IL		0	0	1	0	0	0	0	0	0	1	0	0	0	1	0		
13-5010440	35289	CONTINENTAL INSURANCE COMPANY	PA		0	1	(1)	36	85	1,833	337	0	0	2,291	0	0	0	2,291	0		
38-2145898	33499	DORINCO REINSURANCE COMPANY	MI		0	5	0	133	85	1,833	337	0	0	2,393	0	0	0	2,393	0		
63-0329091	25186	EMC PROPERTY & CASUALTY	IA		0	0	0	0	85	1,833	337	0	0	2,255	0	0	0	2,255	0		
39-0264050	21458	EMPLOYERS INSURANCE OF WAUSAU	WI		0	2	8	266	85	1,833	337	0	0	2,531	0	0	0	2,531	0		
42-0234980	21415	EMPLOYERS MUTUAL CASUALTY COMPANY	IA		66	125	0	151	0	0	0	0	0	276	0	0	0	276	0		
35-2293075	11551	ENDURANCE ASSURANCE CORP	DE		1,443	154	13	998	0	82	37	698	0	1,982	0	374	0	1,608	0		
22-2005057	26921	EVEREST REINSURANCE COMPANY	DE		25,421	2,875	83	9,376	85	2,651	702	7,483	0	23,255	0	6,392	0	16,863	0		
75-1588101	35882	GEICO GENERAL INSURANCE COMPANY	NE		0	0	0	0	85	1,833	337	0	0	2,255	0	0	0	2,255	0		
13-2673100	22039	GENERAL REINSURANCE CORPORATION	DE		39,364	2,499	50	8,816	0	818	366	13,051	0	25,600	0	6,667	0	18,933	0		
13-1958482	11967	GENERAL STAR NATIONAL INS. CO.	DE		0	4	0	19	85	1,833	337	0	0	2,278	0	0	0	2,278	0		
06-0383750	19682	HARTFORD FIRE INSURANCE COMPANY	CT		0	200	3	13	0	0	0	0	0	216	0	0	0	216	0		
74-2195939	42374	HOUSTON CASUALTY CO.	TX		271	0	0	94	0	0	0	0	0	94	0	38	0	56	0		
23-0723970	22713	INSURANCE COMPANY OF NORTH AMERICA	PA		0	1	0	276	85	1,833	337	0	0	2,532	0	0	0	2,532	0		
13-4924125	10227	MUNICH REINSURANCE AMERICA INC.	DE		2,012	2	9	624	85	1,833	337	736	0	3,626	0	292	0	3,334	0		
38-0865250	11991	NATIONAL CASUALTY COMPANY	OH		0	1	10	14	85	1,833	337	0	0	2,280	0	0	0	2,280	0		
47-0355979	20087	NATIONAL INDEMNITY COMPANY	NE		1,441	0	0	0	0	0	0	569	0	569	0	109	0	460	0		
36-2403971	20052	NATIONAL LIABILITY & FIRE	CT		52	0	0	0	0	0	0	22	0	22	0	0	0	22	0		
25-0687550	19445	NATIONAL UNION FIRE INS CO OF PITTSBURGH	PA		61	0	0	0	0	0	0	16	0	16	0	16	0	0	0		
31-4177100	23787	NATIONWIDE MUTUAL INSURANCE COMPANY	OH		7,688	840	9	1,335	0	409	183	3,160	0	5,936	0	2,308	0	3,628	0		
02-0311919	29874	NORTH AMERICAN SPECIALTY INS. CO.	MO		20	0	0	0	0	0	0	10	0	10	0	19	0	(9)	0		
47-0698507	23680	ODYSSEY REINSURANCE CO	CT		723	166	0	389	0	0	0	0	0	555	0	218	0	337	0		
25-0410420	24147	OLD REPUBLIC INSURANCE CO.	PA		0	32	0	607	85	1,833	337	0	0	2,894	0	0	0	2,894	0		
13-3031176	38636	PARTNER REINS CO OF THE US	NY		17	0	0	0	0	0	0	6	0	6	0	0	0	6	0		
13-3531373	10006	PARTNERRE INSURANCE CO. OF NY	NY		16	0	0	0	0	0	0	5	0	5	0	0	0	5	0		
23-1642962	12262	PENNSYLVANIA MANUFACTURERS ASSOC INS	PA		0	0	3	0	85	1,833	337	0	0	2,258	0	0	0	2,258	0		
23-1641984	10219	QBE REINSURANCE CORP	PA		3,449	511	8	1,191	0	164	73	1,399	0	3,346	0	880	0	2,466	0		
16-0366830	22314	RSUI IND CO	NH		0	0	0	20	85	1,833	337	0	0	2,275	0	0	0	2,275	0		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3

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

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						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
75-1444207	30058	SCOR REINSURANCE COMPANY	NY		4,234	2,064	64	2,464	85	1,997	410	1,403	0	8,487	0	1,466	0	7,021	0	
13-2997499	38776	STRATUSPOINT AMERICA INSURANCE CO	NY		0	36	0	291	85	1,833	337	0	0	2,582	0	0	0	2,582	0	
75-1670124	38318	STARR IND & LIAB COMPANY	TX		283	201	15	690	85	1,833	337	55	0	3,216	0	35	0	3,181	0	
81-4566522	16109	STARR SPECIALTY INS CO	TX		(139)	7	0	294	0	0	0	0	0	301	0	0	0	301	0	
13-1675535	25364	SWISS REINSURANCE AMERICA CORPORATION	NY		11,162	598	1	7,234	85	1,833	337	940	0	11,028	0	2,047	0	8,981	0	
94-1517098	25534	TIG INSURANCE COMPANY	CA		0	131	(3)	3,162	85	1,833	337	0	0	5,545	0	0	0	5,545	0	
13-2918573	42439	TOA-RE INSURANCE COMPANY OF AMERICA	DE		0	5	0	133	85	1,833	337	0	0	2,393	0	0	0	2,393	0	
13-6108722	12904	TOKIO MARINE & NICHIDO FIRE INS CO LTD U	NY		2	0	0	1	85	1,833	337	0	0	2,256	0	0	0	2,256	0	
31-4423946	10952	TRANSAMERICA CASUALTY INS CO	IA		0	0	2	0	85	1,833	337	0	0	2,257	0	0	29	2,228	0	
13-5616275	19453	TRANSATLANTIC REINSURANCE COMPANY	NY		1,112	0	1	285	0	0	0	320	0	606	0	12	0	594	0	
06-0566050	25658	TRAVELERS INDEMNITY COMPANY	CT		0	1	0	100	85	1,833	337	0	0	2,356	0	0	0	2,356	0	
92-0040526	10030	WESTCHESTER FIRE INSURANCE COMPANY	PA		(77)	987	34	307	0	0	0	0	0	1,328	0	0	0	1,328	0	
48-0921045	39845	WESTPORT INSURANCE CORPORATION	MO		0	1	0	1,897	85	1,833	337	0	0	4,153	0	0	0	4,153	0	
75-6017952	24554	XL INS AMERICA INC	DE		19	0	0	0	0	0	0	10	0	10	0	15	0	(5)	0	
13-1290712	20583	XL REINSURANCE AMERICA INC	NY		8,148	496	15	2,160	85	2,177	490	4,158	0	9,581	0	2,442	0	7,139	0	
36-4233459	16535	ZURICH AMERICAN INSURANCE COMPANY	NY		61	0	0	0	0	0	0	21	0	21	0	0	0	21	0	
36-2781080	27855	ZURICH AMERICAN INSURANCE COMPANY OF ILL	IL		0	0	0	0	0	0	0	0	0	0	0	34	0	(34)	0	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					119,719	12,398	334	46,843	2,465	55,956	11,023	39,116	0	168,135	0	25,200	29	142,906	0	
AA-9995081	00000	AGENCY MANAGERS LTD	NY		0	0	0	20	0	0	0	0	0	20	0	0	0	20	0	
AA-9995022	00000	EXCESS AND CASUALTY REINSURANCE ASSOC	PA		0	311	429	2,931	85	1,833	337	0	0	5,926	0	0	0	5,926	0	
1199999. Total Authorized - Pools - Voluntary Pools					0	311	429	2,951	85	1,833	337	0	0	5,946	0	0	0	5,946	0	
AA-1120140	00000	ALLIANZ CORNHILL INSURANCE PLC	GBR		0	0	0	0	85	1,833	337	0	0	2,255	0	0	0	2,255	0	
AA-1344102	00000	ALLIANZ GLOBAL CORP & SPECIALTY AG	GBR		1	0	0	0	0	0	0	0	0	0	0	17	0	(17)	0	
AA-3190932	00000	ARGO RE LTD	BMU		0	167	0	201	0	0	0	0	0	368	0	0	0	368	0	
AA-3194168	00000	ASPEN INSURANCE LIMITED	BMU		0	0	0	1,407	0	0	0	0	0	1,407	0	0	0	1,407	0	
AA-1120337	00000	ASPEN INSURANCE UK LIMITED	GBR		2,573	726	19	1,411	0	0	0	962	0	3,118	0	144	0	2,974	0	
AA-1360015	00000	ASSICURAZIONI GEN S P A	ITA		0	0	0	0	85	1,833	337	0	0	2,255	0	0	0	2,255	0	
AA-1120660	00000	AVIVA INSURANCE LIMITED	GBR		7	0	0	0	0	0	0	3	0	3	0	6	0	(3)	0	
AA-3194139	00000	AXIS SPECIALTY LTD	BMU		28	203	5	1,105	0	0	0	(1)	0	1,312	0	(14)	0	1,326	0	
AA-5280012	00000	CENTRAL REINSURANCE CORPORATION	TWJ		0	0	0	0	85	1,833	337	0	0	2,255	0	0	0	2,255	0	
AA-1120191	00000	CONVEX INSURANCE UK LTD	GBR		6	0	0	722	0	0	0	1	0	723	0	(2)	0	725	0	
AA-1120495	00000	DOMINION INSURANCE COMPANY LIMITED	GBR		0	1	7	12	85	1,833	337	0	0	2,275	0	0	0	2,275	0	
AA-1124129	00000	ENDURANCE WORLDWIDE INSURANCE LTD	GBR		1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1340125	00000	HANNOVER RUCK SE	DEU		36	0	0	0	0	0	0	9	0	9	0	0	0	9	0	
AA-1340106	00000	HDI GERLING INDUSTRIE VERISCHERUNG AG	DEU		33	0	0	0	0	0	0	3	0	3	0	0	0	3	0	
AA-3190080	00000	HEDDINGTON INSURANCE LTD	BMU		0	1	0	12	85	1,833	337	0	0	2,268	0	0	0	2,268	0	
AA-1460080	00000	HELVETIA SCHWEIZERISCHE	CHE		27	0	0	0	0	0	0	9	0	9	0	0	0	9	0	
AA-2230425	00000	I.R.B., IST. DE RESS DO BRAZIL	BRA		3,195	500	0	849	85	1,833	337	103	0	3,707	0	302	0	3,405	0	
AA-5420050	00000	KOREAN REINSURANCE COMPANY	KOR		(3)	0	0	0	0	0	0	0	0	0	0	(3)	0	3	0	
AA-3190871	00000	LANCASHIRE INSURANCE COMPANY LIMITED	BMU		0	0	0	265	0	0	0	0	0	265	0	0	0	265	0	
AA-1370048	00000	LIBERTY MUT INS EUROPE LTD	GBR		0	0	2	0	0	0	0	0	0	2	0	0	0	2	0	
AA-3190917	00000	LIBERTY SPECIALTY MARKETS BERMUDA LTD	BMU		1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1122000	00000	LLOYD'S	GBR		0	0	0	2,718	0	0	0	0	0	2,718	0	0	0	2,718	0	
AA-1126033	00000	LLOYDS - SYNDICATE # 0033	GBR		0	0	0	268	0	0	0	0	0	268	0	0	0	268	0	
AA-1126435	00000	LLOYDS - SYNDICATE # 0435	GBR		0	0	0	143	0	0	0	0	0	143	0	0	0	143	0	
AA-1126457	00000	LLOYDS - SYNDICATE # 0457	GBR		39	0	0	0	0	0	0	13	0	13	0	0	0	13	0	
AA-1126510	00000	LLOYDS - SYNDICATE # 0510	GBR		0	0	0	632	0	0	0	0	0	632	0	0	0	632	0	
AA-1126566	00000	LLOYDS - SYNDICATE # 0566	GBR		0	0	0	999	0	0	0	0	0	999	0	0	0	999	0	
AA-1126609	00000	LLOYDS - SYNDICATE # 0609	GBR		81	0	0	376	0	0	0	24	0	400	0	2	0	398	0	
AA-1126623	00000	LLOYDS - SYNDICATE # 0623	GBR		0	0	0	46	0	0	0	0	0	46	0	0	0	46	0	

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AA-1127084	00000	LLOYDS - SYNDICATE # 1084	GBR		(2)	0	0	376	0	0	0	0	0	0	0	376	0	(2)	0	378	0
AA-1127183	00000	LLOYDS - SYNDICATE # 1183	GBR		113	0	0	0	0	0	0	0	0	0	3	0	0	0	0	3	0
AA-1127200	00000	LLOYDS - SYNDICATE # 1200	GBR		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	14	0
AA-1127218	00000	LLOYDS - SYNDICATE # 1218	GBR		0	0	0	0	0	0	0	0	0	0	0	0	0	(13)	0	13	0
AA-1120085	00000	LLOYDS - SYNDICATE # 1274	GBR		13	0	0	0	0	0	0	0	0	0	2	0	0	(18)	0	20	0
AA-1127414	00000	LLOYDS - SYNDICATE # 1414	GBR		271	(51)	10	0	0	(51)	0	86	0	0	45	0	1	0	44	0	
AA-1127688	00000	LLOYDS - SYNDICATE # 1688	GBR		162	16	0	90	0	0	0	71	0	0	177	0	20	0	157	0	
AA-1120157	00000	LLOYDS - SYNDICATE # 1729	GBR		0	0	0	26	0	0	0	0	0	0	26	0	0	0	26	0	
AA-1120171	00000	LLOYDS - SYNDICATE # 1856	GBR		0	0	0	55	0	0	0	0	0	0	55	0	0	0	55	0	
AA-1127861	00000	LLOYDS - SYNDICATE # 1861	GBR		0	0	0	99	0	0	0	0	0	0	99	0	0	0	99	0	
AA-1120096	00000	LLOYDS - SYNDICATE # 1880	GBR		0	0	0	183	0	0	0	0	0	0	183	0	0	0	183	0	
AA-1120161	00000	LLOYDS - SYNDICATE # 1980	GBR		0	0	0	0	0	0	0	0	0	0	0	0	(7)	0	7	0	
AA-1128001	00000	LLOYDS - SYNDICATE # 2001	GBR		36	0	0	188	0	0	0	0	0	0	19	0	16	0	191	0	
AA-1128003	00000	LLOYDS - SYNDICATE # 2003	GBR		0	0	0	1,086	0	0	0	0	0	0	0	1,086	0	0	1,086	0	
AA-1120071	00000	LLOYDS - SYNDICATE # 2007	GBR		0	0	0	0	0	0	0	0	0	0	0	0	(28)	0	28	0	
AA-1128010	00000	LLOYDS - SYNDICATE # 2010	GBR		0	0	0	100	0	0	0	0	0	0	100	0	0	0	100	0	
AA-1128020	00000	LLOYDS - SYNDICATE # 2020	GBR		0	0	3	0	0	0	0	0	0	0	3	0	0	0	3	0	
AA-1120112	00000	LLOYDS - SYNDICATE # 2232	GBR		13	0	0	0	0	0	0	2	0	0	2	0	0	0	2	0	
AA-1128623	00000	LLOYDS - SYNDICATE # 2623	GBR		0	0	0	208	0	0	0	0	0	0	208	0	(18)	0	226	0	
AA-1128791	00000	LLOYDS - SYNDICATE # 2791	GBR		(5)	0	0	19	0	0	0	0	0	0	19	0	(3)	0	22	0	
AA-1128987	00000	LLOYDS - SYNDICATE # 2987	GBR		(3)	0	0	1,417	0	0	0	0	0	0	1,417	0	(3)	0	1,420	0	
AA-1120179	00000	LLOYDS - SYNDICATE # 2988	GBR		0	0	0	57	0	0	0	0	0	0	57	0	0	0	57	0	
AA-1129000	00000	LLOYDS - SYNDICATE # 3000	GBR		0	0	0	86	0	0	0	0	0	0	86	0	0	0	86	0	
AA-1129210	00000	LLOYDS - SYNDICATE # 3210	GBR		0	0	0	0	0	0	0	0	0	0	0	0	(25)	0	25	0	
AA-1126005	00000	LLOYDS - SYNDICATE # 4000	GBR		0	0	0	282	0	0	0	0	0	0	282	0	0	0	282	0	
AA-1120075	00000	LLOYDS - SYNDICATE # 4020	GBR		81	0	0	105	0	0	0	23	0	0	128	0	(15)	0	143	0	
AA-1120067	00000	LLOYDS - SYNDICATE # 4242	GBR		0	0	0	19	0	0	0	0	0	0	19	0	0	0	19	0	
AA-1126004	00000	LLOYDS - SYNDICATE # 4444	GBR		16	0	0	183	0	0	0	3	0	0	186	0	0	0	186	0	
AA-1120181	00000	LLOYDS - SYNDICATE # 5886	GBR		0	0	0	74	0	0	0	0	0	0	74	0	0	0	74	0	
AA-1840000	00000	MAPFRE RE CO DE REASEGUROS S A	ESP		4,903	485	7	935	0	205	91	1,746	0	0	3,469	0	1,219	0	2,250	0	
AA-3190829	00000	MARKEL BERMUDA LIMITED	BMU		665	0	0	0	0	0	0	0	0	0	0	0	333	0	(333)	0	
AA-1121410	00000	NETSUI SUMITOMO INS CO (EUROPE) LTD	GBR		5	0	0	1	85	1,833	337	3	0	0	2,259	0	0	0	2,259	0	
AA-1580065	00000	NISSAN FIRE & MARINE INSURANCE CO. LTD.	JPN		0	0	3	5	85	1,833	337	0	0	0	2,263	0	0	0	2,263	0	
AA-3190686	00000	PARTNERRE GRP	BMU		0	0	0	0	0	0	0	0	0	0	0	0	(1)	0	1	0	
AA-1120962	00000	ST PAUL REINSURANCE CO. LTD. (UK CORP)	GBR		0	0	1	0	0	0	0	0	0	0	1	0	0	0	1	0	
AA-1121380	00000	STOREBRAND INSURANCE CO. (UK) LTD.	GBR		0	0	0	0	85	1,833	337	0	0	0	2,255	0	0	0	2,255	0	
AA-1370020	00000	SWISS RE INTERNATIONAL SE	FRA		3	0	0	0	0	0	0	1	0	0	1	0	11	0	(10)	0	
AA-1121445	00000	TOKIO MARINE EUROPE INS LTD	GBR		0	0	0	0	85	1,833	337	0	0	0	2,255	0	0	0	2,255	0	
AA-1121375	00000	TRAVELERS INS CO LTD	GBR		0	4	2	3	85	1,833	337	0	0	0	2,264	0	0	0	2,264	0	
AA-1121480	00000	UNIONAMERICA INSURANCE COMPANY LTD.	GBR		0	0	0	0	85	1,833	337	0	0	0	2,255	0	0	0	2,255	0	
AA-3190870	00000	VALIDUS REINSURANCE LTD	BMU		2	0	0	0	0	0	0	1	0	0	1	0	2	0	(1)	0	
AA-1460185	00000	WINTERTHUR SCHWEIZERISCHE VERSGES AG	CHE		7	0	1	1	85	1,833	337	0	0	0	2,257	0	0	0	2,257	0	
AA-1121575	00000	YASUDA FIRE & MARINE INS CO OF EUROPE	GBR		0	0	1	1	85	1,833	337	0	0	0	2,257	0	0	0	2,257	0	
1299999		Total Authorized - Other Non-U.S. Insurers			12,305	2,052	61	16,765	1,190	25,867	4,809	3,086	0	53,830	0	1,907	0	51,923	0		
1499999		Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			551,843	105,638	824	69,712	3,740	83,656	16,169	42,202	0	321,941	0	135,309	29	186,603	0		
1899999		Total Unauthorized - Affiliates - U.S. Non-Pool			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AA-3190418	00000	NEW PROVIDENCE MUTUAL LIMITED	BMU		208	0	0	0	0	0	0	49	0	49	0	0	10	0	39	0	
1999999		Total Unauthorized - Affiliates - Other (Non-U.S.) - Captive			208	0	0	0	0	0	0	49	0	49	0	0	10	0	39	0	
AA-3190411	00000	RISK ENGINEERING INSURANCE COMPANY LTD	BMU		40,773	(2,704)	7	7,982	0	0	0	19,430	0	24,715	0	10,431	0	14,284	1,834	0	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
2099999. Total Unauthorized - Affiliates - Other (Non-U.S.) - Other						40,773	(2,704)	7	7,982	0	0	0	19,430	0	24,715	0	10,431	0	14,284	1,834
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)						40,981	(2,704)	7	7,982	0	0	0	19,479	0	24,764	0	10,441	0	14,323	1,834
2299999. Total Unauthorized - Affiliates						40,981	(2,704)	7	7,982	0	0	0	19,479	0	24,764	0	10,441	0	14,323	1,834
87-1924654	00000	CLAREMONT IC	VT		5	0	0	0	0	0	0	1	0	1	0	0	0	1	0	
26-0147121	00000	EFFEM REINSURANCE COMPANY	VT		66	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
03-0461286	11628	EPIC INSURANCE COMPANY	VT		3	0	0	0	0	0	0	2	0	2	0	0	0	2	0	
95-1466743	19852	FINANCIAL INDEMNITY COMPANY	IL	4	0	0	0	85	1,833	337	0	0	0	2,255	0	0	0	2,255	0	
47-5663358	00000	FIRST TOWER PARTNERS, LLC	VT		(531)	(65)	2	1,808	0	0	0	0	0	1,745	0	1	0	1,744	0	
02-0712840	11849	HIGHLAND PARK INSURANCE COMPANY	IL		2	0	0	0	0	0	0	1	0	1	0	0	0	1	0	
31-4177110	23779	NATIONWIDE MUTUAL FIRE INSURANCE COMPANY	OH		0	(1)	0	0	0	0	0	0	0	(1)	0	(27)	0	26	0	
51-0387023	10980	THOMSON REUTERS RISK MGMT INC	VT		9	0	0	0	0	0	0	7	0	7	0	9	0	(2)	0	
03-0348076	11293	UT INSURANCE (VERMONT) INC	VT		32	0	0	0	0	0	0	14	0	14	0	0	0	14	0	
2399999. Total Unauthorized - Other U.S. Unaffiliated Insurers						(414)	(66)	2	1,808	85	1,833	337	25	4,024	0	(17)	0	4,041	0	
AA-9991310	00000	FLORIDA HURRICANE CATASTROPHE FUND	FL		56	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-9991500	00000	ILLINOIS MINE SUBSIDENCE FUND	IL		1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2499999. Total Unauthorized - Pools - Mandatory Pools						57	0	0	0	0	0	0	0	0	0	0	0	0	0	
98-0413961	00000	ADIDAS INTERNATIONAL RE LIMITED (AIR)	IRL		49	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-5760051	00000	AIG ASIA PACIFIC INS PTE LTD	SGP		8	0	0	0	0	0	0	4	0	4	0	7	0	(3)	0	
AA-1120841	00000	AIG EUROPE LIMITED	CHE		36	0	0	0	0	0	0	5	0	5	0	0	0	5	0	
AA-1320065	00000	ALLIANZ GLOBAL CORPORATE & SPECIALTY (FR	FRA		3	0	0	0	0	0	0	2	0	2	0	0	0	2	0	
AA-3194128	00000	ALLIED WORLD ASSURANCE COMPANY LTD	BMU		5	0	0	0	0	0	0	1	0	1	0	0	0	1	0	
AA-1780091	00000	ARCH REINS EUROPE UNDERWRITING LTD	IRL		30	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1560118	00000	ARCH REINSURANCE COMPANY	CAN		974	0	0	0	0	0	0	581	0	581	0	162	0	419	0	
AA-3191352	00000	ASCOT REINS CO LTD	BMU		279	0	0	0	0	0	0	0	0	0	0	(5)	0	5	0	
AA-1440023	00000	ASSA ABLOY FORSAKRINGS AB	SWE		13	82	5	0	0	0	0	3	0	90	0	12	0	78	0	
AA-3191454	00000	AXA XL BERMUDA	BMU		2,963	407	0	890	0	0	0	0	0	1,297	0	607	0	690	0	
AA-3191390	00000	CASTLE HARBOUR INSURANCE LIMITED	BMU		38	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-5320057	00000	CHUBB INS HONG KONG	HKG		26	0	0	0	0	0	0	13	0	13	0	23	0	(10)	0	
AA-1320035	00000	COLISEE RE	FRA	4	0	0	2	3	85	1,833	337	0	0	2,260	0	0	0	2,260	0	
AA-3191435	00000	CONDUIT REINS LTD	BMU		63	20	1	135	0	143	64	(73)	0	290	0	(94)	0	384	0	
AA-1120430	00000	CONTINENTAL INSURANCE CO. (UK) LTD.	GBR	4	0	0	1	2	85	1,833	337	0	0	2,258	0	0	0	2,258	0	
AA-3191400	00000	CONVEX RE LIMITED	BMU		0	0	0	106	0	0	0	0	0	106	0	0	0	106	0	
AA-1340085	00000	E+S RUCKVERSICHERUNGS AKTIENGESELLSCHAFT	DEU	4	0	0	0	2	85	1,833	337	0	0	2,257	0	0	0	2,257	0	
AA-1120515	00000	EAGLE STAR INS CO LTD	GBR		0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	
AA-3191180	00000	ELGO INSURANCE COMPANY LTD	BMU		223	0	0	0	0	0	0	91	0	91	0	171	0	(80)	0	
AA-1370059	00000	ESSILORLUXOTTICA RE	LUX		28	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1370061	00000	FORVIA RE S.A.	LUX		25	0	0	0	0	0	0	13	0	13	0	0	0	13	0	
AA-1780117	00000	GD INSURANCE COMPANY DAC	IRL		14	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1460060	00000	GEN REINS CORP (EUROPE) AG	GBR		0	0	0	0	0	0	0	0	0	0	0	96	0	(96)	0	
AA-1340145	00000	GENERAL REINSURANCE AG	SGP		26	0	0	0	0	0	0	4	0	4	0	11	0	(7)	0	
AA-1080004	00000	GLOBAL RISK UNDERWRITERS (BERMUDA) LTD	BMU		(122)	0	0	0	0	0	0	0	0	0	0	(120)	0	120	0	
AA-3191524	00000	GR BERMUDA SAC LTD	BMU		18,760	141	4	327	0	0	0	739	0	1,211	0	6,270	0	(5,059)	0	
AA-3191437	00000	GROUP ARK INSURANCE LIMITED	BMU		97	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-3191190	00000	HAMILTON RE, LTD.	BMU		(3)	167	0	201	0	0	0	0	0	368	0	(3)	0	371	0	
AA-1560483	00000	HANNOVER RUCKVERSICHERUNGS AKTIENGESELLS	CAN		17	0	0	0	0	0	0	10	0	10	0	0	0	10	0	
AA-3770336	00000	HEXAGON INSURANCE COMPANY, LTD	CYM		4,850	763	39	285	0	0	0	2,394	0	3,481	0	119	0	3,362	0	
AA-3190875	00000	HISCOX (BERMUDA) LTD	BMU		1,052	0	0	270	0	0	0	0	0	270	0	(8)	0	278	0	
AA-1370023	00000	IMERYS RE LIMITED	LUX		10	0	0	0	0	0	0	2	0	2	0	0	0	2	0	
AA-3190906	00000	KEYSTONE PF	BMU		2,084	0	0	0	0	0	0	0	0	0	0	695	0	(695)	0	
AA-5760046	00000	LENOVO INSURANCE COMPANY PTE LTD	SGP		98	0	0	0	0	0	0	24	0	24	0	97	0	(73)	0	

