



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

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

AMICA MUTUAL INSURANCE COMPANY

NAIC Group Code 0028 (Current) 0028 (Prior) NAIC Company Code 19976 Employer's ID Number 05-0348344

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

Incorporated/Organized 03/01/1907 Commenced Business 04/01/1907

Statutory Home Office 100 Amica Way, Lincoln, RI, US 02865-1156
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 100 Amica Way, Lincoln, RI, US 02865-1156
(Street and Number) (City or Town, State, Country and Zip Code)
800-652-6422 (Area Code) (Telephone Number)

Mail Address P.O. Box 6008, Providence, RI, US 02940-6008
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 100 Amica Way, Lincoln, RI, US 02865-1156
(Street and Number) (City or Town, State, Country and Zip Code)
800-652-6422 (Area Code) (Telephone Number)

Internet Website Address www.amica.com

Statutory Statement Contact Michael Lee Baker, Jr., 800-652-6422-22365
(Name) (Area Code) (Telephone Number)
mbakerjr@amica.com, 401-334-3657
(E-mail Address) (FAX Number)

OFFICERS

President and Chief Executive Officer Edmund Shallcross III
Senior Vice President, Chief Financial Officer and Treasurer James Parker Loring
Senior Vice President, General Counsel and Secretary Jennifer Ann Morrison #

OTHER

Michael Lee Baker, Jr. #, Vice President & Controller Scott Everett Boyd #, Vice President Susan Fie Chung, Senior Vice President & Chief Investment Officer
Peter Francis Drogan, Senior Vice President & Chief Actuary William Henry Fitzgerald, Vice President Jeffrey Peter Gagnon, Vice President
Michael George Gillerlani, Vice President Roberta Eldeen Gosselin, Vice President Peter Ernest Moreau, Vice President & Chief Information Officer
Jennifer Ann Morrison, Senior Vice President, General Counsel and Secretary Andrew Thomas Mudra, Vice President Theodore Charles Murphy, Chief Operations Officer
Anthony Noviello III, Senior Vice President Shannon Skenyon O'Brien, Vice President Sotirios Dimitrius Pachis, Senior Vice President of Marketing
Samuel Charles Palmisano, Senior Vice President John Steven Reichley, Vice President Sean Francis Welch, Senior Vice President

DIRECTORS OR TRUSTEES

Jill Janice Avery Ivy Lynne Brown Debra Ann Canales
Patricia Walsh Chadwick Michael David Jeans Matthew Alexander Lopes, Jr.
Ronald Keith Machtley Peter Michael Marino Debra Marie Paul
Heidi Carter Pearlson # Joan Rodena Robinson-Berry # Edmund Shallcross III
Diane Desmarais Souza

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.

Edmund Shallcross III President and Chief Executive Officer
Jennifer Ann Morrison Senior Vice President, General Counsel and Secretary
James Parker Loring Senior Vice President, Chief Financial Officer and Treasurer

Subscribed and sworn to before me this 7th 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.....

Ann Marie Oceau
Notary Public
June 8, 2026



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like Fire, Multiple Peril Crop, Commercial Multiple Peril, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$ 3,797

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

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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2023

NAIC Company Code 19976

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	6,088	5,891	653	2,634								1,691
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	173,219	176,305	10,551	43,210	88,463	85,524	396,257	13,542	11,309	42,088		16,596
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	162,184	163,939	8,929	41,631	98,499	50,892	(27,857)	1,489	169	565		15,546
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	341,491	346,135	20,133	87,475	186,962	136,416	368,400	15,031	11,478	42,653		33,833
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 345

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

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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2023

NAIC Company Code 19976

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	130,653	130,957	10,137	65,921	294,770	165,450	55,385	3,407	395	1,518		2,167
2.1 Allied Lines	484,689	483,948	37,409	243,794								8,061
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	15,715,417	14,390,633	932,186	8,035,286	9,244,154	8,976,615	5,334,321	187,109	181,323	437,186		326,926
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	25,397	27,123	1,123	11,927	8,252	8,252		2,540	2,540			420
9. Inland Marine	228,165	230,060	23,344	115,749	57,824	34,515	11,834	709	(521)	591		3,785
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	41,610	38,890	5,187	22,275								682
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	1,504,016	1,480,351	108,091	755,798		(20,115)	305,467		(1,954)	4,605		25,051
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	11,511,309	11,256,344	597,310	2,945,110	8,300,100	14,416,261	16,986,176	484,035	1,178,337	2,010,816		237,181
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	10,269,884	9,712,433	506,822	2,682,728	5,682,018	5,702,094	327,307	136,895	139,401	39,396		211,542
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	39,911,140	37,750,739	2,221,609	14,878,588	23,587,118	29,283,072	23,020,490	814,695	1,499,521	2,494,112		815,815
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 30,625

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

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like Fire, Multiple Peril Crop, Commercial Multiple Peril, etc., ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,975

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

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

NAIC Group Code 0028

BUSINESS IN THE STATE OF California

DURING THE YEAR 2023

NAIC Company Code 19976

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	2,247,771	2,022,470		1,543,956	752,520	374,346	45,659	71,237	52,771	12,767	293,854	19,259
2.1 Allied Lines	1,771,872	1,700,046		952,274	2,166,957	2,118,571	409,511	38,506	41,075	18,884	10,081	43,875
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	61,848,899	58,273,600		32,426,544	46,508,178	56,274,967	31,562,629	2,247,841	3,065,241	2,540,889	(1,262,064)	1,933,119
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	121,101	116,328		61,984	31,478	458,799	427,321	14,317	72,526	58,209		3,095
9. Inland Marine	702,980	706,383		363,248	430,885	445,048	48,183	18,964	19,193	1,993		17,946
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake							27,000			8,000		
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	3,975,450	3,773,352		2,073,502	4,948,376	8,442,420	12,350,796	326,207	334,008	186,203		101,614
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	60,019,664	59,016,582		15,270,720	38,316,724	53,488,266	72,673,715	4,759,677	6,194,395	8,286,492		1,396,780
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	51,221,023	47,335,969		14,566,478	40,109,303	41,905,289	3,529,148	916,373	978,705	306,318		1,191,974
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	181,908,760	172,944,730		67,258,706	133,264,421	163,507,706	121,073,962	8,393,122	10,757,914	11,419,755	(958,129)	4,707,662
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 184,010

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

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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2023

NAIC Company Code 19976

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	71,074	74,623	3,992	38,095	16,213	(30,321)	147,866	529	1,377	10,338		493
2.1 Allied Lines	1,036,810	959,818	45,166	554,076	1,046,947	1,185,608	196,840	11,226	14,915	5,114		7,453
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	35,323,624	33,441,239	1,761,550	18,586,206	28,766,266	31,473,070	15,316,141	540,168	784,361	1,241,252		303,630
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	21,136	21,535	1,525	9,932								149
9. Inland Marine	164,886	184,166	25,138	83,582	128,560	121,231	13,485	1,132	654	601		1,183
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	50,418	49,487	6,157	26,225								357
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	1,464,978	1,471,581	138,408	754,159	794,276	2,199,337	3,879,488	50,234	58,881	58,488		10,584
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	15,143,021	14,826,235	991,921	3,833,876	11,417,628	11,943,621	17,734,844	1,146,975	1,097,579	2,045,206		194,093
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	15,789,672	15,483,546	1,059,206	3,959,045	10,566,570	10,913,935	785,276	189,024	208,480	73,404		202,389
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	69,065,619	66,512,230	4,033,063	27,845,196	52,736,460	57,806,481	38,073,940	1,939,288	2,166,247	3,434,403		720,331
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 32,142

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

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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2023

NAIC Company Code 19976

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	725,318	740,083	87,905	388,653	26,727	(321,486)	(31,755)	69	(15,382)			12,443
2.1 Allied Lines	1,204,118	1,228,763	145,338	638,052	566,460	460,992	110,229	4,193	1,848	2,948		20,664
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	91,543,238	86,915,385	10,568,030	48,628,612	45,846,913	57,450,295	32,206,475	1,113,762	1,939,148	2,454,566		1,631,434
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	493,983	486,887	46,176	245,139	186,401	221,695	35,292	32,180	36,987	4,807		8,458
9. Inland Marine	1,512,528	1,535,141	234,832	793,207	736,138	708,014	32,663	3,247	1,590	1,494		25,920
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	285,608	281,162	47,865	148,377								4,907
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	10,186,867	9,915,288	1,113,732	5,197,799	7,109,293	7,688,882	11,929,576	172,744	123,977	179,857		174,798
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	63,188,092	61,823,556	6,156,972	15,895,351	42,004,728	44,683,680	68,101,218	3,713,260	3,813,107	8,540,020		1,366,168
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	43,050,193	41,176,207	3,982,533	11,081,884	28,079,518	27,949,150	1,003,004	359,719	369,102	125,297		930,744
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	212,189,945	204,102,472	22,383,383	83,017,074	124,556,178	138,841,222	113,386,702	5,399,174	6,270,377	11,308,989		4,175,536
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 279,168

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

19 CT



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like Fire, Multiple Peril Crop, Commercial Multiple Peril, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$ 9,051

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

19 DE



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like Fire, Auto, and Commercial.

(a) Finance and service charges not included in Lines 1 to 35 \$ 5,407

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

19.DC



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2023

NAIC Company Code 19976

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	80,291	78,577		38,813	(18,568)	(30,044)	(1,047)		(510)			1,180
2.1 Allied Lines	115,676	114,331		56,001	536,150	320,507	615,593	19,776	15,677	16,299		1,743
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	52,729,977	51,564,595		27,036,139	24,710,900	(12,769,339)	31,341,336	1,141,677	(911,488)	1,006,143		1,052,472
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	685,792	670,022		349,084	291,308	(867,073)	(15,870)	42,569	(122,895)	6,201		10,367
9. Inland Marine	617,049	614,229		314,071	301,983	279,527	3,219	1,667	558	222		9,309
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	33,052	31,939		15,214								497
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	4,817,930	4,463,518		2,522,482	2,402,531	7,312,713	18,975,342	10,498	13,264	286,076		72,979
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	11,762,747	11,818,913		2,868,596	5,427,290	5,636,016	1,639,434	720,559	687,464	491,024		219,883
19.2 Other Private Passenger Auto Liability	74,667,905	72,953,076		18,277,140	48,762,004	66,233,654	79,996,124	4,026,568	5,761,208	9,649,091		1,395,533
19.3 Commercial Auto No-Fault (Personal Injury Protection)	38	44		44	5	(72)	62	2	2			(3)
19.4 Other Commercial Auto Liability	30	38		45	59	22	158	24	20	8		14
21.1 Private Passenger Auto Physical Damage	27,493,016	26,952,973		6,817,433	21,987,196	20,950,955	1,711,651	1,072,457	1,094,214	195,300		(391)
21.2 Commercial Auto Physical Damage												1
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	173,003,503	169,262,255		58,295,062	104,400,858	87,066,866	134,266,002	7,035,797	6,537,514	11,650,364	(379)	3,277,762
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 105,868

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

19 FL



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like Fire, Allied Lines, Multiple Peril Crop, Federal Flood, etc., ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 86,162

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

19 GA



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2023

NAIC Company Code 19976

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	28,873	29,270	2,927	15,708								662
2.1 Allied Lines	70,943	70,783	6,160	37,357	29,806	28,562	9,921	4,665	4,653	261		1,620
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	2,369,640	2,184,711	135,377	1,244,829	1,228,343	331,348	453,295	50,019	(16,060)	40,691		55,076
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	37,818	38,144	1,966	18,471								859
9. Inland Marine	16,520	16,944	1,006	8,910	29,940	29,940		125	125			376
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	30,480	28,490	2,233	15,342								693
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	182,041	172,374	13,124	95,252		(60,344)	916,403		(5,859)	13,816		4,149
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	1,387,166	1,335,757	67,087	355,416	1,069,737	1,690,650	1,915,174	38,486	120,675	238,401		36,582
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	1,554,774	1,520,810	82,469	389,028	888,174	840,893	22,292	22,831	22,288	8,979		41,009
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	5,678,255	5,397,283	312,349	2,180,313	3,246,000	2,861,049	3,317,085	116,126	125,822	302,148		141,026
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 4,365

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

19.1D



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2023

NAIC Company Code 19976

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	70,904	68,581	4,958	37,674	28,665	(8,408)	45,147	1,248	513	3,290	816	1,235
2.1 Allied Lines	235,309	226,887	18,394	126,133	217,439	195,821	138,623	19,425	19,284	3,904	567	4,187
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	16,441,240	15,016,672	1,260,646	8,755,811	13,152,547	13,441,867	4,540,177	207,636	241,342	369,954	4,011	343,724
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	26,202	26,196	2,036	14,125	1,036	1,036		787	787			469
9. Inland Marine	204,775	211,602	25,020	106,698	89,867	(38,684)	(11,421)	1,675	(4,397)			3,657
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	108,857	104,955	12,160	57,047								1,943
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	1,191,059	1,178,315	119,223	606,962		2,378,702	2,443,818		35,530	36,842		21,351
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	7,539,286	7,283,288	560,857	1,909,011	3,940,400	7,462,009	7,624,521	283,673	721,619	903,464		254,364
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	6,113,424	5,832,088	441,215	1,564,067	4,386,753	4,336,251	117,192	96,742	96,801	27,691		206,261
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	31,931,056	29,948,584	2,444,509	13,177,528	21,816,707	27,768,594	14,898,057	611,186	1,111,479	1,345,145	5,394	837,191
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 20,239

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

19.1L



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2023

NAIC Company Code 19976

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	40,188	39,089	1,905	21,386	7,507	(18,113)	(454)	314	(304)			564
2.1 Allied Lines	150,720	145,413	6,105	78,727								2,099
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	7,116,052	6,991,216	397,949	3,824,218	4,288,629	4,184,075	1,890,462	59,928	57,157	154,983		127,883
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	17,630	18,110	1,066	8,887	9,398	9,398		1,268	1,268			242
9. Inland Marine	69,383	72,696	7,788	37,663	9,909	9,909		150	150			974
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	99,144	97,786	8,512	51,098								1,384
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	255,059	247,612	18,186	136,807		(2,604,738)	(79)		(52,464)			3,570
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	2,597,083	2,580,941	148,033	630,809	2,050,928	1,651,964	2,076,101	103,091	28,542	222,290		80,908
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	2,773,571	2,712,522	156,818	684,716	1,583,486	1,682,553	151,979	30,147	32,768	10,884		86,384
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	13,118,830	12,905,385	746,362	5,474,311	7,949,857	4,915,048	4,118,009	194,898	67,117	388,157		304,008
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 11,765