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SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
AA-1560051	00000	LIBERTY INS CO OF CANADA	CAN		108	0	0	0	0	0	0	80	0	80	0	53	0	27	0	
AA-1120876	00000	LOMBARD CONTINENTAL INS PLC	GBR	4	0	0	0	85	1,833	337	0	0	0	2,255	0	0	0	2,255	0	
AA-1120887	00000	LONDON AND EDINBURGH INSURANCE CO. LTD.	GBR	4	0	0	0	85	1,833	337	0	0	0	2,255	0	0	0	2,255	0	
AA-3191239	00000	LUMEN RE LTD.	BMU		686	0	0	0	0	0	0	0	0	0	0	47	0	(47)	0	
AA-3190669	00000	MARIAS FALLS INSURANCE COMPANY LTD	BMU		177	0	37	0	0	0	0	59	0	96	0	178	0	(82)	0	
AA-1460019	00000	MS AMLIN AG	BMU		54	480	11	499	0	0	0	(2)	988	0	(6)	0	994	0	0	
AA-1340165	00000	MUNCHENER RUCKVERSICHERUNGS GESELLSCHAFT	DEU		5,568	425	24	4,236	0	0	0	169	0	4,854	0	(130)	0	4,984	0	
AA-1560600	00000	MUNICH REINSURANCE CO. OF CANADA	CAN		569	0	0	0	0	0	0	292	0	292	0	48	0	244	0	
AA-1120011	00000	MUNICH REINSURANCE COMPANY (UK) GENERAL	GBR		327	0	0	0	0	0	0	67	0	67	0	0	0	67	0	
AA-5760072	00000	NEXUS INS INTL PTE LTD (N11)	SGP		218	0	0	0	0	0	0	1	0	1	0	0	0	1	0	
AA-1121077	00000	NISSAN INS. CO. (EUROPE) LTD.	GBR	4	0	0	0	85	1,833	337	0	0	0	2,255	0	0	0	2,255	0	
AA-1320230	00000	PFA TIARD	FRA	4	0	0	0	85	1,833	337	0	0	0	2,255	0	0	0	2,255	0	
AA-1460028	00000	PLASTIC OMNIUM RE AG	CHE		19	6	0	126	0	0	0	10	0	142	0	19	0	123	0	
AA-2730800	00000	REASEGURADORA PATRIA S.A.	MEX		43	0	0	0	0	0	0	14	0	14	0	0	0	14	0	
AA-1464109	00000	RELX RISKS SA	CHE		7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1340022	00000	REVIUM RUCKVERSICHERUNG AG	DEU		35	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-3160102	00000	RIVERVIEW INSURANCE CO LTD	BYB		593	280	66	1,267	0	0	0	516	0	2,129	0	605	0	1,524	0	
98-1291066	00000	ROOSEVELT INSURANCE COMPANY, LTD	CYM		50	0	0	0	0	0	0	16	0	16	0	46	0	(30)	0	
AA-1370026	00000	ROQUETTE RE S.A.	LUX		78	0	0	510	0	0	0	0	0	510	0	0	0	510	0	
AA-5420022	00000	SAMSUNG FIRE & MARINE INS CO L	KOR		16	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1440021	00000	SANDVIK FORSAKRINGS AB	SWE		175	0	0	0	0	0	0	131	0	131	0	0	0	131	0	
AA-1320031	00000	SCOR GLOBAL P&C SE	FRA		5	0	0	0	0	0	0	2	0	2	0	0	0	2	0	
AA-1560745	00000	SCOR REINSURANCE COMPANY OF CANADA	CAN		0	1	0	0	0	0	0	0	0	1	0	0	0	1	0	
AA-1370038	00000	SERECO RE S.A.	LUX		72	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-3194212	00000	SOBRAL LIMITED	BMU		503	73	2	1,014	0	0	0	186	0	1,275	0	3	0	1,272	0	
AA-1370031	00000	SOLVAY HORTENSIA S.A.	LUX		284	0	0	0	0	0	0	69	0	69	0	0	0	69	0	
AA-1810009	00000	STARR EUROPE INS LTD	MLT		3	0	0	0	0	0	0	1	0	1	0	0	0	1	0	
AA-3192080	00000	SUFFOLK INSURANCE LTD	BMU		9	0	0	0	0	0	0	5	0	5	0	0	0	5	0	
AA-1370021	00000	SWISS RE FRANKONA RUCKVERSICHERUNGS-A.G.	DEU		0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	
AA-1460146	00000	SWISS REINSURANCE COMPANY CANADA	CAN		698	0	0	0	0	0	0	451	0	451	0	334	0	117	0	
AA-3191220	00000	TELLURIDE INSURANCE LTD	BMU		2	0	0	0	0	0	0	1	0	1	0	0	0	1	0	
AA-3190305	00000	THE GROVE INSURANCE COMPANY LIMITED	BMU		13	0	0	0	0	0	0	6	0	6	0	0	0	6	0	
98-1404041	00000	THERMO FISHER SCIENTIFIC RE	BMU		11	0	0	0	0	0	0	6	0	6	0	0	0	6	0	
AA-1580100	00000	TOKIO MARINE & NICHIDO FIRE INS CO LTD	JPN		3	0	0	0	0	0	0	2	0	2	0	0	0	2	0	
AA-1320177	00000	VEOLIA ENVIRONMENT SERVICES-RE	LUX		73	0	0	0	0	0	0	0	0	0	0	73	0	(73)	0	
AA-1780131	00000	VITAL BLUE INS DAC	IRL		100	0	0	0	0	0	0	50	0	50	0	97	0	(47)	0	
AA-1490003	00000	W.R. BERKLEY EUROPE AG	LIE		(24)	0	0	0	0	0	0	0	0	0	0	(24)	0	24	0	
AA-3190231	00000	WINGFOOT INS CO LTD	BMU		56	0	0	0	0	0	0	14	0	14	0	0	0	14	0	
AA-1460020	00000	XL INSURANCE COMPANY SE	CHE		10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1780072	00000	XL RE EUROPE SE	GBR		268	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2699999	Total Unauthorized - Other Non-U.S. Insurers				42,455	2,845	157	9,910	595	12,974	2,423	5,959	0	34,863	0	9,383	0	25,480	0	
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				83,079	75	166	19,700	680	14,807	2,760	25,463	0	63,651	0	19,807	0	43,844	1,834	
3299999	Total Certified - Affiliates - U.S. Non-Pool				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3599999	Total Certified - Affiliates - Other (Non-U.S.)				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3699999	Total Certified - Affiliates				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CR-3194126	00000	ARCH REINSURANCE LTD.	BMU		48	46	4	405	0	0	0	(1)	0	454	0	1	0	453	0	
CR-3194122	00000	DAVINCI REINSURANCE LTD.	BMU		0	33	0	40	0	0	0	0	0	73	0	0	0	73	0	
CR-1340125	00000	HANNOVER RUCK SE	DEU		20,291	2,376	29	7,817	614	274	5,494	0	0	16,604	0	4,069	0	12,535	0	
CR-1460019	00000	MS AMLIN AG	BMU		28	0	0	0	0	0	0	1	0	1	0	7	0	(6)	0	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

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

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						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
CR-3190339	.14033	RENAISSANCE REINSURANCE LTD.	BMU		0	50	0	60	0	0	0	0	0	0	110	0	0	110	0	
CR-1460146	.00000	SWISS REINSURANCE CO.	CHE		281	183	13	1,196	0	0	0	0	43	0	1,435	0	5	1,430	0	
4099999. Total Certified - Other Non-U.S. Insurers					20,648	2,688	46	9,518	0	614	274	5,537	0	18,677	0	4,082	0	14,595	0	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					20,648	2,688	46	9,518	0	614	274	5,537	0	18,677	0	4,082	0	14,595	0	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5099999. Total Reciprocal Jurisdiction - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
RJ-3194126	.00000	ARCH REINSURANCE LTD.	BMU		6,936	307	5	491	0	205	91	1,707	0	2,806	0	1,190	0	1,616	0	
RJ-3191352	.00000	ASCOT REINS CO LTD	BMU		306	0	0	0	0	0	0	0	0	0	0	22	0	(22)	0	
RJ-3194168	.00000	ASPEN INSURANCE LIMITED	BMU		9,544	1,376	9	876	0	327	146	2,791	0	5,525	0	2,335	0	3,190	0	
RJ-3194139	.00000	AXIS SPECIALTY LTD	BMU		0	782	0	0	0	0	0	3	0	785	0	0	0	785	0	
RJ-1320152	.00000	CHUBB EUROPEAN GROUP	FRA		4	0	0	0	0	0	0	2	0	2	0	0	0	2	0	
RJ-3191435	.00000	CONDUIT REINS LTD	BMU		2,166	33	1	79	0	0	0	1,170	0	1,283	0	857	0	426	0	
RJ-1120191	.00000	CONVEX INSURANCE UK LTD	GBR		3,362	500	0	0	0	0	0	108	0	608	0	569	0	39	0	
RJ-3191400	.00000	CONVEX RE LIMITED	BMU		1,567	167	0	0	0	0	0	0	0	167	0	169	0	(2)	0	
RJ-3190875	.00000	HISCOX (BERMUDA) LTD	BMU		1,130	384	0	0	0	0	0	0	0	384	0	363	0	21	0	
RJ-3190871	.00000	LANCASHIRE INSURANCE COMPANY LIMITED	BMU		2,135	46	0	(7)	0	82	37	531	0	689	0	522	0	167	0	
RJ-1370048	.00000	LIBERTY MUT INS EUROPE LTD	GBR		4	0	0	0	0	0	0	1	0	1	0	0	0	1	0	
RJ-1122000	.00000	LLOYD'S	GBR		0	0	0	(2,718)	0	0	0	0	0	(2,718)	0	0	0	(2,718)	0	
RJ-1126033	.00000	LLOYDS - SYNDICATE # 0033	GBR		2,053	458	0	0	0	0	0	0	0	458	0	321	0	137	0	
RJ-1126318	.00000	LLOYDS - SYNDICATE # 0318	GBR		4	0	0	0	0	0	0	1	0	1	0	0	0	1	0	
RJ-1126566	.00000	LLOYDS - SYNDICATE # 0566	GBR		1,597	832	0	0	0	0	0	0	0	832	0	380	0	452	0	
RJ-1126609	.00000	LLOYDS - SYNDICATE # 0609	GBR		133	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
RJ-1126623	.00000	LLOYDS - SYNDICATE # 0623	GBR		354	32	0	(1)	0	11	5	71	0	118	0	82	0	36	0	
RJ-1127084	.00000	LLOYDS - SYNDICATE # 1084	GBR		675	0	0	0	0	0	0	0	0	0	0	1	0	(1)	0	
RJ-1120085	.00000	LLOYDS - SYNDICATE # 1274	GBR		94	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
RJ-1127301	.00000	LLOYDS - SYNDICATE # 1301	GBR		56	0	0	0	0	0	0	2	0	2	0	12	0	(10)	0	
RJ-1127414	.00000	LLOYDS - SYNDICATE # 1414	GBR		1,716	0	0	0	0	0	0	184	0	184	0	233	0	(49)	0	
RJ-1120157	.00000	LLOYDS - SYNDICATE # 1729	GBR		140	5	0	0	0	0	0	0	0	5	0	4	0	1	0	
RJ-1120171	.00000	LLOYDS - SYNDICATE # 1856	GBR		154	49	0	0	0	0	0	0	0	49	0	16	0	33	0	
RJ-1120083	.00000	LLOYDS - SYNDICATE # 1910	GBR		243	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
RJ-1128001	.00000	LLOYDS - SYNDICATE # 2001	GBR		762	138	0	0	0	0	0	0	0	138	0	89	0	49	0	
RJ-1128003	.00000	LLOYDS - SYNDICATE # 2003	GBR		111	666	0	441	0	0	0	0	0	1,107	0	0	0	1,107	0	
RJ-1128010	.00000	LLOYDS - SYNDICATE # 2010	GBR		420	83	0	0	0	0	0	0	0	83	0	51	0	32	0	
RJ-1128488	.00000	LLOYDS - SYNDICATE # 2488	GBR		1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
RJ-1128623	.00000	LLOYDS - SYNDICATE # 2623	GBR		1,648	144	0	(4)	0	50	23	328	0	541	0	380	0	161	0	
RJ-1128791	.00000	LLOYDS - SYNDICATE # 2791	GBR		119	111	0	0	0	0	0	0	0	111	0	35	0	76	0	
RJ-1128987	.00000	LLOYDS - SYNDICATE # 2987	GBR		4,781	1,204	0	0	0	0	0	0	0	1,204	0	728	0	476	0	
RJ-1129000	.00000	LLOYDS - SYNDICATE # 3000	GBR		0	83	0	0	0	0	0	0	0	83	0	0	0	83	0	
RJ-1126005	.00000	LLOYDS - SYNDICATE # 4000	GBR		342	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
RJ-1120075	.00000	LLOYDS - SYNDICATE # 4020	GBR		1,153	125	0	0	0	0	0	36	0	161	0	150	0	11	0	
RJ-1126004	.00000	LLOYDS - SYNDICATE # 4444	GBR		463	0	0	0	0	0	0	0	0	0	0	22	0	(22)	0	
RJ-1126006	.00000	LLOYDS - SYNDICATE # 4472	GBR		1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
RJ-1120065	.00000	LLOYDS - SYNDICATE # 5555	GBR		2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
RJ-1120213	.00000	LLOYDS - SYNDICATE # 5623	GBR		1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
RJ-1120181	.00000	LLOYDS - SYNDICATE # 5886	GBR		87	79	0	0	0	0	0	0	0	79	0	0	0	79	0	
RJ-1460019	.00000	MS AMLIN AG	CHE		3,004	445	9	443	0	106	48	1,070	0	2,121	0	811	0	1,310	0	
RJ-1340165	.00000	MUNCHENER RUCKVERSICHERUNGS GESELLSCHAFT	DEU		19,417	1,975	7	3,063	0	695	322	6,525	0	12,587	0	5,475	0	7,112	0	
RJ-1460146	.00000	SWISS REINSURANCE CO.	CHE		8,496	801	18	1,661	0	409	183	3,923	0	6,995	0	2,132	0	4,863	0	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On								16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties		
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions		15 Columns 7 through 14 Totals	17 Ceded Balances Payable			18 Other Amounts Due to Reinsurers	
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers						75,181	10,825	49	4,324	0	1,885	855	18,453	0	36,391	0	16,949	0	19,442	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)						75,181	10,825	49	4,324	0	1,885	855	18,453	0	36,391	0	16,949	0	19,442	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)						730,751	119,226	1,085	103,254	4,420	100,962	20,058	91,655	0	440,660	0	176,147	29	264,484	1,834
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)						0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9999999 Totals						730,751	119,226	1,085	103,254	4,420	100,962	20,058	91,655	0	440,660	0	176,147	29	264,484	1,834

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk									35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent				
05-0316605	FACTORY MUTUAL INSURANCE COMPANY	0	0		0	90,869	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	XXX	0	90,869	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
05-0316605	FACTORY MUTUAL INSURANCE COMPANY	0	0		0	0	3,161	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other	0	0	XXX	0	0	3,161	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	3,161	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0		
0899999	Total Authorized - Affiliates	0	0	XXX	0	90,869	3,161	0	0	0	0	0	0	0	0	XXX	0		
95-2371728	ACE AMERICAN INSURANCE COMPANY	0	0		0	24	0	0	24	29	29	0	0	0	1	0	0		
06-0237820	ACE PROPERTY & CASUALTY INS CO	0	0		0	0	2,775	0	2,775	3,330	0	3,330	0	3,330	1	0	53		
95-3187355	ALLIANZ GLOBAL RISKS US INSURANCE COMPAN	0	0		0	0	9	0	9	11	0	11	0	11	2	0	0		
36-0719665	ALLSTATE INSURANCE COMPANY	0	0		0	0	4,392	0	4,392	5,270	0	5,270	0	5,270	2	0	111		
36-2661954	AMERICAN AGRICULTURAL INSURANCE COMPANY	0	0		90	139	44	0	183	220	49	171	90	81	3	3	2		
13-5124990	AMERICAN HOME ASSURANCE COMPANY	0	0		0	0	2,255	0	2,255	2,706	0	2,706	0	2,706	3	0	76		
06-1430254	ARCH REINSURANCE COMPANY	0	0		0	1,473	3,150	630	3,993	4,792	1,473	3,319	0	3,319	2	0	70		
94-1390273	ARGONAUT INSURANCE COMPANY	0	0		0	0	2,489	0	2,489	2,987	0	2,987	0	2,987	4	0	99		
75-2344200	ASPEN AMERICA INS CO	0	0		0	61	0	0	61	73	63	10	0	10	3	0	0		
06-1463851	ASPEN SPECILAITY INSURANCE COMP	0	0		0	0	2	0	2	2	0	2	0	2	3	0	0		
51-0434766	AXIS REINSURANCE COMPANY	0	0		0	0	188	0	188	226	0	226	0	226	3	0	6		
47-0574325	BERKLEY INSURANCE COMPANY	0	0		0	103	703	0	806	967	103	864	0	864	2	0	18		
63-0202590	BERKSHIRE HATHAWAY SPECIALTY INSURANCE	0	0		0	0	0	0	0	0	0	0	0	0	1	0	0		
39-0971527	CAPITOL INDEMNITY CORPORATION	0	0		0	0	2,255	0	2,255	2,706	0	2,706	0	2,706	3	0	76		
31-0542366	CINCINNATI INSURANCE CO.	0	0		160	196	0	0	196	235	107	128	128	0	2	3	0		
36-2114545	CONTINENTAL CASUALTY COMPANY	0	0		0	0	1	0	1	1	0	1	0	1	3	0	0		
13-5010440	CONTINENTAL INSURANCE COMPANY	0	0		0	0	2,291	0	2,291	2,749	0	2,749	0	2,749	3	0	77		
38-2145898	DORINCO REINSURANCE COMPANY	0	0		0	0	2,393	0	2,393	2,872	0	2,872	0	2,872	3	0	80		
63-0329091	EMC PROPERTY & CASUALTY	0	0		0	0	2,255	0	2,255	2,706	0	2,706	0	2,706	3	0	76		
39-0264050	EMPLOYERS INSURANCE OF WAUSAU	0	0		0	0	2,531	0	2,531	3,037	0	3,037	0	3,037	3	0	85		
42-0234980	EMPLOYERS MUTUAL CASUALTY COMPANY	0	0		0	0	276	0	276	331	0	331	0	331	3	0	9		
35-2293075	ENDURANCE ASSURANCE CORP	0	0		57	431	1,551	11	1,971	2,365	374	1,991	57	1,934	2	1	41		
22-2005057	EVEREST REINSURANCE COMPANY	0	0		1,799	8,191	15,064	0	23,255	27,906	6,392	21,514	1,799	19,715	2	38	414		
75-1588101	GEICO GENERAL INSURANCE COMPANY	0	0		0	0	2,255	0	2,255	2,706	0	2,706	0	2,706	1	0	43		
13-2673100	GENERAL REINSURANCE CORPORATION	0	0		0	6,667	18,933	0	25,600	30,720	6,667	24,053	0	24,053	1	0	385		
13-1958482	GENERAL STAR NATIONAL INS. CO.	0	0		0	0	2,278	0	2,278	2,734	0	2,734	0	2,734	1	0	44		
06-0383750	HARTFORD FIRE INSURANCE COMPANY	0	0		0	0	216	43	173	207	0	207	0	207	2	0	4		
74-2195939	HOUSTON CASUALTY CO.	0	0		0	38	56	0	94	113	0	75	0	75	1	0	1		
23-0723970	INSURANCE COMPANY OF NORTH AMERICA	0	0		0	0	2,532	0	2,532	3,038	0	3,038	0	3,038	1	0	49		
13-4924125	MUNICH REINSURANCE AMERICA INC.	0	0		0	292	3,334	1	3,625	4,350	292	4,058	0	4,058	2	0	85		
38-0865250	NATIONAL CASUALTY COMPANY	0	0		0	0	2,280	0	2,280	2,736	0	2,736	0	2,736	3	0	77		
47-0355979	NATIONAL INDEMNITY COMPANY	0	0		0	109	460	0	569	683	109	574	0	574	1	0	9		
36-2403971	NATIONAL LIABILITY & FIRE	0	0		0	0	22	0	22	26	0	26	0	26	1	0	0		
25-0687550	NATIONAL UNION FIRE INS CO OF PITTSBURGH	0	0		0	16	0	0	16	19	0	16	0	16	3	0	0		
31-4177100	NATIONWIDE MUTUAL INSURANCE COMPANY	0	0		0	2,308	3,628	0	5,936	7,123	0	4,815	0	4,815	3	0	135		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk							
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
02-0311919	NORTH AMERICAN SPECIALTY INS. CO.	0	0		0	10	0	10	12	12	0	0	0	2	0	0
47-0698507	ODYSSEY REINSURANCE CO	0	0		180	398	0	555	666	218	448	180	268	2	4	6
25-0410420	OLD REPUBLIC INSURANCE CO.	0	0		0	0	0	2,894	3,473	0	3,473	0	3,473	2	0	73
13-3031176	PARTNER REINS CO OF THE US	0	0		0	0	0	6	7	0	7	0	7	2	0	0
13-3531373	PARTNERRE INSURANCE CO. OF NY	0	0		0	0	0	5	6	0	6	0	6	2	0	1
23-1642962	PENNSYLVANIA MANUFACTURERS ASSOC INS	0	0		0	0	0	2,258	2,710	0	2,710	0	2,710	2	0	57
23-1641984	QBE REINSURANCE CORP	0	0		255	1,135	0	3,346	4,015	880	3,135	255	2,880	3	7	81
16-0366830	RSUI IND CO	0	0		0	0	0	2,275	2,730	0	2,730	0	2,730	1	0	44
75-1444207	SCOR REINSURANCE COMPANY	0	0		800	2,266	0	8,487	10,184	1,466	8,718	800	7,918	3	22	222
13-2997499	SIRIUSPOINT AMERICA INSURANCE CO	0	0		0	0	0	2,581	3,098	0	3,098	0	3,098	4	0	102
75-1670124	STARR IND & LIAB COMPANY	0	0		0	35	636	2,580	3,096	35	3,061	0	3,061	3	0	86
81-4566522	STARR SPECIALTY INS CO	0	0		0	0	60	241	289	0	289	0	289	3	0	8
13-1675535	SWISS REINSURANCE AMERICA CORPORATION	0	0		629	2,676	0	11,028	13,233	2,047	11,186	629	10,557	2	13	222
94-1517098	TIG INSURANCE COMPANY	0	0		0	0	0	5,545	6,654	0	6,654	0	6,654	6	0	798
13-2918573	TOA-RE INSURANCE COMPANY OF AMERICA	0	0		0	0	0	2,393	2,872	0	2,872	0	2,872	3	0	80
13-6108722	TOKIO MARINE & NICHIDO FIRE INS CO LTD U	0	0		0	0	0	2,256	2,707	0	2,707	0	2,707	6	0	325
31-4423946	TRANSAMERICA CASUALTY INS CO	0	0		0	29	0	2,257	2,708	29	2,679	0	2,679	6	0	322
13-5616275	TRANSATLANTIC REINSURANCE COMPANY	0	0		0	12	0	606	727	12	715	0	715	1	0	11
06-0566050	TRAVELERS INDEMNITY COMPANY	0	0		0	0	0	2,356	2,827	0	2,827	0	2,827	1	0	45
92-0040526	WESTCHESTER FIRE INSURANCE COMPANY	0	0		0	0	266	1,062	1,275	0	1,275	0	1,275	1	0	20
48-0921045	WESTPORT INSURANCE CORPORATION	0	0		0	0	0	4,153	4,984	0	4,984	0	4,984	2	0	105
75-6017952	XL INS AMERICA INC	0	0		0	10	0	10	12	12	0	0	0	0	0	0
13-1290712	XL REINSURANCE AMERICA INC.	0	0		0	2,442	0	9,581	11,497	2,442	9,055	0	9,055	2	0	190
36-4233459	ZURICH AMERICAN INSURANCE COMPANY	0	0		0	0	0	21	25	0	25	0	25	2	0	1
36-2781080	ZURICH AMERICAN INSURANCE COMPANY OF ILL	0	0		0	0	0	0	0	0	0	0	0	0	0	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	0	0	XXX	3,970	29,061	1,648	166,487	199,784	25,173	174,611	3,938	170,673	XXX	91	4,923
AA-9995081	AGENCY MANAGERS LTD	0	0		0	0	0	20	24	0	24	0	24	6	0	3
AA-9995022	EXCESS AND CASUALTY REINSURANCE ASSOC.	0	0		0	0	0	4,741	5,689	0	5,689	0	5,689	6	0	683
1199999	Total Authorized - Pools - Voluntary Pools	0	0	XXX	0	0	5,946	4,761	5,713	0	5,713	0	5,713	XXX	0	686
AA-1120140	ALLIANZ CORNHILL INSURANCE PLC	0	0		0	0	0	2,255	2,706	0	2,706	0	2,706	6	0	325
AA-1344102	ALLIANZ GLOBAL CORP & SPECIALTY AG	0	0		0	0	0	0	0	0	0	0	0	2	0	0
AA-3190932	ARGO RE LTD	0	0		180	180	0	368	442	0	442	180	262	4	5	9
AA-3194168	ASPEN INSURANCE LIMITED	0	0		0	0	0	1,407	1,688	0	1,688	0	1,688	3	0	47
AA-1120337	ASPEN INSURANCE UK LIMITED	0	0		0	144	0	3,118	3,742	144	3,598	0	3,598	3	0	101
AA-1360015	ASSICURAZIONI GEN S P A	0	0		0	0	0	2,255	2,706	0	2,706	0	2,706	3	0	76
AA-1120660	AVIVA INSURANCE LIMITED	0	0		0	3	0	3	4	4	0	0	0	2	0	0
AA-3194139	AXIS SPECIALTY LTD	0	0		0	(14)	0	1,312	1,574	(14)	1,588	0	1,588	3	0	44
AA-5280012	CENTRAL REINSURANCE CORPORATION	0	0		0	0	0	2,255	2,706	0	2,706	0	2,706	3	0	76
AA-1120191	CONVEX INSURANCE UK LTD	0	0		0	(2)	0	723	868	(2)	870	0	870	3	0	24
AA-1120495	DOMINION INSURANCE COMPANY LIMITED	0	0		0	0	0	2,275	2,730	0	2,730	0	2,730	6	0	328
AA-1124129	ENDURANCE WORLDWIDE INSURANCE LTD	0	0		0	0	0	0	0	0	0	0	0	2	0	0
AA-1340125	HANNOVER RUCK SE	0	0		0	0	0	9	11	0	11	0	11	2	0	0
AA-1340106	HDI GERLING INDUSTRIE VERISICHERUNG AG	0	0		0	0	0	3	4	0	4	0	4	2	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk							
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-3190080	HEDDINGTON INSURANCE LTD.	0	0		0	2,268	0	2,268	2,722	0	2,722	0	2,722	6	0	327
AA-1460080	HELVETIA SCHWEIZERISCHE	0	0		0	9	0	9	11	0	11	0	11	3	0	0
AA-2230425	I.R.B., IST. DE RESS DO BRAZIL	0	0		0	302	0	3,707	4,448	302	4,146	0	4,146	4	0	137
AA-5420050	KOREAN REINSURANCE COMPANY	0	0		0	(3)	0	0	0	(3)	3	0	3	3	0	0
AA-3190871	LANCASHIRE INSURANCE COMPANY LIMITED	0	0		0	265	0	265	318	0	318	0	318	3	0	9
AA-1370048	LIBERTY MUT INS EUROPE LTD	0	0		0	2	0	2	2	0	2	0	2	6	0	0
AA-3190917	LIBERTY SPECIALTY MARKETS BERMUDA LTD	0	0		0	0	0	0	0	0	0	0	0	3	0	0
AA-1122000	LLOYD'S	0	0		0	2,718	0	2,718	3,262	0	3,262	0	3,262	3	0	91
AA-1126033	LLOYDS - SYNDICATE # 0033	0	0		0	268	0	268	322	0	322	0	322	3	0	9
AA-1126435	LLOYDS - SYNDICATE # 0435	0	0		0	143	0	143	172	0	172	0	172	3	0	5
AA-1126457	LLOYDS - SYNDICATE # 0457	0	0		0	13	0	13	16	0	16	0	16	3	0	0
AA-1126510	LLOYDS - SYNDICATE # 0510	0	0		0	632	0	632	758	0	758	0	758	3	0	21
AA-1126566	LLOYDS - SYNDICATE # 0566	0	0		0	999	0	999	1,199	0	1,199	0	1,199	3	0	34
AA-1126609	LLOYDS - SYNDICATE # 0609	0	0		2	398	0	400	480	2	478	0	478	3	0	13
AA-1126623	LLOYDS - SYNDICATE # 0623	0	0		0	46	0	46	55	0	55	0	55	3	0	2
AA-1127084	LLOYDS - SYNDICATE # 1084	0	0		(2)	378	0	376	451	(2)	453	0	453	3	0	13
AA-1127183	LLOYDS - SYNDICATE # 1183	0	0		0	3	0	3	4	0	4	0	4	3	0	0
AA-1127200	LLOYDS - SYNDICATE # 1200	0	0		(14)	14	0	0	0	(14)	14	0	14	3	0	0
AA-1127218	LLOYDS - SYNDICATE # 1218	0	0		(13)	13	0	0	0	(13)	13	0	13	3	0	0
AA-1120085	LLOYDS - SYNDICATE # 1274	0	0		(18)	20	0	2	2	(18)	20	0	20	20	0	1
AA-1127414	LLOYDS - SYNDICATE # 1414	0	0		1	44	0	45	54	1	53	0	53	3	0	1
AA-1127688	LLOYDS - SYNDICATE # 1688	0	0		17	37	0	177	212	20	192	17	175	3	0	5
AA-1120157	LLOYDS - SYNDICATE # 1729	0	0		0	26	0	26	31	0	31	0	31	3	0	1
AA-1120171	LLOYDS - SYNDICATE # 1856	0	0		0	55	0	55	66	0	66	0	66	3	0	2
AA-1127861	LLOYDS - SYNDICATE # 1861	0	0		0	99	0	99	119	0	119	0	119	3	0	3
AA-1120096	LLOYDS - SYNDICATE # 1880	0	0		0	183	0	183	220	0	220	0	220	3	0	6
AA-1120161	LLOYDS - SYNDICATE # 1980	0	0		(7)	7	0	0	0	(7)	7	0	7	3	0	0
AA-1128001	LLOYDS - SYNDICATE # 2001	0	0		16	191	0	207	248	16	232	0	232	3	0	7
AA-1128003	LLOYDS - SYNDICATE # 2003	0	0		0	1,086	0	1,086	1,303	0	1,303	0	1,303	3	0	36
AA-1120071	LLOYDS - SYNDICATE # 2007	0	0		(28)	28	0	0	0	(28)	28	0	28	3	0	1
AA-1128010	LLOYDS - SYNDICATE # 2010	0	0		0	100	0	100	120	0	120	0	120	3	0	3
AA-1128020	LLOYDS - SYNDICATE # 2020	0	0		0	3	1	2	3	0	3	0	3	3	0	0
AA-1120112	LLOYDS - SYNDICATE # 2232	0	0		0	2	0	2	2	0	2	0	2	3	0	0
AA-1128623	LLOYDS - SYNDICATE # 2623	0	0		(18)	226	0	208	250	(18)	268	0	268	3	0	7
AA-1128791	LLOYDS - SYNDICATE # 2791	0	0		(3)	22	0	19	23	(3)	26	0	26	3	0	1
AA-1128987	LLOYDS - SYNDICATE # 2987	0	0		(3)	1,420	0	1,417	1,700	(3)	1,703	0	1,703	3	0	48
AA-1120179	LLOYDS - SYNDICATE # 2988	0	0		0	57	0	57	68	0	68	0	68	3	0	2
AA-1129000	LLOYDS - SYNDICATE # 3000	0	0		0	86	0	86	103	0	103	0	103	3	0	3
AA-1129210	LLOYDS - SYNDICATE # 3210	0	0		(25)	25	0	0	0	(25)	25	0	25	3	0	1
AA-1126005	LLOYDS - SYNDICATE # 4000	0	0		0	282	0	282	338	0	338	0	338	3	0	9
AA-1120075	LLOYDS - SYNDICATE # 4020	0	0		(15)	143	0	128	154	(15)	169	0	169	3	0	5
AA-1120067	LLOYDS - SYNDICATE # 4242	0	0		0	19	0	19	23	0	23	0	23	3	0	1
AA-1126004	LLOYDS - SYNDICATE # 4444	0	0		0	186	0	186	223	0	223	0	223	3	0	6
AA-1120181	LLOYDS - SYNDICATE # 5886	0	0		0	74	0	74	89	0	89	0	89	3	0	2