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

19.1N



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2023

NAIC Company Code 19976

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	13,590	14,950	811	7,539	105,698	(10,119)	(923)	1,617	(449)	741		211
2.1 Allied Lines	50,601	53,925	2,491	27,279		126,587	28,554		2,170			813
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	2,393,686	2,211,207	105,074	1,297,722	2,928,664	3,003,861	975,058	19,783	28,046	79,418		46,231
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	5,626	5,692	438	2,238	1,653	1,653						88
9. Inland Marine	13,650	13,165	964	7,633	13,394	13,394						219
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	3,280	3,595	327	1,858								55
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	112,405	113,418	8,236	58,627								1,810
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	783,991	762,422	38,653	198,556	448,354	345,121	196,200	13,790	(606)	14,199		22,900
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	1,285,593	1,246,485	67,601	326,870	761,164	673,651	(31,273)	14,375	12,600	3,178		37,578
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	4,662,422	4,424,859	224,595	1,928,322	4,258,927	4,154,148	1,167,616	49,565	41,761	97,536		109,905
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 3,020

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

191A



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2023

NAIC Company Code 19976

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	14,400	14,748	583	7,926								194
2.1 Allied Lines	59,947	62,251	2,827	33,233	68,216	93,905	25,689	666	1,331	665		862
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	3,665,635	3,467,284	191,640	1,888,480	2,101,985	2,477,632	837,993	50,739	81,171	66,991		78,332
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	4,601	4,381	159	2,179	11,128	11,128		1,338	1,338			65
9. Inland Marine	18,043	19,150	2,162	9,608	4,845	20,359	15,514	50	651	601		261
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	20,181	20,151	1,930	9,151								288
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	123,607	120,793	9,718	59,674		1,221,910	1,221,910		18,421	18,421		1,819
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	116,066	113,147	5,083	29,554	39,602	15,357	41,375		(9,316)	14,718		3,767
19.2 Other Private Passenger Auto Liability	1,162,544	1,123,575	58,327	298,884	586,422	2,162,924	2,117,463	7,130	220,107	274,056		37,297
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	1,838,830	1,760,813	100,096	469,926	798,819	788,944	29,399	23,477	23,594	5,186		59,035
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	7,023,854	6,706,293	372,525	2,808,615	3,611,017	6,792,159	4,289,343	83,400	337,297	380,638		181,920
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 4,602

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

19 KS



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2023

NAIC Company Code 19976

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	26,285	25,581	814	13,103	5,294	5,294	1,052	1,052				573
2.1 Allied Lines	81,643	77,167	2,294	42,508	65,447	63,541			(46)			1,819
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	4,215,840	3,988,167	219,928	2,228,926	4,464,933	3,423,940	613,293	44,650	(31,804)	54,357		103,918
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	10,624	10,507	272	3,816								234
9. Inland Marine	33,504	33,492	3,814	19,698				50	50			733
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	151,808	151,987	13,858	75,218								3,324
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	148,672	150,312	11,725	73,492		961,436	1,221,902		13,175	18,421		3,277
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	326,107	324,532	16,981	78,105	34,160	11,676	112,411	4,192	(8,654)	36,565		11,541
19.2 Other Private Passenger Auto Liability	2,154,634	2,143,016	118,266	518,181	675,527	1,067,464	1,446,554	35,265	62,560	158,214		76,190
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	1,457,086	1,429,808	85,120	351,961	877,056	955,971	116,727	24,364	26,628	5,789		51,524
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	8,606,203	8,334,569	473,072	3,405,008	6,122,417	6,489,322	3,510,853	109,573	62,961	273,346		253,133
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 7,641

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

19 KY



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2023

NAIC Company Code 19976

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	44,488	42,432	3,719	21,432	6,839	(119,737)	(11,543)	3,100	(5,616)	546		2,041
2.1 Allied Lines	48,412	46,331	3,988	22,811	61,786	(10,729)	19,444		1,389			2,256
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	5,656,228	5,051,866	496,520	3,070,043	3,170,379	2,333,637	2,293,978	135,701	79,080	190,931		272,822
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	27,459	25,601	1,552	14,123	1,289	1,289		1,238	1,238			1,288
9. Inland Marine	31,611	31,095	3,941	16,800	40,497	14,060	8,867	921	(432)	477		1,481
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	4,346	4,487	643	2,008								197
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	255,264	232,256	21,766	131,062	2,078,556	1,331,572	2,443,723	4,050	(23,377)	36,842		11,991
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	3,252,817	3,190,929	247,788	821,833	5,118,566	2,842,023	4,124,022	497,982	204,798	526,179		231,825
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	1,758,073	1,716,899	131,872	445,112	618,870	621,435	29,743	11,649	12,532	5,275		125,290
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	11,078,698	10,341,896	911,789	4,545,224	11,096,782	7,013,550	8,908,234	654,641	269,612	760,250		649,191
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 4,197

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

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like Fire, Multiple Peril Crop, Commercial Multiple Peril, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$ 24,008

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

19 ME



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2023

NAIC Company Code 19976

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	137,111	142,588	10,949	72,430	33,335	5,521	15,290			1,212		2,563
2.1 Allied Lines	337,403	352,372	26,732	179,752	179,752	894,822	366,457	2,297	10,414	9,499		6,318
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	23,417,757	21,401,051	2,037,008	12,598,737	11,636,916	13,072,311	6,578,054	222,186	347,523	531,985		450,909
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	106,653	99,908	7,122	54,762	3,490	3,490		2,278	2,278			1,994
9. Inland Marine	322,095	319,472	44,354	171,584	33,872	33,872		175	175			6,026
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	95,763	92,328	12,020	51,553								1,790
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	1,296,692	1,293,304	140,601	661,595		(28,161)	427,655	11,214	8,480	6,447		24,332
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	980,542	960,575	63,054	247,128	326,973	516,595	445,816	10,544	39,839	123,077		24,220
19.2 Other Private Passenger Auto Liability	13,971,180	13,436,629	957,061	3,552,642	6,977,789	9,585,443	12,142,224	413,141	635,795	1,382,706		344,534
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	9,537,746	9,092,053	615,612	2,431,429	6,696,005	7,181,949	766,736	143,365	160,302	57,862		235,237
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	50,202,942	47,190,280	3,914,513	20,021,612	26,293,136	31,265,842	20,742,232	805,200	1,203,913	2,112,788		1,097,923
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 41,640

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

19.MD



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like Fire, Auto, Marine, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$ 590,355

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

19 MA



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2023

NAIC Company Code 19976

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 Commercial, ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 19,962

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

19.MI



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2023

NAIC Company Code 19976

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), 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, Products Liability, Private Passenger Auto, Commercial Auto, 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 \$ 12,685

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

19 JUN



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2023

NAIC Company Code 19976

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	9,193	9,296	875	5,090								369
2.1 Allied Lines	10,376	10,469	1,011	6,052	19,411	33,897	14,485		375	375		429
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	918,083	866,600	43,986	446,114	589,362	(141,888)	574,338	12,512	(40,808)	49,918		45,222
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	9,706	9,624	609	5,190								404
9. Inland Marine	7,346	7,952	177	3,542								308
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	15,187	14,830	656	5,865								635
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	25,134	25,181	2,291	12,980								1,053
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	423,362	406,586	28,203	106,373	452,902	154,120	222,435	37,842	(1,478)	21,835		29,824
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	414,999	399,324	28,147	103,913	303,918	317,664	17,470	6,645	7,310	1,665		29,325
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	1,833,386	1,749,862	105,955	695,119	1,365,593	363,793	828,728	56,999	(34,601)	73,793		107,569
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,461

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

19 MS



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2023

NAIC Company Code 19976

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	55,832	57,499		30,922	164,173	101,365	(5,728)	8,565	5,779			681
2.1 Allied Lines	180,912	182,571		100,216	216,254	654,774	448,151	3,766	15,118	11,588		2,206
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	7,453,458	7,189,070		3,837,888	5,121,204	4,199,163	2,256,983	134,658	71,537	188,253		126,850
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	11,421	11,356		5,517	17,806	17,806		2,765	2,765			141
9. Inland Marine	34,898	36,002		17,192	650	650						421
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	242,045	241,438		123,527								2,957
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	189,780	190,359		98,586		(130,237)	(4)		(2,623)			2,314
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	2,761,245	2,699,643		718,118	1,939,222	2,082,565	2,702,621	92,301	118,709	328,013		78,651
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	3,064,959	2,963,680		799,854	1,608,631	1,731,445	212,620	32,912	37,214	14,686		87,264
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	13,994,550	13,571,618		5,731,820	9,067,940	8,657,531	5,614,643	274,367	248,499	542,540		301,485
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 9,525

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

19 MO



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2023

NAIC Company Code 19976

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	8,840	9,342	634	4,818	17,739	11,192	(116)	831	673			393
2.1 Allied Lines	37,244	37,979	2,421	20,935								1,634
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	737,570	687,524	59,668	438,474	370,852	431,240	121,291	736	5,593	9,672		35,535
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	1,337	1,801	158	753								58
9. Inland Marine	5,268	5,174	644	3,201	5,528	5,528		50	50			231
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	12,551	12,570	1,466	7,421								554
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	34,925	35,243	3,822	18,974		2,317,607	2,382,723		34,609	35,921		1,536
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	530,677	495,300	39,215	146,076	226,162	597,268	1,261,128	47,238	98,874	169,662		23,660
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	565,032	533,082	43,295	152,960	275,746	213,584	(35,701)	5,353	3,919	961		25,173
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	1,933,444	1,818,015	151,323	793,612	896,027	3,576,419	3,729,325	54,208	143,718	216,216		88,774
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,182

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

19 MT



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2023

NAIC Company Code 19976

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), 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, Products Liability, Private Passenger Auto, Commercial Auto, 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 \$ 2,793

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

19 NIE



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2023

NAIC Company Code 19976

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	41,194	37,992	1,819	22,454								2,114
2.1 Allied Lines	90,885	95,320	5,182	48,181	34,863	31,514	10,771	470	409	285		4,640
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	2,985,648	2,882,719	198,939	1,539,052	3,233,371	4,959,791	2,410,216	144,301	280,291	190,061		157,188
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	4,960	5,634	433	2,788	14,185	(6,407)	(1,050)	4,680	1,743			251
9. Inland Marine	45,467	46,644	4,174	22,214	102,402	107,425	5,023	454	649	195		2,320
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	116,731	114,627	13,093	57,417								5,964
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	265,019	260,470	18,865	129,979								13,540
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	4,227,072	4,102,024	214,478	1,064,019	2,832,957	3,228,557	4,368,305	113,215	178,121	539,832		153,382
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	2,034,226	2,000,137	104,643	518,370	1,209,079	1,323,749	149,142	27,406	31,162	9,324		73,853
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	9,811,202	9,545,567	561,626	3,404,474	7,426,857	9,644,629	6,942,407	290,526	492,375	739,697		413,252
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 8,481

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

19 NV



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2023

NAIC Company Code 19976

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	180,274	179,578	22,165	94,560	98,946	495,009	404,196	1,397	26,014	25,014		3,561
2.1 Allied Lines	541,793	510,577	59,708	290,757	119,824	123,175	19,966	495	612	524		10,792
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	21,374,163	20,167,195	2,387,626	11,594,257	10,026,953	9,201,223	4,563,806	176,832	239,649	370,380		515,080
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	358,279	350,055	34,560	173,003	50,739	83,447	32,708	33,224	37,679	4,455		7,145
9. Inland Marine	246,110	247,526	37,344	129,211	129,110	122,680	13,565	1,550	1,115	601		4,909
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	202,074	192,727	29,282	111,585								4,038
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation	32,751	32,929	3,444	17,486								658
17.1 Other Liability - Occurrence	2,366,265	2,269,725	269,538	1,206,123	6,154	855,294	3,128,019	3,744	4,997	47,157		47,230
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	15,679,134	15,254,394	1,465,076	3,931,028	6,673,350	8,211,282	10,808,647	272,716	437,987	1,236,106		345,612
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	17,223,069	16,318,349	1,533,466	4,420,363	10,653,833	10,361,100	492,939	158,874	162,940	76,179		379,609
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	58,203,912	55,523,055	5,842,209	21,968,373	27,758,909	29,453,210	19,463,846	648,832	910,993	1,760,416		1,318,634
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 81,682

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

19 NH



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like Fire, Multiple Peril Crop, Commercial Multiple Peril, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$ 80,230

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

19 NJ



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like Fire, Multiple Peril Crop, Commercial Multiple Peril, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$ 8,197

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

19 NM



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF New York

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like 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 \$ 216,841

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

19.NY



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2023

NAIC Company Code 19976

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	409,270	425,939		208,265	780,106	866,175	161,623	7,814	14,575	10,450		8,400
2.1 Allied Lines	1,694,140	1,673,334		880,218	1,384,046	1,442,574	384,881	19,640	21,730	10,099		34,810
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	65,267,792	59,383,033		34,794,578	36,454,270	31,968,809	13,141,816	570,230	390,489	1,086,012		1,391,140
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	278,767	276,644	52,177	128,772	22,659	(536)	13,843	1,202	(2,206)	2,156		5,725
9. Inland Marine	1,232,563	1,156,558		654,423	239,150	184,720	3,020	8,796	6,153	334		25,326
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	245,473	246,918		131,089								5,029
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	4,457,403	4,396,172	855,225	2,257,373	800,377	(1,668,475)	2,584,186	6,622	(56,198)	38,962		91,666
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	27,001,931	26,265,933		6,908,336	18,672,172	19,561,411	18,087,318	349,152	361,034	2,022,880		986,771
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	25,282,487	23,899,072		6,660,187	18,803,239	18,294,939	497,549	331,166	329,263	108,501		923,981
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	125,869,826	117,723,603	907,402	52,623,241	77,156,019	70,649,617	34,874,236	1,294,622	1,064,840	3,279,394		3,472,848
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 106,791

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

19 NC



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2023

NAIC Company Code 19976

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 (3401-3403, 3498, 3499).

(a) Finance and service charges not included in Lines 1 to 35 \$ 213

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

19 ND



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2023

NAIC Company Code 19976

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	72,420	75,170	3,757	38,021	208,672	(86,069)	(7,849)		(3,819)			1,121
2.1 Allied Lines	224,599	230,880	11,598	114,735		244,204	72,928	21,591	22,575	1,902		3,521
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	13,396,192	12,754,477	987,351	7,234,165	8,605,217	8,005,156	2,022,579	102,715	63,126	167,790		244,000
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	34,479	33,540	2,042	15,543	32,240	48,072	15,833	3,975	6,131	2,156		539
9. Inland Marine	183,285	197,915	21,958	89,088	15,949	15,949		629	629			2,874
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	121,675	111,742	11,917	64,444								1,908
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	842,141	853,421	75,799	422,612	55,000	5,904,075	6,109,541		86,859	92,105		13,274
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	6,006,593	5,909,903	447,153	1,491,084	3,497,974	7,147,616	6,995,570	236,959	653,006	775,946		160,566
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	6,220,623	5,994,676	448,550	1,561,951	3,509,533	3,543,396	176,333	74,687	77,187	20,487		166,302
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	27,102,007	26,161,724	2,010,125	11,031,643	15,924,585	24,822,399	15,384,935	440,556	905,694	1,060,386		594,105
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 26,313

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

19 OH



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2023

NAIC Company Code 19976

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	15,161	14,818	1,447	7,987	5,165	5,165						418
2.1 Allied Lines	80,692	79,304	7,583	42,994	76,532	84,702	33,895	47	304	888		2,246
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	1,978,825	1,908,277	143,727	1,013,158	948,998	1,009,937	161,966	6,533	11,538	12,995		66,893
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	2,280	2,317	154	1,104								57
9. Inland Marine	5,492	5,852	903	2,172								148
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	12,429	12,716	1,098	6,054								352
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	53,672	51,783	5,320	29,737								1,475
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	681,180	668,862	40,503	174,497	730,023	(5,559)	678,079	114,973	17,815	77,963		39,705
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	821,441	799,843	48,020	218,886	322,146	247,004	(53,116)	5,296	3,599	1,395		47,879
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	3,651,172	3,543,772	248,755	1,496,589	2,082,864	1,341,249	820,824	126,849	33,256	93,261		159,173
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,923

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

19 OK



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2023

NAIC Company Code 19976

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	184,189	183,030	13,541	96,932	215,900	220,174	70,753	1,003	2,538	4,782		3,725
2.1 Allied Lines	420,388	415,836	29,638	217,557	244,803	177,489	42,718	4,213	2,670	1,156		8,508
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	15,556,990	13,992,621	861,213	8,000,197	8,657,225	8,215,841	6,409,091	207,923	191,996	525,762		336,263
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	61,381	62,678	3,290	29,152	8,995	8,995						1,241
9. Inland Marine	131,796	136,530	13,780	66,116	76,991	115,816	42,034	2,179	3,654	1,641		2,659
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	1,874,927	1,800,839	169,908	975,949								37,971
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	1,443,477	1,432,039	100,145	717,856	3,033	64,129	61,096	2,031	2,952	921		29,216
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	1,375,287	1,358,113	63,303	341,959	753,293	908,533	792,862	37,190	36,784	233,153		28,851
19.2 Other Private Passenger Auto Liability	13,482,715	12,852,181	620,873	3,502,733	8,182,718	10,533,818	12,942,426	401,188	617,345	1,469,752		283,389
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	9,540,297	8,983,288	419,568	2,482,777	6,073,155	5,748,670	386,208	156,730	155,080	81,658		200,526
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	44,071,447	41,217,155	2,295,259	16,431,228	24,216,113	25,993,465	20,747,188	812,457	1,013,019	2,318,825		932,349
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 29,348

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

19 OR



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2023

NAIC Company Code 19976

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), 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, 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 \$ 60,478

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

19.PA



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like Fire, Auto, Marine, etc., ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 242,177

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

19.R1



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2023

NAIC Company Code 19976

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	54,730	56,622	4,480	28,371	4,770	(22,719)	(2,507)		(1,220)			1,894
2.1 Allied Lines	174,398	181,514	16,698	91,681	108,658	123,717	15,059	1,058	1,447	389		6,116
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	12,429,159	11,682,849	1,100,916	6,452,615	5,615,970	4,484,768	2,396,933	88,866	10,434	200,549		555,102
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	100,768	101,008	7,888	46,588	25,729	41,561	15,833	6,730	8,886	2,156		3,528
9. Inland Marine	91,113	92,038	12,635	43,640	74,391	74,391		225	225			3,199
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	275,002	272,851	33,956	141,813								9,646
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	832,439	803,452	84,554	428,194	1,000,000	(402,943)	1,527,298	80	(35,917)	23,026		29,251
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	336,692	337,471	25,771	80,419	144,100	85,011	60,616	1,793	(18,636)	23,406		17,763
19.2 Other Private Passenger Auto Liability	8,678,766	8,592,274	655,104	2,140,519	4,069,826	5,595,302	6,220,584	137,759	292,004	726,449		457,109
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	5,033,506	4,954,826	390,295	1,252,588	2,823,954	2,972,850	296,126	57,606	63,879	23,725		265,111
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	28,006,573	27,074,905	2,332,297	10,706,428	13,867,398	12,951,938	10,529,942	294,117	321,102	999,700		1,348,719
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 22,751

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

19 SC



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2023

NAIC Company Code 19976

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	589	748		377								31
2.1 Allied Lines	3,259	4,131		2,136								266
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	217,830	198,538	13,465	125,146	77,590	76,824	(38)	169	112			19,899
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	483	476	36	216								38
9. Inland Marine	1,198	1,014	122	493								99
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	171	119	22	107								14
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	11,839	11,599	1,047	6,587								960
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	89,296	88,514	4,689	23,878	24,060	(231,494)	13,802	419	(29,551)	436		7,048
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	238,973	235,072	14,579	62,108	75,093	91,141	22,392	1,428	2,161	1,330		18,971
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	563,638	540,211	33,960	221,048	176,743	(63,529)	36,156	2,016	(27,278)	1,766		47,326
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 237

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

19 SD



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like Fire, Allied Lines, Multiple Peril Crop, Federal Flood, etc., ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$ 15,474

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

19.TN



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2023

NAIC Company Code 19976

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	405,862	405,999	(14)	209,140	19,978	8,397	(1,056)	2,419	1,905			5,924
2.1 Allied Lines	4,962,875	4,898,039	(173)	2,577,655	4,591,759	4,850,355	1,028,926	53,471	61,523	26,950		72,488
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	156,245,101	150,293,470	(619)	82,186,677	100,226,901	104,131,994	32,094,055	2,044,963	2,213,522	2,278,948		2,902,976
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	445,162	451,031		213,973	188,485	205,379	26,373	34,461	36,699	3,662		6,484
9. Inland Marine	1,092,507	1,152,069		559,371	428,077	478,633	89,391	7,157	8,753	3,609		15,949
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	19,676	17,754		10,682								289
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	6,802,708	6,916,532	(284)	3,418,683	2,524,495	1,885,585	15,672,763	43,589	(48,688)	236,290		99,297
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	2,779,372	2,749,508		689,903	1,647,208	1,300,506	1,446,553	98,959	(82,602)	475,130		78,273
19.2 Other Private Passenger Auto Liability	73,738,231	71,279,495		18,769,011	51,655,656	59,895,980	83,112,386	3,937,384	4,789,630	10,115,644		2,075,169
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	58,369,765	57,479,257		14,560,840	46,880,469	45,687,098	1,117,589	657,475	659,037	310,812		1,642,671
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	304,861,259	295,643,154	(1,090)	123,195,935	208,163,028	218,443,927	134,586,980	6,879,878	7,639,779	13,451,045		6,899,520
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 176,637

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

19.TX



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2023

NAIC Company Code 19976

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	16,516	14,827	1,409	8,722	30,366	32,102	25,618	602	1,166	1,730		471
2.1 Allied Lines	67,082	60,037	5,999	35,977								1,949
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	2,214,320	2,067,060	179,508	1,191,063	1,614,802	1,858,580	462,658	29,267	48,816	36,837		69,933
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	9,486	9,974	589	4,613	2,509	2,509		438	438			275
9. Inland Marine	31,869	31,249	3,528	17,941	19,500	19,500		50	50			925
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	432,815	417,582	44,022	240,860								12,609
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	216,300	205,317	18,163	107,616		(8,047)	122,199	291	(489)	1,843		6,281
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	153,228	154,765	9,160	36,517	62,006	15,914	55,831	310	(16,121)	20,906		3,495
19.2 Other Private Passenger Auto Liability	2,662,264	2,605,117	169,253	665,220	1,510,027	2,128,553	2,693,383	108,196	181,771	324,934		59,948
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	2,199,001	2,146,068	146,177	547,135	1,351,007	1,225,669	(65,610)	25,895	23,217	6,040		49,539
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	8,002,881	7,711,996	577,808	2,855,664	4,590,217	5,274,780	3,294,079	165,069	238,848	392,290		205,425
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 4,192

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

19 UT



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2023

NAIC Company Code 19976

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	60,774	63,360	8,203	34,260	161,621	397,392	235,771	1,694	16,255	14,561		2,307
2.1 Allied Lines	114,303	118,749	15,185	63,977	29,674	46,040	16,366		423	423		4,344
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	3,450,946	3,214,610	410,091	1,897,398	982,875	1,011,840	201,206	49,195	51,907	16,332		134,865
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	36,161	36,114	3,332	16,682	26,832	26,832		3,999	3,999			1,369
9. Inland Marine	31,170	31,443	4,853	18,339	7,186	7,186		125	125			1,174
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	18,329	17,884	3,035	9,509								702
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	281,147	273,069	36,041	146,867	50,000	50,000						10,711
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	1,960,738	1,889,198	199,707	490,349	1,007,689	1,000,066	2,052,859	143,150	132,097	246,432		73,635
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	3,100,490	2,977,063	315,264	771,510	1,731,158	1,842,634	197,197	31,780	36,033	12,234		116,393
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	9,054,058	8,621,490	995,711	3,448,891	3,997,035	4,381,990	2,703,399	229,943	240,839	289,982		345,500
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 9,808

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

19.VT



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2023

NAIC Company Code 19976

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	166,830	164,768	9,992	88,242	121,124	231,461	134,136	4,017	10,871	9,297	10,667	2,427
2.1 Allied Lines	505,596	490,800	39,841	270,450	420,080	(27,022)	71,259	6,101	(4,459)	2,939	6,512	9,432
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	21,656,321	19,762,764	1,888,959	11,411,035	12,405,858	13,654,808	5,683,773	188,217	297,155	459,625		549,684
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	76,728	77,582	6,536	36,838	5,185	5,185						1,505
9. Inland Marine	202,787	217,387	29,066	101,798	4,522	(5,069)	8,061	1,366	830	379		3,972
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	143,577	140,226	17,299	72,319								2,811
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	1,659,731	1,586,626	165,880	840,527	2,784,173	1,799,350	122,158	9,330	(11,125)	1,843		32,572
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	12,500,817	12,192,681	1,068,358	3,134,749	6,659,368	6,228,493	8,747,721	414,042	273,811	995,344		422,759
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	9,279,674	8,950,866	767,461	2,332,069	5,320,520	5,858,883	826,404	115,749	131,614	45,549		313,830
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	46,192,061	43,583,700	3,993,392	18,288,027	27,720,830	27,746,089	15,593,512	738,822	698,697	1,514,976	17,179	1,338,992
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 35,386

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

19.VA



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

NAIC Group Code 0028

BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2023

NAIC Company Code 19976

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	332,370	325,437	20,402	166,850	233,012	253,817	147,105	3,644	7,345	9,868		6,595
2.1 Allied Lines	742,947	734,457	46,048	367,562	1,035,919	901,145	169,671	12,075	9,133	4,527		14,674
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	21,762,064	21,092,843	1,366,231	11,488,829	16,336,068	16,146,249	7,932,314	432,949	439,971	649,272		482,901
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	171,900	172,358	9,523	82,183	9,251	132,826	132,703	936	17,709	18,144		3,396
9. Inland Marine	273,682	281,100	27,541	139,079	47,665	47,665		427	427			5,409
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	3,466,121	3,353,004	321,383	1,816,642								68,533
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	2,859,075	2,662,965	189,040	1,461,832	3,450,000	(29,506)	1,664,695		(78,519)	25,099		56,507
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	1,782,725	1,767,390	87,771	440,318	1,201,917	1,365,717	795,330	27,210	29,134	233,246		39,794
19.2 Other Private Passenger Auto Liability	20,908,050	20,683,094	1,085,710	5,175,315	12,667,619	17,247,794	23,882,351	1,039,111	1,405,233	2,734,588		466,646
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	12,246,809	11,901,479	607,953	3,106,037	9,263,855	9,006,494	574,421	250,768	250,089	114,412		273,382
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	64,545,743	62,974,127	3,761,602	24,244,647	44,245,306	45,072,201	35,298,590	1,767,120	2,080,522	3,789,156		1,417,837
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 45,696

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

19/WA



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2023

NAIC Company Code 19976

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.WV

(a) Finance and service charges not included in Lines 1 to 35 \$ 1,884
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2023

NAIC Company Code 19976

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	49,813	53,567	4,560	25,980	24,506	(18,805)	(3,835)	92	(1,833)		528	1,147
2.1 Allied Lines	125,002	130,502	11,087	64,962	23,940	4,964	16,947	684	245	453	209	2,956
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	5,402,856	5,071,458	410,379	2,904,088	3,006,935	3,498,156	1,770,336	57,270	98,890	142,732	1,137	130,907
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	55,008	53,615	3,602	26,420	6,226	6,226		4,243	4,243			1,304
9. Inland Marine	45,405	45,612	4,563	24,440	3,438	15,061	11,623	204	655	451		1,070
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	8,178	7,577	888	4,831								198
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	396,970	382,673	32,643	201,450	513,640	(371,734)	122,161		(18,451)	1,843		9,456
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	3,459,814	3,289,318	225,878	889,456	2,361,715	1,333,343	2,227,095	52,910	(78,844)	277,812		95,900
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	3,024,086	2,895,851	203,919	759,153	1,162,659	1,235,311	162,739	24,871	28,580	13,046		83,845
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	12,567,132	11,930,173	897,519	4,900,780	7,103,059	5,702,522	4,307,066	140,274	33,485	436,337	1,874	326,783
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 8,954

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

19.WI



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2023

NAIC Company Code 19976

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	3,093	3,094	366	1,862								325
2.1 Allied Lines	15,361	15,081	1,987	8,820	27,187	27,187						1,691
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	511,442	464,345	54,443	279,821	145,158	75,982	(191)	2,388	(2,801)	265		57,903
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine	766	986		353								99
9. Inland Marine	1,495	1,550	190	793								160
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake	1,760	1,747	268	1,236								187
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence	28,482	27,448	3,675	15,274								3,165
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability	219,954	212,067	16,334	56,908	47,215	51,976	466,332	1,016	3,075	64,323		26,797
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	418,196	404,669	32,778	103,802	175,952	208,235	40,459	5,468	6,949	2,414		50,879
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. Total (a)	1,200,549	1,130,987	110,041	468,869	395,512	363,380	506,600	8,872	7,223	67,002		141,206
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

19.WV

(a) Finance and service charges not included in Lines 1 to 35 \$ 657
 (b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0028

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2023

NAIC Company Code 19976

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 categories like Fire, Auto, Marine, etc.