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-1840000	MAPFRE RE CO DE REASEGUROS S A	0	0		313	1,532	1,937	0	3,469	4,163	1,219	2,944	313	2,631	3	9	74
AA-3190829	MARKEL BERMUDA LIMITED	0	0		0	0	0	0	0	0	0	0	0	0	3	0	0
AA-1121410	MITSUI SUMITOMO INS CO (EUROPE) LTD	0	0		0	0	2,259	0	2,259	2,711	0	2,711	0	2,711	3	0	76
AA-1580065	NISSAN FIRE & MARINE INSURANCE CO. LTD.	0	0		0	0	2,263	0	2,263	2,716	0	2,716	0	2,716	6	0	326
AA-3190686	PARTNERRE GRP	0	0		(1)	0	1	0	0	0	(1)	1	0	1	2	0	0
AA-1120962	ST PAUL REINSURANCE CO. LTD. (UK CORP)	0	0		0	0	1	0	1	1	0	1	0	1	6	0	0
AA-1121380	STOREBRAND INSURANCE CO. (UK) LTD.	0	0		0	0	2,255	0	2,255	2,706	0	2,706	0	2,706	6	0	325
AA-1370020	SWISS RE INTERNATIONAL SE	0	0		0	1	0	0	1	1	1	0	0	2	0	0	0
AA-1121445	TOKIO MARINE EUROPE INS LTD	0	0		0	0	2,255	0	2,255	2,706	0	2,706	0	2,706	6	0	325
AA-1121375	TRAVELERS INS CO LTD	0	0		0	0	2,264	0	2,264	2,717	0	2,717	0	2,717	1	0	43
AA-1121480	UNIONAMERICA INSURANCE COMPANY LTD.	0	0		0	0	2,255	0	2,255	2,706	0	2,706	0	2,706	6	0	325
AA-3190870	VALIDUS REINSURANCE LTD	0	0		0	1	0	0	1	1	1	0	0	3	0	0	0
AA-1460185	WINTERTHUR SCHWEIZERISCHE VERSGES AG	0	0		0	0	2,257	0	2,257	2,708	0	2,708	0	2,708	2	0	57
AA-1121575	YASUDA FIRE & MARINE INS CO OF EUROPE	0	0		0	0	2,257	0	2,257	2,708	0	2,708	0	2,708	6	0	325
1299999	Total Authorized - Other Non-U.S. Insurers	0	0	XXX	510	2,053	51,777	1	53,829	64,595	1,544	63,051	510	62,541	XXX	15	3,718
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	0	XXX	4,480	121,983	199,958	2,835	225,076	270,092	26,717	243,375	4,448	238,927	XXX	105	9,327
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190418	NEW PROVIDENCE MUTUAL LIMITED	0	0		0	10	39	39	10	12	10	2	0	2	6	0	0
1999999	Total Unauthorized - Affiliates - Other (Non-U.S.) - Captive	0	0	XXX	0	10	39	39	10	12	10	2	0	2	XXX	0	0
AA-3190411	RISK ENGINEERING INSURANCE COMPANY LTD	0	0		25,596	24,715	0	0	24,715	29,658	12,265	17,393	17,393	0	6	522	0
2099999	Total Unauthorized - Affiliates - Other (Non-U.S.) - Other	0	0	XXX	25,596	24,715	0	0	24,715	29,658	12,265	17,393	17,393	0	XXX	522	0
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	XXX	25,596	24,725	39	39	24,725	29,670	12,275	17,395	17,393	2	XXX	522	0
2299999	Total Unauthorized - Affiliates	0	0	XXX	25,596	24,725	39	39	24,725	29,670	12,275	17,395	17,393	2	XXX	522	0
87-1924654	CLAREMONT IC	0	0		0	0	1	1	0	0	0	0	0	0	6	0	0
26-0147121	EFFEM REINSURANCE COMPANY	0	0		0	0	0	0	0	0	0	0	0	0	6	0	0
03-0461286	EPIC INSURANCE COMPANY	0	0		0	0	2	2	0	0	0	0	0	0	6	0	0
95-1466743	FINANCIAL INDEMNITY COMPANY	0	0		0	0	85	85	2,170	2,604	0	2,604	0	2,604	4	0	86
47-5663358	FIRST TOWER PARTNERS, LLC	0	0		1,808	1,745	0	0	1,745	2,094	1	2,093	1,808	285	6	54	34
02-0712840	HIGHLAND PARK INSURANCE COMPANY	0	0		0	0	1	1	0	0	0	0	0	0	6	0	0
31-4177110	NATIONWIDE MUTUAL FIRE INSURANCE COMPANY	0	0		0	(27)	26	0	0	0	(27)	27	0	27	6	0	3
51-0387023	THOMSON REUTERS RISK MGMT INC	0	0		0	7	0	0	7	8	8	0	0	0	6	0	0
03-0348076	UT INSURANCE (VERMONT) INC	0	0		0	0	14	14	0	0	0	0	0	0	6	0	0
2399999	Total Unauthorized - Other U.S. Unaffiliated Insurers	0	0	XXX	1,808	1,725	129	103	3,922	4,706	(18)	4,724	1,808	2,916	XXX	54	123
AA-9991310	FLORIDA HURRICANE CATASTROPHE FUND	0	0		0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	0	0		0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2499999	Total Unauthorized - Pools - Mandatory Pools	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
98-0413961	ADIDAS INTERNATIONAL RE LIMITED (AIR)	0	0		0	0	0	0	0	0	0	0	0	0	6	0	0
AA-5760051	AIG ASIA PACIFIC INS PTE LTD	0	0		0	4	0	0	4	5	5	0	0	0	3	0	0
AA-1120841	AIG EUROPE LIMITED	0	0		0	0	5	5	0	0	0	0	0	0	6	0	0
AA-1320065	ALLIANZ GLOBAL CORPORATE & SPECIALTY (FR	0	0		0	0	2	2	0	0	0	0	0	0	6	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-3194128	ALLIED WORLD ASSURANCE COMPANY LTD	.0	.0		.0	.0	.1	.0	.0	.0	.0	.0	.0	.0	3.	.0	.0
AA-1780091	ARCH REINS EUROPE UNDERWRITING LTD	.0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	6.	.0	.0
AA-1560118	ARCH REINSURANCE COMPANY	.0	.0		.0	162	419	162	194	162	.0	.0	.0	.0	2.	.0	1
AA-3191352	ASCOT REINS CO LTD	.0	.0		.0	(5)	5	.0	.0	.0	(5)	.5	.0	.0	3.	.0	.0
AA-1440023	ASSA ABLOY FORSAKRINGS AB	.0	.0		.0	12	78	.0	.0	.0	.0	.0	.0	.0	6.	.0	.0
AA-3191454	AXA XL BERMUDA	.0	2,509	.0002	440	1,297	.0	1,297	1,556	607	.0	949	949	.0	6.	.0	28
AA-3191390	CASTLE HARBOUR INSURANCE LIMITED	.0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	6.	.0	.0
AA-5320057	CHUBB INS HONG KONG	.0	.0		.0	13	.0	.0	.0	16	.0	.0	.0	.0	6.	.0	.0
AA-1320035	COLISEE RE	.0	.0		.0	.0	90	90	2,170	2,604	.0	2,604	.0	2,604	6.	.0	312
AA-3191435	CONDUIT REINS LTD	.0	223	.0003	.0	129	161	161	129	155	(94)	249	223	.0	4.	.0	7
AA-1120430	CONTINENTAL INSURANCE CO. (UK) LTD.	.0	.0		.0	.0	88	88	2,170	2,604	.0	2,604	.0	2,604	6.	.0	312
AA-3191400	CONVEX RE LIMITED	.0	293	.0004	.0	106	.0	.0	106	127	.0	127	127	.0	3.	.0	.0
AA-1340085	E-S RUCKVERSICHERUNGS AKTIENGESELLSCHAFT	.0	.0		.0	.0	87	87	2,170	2,604	.0	2,604	.0	2,604	2.	.0	.55
AA-1120515	EAGLE STAR INS CO LTD	.0	.0		.0	.0	1	1	.0	.0	.0	.0	.0	.0	6.	.0	.0
AA-3191180	ELGO INSURANCE COMPANY LTD	.0	.0		.0	55	91	.0	91	109	109	.0	.0	.0	6.	.0	.0
AA-1370059	ESSILORLUXOTTICA RE	.0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	6.	.0	.0
AA-1370061	FORVIA RE S.A.	.0	.0		.0	.0	13	13	.0	.0	.0	.0	.0	.0	6.	.0	.0
AA-1780117	GD INSURANCE COMPANY DAC	.0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	6.	.0	.0
AA-1460060	GEN REINS CORP (EUROPE) AG	.0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	6.	.0	.0
AA-1340145	GENERAL REINSURANCE AG	.0	.0		.0	.4	.0	.0	.0	.5	.0	.0	.0	.0	1.	.0	.0
AA-1080004	GLOBAL RISK UNDERWRITERS (BERMUDA) LTD	.0	.0		.0	(120)	120	.0	.0	(120)	.0	120	.0	120	6.	.0	14
AA-3191524	GR BERMUDA SAC LTD	.0	.0		.0	1,211	.0	.0	1,211	1,453	1,453	.0	.0	.0	6.	.0	.0
AA-3191437	GROUP ARK INSURANCE LIMITED	.0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	3.	.0	.0
AA-3191190	HAMILTON RE, LTD.	.0	505	.0005	.0	368	.0	.0	368	442	(3)	445	445	.0	4.	.0	13
AA-1560483	HANNOVER RUCKVERSICHERUNGS AKTIENGESELLS	.0	.0		.0	.0	10	10	.0	.0	.0	.0	.0	.0	2.	.0	.0
AA-3770336	HEXAGON INSURANCE COMPANY, LTD	.0	.0		.0	10,425	3,481	.0	3,481	4,177	119	4,058	4,058	.0	6.	.0	122
AA-3190875	HISCOX (BERMUDA) LTD	.0	.0		.0	1,058	270	.0	270	324	(8)	332	332	.0	3.	.0	.9
AA-1370023	IMERYS RE LIMITED	.0	.0		.0	.0	2	2	.0	.0	.0	.0	.0	.0	6.	.0	.0
AA-3190906	KEYSTONE PF	.0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	6.	.0	.0
AA-5760046	LENOVO INSURANCE COMPANY PTE LTD	.0	.0		.0	24	.0	.0	24	29	29	.0	.0	.0	6.	.0	.0
AA-1560051	LIBERTY INS CO OF CANADA	.0	.0		.0	53	27	27	53	64	53	11	.0	11	6.	.0	1
AA-1120876	LOMBARD CONTINENTAL INS PLC	.0	.0		.0	.0	.85	85	2,170	2,604	.0	2,604	.0	2,604	6.	.0	312
AA-1120887	LONDON AND EDINBURGH INSURANCE CO. LTD.	.0	.0		.0	.0	.85	85	2,170	2,604	.0	2,604	.0	2,604	6.	.0	312
AA-3191239	LUMEN RE LTD.	.0	.0		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	3.	.0	.0
AA-3190669	MARIAS FALLS INSURANCE COMPANY LTD	.0	.0		.0	96	.0	.0	96	115	115	.0	.0	.0	6.	.0	.0
AA-1460019	MS AMLIN AG	.0	1,965	.0006	.0	988	.0	.0	988	1,186	(6)	1,192	1,192	.0	3.	.0	33
AA-1340165	MUNCHENER RUCKVERSICHERUNGS GESELLSCHAFT	.0	18,506	.0008	.0	4,854	.0	.0	4,854	5,825	(130)	5,955	5,955	.0	2.	.0	125
AA-1560600	MUNICH REINSURANCE CO. OF CANADA	.0	.0		.0	48	244	244	48	58	48	10	.0	10	2.	.0	.0
AA-1120011	MUNICH REINSURANCE COMPANY (UK) GENERAL	.0	.0		.0	.0	67	67	.0	.0	.0	.0	.0	.0	6.	.0	.0
AA-5760072	NEXUS INS INTL PTE LTD (NII)	.0	.0		.0	.0	.0	1	.0	.0	.0	.0	.0	.0	6.	.0	.0
AA-1121077	NISSAN INS. CO. (EUROPE) LTD.	.0	.0		.0	.0	.85	85	2,170	2,604	.0	2,604	.0	2,604	6.	.0	312
AA-1320230	PFA TIARD	.0	.0		.0	.0	.85	85	2,170	2,604	.0	2,604	.0	2,604	6.	.0	312
AA-1460028	PLASTIC OMNIUM RE AG	.0	.0		.0	19	123	123	19	23	19	4	.0	4	6.	.0	.0
AA-2730800	REASEGURADORA PATRIA S.A.	.0	.0		.0	.0	14	14	.0	.0	.0	.0	.0	.0	3.	.0	.0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-1464109	RELX RISKS SA	0	0		0	0	0	0	0	0	0	0	0	0	6.	0	0
AA-1340022	REV IUM RUCKVERSICHERUNG AG	0	0		0	0	0	0	0	0	0	0	0	0	6.	0	0
AA-3160102	RIVERVIEW INSURANCE CO LTD	0	0		1,579	2,129	0	0	2,129	2,555	605	1,950	1,579	371	6.	47	44
98-1291066	ROOSEVELT INSURANCE COMPANY, LTD	0	0		0	16	0	0	16	19	19	0	0	0	6.	0	0
AA-1370028	ROUQUETTE RE S.A.	0	0		0	0	510	510	0	0	0	0	0	0	6.	0	0
AA-5420022	SAMSUNG FIRE & MARINE INS CO L	0	0		0	0	0	0	0	0	0	0	0	0	1.	0	0
AA-1440021	SANDVIK FORSAKRINGS AB	0	0		0	0	131	131	0	0	0	0	0	0	6.	0	0
AA-1320031	SCOR GLOBAL P&C SE	0	0		0	0	2	2	0	0	0	0	0	0	6.	0	0
AA-1560745	SCOR REINSURANCE COMPANY OF CANADA	0	0		0	0	1	1	0	0	0	0	0	0	3.	0	0
AA-1370038	SERECO RE S.A.	0	0		0	0	0	0	0	0	0	0	0	0	6.	0	0
AA-3194212	SOBRAL LIMITED	0	0		3	1,272	0	1,272	3	4	3	1	0	1	6.	0	0
AA-1370031	SOLVAY HORTENSIA S.A.	0	0		0	69	69	69	0	0	0	0	0	0	6.	0	0
AA-1810009	STARR EUROPE INS LTD	0	0		0	0	1	1	0	0	0	0	0	0	3.	0	0
AA-3192080	SUFFOLK INSURANCE LTD	0	0		0	5	5	5	0	0	0	0	0	0	6.	0	0
AA-1370021	SWISS RE FRANKONA RUCKVERSICHERUNGS-A.G.	0	0		0	0	1	1	0	0	0	0	0	0	2.	0	0
AA-1460146	SWISS REINSURANCE COMPANY CANADA	0	0		334	117	117	117	334	401	334	67	0	67	2.	0	1
AA-3191220	TELLURIDE INSURANCE LTD	0	0		0	1	1	1	0	0	0	0	0	0	6.	0	0
AA-3190305	THE GROVE INSURANCE COMPANY LIMITED	0	0		0	6	6	6	0	0	0	0	0	0	6.	0	0
98-1404041	THERMO FISHER SCIENTIFIC RE	0	0		0	6	6	6	0	0	0	0	0	0	6.	0	0
AA-1580100	TOKIO MARINE & NICHIDO FIRE INS CO LTD	0	0		0	2	2	2	0	0	0	0	0	0	1.	0	0
AA-1320177	VEOLIA ENVIRONMENT SERVICES-RE	0	0		0	0	0	0	0	0	0	0	0	0	6.	0	0
AA-1780131	VITAL BLUE INS DAC	0	0		50	0	0	0	50	60	60	0	0	0	6.	0	0
AA-1490003	W.R. BERKLEY EUROPE AG	0	0		(24)	24	0	0	0	0	(24)	24	0	24	6.	0	3
AA-3190231	WINGFOOT INS CO LTD	0	0		0	14	14	14	0	0	0	0	0	0	6.	0	0
AA-1460020	XL INSURANCE COMPANY SE	0	0		0	0	0	0	0	0	0	0	0	0	2.	0	0
AA-1780072	XL RE EUROPE SE	0	0		0	0	0	0	0	0	0	0	0	0	2.	0	0
2699999	Total Unauthorized - Other Non-U.S. Insurers	0	24,001	XXX	13,557	15,613	4,060	3,923	30,940	37,128	3,371	33,757	14,860	18,897	XXX	389	1,996
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	24,001	XXX	40,961	42,063	4,228	4,065	59,587	71,504	15,628	55,876	34,061	21,815	XXX	965	2,120
3299999	Total Certified - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999	Total Certified - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3699999	Total Certified - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
CR-3194126	ARCH REINSURANCE LTD.	0	355	0009	0	356	98	0	454	545	1	544	355	189	2.	7	4
CR-3194122	DAVINCI REINSURANCE LTD.	0	0		36	36	37	1	72	86	0	86	36	50	3.	1	1
CR-1340125	HANNOVER RUCK SE	1,255	0		1,074	6,398	10,206	0	16,604	19,925	4,069	15,856	2,329	13,527	2.	49	284
CR-1460019	MS AML IN AG	0	64	0010	0	1	0	0	1	1	0	0	0	0	3.	0	0
CR-3190339	RENAISSANCE REINSURANCE LTD.	0	0		54	54	56	0	110	132	0	132	54	78	2.	1	2
CR-1460146	SWISS REINSURANCE CO.	0	0		604	609	826	3	1,432	1,718	5	1,713	604	1,109	2.	13	23
4099999	Total Certified - Other Non-U.S. Insurers	1,255	419	XXX	1,768	7,454	11,223	4	18,673	22,408	4,076	18,331	3,378	14,953	XXX	71	314
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	1,255	419	XXX	1,768	7,454	11,223	4	18,673	22,408	4,076	18,331	3,378	14,953	XXX	71	314
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120% *)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5099999	Total Reciprocal Jurisdiction - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
RJ-3194126	ARCH REINSURANCE LTD.	0	0	0	0	1,190	1,616	0	2,806	3,367	1,190	2,177	0	2,177	2	0	46
RJ-3191352	ASCOT REINS CO LTD	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0
RJ-3194168	ASPEN INSURANCE LIMITED	0	0	0	0	1,259	3,594	1,931	5,525	6,630	2,335	4,295	1,259	3,036	3	35	85
RJ-3194139	AXIS SPECIALTY LTD	0	0	0	0	960	785	0	785	942	0	942	942	0	3	26	0
RJ-1320152	CHUBB EUROPEAN GROUP	0	0	0	0	0	2	0	2	2	0	2	0	2	1	0	0
RJ-3191435	CONDUIT REINS LTD	0	0	0	0	857	426	0	1,283	1,540	857	683	0	683	4	0	23
RJ-1120191	CONVEX INSURANCE UK LTD	0	0	0	0	529	608	0	608	730	569	161	161	0	3	4	0
RJ-3191400	CONVEX RE LIMITED	0	0	0	0	180	167	0	167	200	169	31	31	0	3	1	0
RJ-3190875	HISCOX (BERMUDA) LTD	0	0	0	0	415	384	0	384	461	363	98	98	0	3	3	0
RJ-3190871	LANCASHIRE INSURANCE COMPANY LIMITED	0	0	0	0	522	167	0	689	827	522	305	0	305	3	0	9
RJ-1370048	LIBERTY MUT INS EUROPE LTD	0	0	0	0	0	1	0	1	1	0	1	0	1	6	0	0
RJ-1122000	LLOYD'S	0	0	0	0	(2,718)	0	0	0	0	0	0	0	0	3	0	0
RJ-1126033	LLOYDS - SYNDICATE # 0033	0	0	0	0	484	458	0	458	550	321	229	229	0	3	6	0
RJ-1126318	LLOYDS - SYNDICATE # 0318	0	0	0	0	0	1	0	1	1	0	1	0	1	3	0	0
RJ-1126566	LLOYDS - SYNDICATE # 0566	0	0	0	0	880	832	0	832	998	380	618	618	0	3	17	0
RJ-1126609	LLOYDS - SYNDICATE # 0609	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0
RJ-1126623	LLOYDS - SYNDICATE # 0623	0	0	0	0	34	116	2	118	142	82	60	34	26	3	1	1
RJ-1127084	LLOYDS - SYNDICATE # 1084	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0
RJ-1120085	LLOYDS - SYNDICATE # 1274	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0
RJ-1127301	LLOYDS - SYNDICATE # 1301	0	0	0	0	0	2	0	2	2	2	0	0	0	3	0	0
RJ-1127414	LLOYDS - SYNDICATE # 1414	0	0	0	0	184	0	0	184	221	221	0	0	0	3	0	0
RJ-1120157	LLOYDS - SYNDICATE # 1729	0	0	0	0	5	5	0	5	6	4	2	2	0	3	0	0
RJ-1120171	LLOYDS - SYNDICATE # 1856	0	0	0	0	52	49	0	49	59	16	43	43	0	3	1	0
RJ-1120083	LLOYDS - SYNDICATE # 1910	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0
RJ-1128001	LLOYDS - SYNDICATE # 2001	0	0	0	0	146	138	0	138	166	89	77	77	0	3	2	0
RJ-1128003	LLOYDS - SYNDICATE # 2003	0	0	0	0	705	705	402	1,107	1,328	0	1,328	705	623	3	20	17
RJ-1128010	LLOYDS - SYNDICATE # 2010	0	0	0	0	88	83	0	83	100	51	49	49	0	3	1	0
RJ-1128488	LLOYDS - SYNDICATE # 2488	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0
RJ-1128623	LLOYDS - SYNDICATE # 2623	0	0	0	0	153	533	8	541	649	380	269	153	116	3	4	3
RJ-1128791	LLOYDS - SYNDICATE # 2791	0	0	0	0	117	111	0	111	133	35	98	98	0	3	3	0
RJ-1128987	LLOYDS - SYNDICATE # 2987	0	0	0	0	921	1,204	0	1,204	1,445	728	717	717	0	3	20	0
RJ-1129000	LLOYDS - SYNDICATE # 3000	0	0	0	0	88	83	0	83	100	0	100	88	12	3	2	0
RJ-1126005	LLOYDS - SYNDICATE # 4000	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0
RJ-1120075	LLOYDS - SYNDICATE # 4020	0	0	0	0	132	161	0	161	193	150	43	43	0	3	1	0
RJ-1126004	LLOYDS - SYNDICATE # 4444	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0
RJ-1126006	LLOYDS - SYNDICATE # 4472	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0
RJ-1120065	LLOYDS - SYNDICATE # 5555	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0
RJ-1120213	LLOYDS - SYNDICATE # 5623	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0
RJ-1120181	LLOYDS - SYNDICATE # 5886	0	0	0	0	83	79	0	79	95	0	95	83	12	3	2	0
RJ-1460019	MS AML IN AG	0	0	0	0	358	1,169	0	2,121	2,545	811	1,734	358	1,376	3	10	39

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
RJ-1340165	MUNCHENER RUCKVERSICHERUNGS GESELLSCHAFT	0	0		1,349	6,824	5,763	0	12,587	15,104	5,475	9,629	1,349	8,280	2	28	174
RJ-1460146	SWISS REINSURANCE CO.	0	0		0	2,132	4,863	0	6,995	8,394	2,132	6,262	0	6,262	2	0	132
5499999	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers	0	0	XXX	8,938	20,257	16,134	0	39,109	46,931	16,882	30,049	7,136	22,913	XXX	190	528
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	0	XXX	8,938	20,257	16,134	0	39,109	46,931	16,882	30,049	7,136	22,913	XXX	190	528
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	1,255	24,420	XXX	56,147	191,757	231,543	6,904	342,445	410,934	63,303	347,631	49,023	298,608	XXX	1,332	12,289
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999	Totals	1,255	24,420	XXX	56,147	191,757	231,543	6,904	342,445	410,934	63,303	347,631	49,023	298,608	XXX	1,332	12,289

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												42 Total Overdue Cols. 38+39 +40+41
05-0316605	FACTORY MUTUAL INSURANCE COMPANY	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
05-0316605	FACTORY MUTUAL INSURANCE COMPANY	90,877	0	0	0	0	90,877	0	0	90,877	0	5	0.0	0.0	0.0	XXX	0
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other	90,877	0	0	0	0	90,877	0	0	90,877	0	5	0.0	0.0	0.0	XXX	0
0499999	Total Authorized - Affiliates - U.S. Non-Pool	90,877	0	0	0	0	90,877	0	0	90,877	0	5	0.0	0.0	0.0	XXX	0
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
0899999	Total Authorized - Affiliates	90,877	0	0	0	0	90,877	0	0	90,877	0	5	0.0	0.0	0.0	XXX	0
95-2371728	ACE AMERICAN INSURANCE COMPANY	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
06-0237820	ACE PROPERTY & CASUALTY INS CO	24	8	0	0	0	32	0	0	32	0	0	25.0	0.0	0.0	YES	0
95-3187355	ALLIANZ GLOBAL RISKS US INSURANCE COMPAN	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
36-0719665	ALLSTATE INSURANCE COMPANY	67	0	0	0	0	67	0	0	67	0	26	0.0	0.0	0.0	YES	0
36-2661954	AMERICAN AGRICULTURAL INSURANCE COMPANY	83	0	0	0	0	83	0	0	83	0	0	0.0	0.0	0.0	YES	0
13-5124990	AMERICAN HOME ASSURANCE COMPANY	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
06-1430254	ARCH REINSURANCE COMPANY	0	0	0	1	0	2	0	0	2	0	0	100.0	100.0	50.0	NO	0
94-1390273	ARGONAUT INSURANCE COMPANY	1	0	0	0	0	1	0	0	1	0	1	0.0	0.0	0.0	YES	0
75-2344200	ASPEN AMERICA INS CO	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
06-1463851	ASPEN SPECIALITY INSURANCE COMP	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
51-0434766	AXIS REINSURANCE COMPANY	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
47-0574325	BERKLEY INSURANCE COMPANY	134	(6)	0	0	0	(6)	128	0	128	0	242	(4.7)	0.0	0.0	YES	0
63-0202590	BERKSHIRE HATHAWAY SPECIALTY INSURANCE	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
39-0971527	CAPITOL INDEMNITY CORPORATION	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
31-0542366	CINCINNATI INSURANCE CO.	148	0	0	0	0	148	0	0	148	0	0	0.0	0.0	0.0	YES	0
36-2114545	CONTINENTAL CASUALTY COMPANY	0	0	0	1	0	1	0	0	1	0	0	100.0	100.0	0.0	NO	0
13-5010440	CONTINENTAL INSURANCE COMPANY	1	0	0	0	(1)	(1)	0	0	0	0	7	0.0	0.0	0.0	YES	0
38-2145898	DORINCO REINSURANCE COMPANY	5	0	0	0	0	5	0	0	5	0	4	0.0	0.0	0.0	YES	0
63-0329091	EMC PROPERTY & CASUALTY	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
39-0264050	EMPLOYERS INSURANCE OF WAUSAU	10	0	0	0	0	10	0	0	10	0	2	0.0	0.0	0.0	YES	0
42-0234980	EMPLOYERS MUTUAL CASUALTY COMPANY	125	0	0	0	0	125	0	0	125	0	0	0.0	0.0	0.0	YES	0
35-2293075	ENDURANCE ASSURANCE CORP	119	(7)	3	52	48	167	55	0	167	109	28.7	19.9	31.1	YES	55	
22-2005057	EVEREST REINSURANCE COMPANY	3,020	0	(61)	0	0	(61)	2,959	0	2,959	0	2,105	(2.1)	0.0	0.0	YES	0
75-1588101	GEICO GENERAL INSURANCE COMPANY	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
13-2673100	GENERAL REINSURANCE CORPORATION	2,612	0	(62)	0	0	(62)	2,550	0	2,550	0	3,289	(2.4)	0.0	0.0	YES	0
13-1958482	GENERAL STAR NATIONAL INS. CO.	4	0	0	0	0	4	0	0	4	0	0	0.0	0.0	0.0	YES	0
06-0383750	HARTFORD FIRE INSURANCE COMPANY	0	0	2	0	201	203	203	0	203	201	3	100.0	97.6	99.0	NO	0
74-2195939	HOUSTON CASUALTY CO.	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
23-0723970	INSURANCE COMPANY OF NORTH AMERICA	1	0	0	0	0	1	0	0	1	0	0	0.0	0.0	0.0	YES	0
13-4924125	MUNICH REINSURANCE AMERICA INC.	6	2	3	0	5	11	11	0	11	3	56	45.5	4.5	0.0	YES	3
38-0865250	NATIONAL CASUALTY COMPANY	11	0	0	0	0	11	0	0	11	0	0	0.0	0.0	0.0	YES	0
47-0355979	NATIONAL INDEMNITY COMPANY	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
36-2403971	NATIONAL LIABILITY & FIRE	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
25-0687550	NATIONAL UNION FIRE INS CO OF PITTSBURGH	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
31-4177100	NATIONWIDE MUTUAL INSURANCE COMPANY	871	0	(22)	0	1	(21)	850	0	850	1	622	(2.5)	0.1	0.1	YES	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
		37 Current	Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)											
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												
02-0311919	NORTH AMERICAN SPECIALTY INS. CO.	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
47-0698507	ODYSSEY REINSURANCE CO	166	0	0	0	0	166	0	166	0	0	0.0	0.0	0.0	0.0	YES	0	
25-0410420	OLD REPUBLIC INSURANCE CO.	31	0	0	0	0	31	0	31	0	6	0.0	0.0	0.0	0.0	YES	0	
13-3031176	PARTNER REINS CO OF THE US	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
13-3531373	PARTNERRE INSURANCE CO. OF NY	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
23-1642962	PENNSYLVANIA MANUFACTURERS ASSOC INS	3	0	0	0	0	3	0	3	0	0	0.0	0.0	0.0	0.0	YES	0	
23-1641984	QBE REINSURANCE CORP	534	0	(15)	0	0	(15)	519	519	0	532	(2.9)	0.0	0.0	0.0	YES	0	
16-0366830	RSUI IND CO	0	0	0	0	0	0	0	0	0	74	0.0	0.0	0.0	0.0	YES	0	
75-1444207	SCOR REINSURANCE COMPANY	871	468	788	0	0	1,256	2,127	2,127	0	0	59.1	0.0	0.0	0.0	YES	0	
13-2997499	SIRIUSPOINT AMERICA INSURANCE CO	27	0	6	3	0	9	36	36	0	(1)	25.0	8.6	0.0	0.0	YES	3	
75-1670124	STARR IND & LIAB COMPANY	48	0	1	0	167	168	216	216	0	8	77.8	74.6	77.3	NO	0		
81-4566522	STARR SPECIALTY INS CO	0	0	0	1	0	6	6	6	0	6	100.0	100.0	83.3	NO	0		
13-1675535	SWISS REINSURANCE AMERICA CORPORATION	597	0	1	0	2	3	600	600	0	2	0.5	0.3	0.3	YES	2		
94-1517098	TIG INSURANCE COMPANY	130	0	1	0	(3)	(2)	128	128	0	142	(1.6)	0.0	(2.3)	YES	0		
13-2918573	TOA-RE INSURANCE COMPANY OF AMERICA	5	0	0	0	0	0	5	5	0	4	0.0	0.0	0.0	0.0	YES	0	
13-6108722	TOKIO MARINE & NICHIDO FIRE INS CO LTD U	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
31-4423946	TRANSAMERICA CASUALTY INS CO	2	0	0	0	0	0	2	2	0	0	0.0	0.0	0.0	0.0	YES	0	
13-5616275	TRANSATLANTIC REINSURANCE COMPANY	1	0	0	0	0	0	1	1	0	0	0.0	0.0	0.0	0.0	YES	0	
06-0566050	TRAVELERS INDEMNITY COMPANY	1	0	0	0	0	0	1	1	0	0	0.0	0.0	0.0	0.0	YES	0	
92-0040526	WESTCHESTER FIRE INSURANCE COMPANY	0	0	0	1	1,020	1,021	1,021	1,021	0	0	100.0	100.0	99.9	NO	0		
48-0921045	WESTPORT INSURANCE CORPORATION	1	0	0	0	0	0	1	1	0	1	0.0	0.0	0.0	0.0	YES	0	
75-6017952	XL INS AMERICA INC	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
13-1290712	XL REINSURANCE AMERICA INC.	537	0	(26)	0	0	(26)	511	511	0	906	(5.1)	0.0	0.0	0.0	YES	0	
36-4233459	ZURICH AMERICAN INSURANCE COMPANY	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
36-2781080	ZURICH AMERICAN INSURANCE COMPANY OF ILL	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	10,196	468	610	13	1,445	2,536	12,732	0	0	12,732	1,462	8,162	19.9	7.0	11.3	XXX	64
AA-9995081	AGENCY MANAGERS LTD	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-9995022	EXCESS AND CASUALTY REINSURANCE ASSOC.	119	0	46	8	566	620	739	739	0	574	170	83.9	63.1	76.6	XXX	0	
1199999	Total Authorized - Pools - Voluntary Pools	119	0	46	8	566	620	739	0	0	739	574	170	83.9	63.1	76.6	XXX	0
AA-1120140	ALLIANZ CORNHILL INSURANCE PLC	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1344102	ALLIANZ GLOBAL CORP & SPECIALTY AG	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-3190932	ARGO RE LTD	167	0	0	0	0	0	167	167	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-3194168	ASPEN INSURANCE LIMITED	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1120337	ASPEN INSURANCE UK LIMITED	627	0	118	0	0	118	745	745	0	1,248	15.8	0.0	0.0	0.0	YES	0	
AA-1360015	ASSICURAZIONI GEN S P A	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1120660	AVIVA INSURANCE LIMITED	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-3194139	AXIS SPECIALTY LTD	27	0	181	0	0	181	208	208	0	74	87.0	0.0	0.0	0.0	YES	0	
AA-5280012	CENTRAL REINSURANCE CORPORATION	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1120191	CONVEX INSURANCE UK LTD	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1120495	DOMINION INSURANCE COMPANY LIMITED	7	0	0	0	0	0	7	7	0	14	0.0	0.0	0.0	0.0	YES	0	
AA-1124129	ENDURANCE WORLDWIDE INSURANCE LTD	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	
AA-1340125	HANNOVER RUCK SE	0	0	0	0	0	0	0	0	0	(1)	0.0	0.0	0.0	0.0	YES	0	
AA-1340106	HDI GERLING INDUSTRIE VERSICHERUNG AG	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)	44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37	Overdue				42 Total Overdue Cols. 38+39 +40+41											
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												
AA-3190080	HEDDINGTON INSURANCE LTD.	.1	.0	.0	.0	.0	.0	.1	.0	.1	.0	.3	.0	.0	.0	.0	.0	.0
AA-1460080	HELVETIA SCHWEIZERISCHE	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-2230425	I.R.B., 1ST. DE RESS DO BRAZIL	500	.0	.0	.0	.0	.0	500	.0	.0	500	.0	.0	.0	.0	.0	.0	.0
AA-5420050	KOREAN REINSURANCE COMPANY	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-3190871	LANCASHIRE INSURANCE COMPANY LIMITED	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1370048	LIBERTY MUT INS EUROPE LTD	.0	.0	.1	.1	.0	.2	.2	.0	.2	.1	.0	100.0	.0	50.0	.0	.0	.0
AA-3190917	LIBERTY SPECIALTY MARKETS BERMUDA LTD	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1122000	LLOYD'S	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.64	.0	.0	.0	.0	.0	.0
AA-1126033	LLOYDS - SYNDICATE # 0033	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	(1)	.0	.0	.0	.0	.0	.0
AA-1126435	LLOYDS - SYNDICATE # 0435	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1126457	LLOYDS - SYNDICATE # 0457	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1126510	LLOYDS - SYNDICATE # 0510	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1126566	LLOYDS - SYNDICATE # 0566	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1126609	LLOYDS - SYNDICATE # 0609	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1126623	LLOYDS - SYNDICATE # 0623	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1127084	LLOYDS - SYNDICATE # 1084	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1127183	LLOYDS - SYNDICATE # 1183	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1127200	LLOYDS - SYNDICATE # 1200	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1127218	LLOYDS - SYNDICATE # 1218	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1120085	LLOYDS - SYNDICATE # 1274	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1127414	LLOYDS - SYNDICATE # 1414	.0	.0	.0	.0	(40)	(40)	(40)	.0	(40)	.0	.0	100.0	.0	.0	100.0	.0	.0
AA-1127688	LLOYDS - SYNDICATE # 1688	16	.0	.0	.0	.0	.0	16	.0	16	.0	.0	.0	.0	.0	.0	.0	.0
AA-1120157	LLOYDS - SYNDICATE # 1729	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1120171	LLOYDS - SYNDICATE # 1856	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1127861	LLOYDS - SYNDICATE # 1861	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1120096	LLOYDS - SYNDICATE # 1880	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1120161	LLOYDS - SYNDICATE # 1980	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1128001	LLOYDS - SYNDICATE # 2001	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1128003	LLOYDS - SYNDICATE # 2003	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1120071	LLOYDS - SYNDICATE # 2007	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1128010	LLOYDS - SYNDICATE # 2010	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1128020	LLOYDS - SYNDICATE # 2020	.0	.0	.1	.2	.0	.3	.3	.0	.3	.2	.0	100.0	.0	66.7	.0	.0	.0
AA-1120112	LLOYDS - SYNDICATE # 2232	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1128623	LLOYDS - SYNDICATE # 2623	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1128791	LLOYDS - SYNDICATE # 2791	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1128987	LLOYDS - SYNDICATE # 2987	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1120179	LLOYDS - SYNDICATE # 2988	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1129000	LLOYDS - SYNDICATE # 3000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1129210	LLOYDS - SYNDICATE # 3210	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1126005	LLOYDS - SYNDICATE # 4000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1120075	LLOYDS - SYNDICATE # 4020	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1120067	LLOYDS - SYNDICATE # 4242	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1126004	LLOYDS - SYNDICATE # 4444	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1120181	LLOYDS - SYNDICATE # 5886	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
AA-1840000	MAPFRE RE CO DE REASEGUROS S A	.511	.0	(18)	.0	.0	(18)	.493	.0	.0	.493	.337	(3.7)	.0	.0	.0	.0	.0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)	44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37	Overdue				42 Total Overdue Cols. 38+39 +40+41											
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												
AA-3194128	ALLIED WORLD ASSURANCE COMPANY LTD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1780091	ARCH REINS EUROPE UNDERWRITING LTD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1560118	ARCH REINSURANCE COMPANY	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3191352	ASCOT REINS CO LTD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1440023	ASSA ABLOY FORSAKRINGS AB	0	0	0	0	86	86	86	0	86	86	0	100.0	100.0	100.0	100.0	NO	0
AA-3191454	AXA XL BERMUDA	407	0	0	0	0	0	407	0	407	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3191390	CASTLE HARBOUR INSURANCE LIMITED	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-5320057	CHUBB INS HONG KONG	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1320035	COLISEE RE	2	0	0	0	0	0	2	0	2	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3191435	CONDUIT REINS LTD	29	0	(7)	0	0	(7)	22	0	22	0	38	(31.8)	0.0	0.0	0.0	YES	0
AA-1120430	CONTINENTAL INSURANCE CO. (UK) LTD.	1	0	0	0	0	0	1	0	1	0	3	0.0	0.0	0.0	0.0	YES	0
AA-3191400	CONVEX RE LIMITED	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1340085	E+S RUCKVERSICHERUNGS AKTIENGESELLSCHAFT	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120515	EAGLE STAR INS CO LTD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3191180	ELGO INSURANCE COMPANY LTD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1370059	ESSILORLUXOTTICA RE	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1370061	FORVIA RE S.A.	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1780117	GD INSURANCE COMPANY DAC	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1460060	GEN REINS CORP (EUROPE) AG	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1340145	GENERAL REINSURANCE AG	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1080004	GLOBAL RISK UNDERWRITERS (BERMUDA) LTD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3191524	GR BERMUDA SAC LTD	145	0	0	0	0	0	145	0	145	0	191	0.0	0.0	0.0	0.0	YES	0
AA-3191437	GROUP ARK INSURANCE LIMITED	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3191190	HAMILTON RE, LTD.	167	0	0	0	0	0	167	0	167	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1560483	HANNOVER RUCKVERSICHERUNGS AKTIENGESELLS	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3770336	HEXAGON INSURANCE COMPANY, LTD	802	0	0	0	0	0	802	0	802	0	322	0.0	0.0	0.0	0.0	YES	0
AA-3190875	HISCOX (BERMUDA) LTD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1370023	IMERYS RE LIMITED	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3190906	KEYSTONE PF	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-5760046	LENOVO INSURANCE COMPANY PTE LTD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1560051	LIBERTY INS CO OF CANADA	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120876	LOMBARD CONTINENTAL INS PLC	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120887	LONDON AND EDINBURGH INSURANCE CO. LTD.	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3191239	LUMEN RE LTD.	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3190669	MARIAS FALLS INSURANCE COMPANY LTD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1460019	MS AMLIN AG	68	1	421	0	0	422	490	0	490	0	1	86.1	0.0	0.0	0.0	YES	0
AA-1340165	MUNCHENER RUCKVERSICHERUNGS GESELLSCHAFT	450	0	0	0	0	0	450	0	450	0	1,814	0.0	0.0	0.0	0.0	YES	0
AA-1560600	MUNICH REINSURANCE CO. OF CANADA	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1120011	MUNICH REINSURANCE COMPANY (UK) GENERAL	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-5760072	NEXUS INS INTL PTE LTD (NII)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1121077	NISSAN INS. CO. (EUROPE) LTD.	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1320230	PFA TIARD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1460028	PLASTIC OMNIUM RE AG	0	0	6	0	0	6	6	0	6	0	0	100.0	0.0	0.0	0.0	YES	0
AA-2730800	REASEGURADORA PATRIA S.A.	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1464109	RELX RISKS SA	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	38 Overdue				42 Total Overdue Cols. 38+39 +40+41	43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												
AA-1340022	REVIUM RUCKVERSICHERUNG AG	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-3160102	RIVERVIEW INSURANCE CO LTD	118	0	235	65	(71)	229	347	0	0	347	0	209	66.0	0.0	(20.5)	YES	0
98-1291066	ROOSEVELT INSURANCE COMPANY, LTD	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-1370026	ROUETTE RE S.A.	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-5420022	SAMSUNG FIRE & MARINE INS CO L	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-1440021	SANDVIK FORSAKRINGS AB	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-1320031	SCOR GLOBAL P&C SE	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-1560745	SCOR REINSURANCE COMPANY OF CANADA	1	0	0	0	0	0	1	0	0	1	0	2	0.0	0.0	0.0	YES	0
AA-1370038	SERECO RE S.A.	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-3194212	SOBRAL LIMITED	75	0	0	0	0	0	75	0	0	75	0	141	0.0	0.0	0.0	YES	0
AA-1370031	SOLVAY HORTENSIA S.A.	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-1810009	STARR EUROPE INS LTD	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-3192080	SUFFOLK INSURANCE LTD	0	0	0	0	0	0	0	0	0	0	0	111	0.0	0.0	0.0	YES	0
AA-1370021	SWISS RE FRANKONA RUCKVERSICHERUNGS-A.G.	0	0	0	1	1	1	1	0	0	1	1	0	100.0	100.0	0.0	NO	0
AA-1460146	SWISS REINSURANCE COMPANY CANADA	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-3191220	TELLURIDE INSURANCE LTD	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-3190305	THE GROVE INSURANCE COMPANY LIMITED	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
98-1404041	THERMO FISHER SCIENTIFIC RE	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-1580100	TOKIO MARINE & NICHIDO FIRE INS CO LTD	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-1320177	VEOLIA ENVIRONMENT SERVICES-RE	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-1780131	VITAL BLUE INS DAC	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-1490003	W. R. BERKLEY EUROPE AG	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-3190231	WINGFOOT INS CO LTD	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-1460020	XL INSURANCE COMPANY SE	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
AA-1780072	XL RE EUROPE SE	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
2699999	Total Unauthorized - Other Non-U.S. Insurers	2,265	1	655	66	15	737	3,002	0	0	3,002	87	2,832	24.6	1.5	0.5	XXX	0
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	(462)	1	622	66	14	703	241	0	0	241	87	11,536	291.7	0.7	5.8	XXX	0
3299999	Total Certified - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
3599999	Total Certified - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
3699999	Total Certified - Affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
CR-3194126	ARCH REINSURANCE LTD.	50	0	0	0	0	0	50	0	0	50	0	319	0.0	0.0	0.0	YES	0
CR-3194122	DAVINCI REINSURANCE LTD.	33	0	0	0	0	0	33	0	0	33	0	0	0.0	0.0	0.0	YES	0
CR-1340125	HANNOVER RUCK SE	2,461	0	(55)	0	0	(55)	2,406	0	0	2,406	0	1,812	(2.3)	0.0	0.0	YES	0
CR-1460019	MS AMLIN AG	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
CR-3190339	RENAISSANCE REINSURANCE LTD.	50	0	0	0	0	0	50	0	0	50	0	0	0.0	0.0	0.0	YES	0
CR-1460146	SWISS REINSURANCE CO.	181	0	0	15	0	15	196	0	0	196	15	1,257	7.7	1.0	0.0	YES	15
4099999	Total Certified - Other Non-U.S. Insurers	2,775	0	(55)	15	0	(40)	2,735	0	0	2,735	15	3,388	(1.5)	0.2	0.0	XXX	15
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	2,775	0	(55)	15	0	(40)	2,735	0	0	2,735	15	3,388	(1.5)	0.2	0.0	XXX	15