(a) Finance and service charges not included in Lines 1 to 35 \$ 2,682,340

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

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 1

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8 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								
26-0115568	.12287	AMICA PROP & CAS INS CO	RI	53,937	4,014	38,853	42,867		17,229	16,831				
0399999. Affiliates - U.S. Non-Pool - Other					53,937	4,014	38,853	42,867	17,229	16,831				
0499999. Total - U.S. Non-Pool					53,937	4,014	38,853	42,867	17,229	16,831				
0799999. Total - Other (Non-U.S.)														
0899999. Total - Affiliates					53,937	4,014	38,853	42,867	17,229	16,831				
AA-9991161	.00000	COMMONWEALTH AUTOMOBILE REINS	MA	38	1	64	65			21				
AA-9991202	.00000	CONNECTICUT FAIR PLAN	CT	51	632	53	685			23				
AA-9991211	.00000	LOUISIANA FAIR PLAN	LA		19		19							
AA-9991302	.00000	LOUISIANA BEACH PLAN	LA		2		2							
AA-9991132	.00000	NEW HAMPSHIRE AUTO REINS FACILITY	NH	1										
AA-9991218	.00000	NEW JERSEY FAIR PLAN	NJ	25	216	4	220			12				
AA-9991221	.00000	NORTH CAROLINA FAIR PLAN	NC	1,608	6,584	207	6,791			876				
AA-9991222	.00000	OHIO FAIR PLAN	OH	30	232	7	239			16				
AA-9991224	.00000	PENNSYLVANIA FAIR PLAN	PA	11	102	1	103			6				
AA-9991225	.00000	RHODE ISLAND FAIR PLAN	RI	2,151	17,093	1,121	18,214			1,252				
1099999. Total Pools, Associations or Other Similar Facilities - Mandatory Pools					3,915	24,881	1,457	26,338		2,206				
1299999. Total - Pools and Associations					3,915	24,881	1,457	26,338		2,206				
.....														
.....														
.....														
.....														
.....														
.....														
.....														
.....														
.....														
9999999 Totals					57,852	28,895	40,310	69,205	17,229	19,037				

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 AMICA MUTUAL 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			
0499999. Total Authorized - Affiliates - U.S. Non-Pool																				
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																				
0899999. Total Authorized - Affiliates																				
36-2661954	10103	AMERICAN AGRICULTURAL INS CO	IN		619															
47-0574325	32603	BERKLEY INS CO	DE					10							10			10		
22-2005057	26921	EVEREST REINS CO	DE		1,221															
13-2915260	34339	FARMERS GRP PROP & CAS INS CO	RI					3						3				3		
06-0383750	19682	HARTFORD FIRE INS CO	CT					4						4				4		
74-2195939	42374	HOUSTON CAS CO	TX		1,530															
13-3138390	42307	NAVIGATORS INS CO	NY		709															
06-1053492	41629	NEW ENGLAND REINS CORP	CT					5						5				5		
47-0698507	23680	ODYSSEY REINS CO	CT		780															
23-1642962	12262	PENNSYLVANIA MANUFACTURERS ASSOC INS	PA					2						2				2		
23-1740414	22705	R&Q REINS CO	PA					2						2				2		
75-1444207	30058	SCOR REINS CO	NY		628			2						2				2		
13-1675535	25364	SWISS REINS AMER CORP	NY		567															
31-0542366	10677	THE CINCINNATI INS CO	OH		1,224															
13-5616275	19453	TRANSATLANTIC REINS CO	NY		1,444															
0999999. Total Authorized - Other U.S. Unaffiliated Insurers						8,722			28					28				28		
AA-9991310	00000	FLORIDA HURRICANE CATASTROPHE FUND	FL		6,595	728	73	5,045		18,470				24,316				24,316		
AA-9991159	00000	MICHIGAN CATASTROPHIC CLAIMS ASSN	MI		914	2,940		1,280				555		4,775				4,775		
AA-9991162	00000	NEW JERSEY AUTO INS RISK EXCH	NJ		29															
		NEW JERSEY UNSATISFIED CLAIM AND JUDGMENT FUND	NJ		253	671		1,398						2,069				2,069		
AA-9991139	00000	NORTH CAROLINA REINS FACILITY	NC		1,278	231	27	545				354		1,157		174		983		
1099999. Total Authorized - Pools - Mandatory Pools						9,069	4,570	100	8,268		18,470		909		32,317		174		32,143	
AA-3194168	00000	ASPEN BERMUDA LTD	BMU		281															
AA-3194122	00000	DAVINCI REINS LTD	BMU		112															
AA-3190871	00000	LANCASHIRE INS CO LTD	BMU		1,477															
AA-1126435	00000	LLOYD'S SYNDICATE NUMBER 435	GBR		312															
AA-1126609	00000	LLOYD'S SYNDICATE NUMBER 609	GBR		106															
AA-1126623	00000	LLOYD'S SYNDICATE NUMBER 623	GBR		51															
AA-1127084	00000	LLOYD'S SYNDICATE NUMBER 1084	GBR		1,167															
AA-1127183	00000	LLOYD'S SYNDICATE NUMBER 1183	GBR		221															
AA-1120085	00000	LLOYD'S SYNDICATE NUMBER 1274	GBR		393															
AA-1127301	00000	LLOYD'S SYNDICATE NUMBER 1301	GBR		1,543															
AA-1120186	00000	LLOYD'S SYNDICATE NUMBER 1947	GBR		312															
AA-1120084	00000	LLOYD'S SYNDICATE NUMBER 1955	GBR		322															
AA-1128010	00000	LLOYD'S SYNDICATE NUMBER 2010	GBR		418															
AA-1128121	00000	LLOYD'S SYNDICATE NUMBER 2121	GBR		355															
AA-1128623	00000	LLOYD'S SYNDICATE NUMBER 2623	GBR		230															
AA-1128791	00000	LLOYD'S SYNDICATE NUMBER 2791	GBR		62															
AA-1128987	00000	LLOYD'S SYNDICATE NUMBER 2987	GBR		2,538															
AA-1840000	00000	MAPPRE RE COMPANIA DE REASEGUROS SA	ESP		2,224															
AA-3190339	00000	RENAISSANCE REINS LTD	BMU		75															
1299999. Total Authorized - Other Non-U.S. Insurers						12,199														
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)						29,990	4,570	100	8,296		18,470		909		32,345		174		32,171	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																				

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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			
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																				
2299999. Total Unauthorized - Affiliates																				
43-0613000	.23388	SHELTER MUT INS CO	MO		1,303															
2399999. Total Unauthorized - Other U.S. Unaffiliated Insurers						1,303														
AA-3194158	.00000	ALLIANZ RISK TRANSFER (BERMUDA) LTD	BMU		2,367															
AA-3194128	.00000	ALLIED WORLD ASSURANCE CO LTD	BMU		562															
AA-3191298	.00000	ANTARES REINS CO LTD	BMU		694															
AA-1780116	.00000	CHAUCER INS CO DESIGNATED ACTIVITY CO	IRL		1,160															
AA-9240012	.00000	CHINA PROP & CAS REINS CO LTD	CHN		807															
AA-3190770	.00000	CHUBB TEMPEST REINS LTD	BMU		1,479															
AA-1120191	.00000	CONVEX INS UK LTD	GBR		599															
AA-3191400	.00000	CONVEX RE LTD	BMU		592															
AA-3191190	.00000	HAMILTON RE LTD	BMU		1,400															
AA-3190060	.00000	HANNOVER RE (BERMUDA) LTD	BMU		1,502															
AA-3191489	.00000	NECTARIS RE LTD	BMU		254															
AA-1340004	.00000	R V VERSICHERUNG AG	DEU		1,114															
AA-5324100	.00000	TAIPING REINS CO LTD	HKG		466															
AA-3191388	.00000	VERMEER REINS LTD	BMU		281															
2699999. Total Unauthorized - Other Non-U.S. Insurers						13,277														
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)						14,580														
3299999. Total Certified - Affiliates - U.S. Non-Pool																				
3599999. Total Certified - Affiliates - Other (Non-U.S.)																				
3699999. Total Certified - Affiliates																				
CR-3194126	.00000	ARCH REINS LTD	BMU		618															
CR-1340125	.00000	HANNOVER RUECK SE	DEU		658															
4099999. Total Certified - Other Non-U.S. Insurers						1,276														
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)						1,276														
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																				
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																				
5099999. Total Reciprocal Jurisdiction - Affiliates																				
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)																				
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)						45,846	4,570	100	8,296		18,470		909		32,345		174		32,171	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																				
9999999 Totals						45,846	4,570	100	8,296		18,470		909		32,345		174		32,171	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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)
0499999	Total Authorized - Affiliates - U.S. Non-Pool			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999	Total Authorized - Affiliates - Other (Non-U.S.)			XXX											XXX		
0899999	Total Authorized - Affiliates			XXX											XXX		
36-2661954	AMERICAN AGRICULTURAL INS CO														3.		
47-0574325	BERKLEY INS CO						10	10	12		12		12		2.		
22-2005057	EVEREST REINS CO														2.		
13-2915260	FARMERS GRP PROP & CAS INS CO						3	3	4		4		4		3.		
06-0383750	HARTFORD FIRE INS CO						4	4	5		5		5		2.		
74-2195939	HOUSTON CAS CO														1.		
13-3138390	NAVIGATORS INS CO														2.		
06-1053492	NEW ENGLAND REINS CORP						5	5	6		6		6		6.	1	
47-0698507	ODYSSEY REINS CO														3.		
23-1642962	PENNSYLVANIA MANUFACTURERS ASSOC INS						2	2	2		2		2		2.		
23-1740414	R&Q REINS CO						2	2	2		2		2		6.		
75-1444207	SCOR REINS CO						2	2	2		2		2		3.		
13-1675535	SWISS REINS AMER CORP														2.		
31-0542366	THE CINCINNATI INS CO														2.		
13-5616275	TRANSATLANTIC REINS CO														1.		
0999999	Total Authorized - Other U.S. Unaffiliated Insurers			XXX			28	28	34		34		34		XXX	2	
AA-9991310	FLORIDA HURRICANE CATASTROPHE FUND						24,316	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN						4,775	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991162	NEW JERSEY AUTO INS RISK EXCH							XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991160	NEW JERSEY UNSATISFIED CLAIM AND JUDGMENT FUND						2,069	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991139	NORTH CAROLINA REINS FACILITY						174	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999	Total Authorized - Pools - Mandatory Pools			XXX		174	32,143	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194168	ASPEN BERMUDA LTD														3.		
AA-3194122	DAVINCI REINS LTD														3.		
AA-3190871	LANCASHIRE INS CO LTD														3.		
AA-1126435	LLOYD'S SYNDICATE NUMBER 435														3.		
AA-1126609	LLOYD'S SYNDICATE NUMBER 609														3.		
AA-1126623	LLOYD'S SYNDICATE NUMBER 623														3.		
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084														3.		
AA-1127183	LLOYD'S SYNDICATE NUMBER 1183														3.		
AA-1120085	LLOYD'S SYNDICATE NUMBER 1274														3.		
AA-1127301	LLOYD'S SYNDICATE NUMBER 1301														3.		
AA-1120186	LLOYD'S SYNDICATE NUMBER 1947														3.		
AA-1120084	LLOYD'S SYNDICATE NUMBER 1955														3.		
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010														3.		
AA-1128121	LLOYD'S SYNDICATE NUMBER 2121														3.		
AA-1128623	LLOYD'S SYNDICATE NUMBER 2623														3.		
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791														3.		
AA-1128987	LLOYD'S SYNDICATE NUMBER 2987														3.		
AA-1840000	MAPFRE RE COMPANIA DE REASEGUROS SA														3.		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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)
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)				XXX											XXX	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)				XXX	174	32,171		28	34		34		34	XXX		2
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)				XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 Totals				XXX	174	32,171		28	34		34		34	XXX		2