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	38 Overdue				42 Total Overdue Cols. 38+39 +40+41	43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
5099999	Total Reciprocal Jurisdiction - Affiliates	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
RJ-3194126	ARCH REINSURANCE LTD.	329	0	(17)	0	0	(17)	312	0	312	0	182	(5.4)	0.0	0.0	YES	0	
RJ-3191352	ASCOT REINS CO LTD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-3194168	ASPEN INSURANCE LIMITED	1,415	0	(29)	0	0	(29)	1,386	0	1,386	0	330	(2.1)	0.0	0.0	YES	0	
RJ-3194139	AXIS SPECIALTY LTD	782	0	0	0	0	0	782	0	782	0	0	0.0	0.0	0.0	YES	0	
RJ-1320152	CHUBB EUROPEAN GROUP	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-3191435	CONDUIT REINS LTD	34	0	0	0	0	0	34	0	34	0	42	0.0	0.0	0.0	YES	0	
RJ-1120191	CONVEX INSURANCE UK LTD	500	0	0	0	0	0	500	0	500	0	0	0.0	0.0	0.0	YES	0	
RJ-3191400	CONVEX RE LIMITED	167	0	0	0	0	0	167	0	167	0	0	0.0	0.0	0.0	YES	0	
RJ-3190875	HISCOX (BERMUDA) LTD	384	0	0	0	0	0	384	0	384	0	0	0.0	0.0	0.0	YES	0	
RJ-3190871	LANCASHIRE INSURANCE COMPANY LIMITED	46	0	0	0	0	0	46	0	46	0	0	0.0	0.0	0.0	YES	0	
RJ-1370048	LIBERTY MUT INS EUROPE LTD	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1122000	LLOYD'S	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1126033	LLOYDS - SYNDICATE # 0033	458	0	0	0	0	0	458	0	458	0	0	0.0	0.0	0.0	YES	0	
RJ-1126318	LLOYDS - SYNDICATE # 0318	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1126566	LLOYDS - SYNDICATE # 0566	832	0	0	0	0	0	832	0	832	0	0	0.0	0.0	0.0	YES	0	
RJ-1126609	LLOYDS - SYNDICATE # 0609	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1126623	LLOYDS - SYNDICATE # 0623	32	0	0	0	0	0	32	0	32	0	0	0.0	0.0	0.0	YES	0	
RJ-1127084	LLOYDS - SYNDICATE # 1084	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1120085	LLOYDS - SYNDICATE # 1274	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1127301	LLOYDS - SYNDICATE # 1301	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1127414	LLOYDS - SYNDICATE # 1414	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1120157	LLOYDS - SYNDICATE # 1729	5	0	0	0	0	0	5	0	5	0	0	0.0	0.0	0.0	YES	0	
RJ-1120171	LLOYDS - SYNDICATE # 1856	49	0	0	0	0	0	49	0	49	0	0	0.0	0.0	0.0	YES	0	
RJ-1120083	LLOYDS - SYNDICATE # 1910	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1128001	LLOYDS - SYNDICATE # 2001	138	0	0	0	0	0	138	0	138	0	0	0.0	0.0	0.0	YES	0	
RJ-1128003	LLOYDS - SYNDICATE # 2003	666	0	0	0	0	0	666	0	666	0	0	0.0	0.0	0.0	YES	0	
RJ-1128010	LLOYDS - SYNDICATE # 2010	83	0	0	0	0	0	83	0	83	0	0	0.0	0.0	0.0	YES	0	
RJ-1128488	LLOYDS - SYNDICATE # 2488	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1128623	LLOYDS - SYNDICATE # 2623	144	0	0	0	0	0	144	0	144	0	0	0.0	0.0	0.0	YES	0	
RJ-1128791	LLOYDS - SYNDICATE # 2791	111	0	0	0	0	0	111	0	111	0	0	0.0	0.0	0.0	YES	0	
RJ-1128987	LLOYDS - SYNDICATE # 2987	1,204	0	0	0	0	0	1,204	0	1,204	0	0	0.0	0.0	0.0	YES	0	
RJ-1129000	LLOYDS - SYNDICATE # 3000	83	0	0	0	0	0	83	0	83	0	0	0.0	0.0	0.0	YES	0	
RJ-1126005	LLOYDS - SYNDICATE # 4000	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1120075	LLOYDS - SYNDICATE # 4020	125	0	0	0	0	0	125	0	125	0	0	0.0	0.0	0.0	YES	0	
RJ-1126004	LLOYDS - SYNDICATE # 4444	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1126006	LLOYDS - SYNDICATE # 4472	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1120065	LLOYDS - SYNDICATE # 5555	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1120213	LLOYDS - SYNDICATE # 5623	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0	
RJ-1120181	LLOYDS - SYNDICATE # 5886	79	0	0	0	0	0	79	0	79	0	0	0.0	0.0	0.0	YES	0	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
		37 Current	38 Overdue				42 Total Overdue Cols. 38+39 +40+41											43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												
RJ-1460019	MS AML IN AG	379	0	75	0	0	75	454	0	454	0	72	16.5	0.0	0.0	YES	0	
RJ-1340165	MUNCHENER RUCKVERSICHERUNGS GESELLSCHAFT	2,038	0	(62)	0	0	(62)	1,976	0	1,976	0	361	(3.1)	0.0	0.0	YES	0	
RJ-1460146	SWISS REINSURANCE CO.	886	0	(55)	(11)	0	(66)	820	0	820	0	605	(8.0)	0.0	0.0	YES	0	
5499999	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers	10,969	0	(88)	(11)	0	(99)	10,870	0	10,870	0	1,592	(0.9)	0.0	0.0	XXX	0	
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	10,969	0	(88)	(11)	0	(99)	10,870	0	10,870	0	1,592	(0.9)	0.0	0.0	XXX	0	
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	116,340	469	1,418	95	1,985	3,967	120,307	0	120,307	2,142	26,653	3.3	1.5	1.7	XXX	79	
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
9999999	Totals	116,340	469	1,418	95	1,985	3,967	120,307	0	120,307	2,142	26,653	3.3	1.5	1.7	XXX	79	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
05-0316605	FACTORY MUTUAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
05-0316605	FACTORY MUTUAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0499999	Total Authorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999	Total Authorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999	Total Authorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-2371728	ACE AMERICAN INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-0237820	ACE PROPERTY & CASUALTY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-3187355	ALLIANZ GLOBAL RISKS US INSURANCE COMPAN	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36-0719665	ALLSTATE INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36-2661954	AMERICAN AGRICULTURAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-5124990	AMERICAN HOME ASSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1430254	ARCH REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
94-1390273	ARGONAUT INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
75-2344200	ASPEN AMERICA INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1463851	ASPEN SPECILAITY INSURANCE COMP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
51-0434766	AXIS REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0574325	BERKLEY INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
63-0202590	BERKSHIRE HATHAWAY SPECIALTY INSURANCE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39-0971527	CAPITOL INDEMNITY CORPORATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
31-0542366	CINCINNATI INSURANCE CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36-2114545	CONTINENTAL CASUALTY COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-5010440	CONTINENTAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38-2145898	DORINCO REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
63-0329091	EMC PROPERTY & CASUALTY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39-0264050	EMPLOYERS INSURANCE OF WAUSAU	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0234980	EMPLOYERS MUTUAL CASUALTY COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35-2293075	ENDURANCE ASSURANCE CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
22-2005057	EVEREST REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
75-1588101	GEICO GENERAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2673100	GENERAL REINSURANCE CORPORATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1958482	GENERAL STAR NATIONAL INS. CO.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-0383750	HARTFORD FIRE INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
74-2195939	HOUSTON CASUALTY CO.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23-0723970	INSURANCE COMPANY OF NORTH AMERICA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-4924125	MUNICH REINSURANCE AMERICA INC.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38-0865250	NATIONAL CASUALTY COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0355979	NATIONAL INDEMNITY COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36-2403971	NATIONAL LIABILITY & FIRE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
25-0687550	NATIONAL UNION FIRE INS CO OF PITTSBURGH	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance														Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68			
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67			
31-4177100	NATIONWIDE MUTUAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
02-0311919	NORTH AMERICAN SPECIALTY INS. CO.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
47-0698507	ODYSSEY REINSURANCE CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
25-0410420	OLD REPUBLIC INSURANCE CO.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-3031176	PARTNER REINS CO OF THE US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-3531373	PARTNERRE INSURANCE CO. OF NY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
23-1642962	PENNSYLVANIA MANUFACTURERS ASSOC INS	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
23-1641984	QBE REINSURANCE CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
16-0366830	RSUI IND CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
75-1444207	SCOR REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-2997499	SIRIUSPOINT AMERICA INSURANCE CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
75-1670124	STARR IND & LIAB COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
81-4566522	STARR SPECIALTY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-1675535	SWISS REINSURANCE AMERICA CORPORATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
94-1517098	TIG INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-2918573	TOA-RE INSURANCE COMPANY OF AMERICA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-6108722	TOKIO MARINE & NICHIDO FIRE INS CO LTD U	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
31-4423946	TRANSAMERICA CASUALTY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-5616275	TRANSATLANTIC REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
06-0566050	TRAVELERS INDEMNITY COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
92-0040526	WESTCHESTER FIRE INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
48-0921045	WESTPORT INSURANCE CORPORATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
75-6017952	XL INS AMERICA INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-1290712	XL REINSURANCE AMERICA INC.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
36-4233459	ZURICH AMERICAN INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
36-2781080	ZURICH AMERICAN INSURANCE COMPANY OF ILL	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0999999	Total Authorized - Other U.S. Unaffiliated Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-9995081	AGENCY MANAGERS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-9995022	EXCESS AND CASUALTY REINSURANCE ASSOC.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1199999	Total Authorized - Pools - Voluntary Pools			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120140	ALLIANZ CORNHILL INSURANCE PLC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1344102	ALLIANZ GLOBAL CORP & SPECIALTY AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3190932	ARGO RE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3194168	ASPEN INSURANCE LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120337	ASPEN INSURANCE UK LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1360015	ASSICURAZIONI GEN S P A	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120660	AVIVA INSURANCE LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3194139	AXIS SPECIALTY LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-5280012	CENTRAL REINSURANCE CORPORATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120191	CONVEX INSURANCE UK LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120495	DOMINION INSURANCE COMPANY LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1124129	ENDURANCE WORLDWIDE INSURANCE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
AA-1340125	HANNOVER RUCK SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340106	HDI GERLING INDUSTRIE VERSICHERUNG AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190080	HEDDINGTON INSURANCE LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460080	HELVETIA SCHWEIZERISCHE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-2230425	I.R.B., IST. DE RESS DO BRAZIL	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5420050	KOREAN REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190871	LANCASHIRE INSURANCE COMPANY LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1370048	LIBERTY MUT INS EUROPE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190917	LIBERTY SPECIALTY MARKETS BERMUDA LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1122000	LLOYD'S	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126033	LLOYDS - SYNDICATE # 0033	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126435	LLOYDS - SYNDICATE # 0435	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126457	LLOYDS - SYNDICATE # 0457	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126510	LLOYDS - SYNDICATE # 0510	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126566	LLOYDS - SYNDICATE # 0566	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126609	LLOYDS - SYNDICATE # 0609	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126623	LLOYDS - SYNDICATE # 0623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127084	LLOYDS - SYNDICATE # 1084	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127183	LLOYDS - SYNDICATE # 1183	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127200	LLOYDS - SYNDICATE # 1200	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127218	LLOYDS - SYNDICATE # 1218	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120085	LLOYDS - SYNDICATE # 1274	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127414	LLOYDS - SYNDICATE # 1414	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127688	LLOYDS - SYNDICATE # 1688	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120157	LLOYDS - SYNDICATE # 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120171	LLOYDS - SYNDICATE # 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127861	LLOYDS - SYNDICATE # 1861	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120096	LLOYDS - SYNDICATE # 1880	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120161	LLOYDS - SYNDICATE # 1980	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128001	LLOYDS - SYNDICATE # 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128003	LLOYDS - SYNDICATE # 2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120071	LLOYDS - SYNDICATE # 2007	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128010	LLOYDS - SYNDICATE # 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128020	LLOYDS - SYNDICATE # 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120112	LLOYDS - SYNDICATE # 2232	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128623	LLOYDS - SYNDICATE # 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128791	LLOYDS - SYNDICATE # 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128987	LLOYDS - SYNDICATE # 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120179	LLOYDS - SYNDICATE # 2988	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1129000	LLOYDS - SYNDICATE # 3000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1129210	LLOYDS - SYNDICATE # 3210	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126005	LLOYDS - SYNDICATE # 4000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
AA-1120075	LLOYDS - SYNDICATE # 4020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120067	LLOYDS - SYNDICATE # 4242	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126004	LLOYDS - SYNDICATE # 4444	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120181	LLOYDS - SYNDICATE # 5886	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1840000	MAPFRE RE CO DE REASEGUROS S A	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190829	MARKEL BERMUDA LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1121410	IMITSU SUMITOMO INS CO (EUROPE) LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1580065	NISSAN FIRE & MARINE INSURANCE CO. LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190686	PARTNERRE GRP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120962	ST PAUL REINSURANCE CO. LTD. (UK CORP)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1121380	STOREBRAND INSURANCE CO. (UK) LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1370020	SWISS RE INTERNATIONAL SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1121445	TOKIO MARINE EUROPE INS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1121375	TRAVELERS INS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1121480	UNIONAMERICA INSURANCE COMPANY LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190870	VALIDUS REINSURANCE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460185	WINTERTHUR SCHWEIZERISCHE VERSGES AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1121575	YASUDA FIRE & MARINE INS CO OF EUROPE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1299999	Total Authorized - Other Non-U.S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190418	NEW PROVIDENCE MUTUAL LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1999999	Total Unauthorized - Affiliates - Other (Non-U.S.) - Captive			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190411	RISK ENGINEERING INSURANCE COMPANY LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2099999	Total Unauthorized - Affiliates - Other (Non-U.S.) - Other			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2299999	Total Unauthorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
87-1924654	CLAREMONT IC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
26-0147121	EFFEM REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
03-0461286	EPIC INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-1466743	FINANCIAL INDEMNITY COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-5663358	FIRST TOWER PARTNERS, LLC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
02-0712840	HIGHLAND PARK INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
31-4177110	NATIONWIDE MUTUAL FIRE INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
51-0387023	THOMSON REUTERS RISK MGMT INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
03-0348076	UT INSURANCE (VERMONT) INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2399999	Total Unauthorized - Other U.S. Unaffiliated Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991310	FLORIDA HURRICANE CATASTROPHE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2499999	Total Unauthorized - Pools - Mandatory Pools			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
98-0413961	ADIDAS INTERNATIONAL RE LIMITED (AIR)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5760051	AIG ASIA PACIFIC INS PTE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120841	AIG EUROPE LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1320065	ALLIANZ GLOBAL CORPORATE & SPECIALTY (FR	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194128	ALLIED WORLD ASSURANCE COMPANY LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1780091	ARCH REINS EUROPE UNDERWRITING LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1560118	ARCH REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191352	ASCOT REINS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1440023	ASSA ABLOY FORSAKRINGS AB	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191454	AXA XL BERMUDA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191390	CASTLE HARBOUR INSURANCE LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5320057	CHUBB INS HONG KONG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1320035	COLISEE RE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191435	CONDUIT REINS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120430	CONTINENTAL INSURANCE CO. (UK) LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191400	CONVEX RE LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340085	E-S RUCKVERSICHERUNGS AKTIENGESELLSCHAFT	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120515	EAGLE STAR INS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191180	ELGO INSURANCE COMPANY LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1370059	ESSILORLUXOTTICA RE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1370061	FORVIA RE S.A.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1780117	GD INSURANCE COMPANY DAC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460060	GEN REINS CORP (EUROPE) AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340145	GENERAL REINSURANCE AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1080004	GLOBAL RISK UNDERWRITERS (BERMUDA) LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191524	GR BERMUDA SAC LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191437	GROUP ARK INSURANCE LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191190	HAMILTON RE, LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1560483	HANNOVER RUCKVERSICHERUNGS AKTIENGESELLS	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3770336	HEXAGON INSURANCE COMPANY, LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190875	HISCOX (BERMUDA) LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1370023	IMERYS RE LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190906	KEYSTONE PF	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5760046	LENOVO INSURANCE COMPANY PTE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1560051	LIBERTY INS CO OF CANADA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120876	LOMBARD CONTINENTAL INS PLC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120887	LONDON AND EDINBURGH INSURANCE CO. LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191239	LUMEN RE LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190669	MARIAS FALLS INSURANCE COMPANY LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460019	MS AMLIN AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340165	MUNICHENER RUCKVERSICHERUNGS GESELLSCHAFT	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1560600	MUNICH REINSURANCE CO. OF CANADA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0			69
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67	Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
AA-1120011	MUNICH REINSURANCE COMPANY (UK) GENERAL	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-5760072	NEXUS INS INTL PTE LTD (N11)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1121077	NISSAN INS. CO. (EUROPE) LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1320230	PFA TIARD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1460028	PLASTIC OMNIUM RE AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-2730800	REASEGURADORA PATRIA S.A.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1464109	RELX RISKS SA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1340022	REVIUM RUCKVERSICHERUNG AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3160102	RIVERVIEW INSURANCE CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
98-1291066	ROOSEVELT INSURANCE COMPANY, LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1370026	ROQUETTE RE S.A.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-5420022	SAMSUNG FIRE & MARINE INS CO L	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1440021	SANDVIK FORSAKRINGS AB	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1320031	SCOR GLOBAL P&C SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1560745	SCOR REINSURANCE COMPANY OF CANADA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1370038	SERECO RE S.A.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3194212	SOBRAL LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1370031	SOLVAY HORTENSIA S.A.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1810009	STARR EUROPE INS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3192080	SUFFOLK INSURANCE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1370021	SWISS RE FRANKONA RUCKVERSICHERUNGS-A.G.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1460146	SWISS REINSURANCE COMPANY CANADA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3191220	TELLURIDE INSURANCE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3190305	THE GROVE INSURANCE COMPANY LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
98-1404041	THERMO FISHER SCIENTIFIC RE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1580100	TOKIO MARINE & NICHIDO FIRE INS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1320177	VEOLIA ENVIRONMENT SERVICES-RE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1780131	VITAL BLUE INS DAC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1490003	W.R. BERKLEY EUROPE AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-3190231	WINGFOOT INS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1460020	XL INSURANCE COMPANY SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1780072	XL RE EUROPE SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2699999	Total Unauthorized - Other Non-U.S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3299999	Total Certified - Affiliates - U.S. Non-Pool			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0		
3599999	Total Certified - Affiliates - Other (Non-U.S.)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0		
3699999	Total Certified - Affiliates			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0		
CR-3194126	ARCH REINSURANCE LTD.	3	.04/08/2015	20.0	0	453	91	78.4	100.0	0	453	0	0	0	0		
CR-3194122	DAVINCI REINSURANCE LTD.	4	.12/02/2015	50.0	0	73	37	49.3	98.6	0	72	0	0	0	0		
CR-1340125	HANNOVER RUCK SE	2	.04/13/2015	10.0	0	12,535	1,254	18.6	100.0	0	12,535	0	0	0	0		
CR-1460019	MS AML IN AG	3	.12/20/2021	20.0	0	(6)	(1)	(1,066.7)	(5,333.3)	0	320	0	0	0	0		

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance											Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)	
		54	55	56	57	58	59	60	61	62	63	64	65	66	67		68
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)		20% of Amount in Col. 67
CR-3190339	RENAISSANCE REINSURANCE LTD.	3	12/02/2015	20.0	0	110	22	49.1	100.0	0	110	0	0	0	0	0	0
CR-1460146	SWISS REINSURANCE CO.	2	06/21/2016	10.0	0	1,430	143	42.2	100.0	0	1,430	0	0	0	0	0	0
4099999	Total Certified - Other Non-U.S. Insurers			XXX	0	14,595	1,544	XXX	XXX	0	14,920	1	3	0	0	0	3
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX	0	14,595	1,544	XXX	XXX	0	14,920	1	3	0	0	0	3
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5099999	Total Reciprocal Jurisdiction - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3194126	ARCH REINSURANCE LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3191352	ASCOT REINS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3194168	ASPEN INSURANCE LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3194139	AXIS SPECIALTY LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1320152	CHUBB EUROPEAN GROUP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3191435	CONDUIT REINS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1120191	CONVEX INSURANCE UK LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3191400	CONVEX RE LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3190875	HISCOX (BERMUDA) LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3190871	LANCASHIRE INSURANCE COMPANY LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1370048	LIBERTY MUT INS EUROPE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1122000	LLOYD'S	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1126033	LLOYDS - SYNDICATE # 0033	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1126318	LLOYDS - SYNDICATE # 0318	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1126566	LLOYDS - SYNDICATE # 0566	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1126609	LLOYDS - SYNDICATE # 0609	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1126623	LLOYDS - SYNDICATE # 0623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1127084	LLOYDS - SYNDICATE # 1084	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1120085	LLOYDS - SYNDICATE # 1274	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1127301	LLOYDS - SYNDICATE # 1301	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1127414	LLOYDS - SYNDICATE # 1414	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1120157	LLOYDS - SYNDICATE # 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1120171	LLOYDS - SYNDICATE # 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1120083	LLOYDS - SYNDICATE # 1910	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1128001	LLOYDS - SYNDICATE # 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1128003	LLOYDS - SYNDICATE # 2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1128010	LLOYDS - SYNDICATE # 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1128488	LLOYDS - SYNDICATE # 2488	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1128623	LLOYDS - SYNDICATE # 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1128791	LLOYDS - SYNDICATE # 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1128987	LLOYDS - SYNDICATE # 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1129000	LLOYDS - SYNDICATE # 3000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1126005	LLOYDS - SYNDICATE # 4000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1120075	LLOYDS - SYNDICATE # 4020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
RJ-1126004	LLOYDS - SYNDICATE # 4444	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1126006	LLOYDS - SYNDICATE # 4472	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1120065	LLOYDS - SYNDICATE # 5555	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1120213	LLOYDS - SYNDICATE # 5623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1120181	LLOYDS - SYNDICATE # 5886	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1460019	MS AMLIN AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1340165	MUNCHENER RUCKVERSICHERUNGS GESELLSCHAFT	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1460146	SWISS REINSURANCE CO.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5499999	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)			XXX	0	14,595	1,544	XXX	XXX	0	14,920	1	3	0	0	0	0	3
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
9999999	Totals			XXX	0	14,595	1,544	XXX	XXX	0	14,920	1	3	0	0	0	0	3

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance				
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)	
05-0316605	FACTORY MUTUAL INSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	XXX	XXX	0	0	0	0	XXX	XXX	0
05-0316605	FACTORY MUTUAL INSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0899999	Total Authorized - Affiliates	0	XXX	XXX	0	0	0	0	XXX	XXX	0
95-2371728	ACE AMERICAN INSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
06-0237820	ACE PROPERTY & CASUALTY INS CO	0	XXX	XXX	0	0	0	0	XXX	XXX	0
95-3187355	ALLIANZ GLOBAL RISKS US INSURANCE COMPAN	0	XXX	XXX	0	0	0	0	XXX	XXX	0
36-0719665	ALLSTATE INSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
36-2661954	AMERICAN AGRICULTURAL INSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-5124990	AMERICAN HOME ASSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
06-1430254	ARCH REINSURANCE COMPANY	0	XXX	XXX	0	0	630	630	XXX	XXX	630
94-1390273	ARGONAUT INSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
75-2344200	ASPEN AMERICA INS CO	0	XXX	XXX	0	0	0	0	XXX	XXX	0
06-1463851	ASPEN SPECILAITY INSURANCE COMP	0	XXX	XXX	0	0	0	0	XXX	XXX	0
51-0434766	AXIS REINSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
47-0574325	BERKLEY INSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
63-0202590	BERKSHIRE HATHAWAY SPECIALTY INSURANCE	0	XXX	XXX	0	0	0	0	XXX	XXX	0
39-0971527	CAPITOL INDEMNITY CORPORATION	0	XXX	XXX	0	0	0	0	XXX	XXX	0
31-0542366	CINCINNATI INSURANCE CO	0	XXX	XXX	0	0	0	0	XXX	XXX	0
36-2114545	CONTINENTAL CASUALTY COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-5010440	CONTINENTAL INSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
38-2145898	DORINCO REINSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
63-0329091	EMC PROPERTY & CASUALTY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
39-0264050	EMPLOYERS INSURANCE OF WAUSAU	0	XXX	XXX	0	0	0	0	XXX	XXX	0
42-0234980	EMPLOYERS MUTUAL CASUALTY COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
35-2293075	ENDURANCE ASSURANCE CORP	11	XXX	XXX	11	0	0	11	XXX	XXX	11
22-2005057	EVEREST REINSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
75-1588101	GEICO GENERAL INSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-2673100	GENERAL REINSURANCE CORPORATION	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-1958482	GENERAL STAR NATIONAL INS. CO.	0	XXX	XXX	0	0	0	0	XXX	XXX	0
06-0383750	HARTFORD FIRE INSURANCE COMPANY	40	XXX	XXX	0	0	43	43	XXX	XXX	43
74-2195939	HOUSTON CASUALTY CO.	0	XXX	XXX	0	0	0	0	XXX	XXX	0
23-0723970	INSURANCE COMPANY OF NORTH AMERICA	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-4924125	MUNICH REINSURANCE AMERICA INC.	1	XXX	XXX	1	0	0	1	XXX	XXX	1
38-0865250	NATIONAL CASUALTY COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
47-0355979	NATIONAL INDEMNITY COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
36-2403971	NATIONAL LIABILITY & FIRE	0	XXX	XXX	0	0	0	0	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance				
			71	72	73	74	75	76	77	78	
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0	Complete if Col. 52 = "No"; Otherwise Enter 0	Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)	
25-0687550 ..	NATIONAL UNION FIRE INS CO OF PITTSBURGH	0	XXX	XXX	0	0	0	0	XXX	XXX	0
31-4177100 ..	NATIONWIDE MUTUAL INSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
02-0311919 ..	NORTH AMERICAN SPECIALTY INS. CO.	0	XXX	XXX	0	0	0	0	XXX	XXX	0
47-0698507 ..	ODYSSEY REINSURANCE CO	0	XXX	XXX	0	0	0	0	XXX	XXX	0
25-0410420 ..	OLD REPUBLIC INSURANCE CO.	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-3031176 ..	PARTNER REINS CO OF THE US	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-3531373 ..	PARTNERRE INSURANCE CO. OF NY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
23-1642962 ..	PENNSYLVANIA MANUFACTURERS ASSOC INS	0	XXX	XXX	0	0	0	0	XXX	XXX	0
23-1641984 ..	QBE REINSURANCE CORP	0	XXX	XXX	0	0	0	0	XXX	XXX	0
16-0366830 ..	RSUI IND CO	0	XXX	XXX	0	0	0	0	XXX	XXX	0
75-1444207 ..	SCOR REINSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-2997499 ..	SIRIUSPOINT AMERICA INSURANCE CO	1	XXX	XXX	1	0	0	1	XXX	XXX	1
75-1670124 ..	STARR IND & LIAB COMPANY	33	XXX	XXX	0	636	636	0	XXX	XXX	636
81-4566522 ..	STARR SPECIALTY INS CO	1	XXX	XXX	0	60	60	0	XXX	XXX	60
13-1675535 ..	SWISS REINSURANCE AMERICA CORPORATION	0	XXX	XXX	0	0	0	0	XXX	XXX	0
94-1517098 ..	TIG INSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-2918573 ..	TOA-RE INSURANCE COMPANY OF AMERICA	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-6108722 ..	TOKIO MARINE & NICHIDO FIRE INS CO LTD U	0	XXX	XXX	0	0	0	0	XXX	XXX	0
31-4423946 ..	TRANSAMERICA CASUALTY INS CO	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-5616275 ..	TRANSATLANTIC REINSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
06-0566050 ..	TRAVELERS INDEMNITY COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
92-0040526 ..	WESTCHESTER FIRE INSURANCE COMPANY	204	XXX	XXX	0	266	266	0	XXX	XXX	266
48-0921045 ..	WESTPORT INSURANCE CORPORATION	0	XXX	XXX	0	0	0	0	XXX	XXX	0
75-6017952 ..	XL INS AMERICA INC	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-1290712 ..	XL REINSURANCE AMERICA INC.	0	XXX	XXX	0	0	0	0	XXX	XXX	0
36-4233459 ..	ZURICH AMERICAN INSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
36-2781080 ..	ZURICH AMERICAN INSURANCE COMPANY OF ILL	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	292	XXX	XXX	13	1,635	1,648	0	XXX	XXX	1,648
AA-9995081 ..	AGENCY MANAGERS LTD	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-9995022 ..	EXCESS AND CASUALTY REINSURANCE ASSOC.	115	XXX	XXX	0	1,185	1,185	0	XXX	XXX	1,185
1199999	Total Authorized - Pools - Voluntary Pools	115	XXX	XXX	0	1,185	1,185	0	XXX	XXX	1,185
AA-1120140 ..	ALLIANZ CORNHILL INSURANCE PLC	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1344102 ..	ALLIANZ GLOBAL CORP & SPECIALTY AG	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-3190932 ..	ARGO RE LTD	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-3194168 ..	ASPEN INSURANCE LIMITED	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120337 ..	ASPEN INSURANCE UK LIMITED	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1360015 ..	ASSICURAZIONI GEN S P A	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120660 ..	AVIVA INSURANCE LIMITED	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-3194139 ..	AXIS SPECIALTY LTD	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-5280012 ..	CENTRAL REINSURANCE CORPORATION	0	XXX	XXX	0	0	0	0	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance				
			71	72	73	74	75	76	77	78	
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0	Complete if Col. 52 = "No"; Otherwise Enter 0	Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)	
AA-1120191	CONVEX INSURANCE UK LTD	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120495	DOMINION INSURANCE COMPANY LIMITED	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1124129	ENDURANCE WORLDWIDE INSURANCE LTD	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1340125	HANNOVER RUCK SE	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1340106	HDI GERLING INDUSTRIE VERSICHERUNG AG	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-3190080	HEDDINGTON INSURANCE LTD.	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1460080	HELVETIA SCHWEIZERISCHE	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-2230425	I.R.B., IST. DE RESS DO BRAZIL	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-5420050	KOREAN REINSURANCE COMPANY	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-3190871	LANCASHIRE INSURANCE COMPANY LIMITED	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1370048	LIBERTY MUT INS EUROPE LTD	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-3190917	LIBERTY SPECIALTY MARKETS BERMUDA LTD	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1122000	LLOYD'S	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1126033	LLOYDS - SYNDICATE # 0033	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1126435	LLOYDS - SYNDICATE # 0435	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1126457	LLOYDS - SYNDICATE # 0457	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1126510	LLOYDS - SYNDICATE # 0510	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1126566	LLOYDS - SYNDICATE # 0566	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1126609	LLOYDS - SYNDICATE # 0609	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1126623	LLOYDS - SYNDICATE # 0623	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1127084	LLOYDS - SYNDICATE # 1084	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1127183	LLOYDS - SYNDICATE # 1183	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1127200	LLOYDS - SYNDICATE # 1200	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1127218	LLOYDS - SYNDICATE # 1218	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120085	LLOYDS - SYNDICATE # 1274	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1127414	LLOYDS - SYNDICATE # 1414	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1127688	LLOYDS - SYNDICATE # 1688	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120157	LLOYDS - SYNDICATE # 1729	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120171	LLOYDS - SYNDICATE # 1856	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1127861	LLOYDS - SYNDICATE # 1861	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120096	LLOYDS - SYNDICATE # 1880	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120161	LLOYDS - SYNDICATE # 1980	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1128001	LLOYDS - SYNDICATE # 2001	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1128003	LLOYDS - SYNDICATE # 2003	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120071	LLOYDS - SYNDICATE # 2007	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1128010	LLOYDS - SYNDICATE # 2010	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1128020	LLOYDS - SYNDICATE # 2020	0	XXX	XXX	0	0	1	1	XXX	XXX	1
AA-1120112	LLOYDS - SYNDICATE # 2232	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1128623	LLOYDS - SYNDICATE # 2623	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1128791	LLOYDS - SYNDICATE # 2791	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1128987	LLOYDS - SYNDICATE # 2987	0	XXX	XXX	0	0	0	0	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance				
			71	72	73	74	75	76	77	78	
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0	Complete if Col. 52 = "No"; Otherwise Enter 0	Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)	
AA-1120179	LLOYDS - SYNDICATE # 2988	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1129000	LLOYDS - SYNDICATE # 3000	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1129210	LLOYDS - SYNDICATE # 3210	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1126005	LLOYDS - SYNDICATE # 4000	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120075	LLOYDS - SYNDICATE # 4020	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120067	LLOYDS - SYNDICATE # 4242	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1126004	LLOYDS - SYNDICATE # 4444	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120181	LLOYDS - SYNDICATE # 5886	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1840000	MAPFRE RE CO DE REASEGUROS S A	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-3190829	MARKEL BERMUDA LIMITED	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1121410	MIITSUI SUMITOMO INS CO (EUROPE) LTD	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1580065	NISSAN FIRE & MARINE INSURANCE CO. LTD.	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-3190686	PARTNERRE GRP	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1120962	ST PAUL REINSURANCE CO. LTD. (UK CORP)	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1121380	STOREBRAND INSURANCE CO. (UK) LTD.	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1370020	SWISS RE INTERNATIONAL SE	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1121445	TOKIO MARINE EUROPE INS LTD	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1121375	TRAVELERS INS CO LTD	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1121480	UNIONAMERICA INSURANCE COMPANY LTD.	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-3190870	VALIDUS REINSURANCE LTD	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1460185	WINTERTHUR SCHWEIZERISCHE VERSGES AG	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1121575	YASUDA FIRE & MARINE INS CO OF EUROPE	0	XXX	XXX	0	0	0	0	XXX	XXX	0
1299999	Total Authorized - Other Non-U.S. Insurers	1	XXX	XXX	0	0	1	1	XXX	XXX	1
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	408	XXX	XXX	13	2,822	2,835	2,835	XXX	XXX	2,835
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	XXX	XXX	XXX	0	0	XXX	0
AA-3190418	NEW PROVIDENCE MUTUAL LIMITED	0	39	0	XXX	XXX	XXX	39	XXX	XXX	39
1999999	Total Unauthorized - Affiliates - Other (Non-U.S.) - Captive	0	39	0	XXX	XXX	XXX	39	XXX	XXX	39
AA-3190411	RISK ENGINEERING INSURANCE COMPANY LTD	0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
2099999	Total Unauthorized - Affiliates - Other (Non-U.S.) - Other	0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	39	0	XXX	XXX	XXX	39	XXX	XXX	39
2299999	Total Unauthorized - Affiliates	0	39	0	XXX	XXX	XXX	39	XXX	XXX	39
87-1924654	CLAREMONT IC	0	1	0	XXX	XXX	XXX	1	XXX	XXX	1
26-0147121	EFFEM REINSURANCE COMPANY	0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
03-0461286	EPIC INSURANCE COMPANY	0	2	0	XXX	XXX	XXX	2	XXX	XXX	2
95-1466743	FINANCIAL INDEMNITY COMPANY	0	85	0	XXX	XXX	XXX	85	XXX	XXX	85
47-5663358	FIRST TOWER PARTNERS, LLC	0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
02-0712840	HIGHLAND PARK INSURANCE COMPANY	0	1	0	XXX	XXX	XXX	1	XXX	XXX	1
31-4177110	NATIONWIDE MUTUAL FIRE INSURANCE COMPANY	0	26	0	XXX	XXX	XXX	0	XXX	XXX	26
51-0387023	THOMSON REUTERS RISK MGMT INC	0	0	0	XXX	XXX	XXX	0	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73	74	75	76	77	78
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0	Complete if Col. 52 = "No"; Otherwise Enter 0	Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
03-0348076	UT INSURANCE (VERMONT) INC	0	14	0	XXX	XXX	XXX	14	XXX	14
2399999	Total Unauthorized - Other U.S. Unaffiliated Insurers	0	129	0	XXX	XXX	XXX	103	XXX	103
AA-9991310	FLORIDA HURRICANE CATASTROPHE FUND	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-9991500	ILLINOIS MINE SUBSIDENCE FUND	0	0	0	XXX	XXX	XXX	0	XXX	0
2499999	Total Unauthorized - Pools - Mandatory Pools	0	0	0	XXX	XXX	XXX	0	XXX	0
98-0413961	ADIDAS INTERNATIONAL RE LIMITED (AIR)	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-5760051	AIG ASIA PACIFIC INS PTE LTD	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1120841	AIG EUROPE LIMITED	0	5	0	XXX	XXX	XXX	5	XXX	5
AA-1320065	ALLIANZ GLOBAL CORPORATE & SPECIALTY (FR)	0	2	0	XXX	XXX	XXX	2	XXX	2
AA-3194128	ALLIED WORLD ASSURANCE COMPANY LTD	0	1	0	XXX	XXX	XXX	1	XXX	1
AA-1780091	ARCH REINS EUROPE UNDERWRITING LTD	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1560118	ARCH REINSURANCE COMPANY	0	419	0	XXX	XXX	XXX	419	XXX	419
AA-3191352	ASCOT REINS CO LTD	0	5	0	XXX	XXX	XXX	0	XXX	0
AA-1440023	ASSA ABLOY FORSAKRINGS AB	17	78	17	XXX	XXX	XXX	90	XXX	90
AA-3191454	AXA XL BERMUDA	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191390	CASTLE HARBOUR INSURANCE LIMITED	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-5320057	CHUBB INS HONG KONG	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1320035	COLISEE RE	0	90	0	XXX	XXX	XXX	90	XXX	90
AA-3191435	CONDUIT REINS LTD	0	161	0	XXX	XXX	XXX	161	XXX	161
AA-1120430	CONTINENTAL INSURANCE CO. (UK) LTD.	0	88	0	XXX	XXX	XXX	88	XXX	88
AA-3191400	CONVEX RE LIMITED	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1340085	E-S RUCKVERSICHERUNGS AKTIENGESELLSCHAFT	0	87	0	XXX	XXX	XXX	87	XXX	87
AA-1120515	EAGLE STAR INS CO LTD	0	1	0	XXX	XXX	XXX	1	XXX	1
AA-3191180	ELGO INSURANCE COMPANY LTD	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1370059	ESSILORLUXOTTICA RE	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1370061	FORVIA RE S.A.	0	13	0	XXX	XXX	XXX	13	XXX	13
AA-1780117	GD INSURANCE COMPANY DAC	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1460060	GEN REINS CORP (EUROPE) AG	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1340145	GENERAL REINSURANCE AG	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1080004	GLOBAL RISK UNDERWRITERS (BERMUDA) LTD	0	120	0	XXX	XXX	XXX	0	XXX	0
AA-3191524	GR BERMUDA SAC LTD	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191437	GROUP ARK INSURANCE LIMITED	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191190	HAMILTON RE, LTD.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1560483	HANNOVER RUCKVERSICHERUNGS AKTIENGESELLS	0	10	0	XXX	XXX	XXX	10	XXX	10
AA-3770336	HEXAGON INSURANCE COMPANY, LTD	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190875	HISCOX (BERMUDA) LTD	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1370023	IMERYS RE LIMITED	0	2	0	XXX	XXX	XXX	2	XXX	2
AA-3190906	KEYSTONE PF	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-5760046	LENOVO INSURANCE COMPANY PTE LTD	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1560051	LIBERTY INS CO OF CANADA	0	27	0	XXX	XXX	XXX	27	XXX	27

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73	74	75	76	77	78
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0	Complete if Col. 52 = "No"; Otherwise Enter 0	Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
AA-1120876	LOMBARD CONTINENTAL INS PLC	0	85	0	XXX	XXX	XXX	85	XXX	85
AA-1120887	LONDON AND EDINBURGH INSURANCE CO. LTD.	0	85	0	XXX	XXX	XXX	85	XXX	85
AA-3191239	LUMEN RE LTD.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190669	MARIAS FALLS INSURANCE COMPANY LTD	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1460019	MS AML IN AG	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1340165	MUNCHENER RUCKVERSICHERUNGS GESELLSCHAFT	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1560600	MUNICH REINSURANCE CO. OF CANADA	0	244	0	XXX	XXX	XXX	244	XXX	244
AA-1120011	MUNICH REINSURANCE COMPANY (UK) GENERAL	0	67	0	XXX	XXX	XXX	67	XXX	67
AA-5760072	NEXUS INS INTL PTE LTD (NII)	0	1	0	XXX	XXX	XXX	1	XXX	1
AA-1121077	NISSAN INS. CO. (EUROPE) LTD.	0	85	0	XXX	XXX	XXX	85	XXX	85
AA-1320230	PFA TIARD	0	85	0	XXX	XXX	XXX	85	XXX	85
AA-1460028	PLASTIC OMNIUM RE AG	0	123	0	XXX	XXX	XXX	123	XXX	123
AA-2730800	REASEGURADORA PATRIA S.A.	0	14	0	XXX	XXX	XXX	14	XXX	14
AA-1464109	RELX RISKS SA	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1340022	REVIUM RUCKVERSICHERUNG AG	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3160102	RIVERVIEW INSURANCE CO LTD	0	0	0	XXX	XXX	XXX	0	XXX	0
98-1291066	ROOSEVELT INSURANCE COMPANY, LTD	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1370026	ROQUETTE RE S.A.	0	510	0	XXX	XXX	XXX	510	XXX	510
AA-5420022	SAMSUNG FIRE & MARINE INS CO L	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1440021	SANDVIK FORSAKRINGS AB	0	131	0	XXX	XXX	XXX	131	XXX	131
AA-1320031	SCOR GLOBAL P&C SE	0	2	0	XXX	XXX	XXX	2	XXX	2
AA-1560745	SCOR REINSURANCE COMPANY OF CANADA	0	1	0	XXX	XXX	XXX	1	XXX	1
AA-1370038	SERECO RE S.A.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3194212	SOBRAL LIMITED	0	1,272	0	XXX	XXX	XXX	1,272	XXX	1,272
AA-1370031	SOLVAY HORTENSIA S.A.	0	69	0	XXX	XXX	XXX	69	XXX	69
AA-1810009	STARR EUROPE INS LTD	0	1	0	XXX	XXX	XXX	1	XXX	1
AA-3192080	SUFFOLK INSURANCE LTD	0	5	0	XXX	XXX	XXX	5	XXX	5
AA-1370021	SWISS RE FRANKONA RUCKVERSICHERUNGS-A.G.	0	1	0	XXX	XXX	XXX	1	XXX	1
AA-1460146	SWISS REINSURANCE COMPANY CANADA	0	117	0	XXX	XXX	XXX	117	XXX	117
AA-3191220	TELLURIDE INSURANCE LTD	0	1	0	XXX	XXX	XXX	1	XXX	1
AA-3190305	THE GROVE INSURANCE COMPANY LIMITED	0	6	0	XXX	XXX	XXX	6	XXX	6
98-1404041	THERMO FISHER SCIENTIFIC RE	0	6	0	XXX	XXX	XXX	6	XXX	6
AA-1580100	TOKIO MARINE & NICHIDO FIRE INS CO LTD	0	2	0	XXX	XXX	XXX	2	XXX	2
AA-1320177	VEOLIA ENVIRONMENT SERVICES-RE	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1780131	VITAL BLUE INS DAC	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1490003	W.R. BERKLEY EUROPE AG	0	24	0	XXX	XXX	XXX	0	XXX	0
AA-3190231	WINGFOOT INS CO LTD	0	14	0	XXX	XXX	XXX	14	XXX	14
AA-1460020	XL INSURANCE COMPANY SE	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1780072	XL RE EUROPE SE	0	0	0	XXX	XXX	XXX	0	XXX	0
2699999	Total Unauthorized - Other Non-U.S. Insurers	17	4,060	17	XXX	XXX	XXX	3,923	XXX	3,923

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		74 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])		74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)		75 Total Provision for Reinsurance			
			71	72	73	74	75	76	77	78						
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	17	4,228	17	XXX	XXX	XXX	XXX	XXX	4,065	XXX	4,065				
3299999	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0				
3599999	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0				
3699999	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0				
CR-3194126	ARCH REINSURANCE LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0				
CR-3194122	DAVINCI REINSURANCE LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1				
CR-1340125	HANNOVER RUCK SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0				
CR-1460019	MS AML IN AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0				
CR-3190339	RENAISSANCE REINSURANCE LTD.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0				
CR-1460146	SWISS REINSURANCE CO.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	3				
4099999	Total Certified - Other Non-U.S. Insurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4				
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4				
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
5099999	Total Reciprocal Jurisdiction - Affiliates	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-3194126	ARCH REINSURANCE LTD.	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-3191352	ASCOT REINS CO LTD	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-3194168	ASPEN INSURANCE LIMITED	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-3194139	AXIS SPECIALTY LTD	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1320152	CHUBB EUROPEAN GROUP	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-3191435	CONDUIT REINS LTD	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1120191	CONVEX INSURANCE UK LTD	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-3191400	CONVEX RE LIMITED	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-3190875	HISCOX (BERMUDA) LTD	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-3190871	LANCASHIRE INSURANCE COMPANY LIMITED	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1370048	LIBERTY MUT INS EUROPE LTD	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1122000	LLOYD'S	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1126033	LLOYDS - SYNDICATE # 0033	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1126318	LLOYDS - SYNDICATE # 0318	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1126566	LLOYDS - SYNDICATE # 0566	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1126609	LLOYDS - SYNDICATE # 0609	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1126623	LLOYDS - SYNDICATE # 0623	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1127084	LLOYDS - SYNDICATE # 1084	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1120085	LLOYDS - SYNDICATE # 1274	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1127301	LLOYDS - SYNDICATE # 1301	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1127414	LLOYDS - SYNDICATE # 1414	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1120157	LLOYDS - SYNDICATE # 1729	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			
RJ-1120171	LLOYDS - SYNDICATE # 1856	0	XXX	XXX	0	0	0	0	0	0	XXX	XXX	0			

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		72 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	76 Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	77 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)			78 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	79 Total Provision for Reinsurance (Cols. 75 + 76 + 77)		
RJ-1120083	LLOYDS - SYNDICATE # 1910	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1128001	LLOYDS - SYNDICATE # 2001	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1128003	LLOYDS - SYNDICATE # 2003	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1128010	LLOYDS - SYNDICATE # 2010	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1128488	LLOYDS - SYNDICATE # 2488	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1128623	LLOYDS - SYNDICATE # 2623	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1128791	LLOYDS - SYNDICATE # 2791	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1128987	LLOYDS - SYNDICATE # 2987	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1129000	LLOYDS - SYNDICATE # 3000	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1126005	LLOYDS - SYNDICATE # 4000	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1120075	LLOYDS - SYNDICATE # 4020	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1126004	LLOYDS - SYNDICATE # 4444	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1126006	LLOYDS - SYNDICATE # 4472	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1120065	LLOYDS - SYNDICATE # 5555	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1120213	LLOYDS - SYNDICATE # 5623	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1120181	LLOYDS - SYNDICATE # 5886	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1460019	MS AML IN AG	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1340165	MUNCHENER RUCKVERSICHERUNGS GESELLSCHAFT	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
RJ-1460146	SWISS REINSURANCE CO.	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
5499999	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	XXX	XXX	0	0	0	0	0	XXX	XXX	0
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	425	4,228	17	13	2,822	2,835	4,065	4	6,904		
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	0	0	0	0	0	0	0	0	0
9999999	Totals	425	4,228	17	13	2,822	2,835	4,065	4	6,904		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	1 <u>Name of Reinsurer</u>	2 <u>Commission Rate</u>	3 <u>Ceded Premium</u>
1.	0.000	0
2.	0.000	0
3.	0.000	0
4.	0.000	0
5.	0.000	0

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

	1 <u>Name of Reinsurer</u>	2 <u>Total Recoverables</u>	3 <u>Ceded Premiums</u>	4 <u>Affiliated</u>
6.	FACTORY MUTUAL INSURANCE COMPANY	90,877	419,820	Yes [X] No []
7.	GENERAL REINSURANCE CORPORATION	25,600	39,357	Yes [] No [X]
8.	RISK ENGINEERING INSURANCE COMPANY	24,715	40,773	Yes [X] No []
9.	EVEREST REINSURANCE COMPANY	23,256	25,421	Yes [] No [X]
10.	HANNOVER RUCK SE	16,605	20,291	Yes [] No [X]

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	4,533,878,174	0	4,533,878,174
2. Premiums and considerations (Line 15)	294,582,341	0	294,582,341
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	120,313,314	(120,313,315)	(1)
4. Funds held by or deposited with reinsured companies (Line 16.2)	13,398	(13,398)	0
5. Other assets	193,787,348	0	193,787,348
6. Net amount recoverable from reinsurers	0	255,572,776	255,572,776
7. Protected cell assets (Line 27)	0	0	0
8. Totals (Line 28)	5,142,574,575	135,246,063	5,277,820,638
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	652,370,034	228,687,469	881,057,503
10. Taxes, expenses, and other obligations (Lines 4 through 8)	195,765,144	0	195,765,144
11. Unearned premiums (Line 9)	685,670,675	91,653,956	777,324,631
12. Advance premiums (Line 10)	0	0	0
13. Dividends declared and unpaid (Line 11.1 and 11.2)	326,090	0	326,090
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	176,151,585	(176,151,585)	0
15. Funds held by company under reinsurance treaties (Line 13)	1,834,334	(1,834,334)	0
16. Amounts withheld or retained by company for account of others (Line 14)	205,843	(205,843)	0
17. Provision for reinsurance (Line 16)	6,903,600	(6,903,600)	0
18. Other liabilities	118,667,849	0	118,667,849
19. Total liabilities excluding protected cell business (Line 26)	1,837,895,154	135,246,063	1,973,141,217
20. Protected cell liabilities (Line 27)	0	0	0
21. Surplus as regards policyholders (Line 37)	3,304,679,421	XXX	3,304,679,421
22. Totals (Line 38)	5,142,574,575	135,246,063	5,277,820,638

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: Refer to footnote 26 for full description of the intercompany pooling agreement

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

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

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2014.....	1,812.....	31.....	1,781.....	557.....	0.....	77.....	0.....	88.....	0.....	0.....	722.....	412.....
3. 2015.....	1,898.....	36.....	1,862.....	2,629.....	0.....	0.....	0.....	262.....	0.....	0.....	2,891.....	753.....
4. 2016.....	1,998.....	43.....	1,955.....	522.....	0.....	0.....	0.....	116.....	0.....	0.....	638.....	329.....
5. 2017.....	2,068.....	20.....	2,048.....	1,233.....	0.....	12.....	0.....	191.....	0.....	0.....	1,436.....	501.....
6. 2018.....	2,110.....	22.....	2,088.....	1,123.....	0.....	0.....	0.....	145.....	0.....	0.....	1,268.....	500.....
7. 2019.....	2,130.....	17.....	2,113.....	963.....	0.....	0.....	0.....	120.....	0.....	6.....	1,083.....	347.....
8. 2020.....	2,232.....	19.....	2,213.....	1,558.....	0.....	0.....	0.....	205.....	0.....	(9).....	1,763.....	393.....
9. 2021.....	2,234.....	21.....	2,213.....	1,530.....	0.....	0.....	0.....	164.....	0.....	(5).....	1,695.....	208.....
10. 2022.....	2,253.....	24.....	2,229.....	2,393.....	0.....	0.....	0.....	227.....	0.....	0.....	2,620.....	131.....
11. 2023.....	2,385.....	28.....	2,357.....	404.....	0.....	0.....	0.....	82.....	0.....	0.....	486.....	55.....
12. Totals.....	XXX.....	XXX.....	XXX.....	12,912.....	0.....	89.....	0.....	1,600.....	0.....	(9).....	14,602.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....
4. 2016.....	19.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	19.....	1.....
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2021.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2022.....	83.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	83.....	4.....
11. 2023.....	286.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	286.....	15.....
12. Totals.....	387.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	387.....	24.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2014.....	722.....	0.....	722.....	39.8.....	0.0.....	40.5.....	0.....	0.....	12.0.....	0.....	0.....
3. 2015.....	2,891.....	0.....	2,891.....	152.3.....	0.0.....	155.3.....	0.....	0.....	12.0.....	0.....	0.....
4. 2016.....	657.....	0.....	657.....	32.9.....	0.0.....	33.6.....	0.....	0.....	12.0.....	19.....	0.....
5. 2017.....	1,436.....	0.....	1,436.....	69.4.....	0.0.....	70.1.....	0.....	0.....	12.0.....	0.....	0.....
6. 2018.....	1,268.....	0.....	1,268.....	60.1.....	0.0.....	60.7.....	0.....	0.....	12.0.....	0.....	0.....
7. 2019.....	1,083.....	0.....	1,083.....	50.8.....	0.0.....	51.2.....	0.....	0.....	12.0.....	0.....	0.....
8. 2020.....	1,763.....	0.....	1,763.....	79.0.....	0.0.....	79.7.....	0.....	0.....	12.0.....	0.....	0.....
9. 2021.....	1,695.....	0.....	1,695.....	75.9.....	0.0.....	76.6.....	0.....	0.....	12.0.....	0.....	0.....
10. 2022.....	2,703.....	0.....	2,703.....	120.0.....	0.0.....	121.3.....	0.....	0.....	12.0.....	83.....	0.....
11. 2023.....	772.....	0.....	772.....	32.4.....	0.0.....	32.7.....	0.....	0.....	12.0.....	286.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	387.....	0.....

Schedule P - Part 1B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	384	269	49	265	29	0	0	(73)	XXX
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	384	269	49	265	29	0	0	(73)	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....	1,107	395	6,901	3,750	242	285	961	902	0	0	0	3,879	30
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	1,107	395	6,901	3,750	242	285	961	902	0	0	0	3,879	30

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	3,862	17
2. 2014.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
3. 2015.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
4. 2016.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
5. 2017.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
6. 2018.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
7. 2019.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
8. 2020.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
9. 2021.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
10. 2022.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
11. 2023.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	3,862	17

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	15.....	(1).....	0.....	0.....	(26).....	(16).....	(16).....	6.....	XXX.....
2. 2014.....	81,564.....	13,713.....	67,851.....	43,740.....	4,972.....	28.....	0.....	2,353.....	356.....	1,311.....	40,793.....	433.....
3. 2015.....	82,119.....	13,135.....	68,984.....	14,495.....	1,973.....	0.....	0.....	1,248.....	83.....	285.....	13,687.....	364.....
4. 2016.....	82,702.....	12,359.....	70,343.....	120,824.....	5,972.....	135.....	0.....	2,302.....	88.....	578.....	117,201.....	527.....
5. 2017.....	79,193.....	12,067.....	67,126.....	25,926.....	572.....	0.....	0.....	1,400.....	26.....	(91).....	26,729.....	452.....
6. 2018.....	80,848.....	13,280.....	67,568.....	91,637.....	4,972.....	72.....	33.....	2,443.....	75.....	55.....	89,072.....	539.....
7. 2019.....	94,223.....	20,012.....	74,211.....	45,069.....	1,562.....	3.....	1.....	1,853.....	50.....	173.....	45,312.....	444.....
8. 2020.....	111,873.....	26,019.....	85,854.....	26,804.....	737.....	53.....	0.....	1,844.....	34.....	34.....	27,929.....	353.....
9. 2021.....	52,948.....	13,653.....	39,295.....	11,037.....	0.....	0.....	0.....	978.....	6.....	21.....	12,009.....	115.....
10. 2022.....	4,351.....	845.....	3,506.....	1.....	0.....	0.....	0.....	196.....	0.....	(1).....	196.....	17.....
11. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	20.....	0.....	0.....	20.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	379,548.....	20,759.....	290.....	34.....	14,611.....	702.....	2,349.....	372,955.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....	78.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	78.....	6.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	(4).....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....	(3).....	1.....
5. 2017.....	(6).....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	6.....	(6).....	0.....
6. 2018.....	(12).....	(1).....	17.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	11.....	6.....	0.....
7. 2019.....	5,986.....	(1).....	44.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	13.....	6,031.....	2.....
8. 2020.....	(14).....	(2).....	58.....	0.....	2.....	0.....	0.....	0.....	7.....	0.....	22.....	56.....	5.....
9. 2021.....	20.....	(2).....	100.....	0.....	8.....	0.....	0.....	0.....	26.....	0.....	28.....	156.....	3.....
10. 2022.....	96.....	(2).....	206.....	0.....	26.....	0.....	0.....	0.....	84.....	0.....	27.....	414.....	1.....
11. 2023.....	(36).....	(3).....	751.....	0.....	89.....	0.....	0.....	0.....	282.....	0.....	34.....	1,089.....	0.....
12. Totals.....	6,109.....	(11).....	1,175.....	0.....	126.....	0.....	0.....	0.....	399.....	0.....	143.....	7,820.....	18.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....		0.....	XXX.....	78.....	0.....
2. 2014.....	46,121.....	5,328.....	40,793.....	56.5.....	38.9.....	60.1.....	0.....	0.....	12.0.....	0.....	0.....
3. 2015.....	15,743.....	2,056.....	13,687.....	19.2.....	15.7.....	19.8.....	0.....	0.....	12.0.....	0.....	0.....
4. 2016.....	123,258.....	6,060.....	117,198.....	149.0.....	49.0.....	166.6.....	0.....	0.....	12.0.....	(3).....	0.....
5. 2017.....	27,320.....	598.....	26,723.....	34.5.....	5.0.....	39.8.....	0.....	0.....	12.0.....	(6).....	0.....
6. 2018.....	94,157.....	5,078.....	89,079.....	116.5.....	38.2.....	131.8.....	0.....	0.....	12.0.....	6.....	0.....
7. 2019.....	52,956.....	1,612.....	51,343.....	56.2.....	8.1.....	69.2.....	0.....	0.....	12.0.....	6,031.....	0.....
8. 2020.....	28,754.....	770.....	27,985.....	25.7.....	3.0.....	32.6.....	0.....	0.....	12.0.....	46.....	10.....
9. 2021.....	12,169.....	4.....	12,165.....	23.0.....	0.0.....	31.0.....	0.....	0.....	12.0.....	122.....	34.....
10. 2022.....	608.....	(2).....	610.....	14.0.....	(0.2).....	17.4.....	0.....	0.....	12.0.....	304.....	110.....
11. 2023.....	1,106.....	(3).....	1,108.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	717.....	371.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	7,295.....	525.....