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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												
0499999	Total Authorized - Affiliates - U.S. Non-Pool																XXX	
0799999	Total Authorized - Affiliates - Other (Non-U.S.)																XXX	
0899999	Total Authorized - Affiliates																XXX	
36-2661954	AMERICAN AGRICULTURAL INS CO																YES	
47-0574325	BERKLEY INS CO																YES	
22-2005057	EVEREST REINS CO																YES	
13-2915260	FARMERS GRP PROP & CAS INS CO																YES	
06-0383750	HARTFORD FIRE INS CO																YES	
74-2195939	HOUSTON CAS CO																YES	
13-3138390	NAVIGATORS INS CO																YES	
06-1053492	NEW ENGLAND REINS CORP																YES	
47-0698507	ODYSSEY REINS CO																YES	
23-1642962	PENNSYLVANIA MANUFACTURERS ASSOC INS																YES	
23-1740414	R&Q REINS CO																YES	
75-1444207	SCOR REINS CO																YES	
13-1675535	SWISS REINS AMER CORP																YES	
31-0542366	THE CINCINNATI INS CO																YES	
13-5616275	TRANSATLANTIC REINS CO																YES	
0999999	Total Authorized - Other U.S. Unaffiliated Insurers																XXX	
AA-9991310	FLORIDA HURRICANE CATASTROPHE FUND	.801					.801			.801							YES	
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN	2,940					2,940			2,940							YES	
AA-9991162	NEW JERSEY AUTO INS RISK EXCH																YES	
AA-9991160	NEW JERSEY UNSATISFIED CLAIM AND JUDGMENT FUND	.671					.671			.671							YES	
AA-9991139	NORTH CAROLINA REINS FACILITY	.258					.258			.258							YES	
1099999	Total Authorized - Pools - Mandatory Pools	4,670					4,670			4,670							XXX	
AA-3194168	ASPEN BERMUDA LTD																YES	
AA-3194122	DAVINCI REINS LTD																YES	
AA-3190871	LANCASHIRE INS CO LTD																YES	
AA-1126435	LLOYD'S SYNDICATE NUMBER 435																YES	
AA-1126609	LLOYD'S SYNDICATE NUMBER 609																YES	
AA-1126623	LLOYD'S SYNDICATE NUMBER 623																YES	
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084																YES	
AA-1127183	LLOYD'S SYNDICATE NUMBER 1183																YES	
AA-1120085	LLOYD'S SYNDICATE NUMBER 1274																YES	
AA-1127301	LLOYD'S SYNDICATE NUMBER 1301																YES	
AA-1120186	LLOYD'S SYNDICATE NUMBER 1947																YES	
AA-1120084	LLOYD'S SYNDICATE NUMBER 1955																YES	
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010																YES	
AA-1128121	LLOYD'S SYNDICATE NUMBER 2121																YES	
AA-1128623	LLOYD'S SYNDICATE NUMBER 2623																YES	
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791																YES	
AA-1128987	LLOYD'S SYNDICATE NUMBER 2987																YES	
AA-1840000	MAPFRE RE COMPANIA DE REASEGUROS SA																YES	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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-3190339	RENAISSANCE REINS LTD																		
1299999	Total Authorized - Other Non-U.S. Insurers																		XXX
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	4,670					4,670			4,670									XXX
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool																		XXX
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)																		XXX
2299999	Total Unauthorized - Affiliates																		XXX
43-0613000	SHELTER MUT INS CO																		YES
2399999	Total Unauthorized - Other U.S. Unaffiliated Insurers																		XXX
AA-3194158	ALLIANZ RISK TRANSFER (BERMUDA) LTD																		YES
AA-3194128	ALLIED WORLD ASSURANCE CO LTD																		YES
AA-3191298	ANTARES REINS CO LTD																		YES
AA-1780116	CHAUCER INS CO DESIGNATED ACTIVITY CO																		YES
AA-9240012	CHINA PROP & CAS REINS CO LTD																		YES
AA-3190770	CHUBB TEMPEST REINS LTD																		YES
AA-1120191	CONVEX INS UK LTD																		YES
AA-3191400	CONVEX RE LTD																		YES
AA-3191190	HAMILTON RE LTD																		YES
AA-3190060	HANNOVER RE (BERMUDA) LTD																		YES
AA-3191489	NECTARIS RE LTD																		YES
AA-1340004	R V VERSICHERUNG AG																		YES
AA-5324100	TAIPING REINS CO LTD																		YES
AA-3191388	VERMEER REINS LTD																		YES
2699999	Total Unauthorized - Other Non-U.S. Insurers																		XXX
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																		XXX
3299999	Total Certified - Affiliates - U.S. Non-Pool																		XXX
3599999	Total Certified - Affiliates - Other (Non-U.S.)																		XXX
3699999	Total Certified - Affiliates																		XXX
CR-3194126	ARCH REINS LTD																		YES
CR-1340125	HANNOVER RUECK SE																		YES
4099999	Total Certified - Other Non-U.S. Insurers																		XXX
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																		XXX
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																		XXX
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																		XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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	Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)											
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												42 Total Overdue Cols. 38+39 +40+41
5099999. Total Reciprocal Jurisdiction - Affiliates																	XXX	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)																		XXX
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		4,670					4,670			4,670								XXX
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																		XXX
9999999 Totals		4,670					4,670			4,670								XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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														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	Complete if Col. 52 = "No"; Otherwise Enter 0				
		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 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%)	66 Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	67 Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)		68 20% of Amount in Col. 67	
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999. Total Authorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
36-2661954	AMERICAN AGRICULTURAL INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47-0574325	BERKLEY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
22-2005057	EVEREST REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-2915260	FARMERS GRP PROP & CAS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
06-0383750	HARTFORD FIRE INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
74-2195939	HOUSTON CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-3138390	NAVIGATORS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
06-1053492	NEW ENGLAND REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47-0698507	ODYSSEY REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
23-1642962	PENNSYLVANIA MANUFACTURERS ASSOC INS	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
23-1740414	R&Q REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
75-1444207	SCOR REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-1675535	SWISS REINS AMER CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
31-0542366	THE CINCINNATI INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-5616275	TRANSATLANTIC REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0999999. Total Authorized - Other U.S. Unaffiliated Insurers				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991310	FLORIDA HURRICANE CATASTROPHE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991162	NEW JERSEY AUTO INS RISK EXCH	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991160	NEW JERSEY UNSATISFIED CLAIM AND JUDGMENT FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9991139	NORTH CAROLINA REINS FACILITY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999. Total Authorized - Pools - Mandatory Pools				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194168	ASPEN BERMUDA LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194122	DAVINCI REINS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190871	LANCASHIRE INS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126435	LLOYD'S SYNDICATE NUMBER 435	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126609	LLOYD'S SYNDICATE NUMBER 609	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126623	LLOYD'S SYNDICATE NUMBER 623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1127183	LLOYD'S SYNDICATE NUMBER 1183	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120085	LLOYD'S SYNDICATE NUMBER 1274	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1127301	LLOYD'S SYNDICATE NUMBER 1301	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120186	LLOYD'S SYNDICATE NUMBER 1947	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120084	LLOYD'S SYNDICATE NUMBER 1955	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128121	LLOYD'S SYNDICATE NUMBER 2121	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128623	LLOYD'S SYNDICATE NUMBER 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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. 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-1128987	LLOYD'S SYNDICATE NUMBER 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1840000	MAPFRE RE COMPANIA DE REASEGUROS SA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190339	RENAISSANCE REINS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1299999	Total Authorized - Other Non-U.S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2299999	Total Unauthorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
43-0613000	SHELTER MUT INS CO	XXX	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	XXX
AA-3194158	ALLIANZ RISK TRANSFER (BERMUDA) LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194128	ALLIED WORLD ASSURANCE CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191298	ANTARES REINS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1780116	CHAUCER INS CO DESIGNATED ACTIVITY CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9240012	CHINA PROP & CAS REINS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190770	CHUBB TEMPEST REINS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120191	CONVEX INS UK LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191400	CONVEX RE LTD	XXX	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	XXX
AA-3190060	HANNOVER RE (BERMUDA) LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191489	NECTARIS RE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1340004	R V VERSICHERUNG AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-5324100	TAIPING REINS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191388	VERMEER REINS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2699999	Total Unauthorized - Other Non-U.S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3299999	Total Certified - Affiliates - U.S. Non-Pool			XXX				XXX	XXX									
3599999	Total Certified - Affiliates - Other (Non-U.S.)			XXX				XXX	XXX									
3699999	Total Certified - Affiliates			XXX				XXX	XXX									
CR-3194126	ARCH REINS LTD	2	04/08/2015	10.0														
CR-1340125	HANNOVER RUECK SE	2	04/13/2015	10.0														
4099999	Total Certified - Other Non-U.S. Insurers			XXX				XXX	XXX									
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX				XXX	XXX									
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5099999	Total Reciprocal Jurisdiction - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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. 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%)	66	67	68	Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
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	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)			XXX				XXX	XXX									
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX				XXX	XXX									
9999999 Totals			XXX				XXX	XXX									

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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)
0499999	Total Authorized - Affiliates - U.S. Non-Pool		XXX	XXX				XXX	XXX	
0799999	Total Authorized - Affiliates - Other (Non-U.S.)		XXX	XXX				XXX	XXX	
0899999	Total Authorized - Affiliates		XXX	XXX				XXX	XXX	
36-2661954	AMERICAN AGRICULTURAL INS CO		XXX	XXX				XXX	XXX	
47-0574325	BERKLEY INS CO		XXX	XXX				XXX	XXX	
22-2005057	EVEREST REINS CO		XXX	XXX				XXX	XXX	
13-2915260	FARMERS GRP PROP & CAS INS CO		XXX	XXX				XXX	XXX	
06-0383750	HARTFORD FIRE INS CO		XXX	XXX				XXX	XXX	
74-2195939	HOUSTON CAS CO		XXX	XXX				XXX	XXX	
13-3138390	NAVIGATORS INS CO		XXX	XXX				XXX	XXX	
06-1053492	NEW ENGLAND REINS CORP		XXX	XXX				XXX	XXX	
47-0698507	ODYSSEY REINS CO		XXX	XXX				XXX	XXX	
23-1642962	PENNSYLVANIA MANUFACTURERS ASSOC INS		XXX	XXX				XXX	XXX	
23-1740414	R&Q REINS CO		XXX	XXX				XXX	XXX	
75-1444207	SCOR REINS CO		XXX	XXX				XXX	XXX	
13-1675535	SWISS REINS AMER CORP		XXX	XXX				XXX	XXX	
31-0542366	THE CINCINNATI INS CO		XXX	XXX				XXX	XXX	
13-5616275	TRANSATLANTIC REINS CO		XXX	XXX				XXX	XXX	
0999999	Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX				XXX	XXX	
AA-9991310	FLORIDA HURRICANE CATASTROPHE FUND		XXX	XXX				XXX	XXX	
AA-9991159	MICHIGAN CATASTROPHIC CLAIMS ASSN		XXX	XXX				XXX	XXX	
AA-9991162	NEW JERSEY AUTO INS RISK EXCH		XXX	XXX				XXX	XXX	
AA-9991160	NEW JERSEY UNSATISFIED CLAIM AND JUDGMENT FUND		XXX	XXX				XXX	XXX	
AA-9991139	NORTH CAROLINA REINS FACILITY		XXX	XXX				XXX	XXX	
1099999	Total Authorized - Pools - Mandatory Pools		XXX	XXX				XXX	XXX	
AA-3194168	ASPEN BERMUDA LTD		XXX	XXX				XXX	XXX	
AA-3194122	DAVINCI REINS LTD		XXX	XXX				XXX	XXX	
AA-3190871	LANCASHIRE INS CO LTD		XXX	XXX				XXX	XXX	
AA-1126435	LLOYD'S SYNDICATE NUMBER 435		XXX	XXX				XXX	XXX	
AA-1126609	LLOYD'S SYNDICATE NUMBER 609		XXX	XXX				XXX	XXX	
AA-1126623	LLOYD'S SYNDICATE NUMBER 623		XXX	XXX				XXX	XXX	
AA-1127084	LLOYD'S SYNDICATE NUMBER 1084		XXX	XXX				XXX	XXX	
AA-1127183	LLOYD'S SYNDICATE NUMBER 1183		XXX	XXX				XXX	XXX	
AA-1120085	LLOYD'S SYNDICATE NUMBER 1274		XXX	XXX				XXX	XXX	
AA-1127301	LLOYD'S SYNDICATE NUMBER 1301		XXX	XXX				XXX	XXX	
AA-1120186	LLOYD'S SYNDICATE NUMBER 1947		XXX	XXX				XXX	XXX	
AA-1120084	LLOYD'S SYNDICATE NUMBER 1955		XXX	XXX				XXX	XXX	
AA-1128010	LLOYD'S SYNDICATE NUMBER 2010		XXX	XXX				XXX	XXX	
AA-1128121	LLOYD'S SYNDICATE NUMBER 2121		XXX	XXX				XXX	XXX	
AA-1128623	LLOYD'S SYNDICATE NUMBER 2623		XXX	XXX				XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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)
AA-1128791 ..	LLOYD'S SYNDICATE NUMBER 2791		XXX	XXX				XXX	XXX	
AA-1128987 ..	LLOYD'S SYNDICATE NUMBER 2987		XXX	XXX				XXX	XXX	
AA-1840000 ..	MAPFRE RE COMPANIA DE REASEGUROS SA		XXX	XXX				XXX	XXX	
AA-3190339 ..	RENAISSANCE REINS LTD		XXX	XXX				XXX	XXX	
1299999.	Total Authorized - Other Non-U.S. Insurers		XXX	XXX				XXX	XXX	
1499999.	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX	XXX				XXX	XXX	
1899999.	Total Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX		XXX	
2199999.	Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX		XXX	
2299999.	Total Unauthorized - Affiliates				XXX	XXX	XXX		XXX	
43-0613000 ..	SHELTER MUT INS CO				XXX	XXX	XXX		XXX	
2399999.	Total Unauthorized - Other U.S. Unaffiliated Insurers				XXX	XXX	XXX		XXX	
AA-3194158 ..	ALLIANZ RISK TRANSFER (BERMUDA) LTD				XXX	XXX	XXX		XXX	
AA-3194128 ..	ALLIED WORLD ASSURANCE CO LTD				XXX	XXX	XXX		XXX	
AA-3191298 ..	ANTARES REINS CO LTD				XXX	XXX	XXX		XXX	
AA-1780116 ..	CHAUCER INS CO DESIGNATED ACTIVITY CO				XXX	XXX	XXX		XXX	
AA-9240012 ..	CHINA PROP & CAS REINS CO LTD				XXX	XXX	XXX		XXX	
AA-3190770 ..	CHUBB TEMPEST REINS LTD				XXX	XXX	XXX		XXX	
AA-1120191 ..	CONVEX INS UK LTD				XXX	XXX	XXX		XXX	
AA-3191400 ..	CONVEX RE LTD				XXX	XXX	XXX		XXX	
AA-3191190 ..	HAMILTON RE LTD				XXX	XXX	XXX		XXX	
AA-3190060 ..	HANNOVER RE (BERMUDA) LTD				XXX	XXX	XXX		XXX	
AA-3191489 ..	NECTARIS RE LTD				XXX	XXX	XXX		XXX	
AA-1340004 ..	R V VERSICHERUNG AG				XXX	XXX	XXX		XXX	
AA-5324100 ..	TAIPING REINS CO LTD				XXX	XXX	XXX		XXX	
AA-3191388 ..	VERMEER REINS LTD				XXX	XXX	XXX		XXX	
2699999.	Total Unauthorized - Other Non-U.S. Insurers				XXX	XXX	XXX		XXX	
2899999.	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX	XXX	XXX		XXX	
3299999.	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3599999.	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3699999.	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
CR-3194126 ..	ARCH REINS LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	
CR-1340125 ..	HANNOVER RUECK SE		XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4099999.	Total Certified - Other Non-U.S. Insurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4299999.	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4699999.	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		XXX	XXX				XXX	XXX	
4999999.	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		XXX	XXX				XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		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)	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 Jurisdiction 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)
5099999. Total Reciprocal Jurisdiction - Affiliates			XXX	XXX				XXX	XXX	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX	XXX				XXX	XXX	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)										
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)										
9999999 Totals										

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 4

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

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
NONE				
Total				

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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.
2.
3.
4.
5.

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.	FLORIDA HURRICANE CATASTROPHE FUND	24,316	6,595	Yes [] No [X]
7.	MICHIGAN CATASTROPHIC CLAIMS ASSN	4,775	914	Yes [] No [X]
8.	NEW JERSEY UNSATISFIED CLAIM AND JUDGMENT FUND	2,069	253	Yes [] No [X]
9.	NORTH CAROLINA REINS FACILITY	1,157	1,278	Yes [] No [X]
10.	BERKLEY INS CO	10	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 AMICA MUTUAL 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)	4,818,758,792		4,818,758,792
2. Premiums and considerations (Line 15)	511,217,196		511,217,196
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	4,669,886		4,669,886
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	259,065,601		259,065,601
6. Net amount recoverable from reinsurers		27,578	27,578
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	5,593,711,475	27,578	5,593,739,053
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	1,543,573,994	27,578	1,543,601,572
10. Taxes, expenses, and other obligations (Lines 4 through 8)	140,772,101		140,772,101
11. Unearned premiums (Line 9)	1,070,947,958		1,070,947,958
12. Advance premiums (Line 10)	13,558,811		13,558,811
13. Dividends declared and unpaid (Line 11.1 and 11.2)	11,591,595		11,591,595
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	174,010		174,010
15. Funds held by company under reinsurance treaties (Line 13)			
16. Amounts withheld or retained by company for account of others (Line 14)	6,689,513		6,689,513
17. Provision for reinsurance (Line 16)			
18. Other liabilities	79,457,156		79,457,156
19. Total liabilities excluding protected cell business (Line 26)	2,866,765,138	27,578	2,866,792,716
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	2,726,946,337	XXX	2,726,946,337
22. Totals (Line 38)	5,593,711,475	27,578	5,593,739,053

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

If yes, give full explanation:

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 AMICA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1A - HOMEOWNERS/FAROWNERS
(\$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.....	169.....		137.....		11.....		9.....	317.....	XXX.....
2. 2014.....	624,028.....	25,407.....	598,621.....	273,395.....		9,967.....		43,096.....		5,753.....	326,457.....	35,519.....
3. 2015.....	691,162.....	24,785.....	666,377.....	489,612.....		13,053.....		59,982.....		7,676.....	562,647.....	56,545.....
4. 2016.....	747,343.....	25,824.....	721,519.....	426,918.....		11,546.....		56,678.....		6,043.....	495,143.....	47,338.....
5. 2017.....	813,957.....	28,845.....	785,112.....	575,757.....	15,503.....	17,872.....	776.....	69,693.....		20,369.....	647,043.....	63,630.....
6. 2018.....	877,501.....	31,325.....	846,176.....	527,275.....		16,313.....		69,892.....		14,299.....	613,480.....	54,387.....
7. 2019.....	929,242.....	31,721.....	897,521.....	499,189.....		13,242.....		73,465.....		7,705.....	585,896.....	45,893.....
8. 2020.....	948,848.....	30,158.....	918,690.....	531,364.....		11,554.....		79,268.....		5,629.....	622,185.....	49,584.....
9. 2021.....	955,360.....	30,587.....	924,773.....	592,496.....		11,548.....		80,627.....		6,448.....	684,670.....	45,879.....
10. 2022.....	985,363.....	31,092.....	954,271.....	535,876.....	5,775.....	9,836.....	575.....	67,652.....		3,067.....	607,013.....	36,952.....
11. 2023.....	1,066,157.....	35,855.....	1,030,302.....	450,723.....		5,691.....		53,243.....		557.....	509,657.....	34,488.....
12. Totals.....	XXX.....	XXX.....	XXX.....	4,902,774.....	21,278.....	120,757.....	1,351.....	653,606.....		77,557.....	5,654,508.....	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.....	604.....				42.....				14.....			661.....	6.....
2. 2014.....	307.....				23.....				2.....			332.....	1.....
3. 2015.....	280.....				31.....				10.....			320.....	4.....
4. 2016.....	369.....				28.....				14.....		407.....	411.....	6.....
5. 2017.....	2,860.....		(999).....		211.....		(97).....		51.....		407.....	2,026.....	21.....
6. 2018.....	4,104.....		(499).....		292.....		(49).....		82.....		1,017.....	3,930.....	34.....
7. 2019.....	6,550.....		(999).....		478.....		(97).....		147.....		1,017.....	6,079.....	61.....
8. 2020.....	10,003.....		(1,498).....		709.....		(146).....		270.....		1,424.....	9,338.....	112.....
9. 2021.....	31,398.....		(1,997).....		2,216.....		(194).....		812.....		3,661.....	32,235.....	337.....
10. 2022.....	62,520.....	5,045.....	13,980.....		4,449.....		1,359.....		2,380.....		3,864.....	79,643.....	988.....
11. 2023.....	172,351.....		41,939.....	18,470.....	11,977.....		4,076.....		17,117.....		8,541.....	228,989.....	7,105.....
12. Totals.....	291,346.....	5,045.....	49,927.....	18,470.....	20,457.....		4,853.....		20,899.....		20,338.....	363,965.....	8,675.....

	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.....	604.....	57.....
2. 2014.....	326,789.....		326,789.....	52.4.....		54.6.....				307.....	25.....
3. 2015.....	562,968.....		562,968.....	81.5.....		84.5.....				280.....	40.....
4. 2016.....	495,554.....		495,554.....	66.3.....		68.7.....				369.....	42.....
5. 2017.....	665,348.....	16,279.....	649,069.....	81.7.....	56.4.....	82.7.....				1,861.....	165.....
6. 2018.....	617,410.....		617,410.....	70.4.....		73.0.....				3,605.....	325.....
7. 2019.....	591,975.....		591,975.....	63.7.....		66.0.....				5,551.....	528.....
8. 2020.....	631,523.....		631,523.....	66.6.....		68.7.....				8,505.....	833.....
9. 2021.....	716,905.....		716,905.....	75.0.....		77.5.....				29,401.....	2,834.....
10. 2022.....	698,051.....	11,395.....	686,656.....	70.8.....	36.7.....	72.0.....				71,455.....	8,188.....
11. 2023.....	757,116.....	18,470.....	738,646.....	71.0.....	51.5.....	71.7.....				195,819.....	33,170.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	317,757.....	46,208.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						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.....	2,818	1,977	334	8	5			
2. 2014.....	675,686	2,563	673,123	460,444	914	24,413	114	64,007		12,205	547,836	94,600
3. 2015.....	679,284	3,061	676,223	520,749	1,588	30,472	123	64,671		12,569	614,181	101,288
4. 2016.....	702,641	3,095	699,546	554,116	1,115	30,458	138	65,608		15,007	648,930	106,227
5. 2017.....	758,588	3,281	755,307	570,778	2,294	32,185	175	66,636		15,190	667,129	108,050
6. 2018.....	807,018	3,752	803,266	580,595	1,066	36,880	196	68,501		15,603	684,713	103,460
7. 2019.....	829,886	3,818	826,068	560,052	1,166	33,870	185	76,388		13,941	668,959	94,202
8. 2020.....	812,633	2,268	810,365	352,240	920	20,246	163	54,151		9,577	425,553	54,276
9. 2021.....	757,205	2,232	754,973	368,751	1,000	15,840	113	56,682		10,340	440,159	60,952
10. 2022.....	717,278	2,016	715,262	328,826	799	8,976	132	46,725		9,035	383,595	61,825
11. 2023.....	766,716	2,225	764,491	179,324	418	3,068	150	32,025		4,714	213,849	57,876
12. Totals	XXX	XXX	XXX	4,478,693	13,258	236,740	1,497	595,398		118,326	5,296,076	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	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	4,847	2,282			853				43		42	3,462	25
2. 2014.....	838	70			120				9		40	897	5
3. 2015.....	2,365				316				28		80	2,709	16
4. 2016.....	5,594				676				52		183	6,323	30
5. 2017.....	9,281	338			1,152				121		324	10,217	70
6. 2018.....	16,779		(1,824)		2,103		(258)		248		403	17,048	143
7. 2019.....	34,918		(3,872)		4,421		(554)		581		530	35,494	335
8. 2020.....	54,014	20	(5,473)		7,011		(775)		935		708	55,692	539
9. 2021.....	109,798	130	(297)		14,366		(49)		2,694		1,428	126,382	1,553
10. 2022.....	158,089	19	36,084		20,638		4,803		7,334		2,423	226,929	4,228
11. 2023.....	231,978	393	154,242		25,971		19,422		35,300		9,111	466,520	20,349
12. Totals	628,501	3,251	178,860		77,628		22,588		47,346		15,272	951,672	27,293

	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.....				XXX.....
2. 2014.....	549,831	1,098	548,733	81.4	42.8	81.5				768	129
3. 2015.....	618,601	1,711	616,890	91.1	55.9	91.2				2,365	344
4. 2016.....	656,505	1,253	655,253	93.4	40.5	93.7				5,594	729
5. 2017.....	680,152	2,807	677,346	89.7	85.5	89.7				8,943	1,274
6. 2018.....	703,023	1,262	701,761	87.1	33.6	87.4				14,955	2,093
7. 2019.....	705,804	1,351	704,453	85.0	35.4	85.3				31,046	4,448
8. 2020.....	482,348	1,103	481,246	59.4	48.6	59.4				48,521	7,171
9. 2021.....	567,784	1,243	566,541	75.0	55.7	75.0				109,372	17,010
10. 2022.....	611,475	950	610,525	85.2	47.1	85.4				194,154	32,775
11. 2023.....	681,330	961	680,369	88.9	43.2	89.0				385,827	80,693
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	804,109	147,563

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						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.....	285		285	150		7			11		17	168	27
3. 2015.....	279		279	87		3			11		10	102	37
4. 2016.....	275		275	119		5			13		3	137	33
5. 2017.....	265		265	87		3			11		2	101	26
6. 2018.....	248		248	75		3			5		1	83	23
7. 2019.....	282		282	68					8		3	76	21
8. 2020.....	196		196	172					6		(1)	178	11
9. 2021.....	172		172	19					4			23	4
10. 2022.....	152		152	38		23			9			70	12
11. 2023.....	135		135	15					1			16	5
12. Totals	XXX	XXX	XXX	830		44			79		35	953	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2014.....	1											1	
3. 2015.....	1											1	
4. 2016.....	1											1	
5. 2017.....	6											6	
6. 2018.....	7		(1)									6	
7. 2019.....	9		(1)									8	
8. 2020.....	8		(2)									6	
9. 2021.....	10											10	
10. 2022.....	314		16		42		2		6			380	1
11. 2023.....	20		61		1		9		17		1	108	3
12. Totals	377		73		43		11		23		1	527	4

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2014.....	169		169	59.3		59.3				1	
3. 2015.....	103		103	36.8		36.8				1	
4. 2016.....	138		138	50.3		50.3				1	
5. 2017.....	107		107	40.4		40.4				6	
6. 2018.....	89		89	35.7		35.7				6	
7. 2019.....	84		84	29.9		29.9				8	
8. 2020.....	184		184	93.8		93.8				6	
9. 2021.....	33		33	19.4		19.4				10	
10. 2022.....	450		450	295.8		295.8				330	50
11. 2023.....	124		124	91.7		91.7				81	27
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	450	77

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed			
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX	XXX	XXX									XXX	
2. 2014.....	60		60	10		3			2			15	1
3. 2015.....	61		61										
4. 2016.....	62		62										
5. 2017.....	62		62										
6. 2018.....	62		62	13					4			17	1
7. 2019.....	61		61			2						2	1
8. 2020.....	59		59										
9. 2021.....	58		58			4						4	1
10. 2022.....	56		56	31		2			7			40	1
11. 2023	52		52										2
12. Totals	XXX	XXX	XXX	54		11			13			78	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.....													
2. 2014.....													
3. 2015.....													
4. 2016.....													
5. 2017.....													
6. 2018.....													
7. 2019.....													
8. 2020.....													
9. 2021.....													
10. 2022.....													
11. 2023	100		41		20		8		8			177	1
12. Totals	100		41		20		8		8			177	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				XXX
2. 2014.....	15		15	25.0		25.0					
3. 2015.....											
4. 2016.....											
5. 2017.....											
6. 2018.....	17		17	27.4		27.4					
7. 2019.....	2		2	3.3		3.3					
8. 2020.....											
9. 2021.....	4		4	6.9		6.9					
10. 2022.....	40		40	71.4		71.4					
11. 2023	177		177	340.4		340.4					
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	141	36

Schedule P - Part 1E - Commercial Multiple Peril

N O N E

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 AMICA MUTUAL 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									XXX
2. 2014.....	4,800	115	4,685	1,714		152		254		140	2,120	XXX
3. 2015.....	4,905	101	4,804	2,445		316		285		97	3,046	XXX
4. 2016.....	5,036	103	4,933	2,361		544		277		37	3,182	XXX
5. 2017.....	5,124	110	5,014	2,929		261		364		155	3,554	XXX
6. 2018.....	5,127	112	5,015	2,464		224		313		166	3,002	XXX
7. 2019.....	5,073	107	4,966	2,097		235		323		43	2,655	XXX
8. 2020.....	5,160	104	5,056	2,415		330		397		99	3,142	XXX
9. 2021.....	5,446	115	5,331	3,165		315		415		86	3,895	XXX
10. 2022.....	5,749	119	5,630	2,882		343		438		217	3,663	XXX
11. 2023.....	5,948	138	5,810	1,678		243		274		27	2,195	XXX
12. Totals	XXX	XXX	XXX	24,150		2,964		3,341		1,067	30,455	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2014.....													
3. 2015.....													
4. 2016.....													
5. 2017.....													
6. 2018.....													
7. 2019.....													
8. 2020.....													
9. 2021.....											4		
10. 2022.....	100		165		14		24		6		27	309	2
11. 2023.....	452		1,015		61		149		100		73	1,777	36
12. Totals	552		1,180		75		173		106		104	2,086	38

	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			XXX		
2. 2014.....	2,120		2,120	44.2		45.3					
3. 2015.....	3,046		3,046	62.1		63.4					
4. 2016.....	3,182		3,182	63.2		64.5					
5. 2017.....	3,554		3,554	69.4		70.9					
6. 2018.....	3,002		3,002	58.5		59.9					
7. 2019.....	2,655		2,655	52.3		53.5					
8. 2020.....	3,142		3,142	60.9		62.1					
9. 2021.....	3,895		3,895	71.5		73.1					
10. 2022.....	3,972		3,972	69.1		70.5				265	43
11. 2023.....	3,972		3,972	66.8		68.4				1,467	311
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	1,732	354

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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.....	631.....		(12).....		40.....		659.....	XXX.....	
2. 2014.....	47,958.....		47,958.....	22,738.....		300.....		1,926.....		24,964.....	180.....	
3. 2015.....	51,915.....		51,915.....	34,708.....		857.....		3,285.....	6.....	38,850.....	234.....	
4. 2016.....	55,768.....		55,768.....	20,793.....		825.....		2,467.....		24,086.....	204.....	
5. 2017.....	62,102.....		62,102.....	29,799.....		671.....		3,472.....	23.....	33,942.....	189.....	
6. 2018.....	67,829.....		67,829.....	25,597.....		479.....		3,211.....		29,287.....	189.....	
7. 2019.....	70,089.....		70,089.....	35,813.....		1,154.....		3,569.....	15.....	40,536.....	215.....	
8. 2020.....	71,293.....		71,293.....	22,390.....		409.....		2,590.....	270.....	25,389.....	191.....	
9. 2021.....	71,591.....		71,591.....	23,564.....		77.....		1,880.....	15.....	25,521.....	156.....	
10. 2022.....	72,851.....		72,851.....	12,101.....		126.....		1,088.....		13,315.....	165.....	
11. 2023.....	74,720.....		74,720.....	3,275.....		2.....		318.....	5.....	3,596.....	77.....	
12. Totals.....	XXX.....	XXX.....	XXX.....	231,409.....		4,889.....		23,846.....	334.....	260,144.....	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.....	411.....				6.....			87.....		504.....	3.....		
2. 2014.....	50.....				1.....			29.....		80.....	1.....		
3. 2015.....			255.....				4.....			259.....			
4. 2016.....	1,381.....				21.....			203.....		1,605.....	7.....		
5. 2017.....	1,100.....				17.....			116.....		1,233.....	4.....		
6. 2018.....	3,517.....		(255).....		53.....		(4).....	290.....		3,602.....	10.....		
7. 2019.....	12,225.....		(1,275).....		184.....		(19).....	755.....		11,870.....	26.....		
8. 2020.....	11,729.....		510.....		177.....		8.....	1,075.....		13,498.....	37.....		
9. 2021.....	22,936.....		(1,020).....		346.....		(15).....	1,539.....		23,786.....	53.....		
10. 2022.....	37,942.....		2,806.....		572.....		42.....	2,498.....		43,860.....	86.....		
11. 2023.....	23,682.....		24,489.....		357.....		369.....	1,598.....		50,495.....	55.....		
12. Totals.....	114,973.....		25,510.....		1,733.....		385.....	8,191.....		150,792.....	282.....		