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
	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			
1. Prior	XXX	XXX	XXX	8	0	1	0	21	0	53	31	XXX
2. 2014	71,055	2,495	68,560	60,138	4,905	173	0	3,323	24	4,951	58,705	XXX
3. 2015	76,314	2,801	73,513	26,589	230	91	2	2,229	24	1,689	28,653	XXX
4. 2016	81,021	3,205	77,816	35,974	1,456	111	0	2,125	48	782	36,707	XXX
5. 2017	87,099	2,918	84,181	84,847	2,187	444	41	3,285	46	1,153	86,302	XXX
6. 2018	90,436	3,736	86,700	70,892	622	804	0	3,372	36	852	74,411	XXX
7. 2019	86,437	3,904	82,533	88,279	22,130	71	0	3,648	85	3,346	69,782	XXX
8. 2020	91,055	6,825	84,230	63,065	5,263	144	12	2,790	164	1,240	60,560	XXX
9. 2021	86,875	7,355	79,520	52,044	2,159	57	0	3,192	121	1,173	53,013	XXX
10. 2022	101,639	7,931	93,708	43,543	1,740	8	0	2,443	121	713	44,134	XXX
11. 2023	114,453	8,422	106,031	9,526	316	0	0	973	21	3	10,162	XXX
12. Totals	XXX	XXX	XXX	534,905	41,008	1,904	55	27,402	689	15,954	522,458	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior	124	0	0	0	0	0	0	0	0	0	0	124	22
2. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015	458	0	0	0	0	0	0	0	0	0	0	458	17
4. 2016	(18)	(1)	0	0	0	0	0	0	0	0	29	(17)	7
5. 2017	344	(4)	0	0	0	0	0	0	0	0	50	347	7
6. 2018	181	(7)	145	10	0	0	0	0	0	0	91	322	24
7. 2019	8,120	(5)	372	25	0	0	0	0	0	0	108	8,472	52
8. 2020	619	4,723	494	34	20	1	0	0	64	2	186	(3,564)	24
9. 2021	11,452	120	850	58	69	2	0	0	218	8	236	12,401	115
10. 2022	12,522	1,690	1,755	120	226	8	0	0	715	26	229	13,375	161
11. 2023	23,773	1,015	6,408	439	760	27	0	0	2,405	87	288	31,778	370
12. Totals	57,576	7,531	10,023	687	1,074	39	0	0	3,403	122	1,217	63,697	799

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	124	0
2. 2014	63,634	4,929	58,705	89.6	197.6	85.6	0	0	12.0	0	0
3. 2015	29,367	256	29,111	38.5	9.1	39.6	0	0	12.0	458	0
4. 2016	38,192	1,502	36,690	47.1	46.9	47.1	0	0	12.0	(17)	0
5. 2017	88,919	2,270	86,649	102.1	77.8	102.9	0	0	12.0	347	0
6. 2018	75,393	661	74,733	83.4	17.7	86.2	0	0	12.0	322	0
7. 2019	100,490	22,236	78,254	116.3	569.6	94.8	0	0	12.0	8,472	0
8. 2020	67,196	10,199	56,996	73.8	149.4	67.7	0	0	12.0	(3,644)	81
9. 2021	67,882	2,468	65,414	78.1	33.6	82.3	0	0	12.0	12,124	277
10. 2022	61,213	3,705	57,508	60.2	46.7	61.4	0	0	12.0	12,467	908
11. 2023	43,845	1,905	41,940	38.3	22.6	39.6	0	0	12.0	28,727	3,051
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	59,381	4,316

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
	1. Prior.....	XXX.....	XXX.....	XXX.....	227.....	153.....	276.....	0.....	17.....				0.....	0.....	368.....	XXX.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2021.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
12. Totals	XXX	XXX	XXX	227	153	276	0	17	0	0	368	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
	1. Prior.....	9,297.....	6,584.....	110,042.....	9,818.....	1,777.....	148.....	6,943.....	469.....	0.....			
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2021.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
12. Totals	9,297	6,584	110,042	9,818	1,777	148	6,943	469	0	0	0	111,040	168

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....		0.....	XXX.....	102,937.....	8,103.....
2. 2014.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	0.....	0.....
4. 2016.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	0.....	0.....
5. 2017.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	0.....	0.....
6. 2018.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	0.....	0.....
7. 2019.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	0.....	0.....
8. 2020.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	0.....	0.....
9. 2021.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	0.....	0.....
10. 2022.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	0.....	0.....
11. 2023.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	0.....	0.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	102,937	8,103

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2014.....												
3. 2015.....												
4. 2016.....												
5. 2017.....												
6. 2018.....												
7. 2019.....												
8. 2020.....												
9. 2021.....												
10. 2022.....												
11. 2023.....												
12. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2014.....													
3. 2015.....													
4. 2016.....													
5. 2017.....													
6. 2018.....													
7. 2019.....													
8. 2020.....													
9. 2021.....													
10. 2022.....													
11. 2023.....													
12. Totals													

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2014.....											
3. 2015.....											
4. 2016.....											
5. 2017.....											
6. 2018.....											
7. 2019.....											
8. 2020.....											
9. 2021.....											
10. 2022.....											
11. 2023.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	122,517	48,381	6,226	328	2,618	166	8,833	82,486	XXX
2. 2022	1,174,850	278,437	896,413	474,575	46,186	413	2	24,766	1,154	2,417	452,412	XXX
3. 2023	1,367,356	300,605	1,066,751	209,201	9,503	170	15	12,875	169	44	212,559	XXX
4. Totals	XXX	XXX	XXX	806,293	104,069	6,808	345	40,259	1,489	11,295	747,458	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior	30,892	36,803	12,981	920	767	47	3,840	0	1,953	149	4,859	12,514	386
2. 2022	97,950	19,993	12,254	868	1,625	119	0	0	4,957	377	1,587	95,429	267
3. 2023	288,038	14,345	44,422	3,170	5,269	401	0	0	16,665	1,268	1,994	335,211	722
4. Totals	416,879	71,140	69,657	4,958	7,662	567	3,840	0	23,575	1,794	8,439	443,154	1,375

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0		0	XXX	6,149	6,364
2. 2022	616,540	68,699	547,841	52.5	24.7	61.1	0	0	12.0	89,343	6,086
3. 2023	576,640	28,870	547,770	42.2	9.6	51.3	0	0	12.0	314,946	20,266
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	410,438	32,716

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
	NONE											
1. Prior	XXX	XXX	XXX									XXX
2. 2022												
3. 2023												
4. Totals	XXX	XXX	XXX									XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
	NONE												
1. Prior													
2. 2022													
3. 2023													
4. Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount		
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid	
	NONE											
	NONE											
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX			
2. 2022												
3. 2023												
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX			

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 1K - FIDELITY/SURETY
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments					
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	(8).....	0.....	0.....	0.....	0.....	0.....	0.....	8.....	(8).....	XXX.....
2. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
3. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
4. Totals.....	XXX.....	XXX.....	XXX.....	(8).....	0.....	0.....	0.....	0.....	0.....	0.....	8.....	(8).....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....
2. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. Totals.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....		0.....	XXX.....	0.....	0.....
2. 2022.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	0.....	0.....
3. 2023.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	12.0.....	0.....	0.....
4. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

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

N O N E

Schedule P - Part 1M - International

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 1N - REINSURANCE - NONPROPORTIONAL ASSUMED PROPERTY
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2014.....	0.....	291,913.....	(291,913).....	0.....	183,940.....	0.....	3,844.....	0.....	15,374.....	0.....	(203,158).....	XXX.....
3. 2015.....	0.....	283,463.....	(283,463).....	0.....	119,351.....	0.....	3,569.....	0.....	16,257.....	0.....	(139,177).....	XXX.....
4. 2016.....	0.....	282,941.....	(282,941).....	0.....	426,018.....	0.....	5,614.....	0.....	19,904.....	0.....	(451,536).....	XXX.....
5. 2017.....	0.....	286,725.....	(286,725).....	0.....	45,693.....	0.....	2,086.....	0.....	7,395.....	0.....	(55,174).....	XXX.....
6. 2018.....	0.....	325,021.....	(325,021).....	0.....	472,164.....	0.....	7,972.....	0.....	25,244.....	0.....	(505,380).....	XXX.....
7. 2019.....	0.....	258,612.....	(258,612).....	0.....	152,246.....	0.....	3,882.....	0.....	11,647.....	0.....	(167,775).....	XXX.....
8. 2020.....	0.....	247,593.....	(247,593).....	0.....	54,392.....	0.....	12,205.....	0.....	32,998.....	0.....	(99,595).....	XXX.....
9. 2021.....	0.....	251,757.....	(251,757).....	0.....	142,501.....	0.....	5,530.....	0.....	14,951.....	0.....	(162,982).....	XXX.....
10. 2022.....	0.....	324,267.....	(324,267).....	0.....	251,693.....	0.....	7,729.....	0.....	13,161.....	0.....	(272,583).....	XXX.....
11. 2023.....	0.....	419,820.....	(419,820).....	0.....	350,749.....	0.....	792.....	0.....	2,509.....	0.....	(354,050).....	XXX.....
12. Totals.....	XXX.....	XXX.....	XXX.....	0.....	2,198,747.....	0.....	53,223.....	0.....	159,439.....	0.....	(2,411,410).....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
7. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
8. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
9. 2021.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
10. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
11. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
12. Totals.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2014.....	0.....	203,158.....	(203,158).....	0.0.....	69.6.....	69.6.....	0.....	0.....	12.0.....	0.....	0.....
3. 2015.....	0.....	139,177.....	(139,177).....	0.0.....	49.1.....	49.1.....	0.....	0.....	12.0.....	0.....	0.....
4. 2016.....	0.....	451,536.....	(451,536).....	0.0.....	159.6.....	159.6.....	0.....	0.....	12.0.....	0.....	0.....
5. 2017.....	0.....	55,174.....	(55,174).....	0.0.....	19.2.....	19.2.....	0.....	0.....	12.0.....	0.....	0.....
6. 2018.....	0.....	505,380.....	(505,380).....	0.0.....	155.5.....	155.5.....	0.....	0.....	12.0.....	0.....	0.....
7. 2019.....	0.....	167,775.....	(167,775).....	0.0.....	64.9.....	64.9.....	0.....	0.....	12.0.....	0.....	0.....
8. 2020.....	0.....	99,595.....	(99,595).....	0.0.....	40.2.....	40.2.....	0.....	0.....	12.0.....	0.....	0.....
9. 2021.....	0.....	162,982.....	(162,982).....	0.0.....	64.7.....	64.7.....	0.....	0.....	12.0.....	0.....	0.....
10. 2022.....	0.....	272,583.....	(272,583).....	0.0.....	84.1.....	84.1.....	0.....	0.....	12.0.....	0.....	0.....
11. 2023.....	0.....	354,050.....	(354,050).....	0.0.....	84.3.....	84.3.....	0.....	0.....	12.0.....	0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 10 - REINSURANCE - NONPROPORTIONAL ASSUMED LIABILITY
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments					
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX	XXX	XXX	4	0	0	0	0	0	0	0	4	XXX
2. 2014.....	(3)	0	(3)	0	0	0	0	0	0	0	0	0	XXX
3. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2016.....	(1)	0	(1)	0	0	0	0	0	0	0	0	0	XXX
5. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
12. Totals	XXX	XXX	XXX	4	0	0	0	0	0	0	0	4	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	75	0	1,388	(4)	0	0	0	0	0	0	0	1,467	XXX
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
12. Totals	75	0	1,388	(4)	0	0	0	0	0	0	0	1,467	XXX

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,467	0
2. 2014.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
3. 2015.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
4. 2016.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
5. 2017.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
6. 2018.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
7. 2019.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
8. 2020.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
9. 2021.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
10. 2022.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
11. 2023.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,467	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 1P - REINSURANCE - NONPROPORTIONAL ASSUMED FINANCIAL LINES
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2014.....												XXX
3. 2015.....												XXX
4. 2016.....												XXX
5. 2017.....												XXX
6. 2018.....												XXX
7. 2019.....												XXX
8. 2020.....												XXX
9. 2021.....												XXX
10. 2022.....												XXX
11. 2023.....												XXX
12. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													XXX
2. 2014.....													XXX
3. 2015.....													XXX
4. 2016.....													XXX
5. 2017.....													XXX
6. 2018.....													XXX
7. 2019.....													XXX
8. 2020.....													XXX
9. 2021.....													XXX
10. 2022.....													XXX
11. 2023.....													XXX
12. Totals													XXX

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2014.....											
3. 2015.....											
4. 2016.....											
5. 2017.....											
6. 2018.....											
7. 2019.....											
8. 2020.....											
9. 2021.....											
10. 2022.....											
11. 2023.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	4,095	2,531	959	(117)	316	0	0	2,956	XXX
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	4,095	2,531	959	(117)	316	0	0	2,956	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	31,516	17,614	85,842	81,747	5,568	4,837	22,088	15,316	0	0	0	25,500	202
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	31,516	17,614	85,842	81,747	5,568	4,837	22,088	15,316	0	0	0	25,500	202

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
2. 2014.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
3. 2015.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
4. 2016.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
5. 2017.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
6. 2018.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
7. 2019.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
8. 2020.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
9. 2021.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
10. 2022.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
11. 2023.....	0	0	0	0.0	0.0	0.0	0	0	12.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	17,997	7,504

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

N O N E

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

N O N E

Schedule P - Part 1T - Warranty

N O N E

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SCHEDULE P - PART 2A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior.....	9	94	159	170	170	170	170	170	171	171	0	0
2. 2014.....	459	504	616	616	634	634	634	634	634	634	0	0
3. 2015.....	XXX	2,338	2,624	2,629	2,629	2,629	2,629	2,629	2,629	2,629	0	0
4. 2016.....	XXX	XXX	568	541	541	541	541	541	541	541	0	0
5. 2017.....	XXX	XXX	XXX	833	1,019	1,138	1,240	1,240	1,240	1,245	5	5
6. 2018.....	XXX	XXX	XXX	XXX	975	1,080	1,114	1,123	1,123	1,123	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	820	894	909	909	963	53	53
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	1,603	1,549	1,513	1,558	45	10
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,587	1,672	1,530	(142)	(57)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,243	2,476	233	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	690	XXX	XXX
12. Totals											195	12

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

1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX	XXX									
6. 2018.....	XXX	XXX	XXX	XXX								
7. 2019.....	XXX	XXX	XXX	XXX	XXX							
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											XXX	XXX

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

1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX	XXX									
6. 2018.....	XXX	XXX	XXX	XXX								
7. 2019.....	XXX	XXX	XXX	XXX	XXX							
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											XXX	XXX

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

1. Prior.....	403	2,665	3,200	3,205	2,934	3,571	3,407	4,005	3,923	4,693	770	687
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											770	687

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	6,022	3,593	2,592	1,674	1,820	1,861	1,814	1,852	3,775	3,790	16	1,939
2. 2014.....	48,746	41,824	42,265	38,957	38,816	38,957	38,797	38,814	38,796	38,796	0	(18)
3. 2015.....	XXX	13,212	14,955	12,740	12,572	12,521	12,533	12,540	12,529	12,522	(7)	(18)
4. 2016.....	XXX	XXX	129,971	120,183	115,180	115,174	114,987	115,063	114,997	114,983	(13)	(79)
5. 2017.....	XXX	XXX	XXX	24,869	34,085	25,100	24,872	25,272	25,298	25,348	51	76
6. 2018.....	XXX	XXX	XXX	XXX	106,061	94,270	83,483	81,354	86,793	86,710	(83)	5,356
7. 2019.....	XXX	XXX	XXX	XXX	XXX	54,288	50,540	49,475	49,473	49,540	66	65
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	27,407	29,611	27,086	26,168	(919)	(3,443)
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14,407	11,748	11,167	(580)	(3,240)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,250	331	(919)	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	806	XXX	XXX
12. Totals											(2,389)	638

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX	XXX									
6. 2018.....	XXX	XXX	XXX	XXX								
7. 2019.....	XXX	XXX	XXX	XXX	XXX							
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

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

1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX	XXX									
6. 2018.....	XXX	XXX	XXX	XXX								
7. 2019.....	XXX	XXX	XXX	XXX	XXX							
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

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

1. Prior.....	10,284	7,960	5,277	3,997	4,222	3,545	2,835	2,835	3,380	1,338	(2,042)	(1,497)
2. 2014.....	52,920	57,935	60,390	59,805	56,570	56,067	55,400	55,447	55,418	55,406	(12)	(41)
3. 2015.....	XXX	32,584	28,896	27,741	27,472	27,365	26,940	26,963	26,948	26,907	(41)	(57)
4. 2016.....	XXX	XXX	32,467	37,184	34,725	35,053	34,884	34,920	34,731	34,612	(119)	(308)
5. 2017.....	XXX	XXX	XXX	77,371	85,342	82,669	82,973	84,030	83,991	83,410	(581)	(619)
6. 2018.....	XXX	XXX	XXX	XXX	72,529	75,903	71,273	71,384	71,717	71,396	(321)	13
7. 2019.....	XXX	XXX	XXX	XXX	XXX	76,939	72,129	72,119	76,934	74,691	(2,243)	2,573
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	45,149	49,546	54,763	54,308	(455)	4,762
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	63,114	60,078	62,133	2,055	(982)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	40,935	54,496	13,562	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38,669	XXX	XXX
12. Totals											9,802	3,844

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

1. Prior.....	29,285	86,954	84,489	86,448	86,299	86,671	86,524	86,584	86,431	117,121	30,690	30,537
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											30,690	30,537

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

1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX	XXX									
6. 2018.....	XXX	XXX	XXX	XXX								
7. 2019.....	XXX	XXX	XXX	XXX	XXX							
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	341,922	362,367	337,615	(24,751)	(4,307)
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	500,261	519,649	19,389	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	519,668	XXX	XXX
4. Totals											(5,363)	(4,307)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Totals												

NONE

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	(13)	(21)	(8)	(21)
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
4. Totals											(8)	(21)

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Totals												

NONE

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX	XXX									
6. 2018.....	XXX	XXX	XXX	XXX								
7. 2019.....	XXX	XXX	XXX	XXX	XXX							
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	(187,783)	(187,783)	(187,783)	(187,783)	(187,783)	(187,783)	(187,783)	(187,784)	(187,784)	(187,784)	0	0
3. 2015.....	XXX	(122,920)	(122,920)	(122,920)	(122,920)	(122,920)	(122,920)	(122,920)	(122,920)	(122,920)	0	0
4. 2016.....	XXX	XXX	(431,632)	(431,632)	(431,632)	(431,632)	(431,632)	(431,632)	(431,632)	(431,632)	0	0
5. 2017.....	XXX	XXX	XXX	(47,779)	(47,779)	(47,779)	(47,779)	(47,779)	(47,779)	(47,779)	0	0
6. 2018.....	XXX	XXX	XXX	XXX	(480,135)	(480,135)	(480,135)	(480,136)	(480,136)	(480,136)	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	(156,128)	(156,128)	(156,128)	(156,128)	(156,128)	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	(66,596)	(66,597)	(66,597)	(66,597)	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(148,031)	(148,031)	(148,031)	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(259,423)	(259,423)	0	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(351,541)	XXX	XXX
12. Totals											0	0

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

1. Prior.....	16,237	1,351	1,543	1,737	1,956	1,357	1,388	1,502	1,523	1,544	21	42
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											21	42

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

1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX	XXX									
6. 2018.....	XXX	XXX	XXX	XXX								
7. 2019.....	XXX	XXX	XXX	XXX	XXX							
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 2R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior.....	57,758	53,263	54,741	69,381	69,163	68,429	68,285	69,620	69,430	67,572	(1,858)	(2,048)
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											(1,858)	(2,048)

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

1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX	XXX									
6. 2018.....	XXX	XXX	XXX	XXX								
7. 2019.....	XXX	XXX	XXX	XXX	XXX							
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
3. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
4. Totals												

SCHEDULE P - PART 2T - WARRANTY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
3. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
4. Totals												

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SCHEDULE P - PART 3A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023		
1. Prior.....	000.....	59.....	159.....	170.....	170.....	170.....	170.....	170.....	171.....	171.....	9,939.....	0.....
2. 2014.....	425.....	504.....	616.....	616.....	634.....	634.....	634.....	634.....	634.....	634.....	304.....	108.....
3. 2015.....	XXX.....	974.....	2,338.....	2,629.....	2,629.....	2,629.....	2,629.....	2,629.....	2,629.....	2,629.....	648.....	104.....
4. 2016.....	XXX.....	XXX.....	364.....	522.....	522.....	522.....	522.....	522.....	522.....	522.....	260.....	68.....
5. 2017.....	XXX.....	XXX.....	XXX.....	566.....	1,019.....	1,138.....	1,240.....	1,240.....	1,240.....	1,245.....	397.....	104.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	851.....	1,080.....	1,114.....	1,123.....	1,123.....	1,123.....	352.....	148.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	643.....	889.....	909.....	909.....	963.....	264.....	83.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	853.....	1,549.....	1,513.....	1,558.....	300.....	93.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,045.....	1,511.....	1,530.....	140.....	68.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,528.....	2,393.....	94.....	33.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	404.....	33.....	7.....

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

1. Prior.....	000.....											
2. 2014.....												
3. 2015.....	XXX.....											
4. 2016.....	XXX.....	XXX.....										
5. 2017.....	XXX.....	XXX.....	XXX.....									
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

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

1. Prior.....	000.....											
2. 2014.....												
3. 2015.....	XXX.....											
4. 2016.....	XXX.....	XXX.....										
5. 2017.....	XXX.....	XXX.....	XXX.....									
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

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

1. Prior.....	000.....	86.....	216.....	293.....	442.....	546.....	630.....	766.....	916.....	814.....	93,375.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....	2,892.....	1,486.....	1,596.....	1,672.....	1,694.....	1,736.....	1,774.....	3,697.....	3,713.....	10,843.....	0.....
2. 2014.....	13,303.....	37,514.....	40,217.....	38,827.....	38,816.....	38,817.....	38,797.....	38,796.....	38,796.....	38,796.....	229.....	204.....
3. 2015.....	XXX.....	7,373.....	11,636.....	12,526.....	12,520.....	12,521.....	12,521.....	12,522.....	12,522.....	12,522.....	136.....	228.....
4. 2016.....	XXX.....	XXX.....	17,320.....	64,929.....	94,844.....	95,323.....	105,829.....	114,988.....	114,985.....	114,987.....	286.....	240.....
5. 2017.....	XXX.....	XXX.....	XXX.....	5,731.....	13,889.....	24,858.....	24,869.....	25,272.....	25,272.....	25,354.....	163.....	289.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	26,818.....	73,113.....	80,392.....	81,264.....	86,704.....	86,704.....	250.....	289.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	9,640.....	41,413.....	43,225.....	43,363.....	43,509.....	208.....	234.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	8,748.....	22,851.....	25,384.....	26,119.....	152.....	196.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5,356.....	9,451.....	11,037.....	43.....	69.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	1.....	0.....	16.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023			
1. Prior.....	000.....												
2. 2014.....													
3. 2015.....	XXX.....												
4. 2016.....	XXX.....	XXX.....											
5. 2017.....	XXX.....	XXX.....	XXX.....										
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

NONE

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

1. Prior.....	000.....												
2. 2014.....													
3. 2015.....	XXX.....												
4. 2016.....	XXX.....	XXX.....											
5. 2017.....	XXX.....	XXX.....	XXX.....										
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

NONE

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

1. Prior.....	000.....	4,352	4,363	2,692	2,905	2,291	1,705	1,768	1,205	1,214	XXX.....	XXX.....
2. 2014.....	18,356	43,986	58,360	58,209	55,473	55,351	55,384	55,384	55,402	55,406	XXX.....	XXX.....
3. 2015.....	XXX.....	11,069	22,872	25,365	26,739	26,664	26,454	26,458	26,448	26,448	XXX.....	XXX.....
4. 2016.....	XXX.....	XXX.....	8,940	28,185	33,647	34,853	34,768	34,689	34,629	34,629	XXX.....	XXX.....
5. 2017.....	XXX.....	XXX.....	XXX.....	26,223	71,844	79,046	82,580	83,168	82,963	83,063	XXX.....	XXX.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	16,972	65,940	68,348	70,897	70,951	71,074	XXX.....	XXX.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	37,023	59,348	62,400	67,276	66,220	XXX.....	XXX.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	14,247	38,495	42,586	57,933	XXX.....	XXX.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	20,648	44,090	49,942	XXX.....	XXX.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	14,187	41,811	XXX.....	XXX.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	9,210	XXX.....	XXX.....

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

1. Prior.....	000.....	611	1,740	2,412	3,668	4,689	4,526	5,154	5,730	6,081	12,937	0
2. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX.....	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0	0
5. 2017.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	0
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0

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

1. Prior.....	000.....											
2. 2014.....												
3. 2015.....	XXX.....											
4. 2016.....	XXX.....	XXX.....										
5. 2017.....	XXX.....	XXX.....	XXX.....									
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
 EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023		
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	246,872	326,906	XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	127,995	428,800	XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	199,853	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000				
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	(13)	(21)	XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000			XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	000										XXX	XXX
2. 2014.....											XXX	XXX
3. 2015.....	XXX										XXX	XXX
4. 2016.....	XXX	XXX									XXX	XXX
5. 2017.....	XXX	XXX	XXX								XXX	XXX
6. 2018.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2019.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

**SCHEDULE P - PART 3N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023			
1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
2. 2014.....	(187,783).....	(187,783).....	(187,783).....	(187,783).....	(187,783).....	(187,783).....	(187,783).....	(187,784).....	(187,784).....	(187,784).....	(187,784).....	XXX.....	XXX.....
3. 2015.....	XXX.....	(122,920).....	(122,920).....	(122,920).....	(122,920).....	(122,920).....	(122,920).....	(122,920).....	(122,920).....	(122,920).....	(122,920).....	XXX.....	XXX.....
4. 2016.....	XXX.....	XXX.....	(431,632).....	(431,632).....	(431,632).....	(431,632).....	(431,632).....	(431,632).....	(431,632).....	(431,632).....	(431,632).....	XXX.....	XXX.....
5. 2017.....	XXX.....	XXX.....	XXX.....	(47,779).....	(47,779).....	(47,779).....	(47,779).....	(47,779).....	(47,779).....	(47,779).....	(47,779).....	XXX.....	XXX.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	(480,135).....	(480,135).....	(480,135).....	(480,136).....	(480,136).....	(480,136).....	(480,136).....	XXX.....	XXX.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(156,128).....	(156,128).....	(156,128).....	(156,128).....	(156,128).....	(156,128).....	XXX.....	XXX.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(66,596).....	(66,597).....	(66,597).....	(66,597).....	(66,597).....	XXX.....	XXX.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(148,031).....	(148,031).....	(148,031).....	(148,031).....	XXX.....	XXX.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(259,423).....	(259,423).....	(259,423).....	XXX.....	XXX.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(351,541).....	(351,541).....	XXX.....	XXX.....

**SCHEDULE P - PART 3O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior.....	000.....	2.....	27.....	50.....	55.....	58.....	61.....	70.....	73.....	77.....	XXX.....	XXX.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	XXX.....	XXX.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	XXX.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	XXX.....	XXX.....

**SCHEDULE P - PART 3P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

1. Prior.....	000.....										XXX.....	XXX.....
2. 2014.....											XXX.....	XXX.....
3. 2015.....	XXX.....										XXX.....	XXX.....
4. 2016.....	XXX.....	XXX.....									XXX.....	XXX.....
5. 2017.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

NONE

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 3R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023		
1. Prior.....	000.....	9,536.....	14,372.....	16,741.....	20,719.....	26,433.....	33,124.....	36,472.....	39,431.....	42,071.....	11,651.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....