	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.....	411.....	93.....
2. 2014.....	25,044.....		25,044.....	52.2.....		52.2.....				50.....	30.....
3. 2015.....	39,109.....		39,109.....	75.3.....		75.3.....				255.....	4.....
4. 2016.....	25,691.....		25,691.....	46.1.....		46.1.....				1,381.....	224.....
5. 2017.....	35,175.....		35,175.....	56.6.....		56.6.....				1,100.....	133.....
6. 2018.....	32,889.....		32,889.....	48.5.....		48.5.....				3,262.....	340.....
7. 2019.....	52,407.....		52,407.....	74.8.....		74.8.....				10,950.....	920.....
8. 2020.....	38,887.....		38,887.....	54.5.....		54.5.....				12,239.....	1,259.....
9. 2021.....	49,307.....		49,307.....	68.9.....		68.9.....				21,916.....	1,870.....
10. 2022.....	57,175.....		57,175.....	78.5.....		78.5.....				40,748.....	3,112.....
11. 2023.....	54,090.....		54,090.....	72.4.....		72.4.....				48,171.....	2,324.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	140,483.....	10,309.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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 AMICA MUTUAL 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	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	XXX	XXX	XXX	1,220		200		159		69	1,579	XXX
2. 2022	57,870	1,592	56,278	24,222		551		3,396		296	28,169	XXX
3. 2023	58,571	1,786	56,785	20,668		327		3,129		54	24,124	XXX
4. Totals	XXX	XXX	XXX	46,109		1,078		6,684		419	53,872	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	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	573		600		39		24		22		37	1,258	14
2. 2022	1,590		257		102		10		40		62	1,999	25
3. 2023	5,721		1,287		245		50		499		272	7,802	316
4. Totals	7,884		2,145		386		84		561		371	11,060	355

	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			XXX	1,173	85
2. 2022	30,168		30,168	52.1		53.6				1,847	152
3. 2023	31,927		31,927	54.5		56.2				7,008	795
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	10,029	1,031

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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						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.....	(3,348).....		431.....			99.....		5,106.....	(2,818).....	XXX.....
2. 2022.....	498,821.....	4,389.....	494,432.....	377,975.....		7,877.....			37,366.....		142,248.....	423,219.....	186,733.....
3. 2023.....	558,509.....	5,592.....	552,917.....	389,880.....		6,320.....			37,879.....		84,636.....	434,079.....	179,376.....
4. Totals.....	XXX.....	XXX.....	XXX.....	764,507.....		14,629.....			75,344.....		231,991.....	854,479.....	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.....	979.....		(1,286).....		32.....		11.....		32.....		2,877.....	(231).....	91.....
2. 2022.....	3,761.....		(548).....		102.....		4.....		172.....		5,309.....	3,491.....	487.....
3. 2023.....	87,052.....		(64,819).....		2,031.....		565.....		6,312.....		79,588.....	31,141.....	17,836.....
4. Totals.....	91,792.....		(66,653).....		2,165.....		579.....		6,517.....		87,774.....	34,401.....	18,414.....

	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. 2022.....	426,710.....		426,710.....	85.5.....		86.3.....				3,213.....	278.....
3. 2023.....	465,220.....		465,220.....	83.3.....		84.1.....				22,233.....	8,908.....
4. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	25,139.....	9,261.....

Schedule P - Part 1K - Fidelity/Surety

NONE

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

NONE

Schedule P - Part 1M - International

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

Schedule P - Part 1T - Warranty

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

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.....	56,877	49,251	46,983	46,278	43,341	43,328	43,051	44,003	44,237	43,987	(251)	(16)
2. 2014.....	302,071	293,079	289,711	284,963	283,720	283,292	283,306	283,965	283,804	283,691	(113)	(274)
3. 2015.....	XXX	506,064	508,863	505,533	504,306	503,175	503,790	504,482	504,094	502,976	(1,118)	(1,506)
4. 2016.....	XXX	XXX	449,177	444,579	439,871	437,374	438,244	438,631	439,428	438,861	(567)	230
5. 2017.....	XXX	XXX	XXX	582,807	583,663	589,093	583,053	579,405	579,640	579,325	(315)	(80)
6. 2018.....	XXX	XXX	XXX	XXX	554,478	558,818	547,746	548,225	546,176	547,436	1,260	(789)
7. 2019.....	XXX	XXX	XXX	XXX	XXX	491,028	510,758	521,589	518,366	518,363	(3)	(3,226)
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	554,858	567,247	557,884	551,986	(5,898)	(15,261)
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	640,048	636,194	635,467	(728)	(4,581)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	638,736	616,624	(22,112)	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	668,286	XXX	XXX
12. Totals											(29,845)	(25,502)

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

1. Prior.....	416,185	371,171	344,510	320,370	314,698	310,309	311,967	312,368	310,146	309,499	(647)	(2,869)
2. 2014.....	497,922	505,307	508,081	490,665	488,172	483,650	485,929	485,131	484,706	484,717	10	(415)
3. 2015.....	XXX	544,079	568,549	560,421	544,467	551,177	550,427	550,281	550,543	552,191	1,648	1,910
4. 2016.....	XXX	XXX	586,566	591,368	585,199	580,823	581,832	584,957	587,394	589,593	2,199	4,635
5. 2017.....	XXX	XXX	XXX	611,481	605,632	596,877	605,069	604,579	606,941	610,589	3,648	6,009
6. 2018.....	XXX	XXX	XXX	XXX	624,163	614,599	612,123	625,820	628,923	633,012	4,089	7,192
7. 2019.....	XXX	XXX	XXX	XXX	XXX	608,299	612,267	609,088	620,388	627,484	7,095	18,395
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	446,298	416,140	421,763	426,160	4,396	10,019
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	488,644	506,386	507,165	780	18,522
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	570,404	556,465	(13,939)	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	613,044	XXX	XXX
12. Totals											9,279	63,399

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

1. Prior.....	325	285	285	167	166	168	168	169	168	168	168	(1)
2. 2014.....	128	148	163	157	152	159	158	158	158	158	158	
3. 2015.....	XXX	96	90	85	86	90	91	90	90	91	1	1
4. 2016.....	XXX	XXX	92	108	114	126	125	124	124	125	1	1
5. 2017.....	XXX	XXX	XXX	63	91	100	99	96	96	96		
6. 2018.....	XXX	XXX	XXX	XXX	68	89	86	80	79	84	5	4
7. 2019.....	XXX	XXX	XXX	XXX	XXX	71	81	75	73	76	3	1
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	48	256	178	178		(78)
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	45	29	(16)	(15)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	479	435	(44)	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	106	XXX	XXX
12. Totals											(50)	(87)

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

1. Prior.....	45											
2. 2014.....	59	38	13	13	13	13	13	13	13	13		
3. 2015.....	XXX	44	25									
4. 2016.....	XXX	XXX	44	9								
5. 2017.....	XXX	XXX	XXX	60								
6. 2018.....	XXX	XXX	XXX	XXX	169	13	13	13	13	13		
7. 2019.....	XXX	XXX	XXX	XXX	XXX	69	2	2	2	2		
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	69					
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	123	6	4	(2)	(119)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	99	33	(66)	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	169	XXX	XXX
12. Totals											(68)	(119)

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

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						
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 AMICA MUTUAL 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.....	688	534	718	741	719	827	495	495	495	495		
2. 2014.....	2,033	1,923	1,870	1,858	1,866	1,866	1,866	1,866	1,866	1,866		
3. 2015.....	XXX	2,840	2,740	2,740	2,743	2,761	2,761	2,761	2,761	2,761		
4. 2016.....	XXX	XXX	2,994	2,835	2,620	3,102	2,905	2,905	2,905	2,905		
5. 2017.....	XXX	XXX	XXX	3,114	3,278	3,255	3,150	3,190	3,190	3,190		
6. 2018.....	XXX	XXX	XXX	XXX	3,107	2,931	2,753	2,689	2,689	2,689		
7. 2019.....	XXX	XXX	XXX	XXX	XXX	2,574	2,447	2,332	2,332	2,332		
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	3,698	2,955	2,741	2,745	4	(210)
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,426	3,457	3,480	23	(946)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,745	3,528	(1,217)	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,598	XXX	XXX
12. Totals											(1,190)	(1,156)

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

1. Prior.....	47,780	49,060	38,871	36,521	38,079	35,693	36,323	36,373	37,820	36,764	(1,056)	392
2. 2014.....	32,307	35,763	29,380	25,528	25,434	23,305	23,112	23,089	23,687	23,089	(598)	(1)
3. 2015.....	XXX	41,747	47,229	44,779	40,835	36,145	35,584	36,313	36,162	35,824	(338)	(489)
4. 2016.....	XXX	XXX	30,655	29,190	29,038	23,854	21,058	21,375	21,766	23,020	1,254	1,645
5. 2017.....	XXX	XXX	XXX	29,074	27,312	25,305	31,812	32,107	33,271	31,587	(1,684)	(520)
6. 2018.....	XXX	XXX	XXX	XXX	23,866	24,998	32,317	26,524	27,673	29,387	1,714	2,863
7. 2019.....	XXX	XXX	XXX	XXX	XXX	40,004	37,865	39,553	46,725	48,082	1,357	8,529
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	29,183	33,272	37,820	35,222	(2,598)	1,950
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44,367	45,172	45,888	716	1,521
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45,810	53,589	7,779	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52,174	XXX	XXX
12. Totals											6,546	15,890

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 AMICA MUTUAL 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	9,216	12,079	11,400	(679)	2,184
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25,327	26,733	1,405	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	28,298	XXX	XXX
4. Totals											727	2,184

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	67,581	8,542	1,454	(7,088)	(66,128)
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	464,454	389,171	(75,283)	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	421,028	XXX	XXX
4. Totals											(82,371)	(66,128)

SCHEDULE P - PART 2K - FIDELITY/SURETY

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											XXX	XXX

NONE

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											XXX	XXX

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
12. Totals											XXX	XXX

NONE

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

N O N E

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

N O N E

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

N O N E

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

N O N E

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

N O N E

Schedule P - Part 2T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

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.....	21,075	30,273	34,725	38,569	40,684	41,962	42,480	43,034	43,340	1,201	2,208
2. 2014.....	210,772	261,277	272,507	276,811	279,943	281,280	282,725	283,154	283,342	283,361	24,730	10,788
3. 2015.....	XXX	387,078	468,552	486,819	494,290	499,382	502,006	503,236	503,624	502,665	41,805	14,736
4. 2016.....	XXX	XXX	326,896	408,984	423,502	431,571	434,757	436,301	438,069	438,465	33,590	13,742
5. 2017.....	XXX	XXX	XXX	416,971	536,022	565,089	567,838	573,028	576,189	577,350	43,863	19,746
6. 2018.....	XXX	XXX	XXX	XXX	409,111	515,643	530,488	536,428	540,528	543,588	39,223	15,130
7. 2019.....	XXX	XXX	XXX	XXX	XXX	369,032	474,072	499,437	507,123	512,431	32,586	13,246
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	400,215	510,782	534,271	542,918	35,998	13,474
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	421,994	577,814	604,044	32,315	13,227
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	391,834	539,361	25,461	10,503
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	456,413	19,310	8,073

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

1. Prior.....	000.....	152,687	234,334	271,305	289,062	299,767	302,409	304,174	304,913	306,080	6,186	11,770
2. 2014.....	186,828	332,748	409,348	449,806	470,655	478,206	480,261	482,541	483,120	483,829	67,460	27,135
3. 2015.....	XXX	206,672	373,971	452,225	500,762	527,407	537,759	543,072	546,756	549,510	72,639	28,633
4. 2016.....	XXX	XXX	220,543	399,304	491,457	538,479	558,505	570,753	578,190	583,322	75,590	30,607
5. 2017.....	XXX	XXX	XXX	222,994	410,958	500,358	550,167	576,738	593,386	600,494	75,933	32,047
6. 2018.....	XXX	XXX	XXX	XXX	228,816	416,816	502,860	557,792	596,834	616,212	72,587	30,730
7. 2019.....	XXX	XXX	XXX	XXX	XXX	222,576	401,773	497,181	554,846	592,571	65,257	28,610
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	142,298	258,527	322,632	371,402	36,799	16,938
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	152,409	301,997	383,477	39,815	19,584
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	169,922	336,870	37,880	19,717
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	181,824	24,832	12,695

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

1. Prior.....	000.....	34	44	155	160	167	168	168	168	168	2	2
2. 2014.....	47	102	119	140	147	156	157	157	157	157	18	9
3. 2015.....	XXX	35	64	71	77	86	89	89	90	90	21	16
4. 2016.....	XXX	XXX	26	66	85	110	118	121	123	124	25	8
5. 2017.....	XXX	XXX	XXX	31	50	73	81	85	88	90	15	11
6. 2018.....	XXX	XXX	XXX	XXX	22	56	63	70	74	78	13	10
7. 2019.....	XXX	XXX	XXX	XXX	XXX	36	50	57	64	68	11	10
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	18	23	169	172	8	3
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	15	19	3	1
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	61	7	4
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15	2	

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

1. Prior.....	000.....											
2. 2014.....		13	13	13	13	13	13	13	13	13	1	
3. 2015.....	XXX											
4. 2016.....	XXX	XXX										
5. 2017.....	XXX	XXX	XXX									
6. 2018.....	XXX	XXX	XXX	XXX		13	13	13	13	13	1	
7. 2019.....	XXX	XXX	XXX	XXX	XXX		2	2	2	2		1
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4	4		1
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	33	1	
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			1

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

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 AMICA MUTUAL INSURANCE COMPANY

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	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.....	478.....	483.....	490.....	495.....	495.....	495.....	495.....	495.....	495.....	XXX.....	XXX.....
2. 2014.....	1,429.....	1,820.....	1,830.....	1,866.....	1,866.....	1,866.....	1,866.....	1,866.....	1,866.....	1,866.....	XXX.....	XXX.....
3. 2015.....	XXX.....	1,979.....	2,259.....	2,737.....	2,757.....	2,761.....	2,761.....	2,761.....	2,761.....	2,761.....	XXX.....	XXX.....
4. 2016.....	XXX.....	XXX.....	1,767.....	2,324.....	2,575.....	2,832.....	2,905.....	2,905.....	2,905.....	2,905.....	XXX.....	XXX.....
5. 2017.....	XXX.....	XXX.....	XXX.....	2,287.....	3,140.....	3,158.....	3,189.....	3,190.....	3,190.....	3,190.....	XXX.....	XXX.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	2,103.....	2,756.....	2,753.....	2,689.....	2,689.....	2,689.....	XXX.....	XXX.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,772.....	2,235.....	2,332.....	2,332.....	2,332.....	XXX.....	XXX.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,305.....	2,647.....	2,741.....	2,745.....	XXX.....	XXX.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,461.....	3,457.....	3,480.....	XXX.....	XXX.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,758.....	3,225.....	XXX.....	XXX.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,921.....	XXX.....	XXX.....