SCHEDULE P - PART 3R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior.....	000.....											
2. 2014.....												
3. 2015.....	XXX.....											
4. 2016.....	XXX.....	XXX.....										
5. 2017.....	XXX.....	XXX.....	XXX.....									
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

SCHEDULE P - PART 3S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
2. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
3. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

NONE

SCHEDULE P - PART 3T - WARRANTY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
2. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
3. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 4A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XXX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XX	XX					
8. 2020.....	XXX	XXX	XX	XX	XX	XX				
9. 2021.....	XXX	XXX	XX	XXX	XXX	XX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XXX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XX	XX					
8. 2020.....	XXX	XXX	XX	XX	XX	XX				
9. 2021.....	XXX	XXX	XX	XXX	XXX	XX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1. Prior.....	163	1,746	2,285	2,228	1,841	2,291	2,132	2,667	2,397	3,210
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	4,121	500	1,136	0	78	102	0	0	0	0
2. 2014.....	5,310	818	2,238	165	0	161	0	23	0	0
3. 2015.....	XXX	1,249	2,748	267	47	0	15	22	8	0
4. 2016.....	XXX	XXX	10,156	1,436	479	25	0	91	13	0
5. 2017.....	XXX	XXX	XXX	3,238	2,084	218	0	0	29	0
6. 2018.....	XXX	XXX	XXX	XXX	10,850	3,795	92	86	101	17
7. 2019.....	XXX	XXX	XXX	XXX	XXX	9,677	1,519	229	113	44
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	3,795	550	177	58
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,726	284	100
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,084	206
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	751

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XXX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XX	XX					
8. 2020.....	XXX	XXX	XX	XX	XX	XX				
9. 2021.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

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

1. Prior.....	5,076	2,331	332	0	49	68	0	0	0	0
2. 2014.....	6,540	3,812	654	153	0	108	0	58	0	0
3. 2015.....	XXX	5,819	802	248	29	0	13	57	47	0
4. 2016.....	XXX	XXX	2,966	1,453	296	17	0	235	76	0
5. 2017.....	XXX	XXX	XXX	2,896	1,288	146	0	0	171	0
6. 2018.....	XXX	XXX	XXX	XXX	6,705	2,546	76	222	597	135
7. 2019.....	XXX	XXX	XXX	XXX	XXX	6,492	1,267	588	663	346
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	3,166	1,412	1,041	460
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,431	1,675	792
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,388	1,635
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,969

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

1. Prior.....	25,701	80,602	78,789	80,512	79,163	76,044	77,584	75,820	75,536	106,698
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XXX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XX	XX					
8. 2020.....	XXX	XXX	XX	XX	XX	XX				
9. 2021.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	88,028	67,702	15,901
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	114,900	11,386
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41,253

SCHEDULE P - PART 4J - ALLIED PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XXX							
6. 2018.....	XXX	XXX	XXX	XXX						
7. 2019.....	XXX	XXX	XXX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

**SCHEDULE P - PART 4O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior.....	3,832	1,239	1,405	1,540	1,753	1,225	1,254	1,354	1,375	1,392
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XXX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XX	XX					
8. 2020.....	XXX	XXX	XX	XX	XX	XX				
9. 2021.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 4R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	53,745	29,927	24,497	35,955	30,036	19,413	15,987	15,496	14,595	10,867
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XXX							
6. 2018.....	XXX	XXX	XXX	XXX						
7. 2019.....	XXX	XXX	XXX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4T - WARRANTY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	(30)	1	1	1	0	0	0	3,312	3,312	3,312
2. 2014.....	63	73	75	75	76	76	76	152	228	304
3. 2015.....	XXX	136	161	162	162	162	162	324	486	648
4. 2016.....	XXX	XXX	46	65	65	65	65	130	195	260
5. 2017.....	XXX	XXX	XXX	66	97	98	99	198	297	397
6. 2018.....	XXX	XXX	XXX	XXX	65	87	88	176	264	352
7. 2019.....	XXX	XXX	XXX	XXX	XXX	52	65	131	197	264
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	55	137	218	300
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36	86	140
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34	94
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	6	5	3	3	3	3	3	3	3	3
2. 2014.....	7	2	0	1	0	0	0	0	0	0
3. 2015.....	XXX	24	2	1	1	1	1	1	1	1
4. 2016.....	XXX	XXX	17	1	1	1	1	1	1	1
5. 2017.....	XXX	XXX	XXX	27	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	13	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	13	1	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	18	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	3	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23	4
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	76	2	0	1	0	0	0	4,346	4,346	4,346
2. 2014.....	94	102	102	103	103	103	103	206	309	412
3. 2015.....	XXX	176	189	189	189	189	189	377	565	753
4. 2016.....	XXX	XXX	74	83	83	83	83	165	247	329
5. 2017.....	XXX	XXX	XXX	108	123	124	125	250	375	501
6. 2018.....	XXX	XXX	XXX	XXX	112	124	125	250	375	500
7. 2019.....	XXX	XXX	XXX	XXX	XXX	82	86	172	259	347
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	93	181	287	393
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	72	133	208
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	70	131
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	55

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 1

N O N E

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 2

N O N E

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 3

N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1

N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2

N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3

N O N E

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**SCHEDULE P - PART 5D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	12	(1)	0	0	0	1	1	31,123	31,124	31,127
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	31	32	33	34	34	33	32	32	32	30
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	0	0	0	0	0	0	0	32,269	32,270	32,271
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	75	12	3	1	0	0	1	3,608	3,609	3,609
2. 2014.....	14	45	56	57	57	57	57	114	171	229
3. 2015.....	XXX	8	29	34	34	34	34	68	102	136
4. 2016.....	XXX	XXX	24	56	70	70	70	142	214	286
5. 2017.....	XXX	XXX	XXX	15	30	40	40	81	122	163
6. 2018.....	XXX	XXX	XXX	XXX	12	49	59	122	186	250
7. 2019.....	XXX	XXX	XXX	XXX	XXX	22	47	100	154	208
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	17	56	103	152
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	23	43
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	21	10	8	57	7	7	7	7	6	6
2. 2014.....	48	12	1	0	0	0	0	0	0	0
3. 2015.....	XXX	31	5	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	59	0	4	4	3	1	1	1
5. 2017.....	XXX	XXX	XXX	0	10	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	60	15	3	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	40	10	4	3	2
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	45	21	7	5
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21	7	3
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	28	3	0	(1)	1	0	0	6,347	6,347	6,348
2. 2014.....	93	105	108	108	108	108	108	216	324	433
3. 2015.....	XXX	83	91	91	91	91	91	182	273	364
4. 2016.....	XXX	XXX	122	112	133	133	133	263	395	527
5. 2017.....	XXX	XXX	XXX	65	111	113	113	226	339	452
6. 2018.....	XXX	XXX	XXX	XXX	119	135	135	267	403	539
7. 2019.....	XXX	XXX	XXX	XXX	XXX	103	113	219	331	444
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	94	159	249	353
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45	73	115
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9	17
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	(350)	9	0	3	2	0	0	4,307	4,308	4,308
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	150	123	127	123	128	131	134	162	166	168
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	0	0	0	0	0	0	0	11,443	11,428	11,426
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE
SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XXX							
6. 2018.....	XXX	XXX	XXX	XXX						
7. 2019.....	XXX	XXX	XXX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XXX							
6. 2018.....	XXX	XXX	XXX	XXX						
7. 2019.....	XXX	XXX	XXX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XXX							
6. 2018.....	XXX	XXX	XXX	XXX						
7. 2019.....	XXX	XXX	XXX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE
SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	117	5	0	6	1	2	0	3,879	3,879	3,879
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	247	205	196	189	181	185	185	187	193	202
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	0	0	0	0	0	0	0	16,024	16,027	16,030
2. 2014.....	0	0	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

NONE

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2

NONE

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

NONE

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

NONE

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	81,564	81,564	81,564	81,564	81,564	81,564	81,564	81,564	81,564	81,564	0
3. 2015.....	XXX	82,119	82,119	82,119	82,119	82,119	82,119	82,119	82,119	82,119	0
4. 2016.....	XXX	XXX	82,702	82,702	82,702	82,702	82,702	82,702	82,702	82,702	0
5. 2017.....	XXX	XXX	XXX	79,193	79,193	79,193	79,193	79,193	79,193	79,193	0
6. 2018.....	XXX	XXX	XXX	XXX	80,848	80,848	80,848	80,848	80,848	80,848	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	94,223	94,223	94,223	94,223	94,223	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	111,873	111,873	111,873	111,873	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52,948	52,948	52,948	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,351	4,351	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	81,564	82,119	82,702	79,193	80,848	94,223	111,873	52,948	4,351	0	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	13,713	13,713	13,713	13,713	13,713	13,713	13,713	13,713	13,713	13,713	0
3. 2015.....	XXX	13,135	13,135	13,135	13,135	13,135	13,135	13,135	13,135	13,135	0
4. 2016.....	XXX	XXX	12,359	12,359	12,359	12,359	12,359	12,359	12,359	12,359	0
5. 2017.....	XXX	XXX	XXX	12,067	12,067	12,067	12,067	12,067	12,067	12,067	0
6. 2018.....	XXX	XXX	XXX	XXX	13,280	13,280	13,280	13,280	13,280	13,280	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	20,012	20,012	20,012	20,012	20,012	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	26,019	26,019	26,019	26,019	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,653	13,653	13,653	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	845	845	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	13,713	13,135	12,359	12,067	13,280	20,012	26,019	13,653	845	0	XXX

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

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX									
11. 2023.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX									
11. 2023.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE
SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned Premiums (Sch P-Pt. 1)											XXX

SCHEDULE P - PART 6M - INTERNATIONAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 6N - REINSURANCE - NONPROPORTIONAL ASSUMED PROPERTY
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned	
	1	2	3	4	5	6	7	8	9	10		
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023		
1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX										
6. 2018.....	XXX	XXX										
7. 2019.....	XXX	XXX										
8. 2020.....	XXX	XXX										
9. 2021.....	XXX	XXX										
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)												XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned	
	1	2	3	4	5	6	7	8	9	10		
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023		
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	291,913	291,913	291,913	291,913	291,913	291,913	291,913	291,913	291,913	291,913	291,913	0
3. 2015.....	XXX	283,463	283,463	283,463	283,463	283,463	283,463	283,463	283,463	283,463	283,463	0
4. 2016.....	XXX	XXX	282,941	282,941	282,941	282,941	282,941	282,941	282,941	282,941	282,941	0
5. 2017.....	XXX	XXX	XXX	286,725	286,725	286,725	286,725	286,725	286,725	286,725	286,725	0
6. 2018.....	XXX	XXX	XXX	XXX	325,021	325,021	325,021	325,021	325,021	325,021	325,021	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	258,612	258,612	258,612	258,612	258,612	258,612	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	247,593	247,593	247,593	247,593	247,593	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	251,757	251,757	251,757	251,757	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	324,267	324,267	324,267	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	419,820	419,820	419,820
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	419,820
13. Earned Premiums (Sch P-Pt. 1)	291,913	283,463	282,941	286,725	325,021	258,612	247,593	251,757	324,267	419,820		XXX

SCHEDULE P - PART 6O - REINSURANCE - NONPROPORTIONAL ASSUMED LIABILITY
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned	
	1	2	3	4	5	6	7	8	9	10		
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023		
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	(3)	0	(1)	0	0	0	0	0	0	0	0	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned	
	1	2	3	4	5	6	7	8	9	10		
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023		
1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX										
6. 2018.....	XXX	XXX										
7. 2019.....	XXX	XXX										
8. 2020.....	XXX	XXX										
9. 2021.....	XXX	XXX										
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)												XXX

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE
SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX										
6. 2018.....	XXX	XXX										
7. 2019.....	XXX	XXX										
8. 2020.....	XXX	XXX										
9. 2021.....	XXX	XXX										
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)												XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX										
6. 2018.....	XXX	XXX										
7. 2019.....	XXX	XXX										
8. 2020.....	XXX	XXX										
9. 2021.....	XXX	XXX										
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)												XXX

**SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE
SECTION 1B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX										
6. 2018.....	XXX	XXX										
7. 2019.....	XXX	XXX										
8. 2020.....	XXX	XXX										
9. 2021.....	XXX	XXX										
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)												XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....												
2. 2014.....												
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX										
6. 2018.....	XXX	XXX										
7. 2019.....	XXX	XXX										
8. 2020.....	XXX	XXX										
9. 2021.....	XXX	XXX										
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)												XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)
SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	387	0	0.0	2,448	0	0.0
2. Private Passenger Auto Liability/ Medical	0	0	0.0	0	0	0.0
3. Commercial Auto/Truck Liability/ Medical	0	0	0.0	0	0	0.0
4. Workers' Compensation	3,879	0	0.0	0	0	0.0
5. Commercial Multiple Peril	7,820	0	0.0	0	0	0.0
6. Medical Professional Liability - Occurrence	0	0	0.0	0	0	0.0
7. Medical Professional Liability - Claims - Made	0	0	0.0	0	0	0.0
8. Special Liability	63,697	0	0.0	110,731	0	0.0
9. Other Liability - Occurrence	111,040	0	0.0	0	0	0.0
10. Other Liability - Claims-Made	0	0	0.0	0	0	0.0
11. Special Property	443,154	0	0.0	1,166,571	0	0.0
12. Auto Physical Damage	0	0	0.0	0	0	0.0
13. Fidelity/Surety	0	0	0.0	0	0	0.0
14. Other	0	0	0.0	0	0	0.0
15. International	0	0	0.0	0	0	0.0
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	25,500	0	0.0	0	0	0.0
20. Products Liability - Claims-Made	0	0	0.0	0	0	0.0
21. Financial Guaranty/Mortgage Guaranty	0	0	0.0	0	0	0.0
22. Warranty	0	0	0.0	0	0	0.0
23. Totals	655,477	0	0.0	1,279,751	0	0.0

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (Continued)

SECTION 4

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XXX						
7. 2019.....	XXX	XXX	XXX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XXX						
7. 2019.....	XXX	XXX	XXX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)**

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	387	0	0.0	2,448	0	0.0
2. Private Passenger Auto Liability/Medical	0	0	0.0	0	0	0.0
3. Commercial Auto/Truck Liability/Medical	0	0	0.0	0	0	0.0
4. Workers' Compensation	3,879	0	0.0	0	0	0.0
5. Commercial Multiple Peril	7,820	0	0.0	0	0	0.0
6. Medical Professional Liability - Occurrence	0	0	0.0	0	0	0.0
7. Medical Professional Liability - Claims - Made	0	0	0.0	0	0	0.0
8. Special Liability	63,697	0	0.0	110,731	0	0.0
9. Other Liability - Occurrence	111,040	0	0.0	0	0	0.0
10. Other Liability - Claims-Made	0	0	0.0	0	0	0.0
11. Special Property	443,154	0	0.0	1,166,571	0	0.0
12. Auto Physical Damage	0	0	0.0	0	0	0.0
13. Fidelity/Surety	0	0	0.0	0	0	0.0
14. Other	0	0	0.0	0	0	0.0
15. International	0	0	0.0	0	0	0.0
16. Reinsurance - Nonproportional Assumed Property	0	0	0.0	(419,820)	0	0.0
17. Reinsurance - Nonproportional Assumed Liability	1,467	0	0.0	0	0	0.0
18. Reinsurance - Nonproportional Assumed Financial Lines	0	0	0.0	0	0	0.0
19. Products Liability - Occurrence	25,500	0	0.0	0	0	0.0
20. Products Liability - Claims-Made	0	0	0.0	0	0	0.0
21. Financial Guaranty/Mortgage Guaranty	0	0	0.0	0	0	0.0
22. Warranty	0	0	0.0	0	0	0.0
23. Totals	656,945	0	0.0	859,931	0	0.0

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (Continued)
SECTION 4

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 6

Years in Which Policies Were Issued	INCURRED ADJUSTABLE COMMISSIONS REPORTED AT YEAR END (\$000 OMITTED)									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 7

Years in Which Policies Were Issued	RESERVES FOR COMMISSION ADJUSTMENTS AT YEAR END (\$000 OMITTED)									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
 If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:
- 1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?\$0
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No [X]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A [X]
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior	0	0
1.602	2014	0	0
1.603	2015	0	0
1.604	2016	0	0
1.605	2017	0	0
1.606	2018	0	0
1.607	2019	0	0
1.608	2020	0	0
1.609	2021	0	0
1.610	2022	0	0
1.611	2023	0	0
1.612	Totals	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []
4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]
- If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.
 Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.
5. What were the net premiums in force at the end of the year for:
 (in thousands of dollars) 5.1 Fidelity0
 5.2 Surety0
6. Claim count information is reported per claim or per claimant (Indicate which) per claim.....
 If not the same in all years, explain in Interrogatory 7.
- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [X] No []
- 7.2 (An extended statement may be attached.)
 The Company discontinued writing casualty business in 1979.

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

Allocated by States and Territories

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0065	Factory Mutual Insurance Company & its Affiliates	21482	05-0316605				Factory Mutual Insurance Company	..RI	.....UIP	Policyholders	Ownership	100.000	N/A	..NO	.....1
.0065	Factory Mutual Insurance Company & its Affiliates	10014	05-0254496				Affiliated FM Insurance Company	..RI	.....RE	FMIC Holdings, Inc.	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....1
.0065	Factory Mutual Insurance Company & its Affiliates	10316	05-0284861				Appalachian Insurance Company	..RI	.....IA	FMIC Holdings, Inc.	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....1
.0000	Factory Mutual Insurance Company & its Affiliates	00000	AA-1120610				FM Insurance Company Limited	..GBR	.....IA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	..YES	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	98-0131767				Risk Engineering Insurance Company Limited	..BMU	.....IA	FMIC Holdings, Inc.	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	AA-1370041				FM Insurance Europe S.A.	..LUX	.....IA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	..YES	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	AA-2730043				FM Global de Mexico S.A. de C.V.	..MEX	.....IA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	..YES	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	20-2740839				Watch Hill Insurance Company	..VT	.....IA	FMIC Holdings, Inc.	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	05-0453751				Corporate Insurance Services, Inc.	..RI	.....NIA	FMIC Holdings, Inc.	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000					New Providence Mutual Limited	..BMU	.....IA	Risk Engineering Insurance Company Limited	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000					Factory Mutual Insurance Company - Escritorio de Representação No Brasil LTDA.	..BRA	.....IA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	..YES	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	05-0520189				FM Approvals LLC	..RI	.....NIA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000					FM Engineering International Limited	..GBR	.....NIA	FM Insurance Company Limited	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000					FM Engineering Consulting (Shanghai) Co. Ltd	..CHN	.....NIA	FM Global Services LLC	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000					FM Approvals Limited	..GBR	.....NIA	FM Approvals LLC	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000					FM Approvals Assessoria E Representação LTDA.	..BRA	.....NIA	FM Approvals LLC	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	27-1439297				FMRE Holdings LLC	..DE	.....NIA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	05-6009095				FMIC Holdings, Inc.	..RI	.....UDP	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	..YES	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000					FM Global Servicios, S.de R.L. de C.V.	..MEX	.....NIA	FMIC Holdings, Inc.	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	27-0433536				FM Global Services LLC	..RI	.....NIA	FMIC Holdings, Inc.	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000					FM do Brasil Servicos de Prevencao de Perdas LTDA.	..BRA	.....NIA	FM Global Services LLC	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	04-3516902				610 Lincoln LLC	..DE	.....NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	04-3516903				404 Wyman LLC	..DE	.....NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	04-3516936				275 Wyman LLC	..DE	.....NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	20-8836334				175 Wyman LLC	..DE	.....NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....
.0000	Factory Mutual Insurance Company & its Affiliates	00000	04-3516937				Park Ridge Building LLC	..DE	.....NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	..NO	.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0000	Factory Mutual Insurance Company & its Affiliates	00000	04-3516935				93 Building LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	20-2775533				265 Winter LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	27-1169682				245 Winter LLC	DE	NIA	265 Winter LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	04-3516938				Neponset River LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	27-1440189				West Gloucester LLC	RI	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	04-3516901				601 Edgewater LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	27-1595571				285 Central Avenue, LLC	RI	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	04-3516897				Hobbs Brook Real Estate LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	45-2766487				101 Edgewater LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	27-1169682				401 Edgewater LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	27-1439940				Johnston Building LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000					FM Global Services Colombia S.A.S	COL	NIA	FM Global Services LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	46-0627887				95 Hayden LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	46-1609795				3460 Preston Ridge, LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	46-1737956				1301 Atwood LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	38-3942900				81 Wyman LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	30-0871090				Hobbs Solar 1 LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	38-3982389				Hobbs Solar 2 LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	32-0486346				Hobbs Solar 3 LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000					FM Asia Holdings Pte. Ltd.	SGP	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	30-0939239				Green Street Plaza LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	35-2566166				Hobbs Solar 4 LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000					FM Engineering Egypt LLC	EGY	NIA	FM Engineering International Limited	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	30-0965702				343 Winter Bldg LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000					FM Approvals Europe Limited	IRL	NIA	FM Approvals LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	38-4085564				Hobbs Solar 5 LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	NO	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0000	Factory Mutual Insurance Company & its Affiliates	00000	84-4295769				99 Hayden LLC	..MA.....	.....NIA.....	FMRE Holdings LLC	Ownership.....	100.000	Factory Mutual Insurance Company	.....NO.....	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	85-3705167				Hobbs Solar 6 LLC	..DE.....	.....NIA.....	FMRE Holdings LLC	Ownership.....	100.000	Factory Mutual Insurance Company	.....NO.....	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	86-1428530				Hobbs Solar 7 LLC	..RI.....	.....NIA.....	FMRE Holdings LLC	Ownership.....	100.000	Factory Mutual Insurance Company	.....NO.....	
.0000	Factory Mutual Insurance Company & its Affiliates	00000					225 Wyman LLC	..DE.....	.....NIA.....	FMRE Holdings LLC	Ownership.....	100.000	Factory Mutual Insurance Company	.....NO.....	
.0000	Factory Mutual Insurance Company & its Affiliates	00000					303-333 Wyman LLC	..DE.....	.....NIA.....	FMRE Holdings LLC	Ownership.....	100.000	Factory Mutual Insurance Company	.....NO.....	
.0000	Factory Mutual Insurance Company & its Affiliates	00000					FM Global Science and Technology S.a.r.l.	..LUX.....	.....NIA.....	Factory Mutual Insurance Company	Ownership.....	100.000	Factory Mutual Insurance Company	.....YES.....	
.0000	Factory Mutual Insurance Company & its Affiliates	00000					FME Middle East FZE	..ARE.....	.....NIA.....	FM Engineering International Limited	Ownership.....	100.000	Factory Mutual Insurance Company	.....NO.....	
.0000	Factory Mutual Insurance Company & its Affiliates	00000	92-2437485				FM InnoVentures LLC	..RI.....	.....NIA.....	FMIC Holdings, Inc.	Ownership.....	100.000	Factory Mutual Insurance Company	.....NO.....	

Asterisk	Explanation
1	Pool Participants: Factory Mutual Insurance Company (87%), Affiliated FM Insurance Company (12%), and Appalachian Insurance Company (1%).

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	05-0316605	Factory Mutual Insurance Company	13,500,000	1,835,601	0	0	104,081,416	151,723,806	*	0	271,140,823	(329,341,000)
10014	05-0254496	Affiliated FM Insurance Company	(507,500)	0	0	0	(102,641,933)	25,249,633	*	0	(77,899,800)	26,678,000
10316	05-0284861	Appalachian Insurance Company	175,000	0	0	0	(1,439,483)	0	*	0	(1,264,483)	0
	AA-1120610	FM Insurance Company Limited	0	0	0	0	0	(32,490,692)	0	0	(32,490,692)	101,865,000
	05-6009005	FMIC Holdings, Inc	332,500	(598,113)	0	0	0	0	0	0	(265,613)	0
	27-1439297	FMRE Holdings LLC	0	(1,250,759)	0	0	0	0	0	0	(1,250,759)	0
	05-0520189	FM Approvals LLC	(13,500,000)	0	0	0	0	0	0	0	(13,500,000)	0
	98-0131767	Risk Engineering Insurance Company Limit	0	0	0	0	0	254,048,034	0	0	254,048,034	(197,987,000)
	AA-2730043	FM Global de Mexico S.A. de C.V	0	0	0	0	0	(157,050,545)	0	0	(157,050,545)	154,867,000
	AA-3190418	New Providence Mutual Limited	0	0	0	0	0	0	0	0	0	(3,431,000)
	AA-1370041	FM Insurance Europe S.A	0	0	0	0	0	(241,480,236)	0	0	(241,480,236)	254,073,000
	20-2740839	Watch Hill Insurance Company	0	0	0	0	0	0	0	0	0	(6,724,000)
		FM Global Science and Technology S.a.r.l.	0	13,271	0	0	0	0	0	0	13,271	0
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

*Pool Participants: Factory Mutual Insurance Company (87%), Affiliated FM Insurance Company (12%), and Appalachian Insurance Company (1%)

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

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

SUPPLEMENTAL FILINGS

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

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

Explanations:

- 11.
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- 37.

Bar Codes:

11. SIS Stockholder Information Supplement [Document Identifier 420]



12. Financial Guaranty Insurance Exhibit [Document Identifier 240]



13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]



14. Supplement A to Schedule T [Document Identifier 455]



15. Trusteed Surplus Statement [Document Identifier 490]



16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

17. Reinsurance Summary Supplemental Filing [Document Identifier 401]



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



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



22. Bail Bond Supplement [Document Identifier 500]



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



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



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



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



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



30. Credit Insurance Experience Exhibit [Document Identifier 230]



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



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



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



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



36. Private Flood Insurance Supplement [Document Identifier 560]



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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Liabilities Line 29

	1 Current Year	2 Prior Year
2904.	0	0
2997. Summary of remaining write-ins for Line 29 from overflow page	0	0

Additional Write-ins for Liabilities Line 32

	1 Current Year	2 Prior Year
3204.	0	0
3297. Summary of remaining write-ins for Line 32 from overflow page	0	0

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 24

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
2404. Intercompany Service	0	6,097,827	0	6,097,827
2405. Engineering Fee Income	0	(1,189,958)	0	(1,189,958)
2406. Miscellaneous Income	0	976	943	1,919
2407. Foreign Exchange	0	18,795	0	18,795
2497. Summary of remaining write-ins for Line 24 from overflow page	0	4,927,640	943	4,928,583

Additional Write-ins for Schedule T Line 58

	1 Active Status	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
58004. HKG HONG KONG	XXX	3,368	4,065	0	0	0	0	0	0
58005. IND INDIA	XXX	99,333	72,758	0	0	0	0	0	0
58006. IDN INDONESIA	XXX	10,735	7,344	0	0	0	0	0	0
58007. IRL IRELAND	XXX	149,999	25,070	0	0	0	0	0	0
58008. MEX MEXICO	XXX	3,300	47,002	0	0	0	0	0	0
58009. KOR SOUTH KOREA	XXX	0	372	0	0	0	0	0	0
58010. SWE SWEDEN	XXX	0	3,471	0	0	0	0	0	0
58011. THA THAILAND	XXX	1,470	2,486	0	0	0	0	0	0
58012. VNM VIETNAM	XXX	21,369	29,846	0	0	0	0	0	0
58013. GAB GABON	XXX	0	0	0	0	0	271,766	0	0
58997. Summary of remaining write-ins for Line 58 from overflow page	XXX	289,574	192,414	0	0	0	271,766	0	0



SUPPLEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY

EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS

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

(To Be Filed by March 1)

NAIC Group Code 0065

NAIC Company Code 10014

	Direct Business Only			
	Prior Year	Current Year		
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
1. Completed operations	0	0	0	0
2. Errors & omissions (E&O)	0	0	0	0
3. Directors & officers (D&O)	0	0	0	0
4. Environmental liability	0	0	226,700	9,225,758
5. Excess workers' compensation	0	0	0	0
6. Commercial excess & umbrella	0	0	0	0
7. Personal umbrella	0	0	0	0
8. Employment liability	0	0	0	0
9. Aggregate write-ins for facilities & premises (CGL)	0	0	0	0
10. Internet & cyber liability	0	0	0	0
11. Aggregate write-ins for other	0	0	0	0
12. Total ASL 17 - other liability (sum of Lines 1 through 11)	0	0	226,700	9,225,758
DETAILS OF WRITE-INS				
0901.				
0902.				
0903.				
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998)(Line 9 above)	0	0	0	0
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0



SUPPLEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
 (To Be Filed by March 1)

FOR THE STATE OF: California

NAIC Group Code 0065

NAIC Company Code 10014

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



SUPPLEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
 (To Be Filed by March 1)

FOR THE STATE OF: Connecticut

NAIC Group Code 0065

NAIC Company Code 10014

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



SUPPLEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
 (To Be Filed by March 1)

FOR THE STATE OF: Florida

NAIC Group Code 0065

NAIC Company Code 10014

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



SUPPLEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
 (To Be Filed by March 1)

FOR THE STATE OF: Georgia

NAIC Group Code 0065

NAIC Company Code 10014

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



SUPPLEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
 (To Be Filed by March 1)

FOR THE STATE OF: Massachusetts

NAIC Group Code 0065

NAIC Company Code 10014

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



SUPPLEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
 (To Be Filed by March 1)

FOR THE STATE OF: New Jersey

NAIC Group Code 0065

NAIC Company Code 10014

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



SUPPLEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
 (To Be Filed by March 1)

FOR THE STATE OF: Ohio

NAIC Group Code 0065

NAIC Company Code 10014

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



SUPPLEMENT FOR THE YEAR 2023 OF THE AFFILIATED FM INSURANCE COMPANY
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
 (To Be Filed by March 1)

FOR THE STATE OF: Rhode Island

NAIC Group Code 0065

NAIC Company Code 10014

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