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

1. Prior.....	000.....	16,869.....	23,421.....	28,981.....	30,427.....	34,306.....	35,579.....	35,705.....	35,728.....	36,347.....	62.....	294.....
2. 2014.....	2,315.....	8,524.....	16,138.....	18,599.....	21,329.....	22,046.....	22,046.....	23,038.....	23,038.....	23,038.....	69.....	110.....
3. 2015.....	XXX.....	2,613.....	16,233.....	25,678.....	28,984.....	31,441.....	33,654.....	34,262.....	35,265.....	35,565.....	101.....	133.....
4. 2016.....	XXX.....	XXX.....	1,091.....	8,506.....	15,435.....	17,082.....	17,854.....	17,867.....	18,342.....	21,618.....	68.....	129.....
5. 2017.....	XXX.....	XXX.....	XXX.....	60.....	9,390.....	14,432.....	20,751.....	25,975.....	28,678.....	30,470.....	89.....	96.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	2,041.....	9,548.....	13,916.....	19,270.....	22,320.....	26,076.....	75.....	104.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5,727.....	13,443.....	19,600.....	29,019.....	36,967.....	78.....	111.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5,339.....	9,703.....	17,611.....	22,799.....	59.....	95.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5,503.....	14,087.....	23,641.....	44.....	59.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,019.....	12,227.....	27.....	52.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,277.....	8.....	14.....

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 AMICA MUTUAL 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	8,744	10,164	XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,028	24,773	XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,995	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	4,634	1,717	16,193	7,041
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	368,967	385,852	153,351	32,895
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	396,200	136,305	25,235

SCHEDULE P - PART 3K - FIDELITY/SURETY

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

NONE

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

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

NONE

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 3T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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.....	4,071	459	71	1,084	105	(456)	(806)	23		
2. 2014.....	9,498	1,225	271	(913)	(362)	(442)	(503)	33	64	
3. 2015.....	XXX	9,661	572	(798)	(1,115)	(1,011)	(819)			
4. 2016.....	XXX	XXX	7,431	399	(3,041)	(1,479)	(682)			
5. 2017.....	XXX	XXX	XXX	20,361	(5,272)	(3,004)	1,501			(1,096)
6. 2018.....	XXX	XXX	XXX	XXX	19,870	(6,214)	(2,047)	828		(548)
7. 2019.....	XXX	XXX	XXX	XXX	XXX	(852)	(3,959)	828	(3,850)	(1,096)
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	21,023	3,312	963	(1,644)
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	77,835	(8,662)	(2,191)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	65,899	15,339
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,545

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

1. Prior.....	41,612	3,686	85	(6,901)	(6,578)	(3,402)	(244)	735		
2. 2014.....	74,343	21,531	3,254	(8,297)	(6,098)	(5,621)	(999)			
3. 2015.....	XXX	80,593	22,031	(9,065)	(15,605)	(7,629)	(2,996)	(2,206)	(1,527)	
4. 2016.....	XXX	XXX	84,799	23,160	(18,617)	(12,603)	(7,989)	(5,147)	(1,527)	
5. 2017.....	XXX	XXX	XXX	134,914	27,629	(18,120)	(10,741)	(11,205)	(4,581)	
6. 2018.....	XXX	XXX	XXX	XXX	143,783	25,387	(14,603)	(16,370)	(8,247)	(2,082)
7. 2019.....	XXX	XXX	XXX	XXX	XXX	147,484	31,029	(16,223)	(9,290)	(4,426)
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	146,456	17,007	(6,244)	(6,248)
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	133,399	32,467	(346)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	180,560	40,887
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	173,664

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

1. Prior.....	14	1								
2. 2014.....	26	7	1							
3. 2015.....	XXX	27	6						(1)	
4. 2016.....	XXX	XXX	24		(1)			(1)	(1)	
5. 2017.....	XXX	XXX	XXX	4	1			(2)	(2)	
6. 2018.....	XXX	XXX	XXX	XXX	3			(4)	(5)	(1)
7. 2019.....	XXX	XXX	XXX	XXX	XXX	1		(4)	(5)	(1)
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	2	2	(3)	(2)
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25	15	
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	83	18
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	70

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

1. Prior.....	45									
2. 2014.....	45	25								
3. 2015.....	XXX	44	25							
4. 2016.....	XXX	XXX	44	9						
5. 2017.....	XXX	XXX	XXX	60						
6. 2018.....	XXX	XXX	XXX	XXX	49					
7. 2019.....	XXX	XXX	XXX	XXX	XXX	69				
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	69			
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	54	2	
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	65	
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	49

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	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 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.....	74			30		.97				
2. 2014.....	280	62		(8)						
3. 2015.....	XXX	298	59	(8)	(14)					
4. 2016.....	XXX	XXX	288	52	(11)	.79				
5. 2017.....	XXX	XXX	XXX	302	59	49	(39)			
6. 2018.....	XXX	XXX	XXX	XXX	340	167				
7. 2019.....	XXX	XXX	XXX	XXX	XXX	587	109			
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	921	139		
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,021		
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,181	189
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,164

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

1. Prior.....	7,269	3,994	2,632	911	447	(484)	(55)			
2. 2014.....	8,533	2,150	1,645	(152)	149	(242)	(274)		598	
3. 2015.....	XXX	9,217	2,303	2,126	(149)	(1,699)	(493)		897	259
4. 2016.....	XXX	XXX	9,868	2,734		(81)	(657)	(302)	(598)	
5. 2017.....	XXX	XXX	XXX	9,568	1,937	(2,750)	(1,315)	(1,409)		
6. 2018.....	XXX	XXX	XXX	XXX	12,517	3,639	(2,136)	(805)	(299)	(259)
7. 2019.....	XXX	XXX	XXX	XXX	XXX	9,704	(876)	(4,327)	(897)	(1,294)
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	11,282	1,006	1,794	518
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,899	6,878	(1,035)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,530	2,848
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,858

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
**SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
 EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	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	2,609	1,195	624
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,403	267
3. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,337

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,921	331	(1,275)
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,655	(544)
3. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(64,255)

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

NONE

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

NONE

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	

NONE

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 4T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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.....	4,404	738	257	84	59	35	17	4	3	4
2. 2014.....	19,226	24,022	24,467	24,598	24,660	24,692	24,715	24,724	24,729	24,730
3. 2015.....	XXX	34,292	40,697	41,338	41,550	41,674	41,753	41,789	41,807	41,805
4. 2016.....	XXX	XXX	25,920	32,218	33,036	33,334	33,452	33,529	33,580	33,590
5. 2017.....	XXX	XXX	XXX	34,725	42,196	43,157	43,592	43,766	43,839	43,863
6. 2018.....	XXX	XXX	XXX	XXX	31,544	38,220	38,863	39,088	39,181	39,223
7. 2019.....	XXX	XXX	XXX	XXX	XXX	24,877	31,294	32,187	32,483	32,586
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	27,976	34,967	35,760	35,998
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,911	31,552	32,315
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,433	25,461
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19,310

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.....	936	373	173	102	50	40	23	17	11	6
2. 2014.....	4,552	566	216	100	39	26	9	8	2	1
3. 2015.....	XXX	5,576	726	297	124	62	33	14	6	4
4. 2016.....	XXX	XXX	5,333	786	290	112	71	39	13	6
5. 2017.....	XXX	XXX	XXX	6,428	903	396	212	78	38	21
6. 2018.....	XXX	XXX	XXX	XXX	5,715	730	240	125	57	34
7. 2019.....	XXX	XXX	XXX	XXX	XXX	5,184	730	282	135	61
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	5,906	835	321	112
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,920	942	337
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,248	988
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,105

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.....	2,250	515	192	68	50	46	18	3	5	
2. 2014.....	32,769	35,088	35,335	35,421	35,458	35,486	35,499	35,511	35,518	35,519
3. 2015.....	XXX	52,344	55,756	56,183	56,331	56,439	56,509	56,533	56,547	56,545
4. 2016.....	XXX	XXX	42,700	46,307	46,859	47,096	47,213	47,279	47,326	47,338
5. 2017.....	XXX	XXX	XXX	57,961	62,222	63,000	63,436	63,540	63,608	63,630
6. 2018.....	XXX	XXX	XXX	XXX	49,798	53,690	54,096	54,273	54,342	54,387
7. 2019.....	XXX	XXX	XXX	XXX	XXX	41,089	44,923	45,574	45,806	45,893
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	45,357	48,991	49,458	49,584
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	42,053	45,490	45,879
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33,159	36,952
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34,488

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	20,732	4,019	1,288	490	233	111	27	10	4	4
2. 2014.....	46,152	63,663	66,149	66,986	67,241	67,378	67,426	67,448	67,454	67,460
3. 2015.....	XXX	48,993	68,242	71,190	72,071	72,393	72,545	72,600	72,624	72,639
4. 2016.....	XXX	XXX	50,973	71,130	74,160	75,041	75,355	75,492	75,565	75,590
5. 2017.....	XXX	XXX	XXX	50,348	71,126	74,300	75,282	75,664	75,853	75,933
6. 2018.....	XXX	XXX	XXX	XXX	48,073	67,879	70,979	71,941	72,386	72,587
7. 2019.....	XXX	XXX	XXX	XXX	XXX	44,300	61,188	63,845	64,828	65,257
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	25,249	34,488	36,151	36,799
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25,110	37,679	39,815
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,282	37,880
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,832

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.....	7,079	2,504	1,093	514	251	113	71	55	36	25
2. 2014.....	24,316	4,330	1,503	576	255	105	46	22	13	5
3. 2015.....	XXX	26,305	4,854	1,682	682	282	118	55	33	16
4. 2016.....	XXX	XXX	27,748	5,038	1,690	662	308	142	68	30
5. 2017.....	XXX	XXX	XXX	28,807	5,504	1,957	821	370	146	70
6. 2018.....	XXX	XXX	XXX	XXX	27,765	5,339	1,987	905	373	143
7. 2019.....	XXX	XXX	XXX	XXX	XXX	23,402	4,710	1,978	847	335
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	13,261	3,016	1,261	539
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,369	3,905	1,553
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19,806	4,228
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,349

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.....	6,236	1,007	370	183	108	42	11	12	(3)	4
2. 2014.....	88,149	93,533	94,225	94,469	94,545	94,586	94,600	94,601	94,601	94,600
3. 2015.....	XXX	93,781	100,022	100,869	101,140	101,226	101,264	101,274	101,283	101,288
4. 2016.....	XXX	XXX	98,311	105,061	105,857	106,102	106,183	106,208	106,225	106,227
5. 2017.....	XXX	XXX	XXX	99,228	106,657	107,608	107,888	107,964	108,019	108,050
6. 2018.....	XXX	XXX	XXX	XXX	94,938	102,081	103,015	103,309	103,405	103,460
7. 2019.....	XXX	XXX	XXX	XXX	XXX	86,744	93,036	93,875	94,132	94,202
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	49,941	53,503	54,100	54,276
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	55,316	60,177	60,952
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56,425	61,825
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	57,876

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	10	2	(1)	1						
2. 2014.....	10	15	16	17	18	18	18	18	18	18
3. 2015.....	XXX	13	21	21	21	21	21	21	21	21
4. 2016.....	XXX	XXX	13	22	25	25	25	25	25	25
5. 2017.....	XXX	XXX	XXX	10	14	15	15	15	15	15
6. 2018.....	XXX	XXX	XXX	XXX	9	12	13	13	13	13
7. 2019.....	XXX	XXX	XXX	XXX	XXX	7	10	11	11	11
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	6	6	8	8
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	3	3
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	7
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2

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

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	5		(1)							
2. 2014.....	25	28	27	27	27	27	27	27	27	27
3. 2015.....	XXX	31	38	37	37	37	37	37	37	37
4. 2016.....	XXX	XXX	26	33	33	33	33	33	33	33
5. 2017.....	XXX	XXX	XXX	19	24	26	26	26	26	26
6. 2018.....	XXX	XXX	XXX	XXX	21	23	23	23	23	23
7. 2019.....	XXX	XXX	XXX	XXX	XXX	18	20	21	21	21
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	13	11	11	11
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	4	4
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	12
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

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

SECTION 1

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

SECTION 2

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

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

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

NONE

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

NONE

Schedule P - Part 5E - Commercial Multiple Peril - Section 3

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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.....	31	45	20	9	5	(19)	1			1
2. 2014.....	7	31	48	54	65	67	67	69	69	69
3. 2015.....	XXX	24	50	67	79	91	96	98	99	101
4. 2016.....	XXX	XXX	6	26	45	57	62	62	64	68
5. 2017.....	XXX	XXX	XXX	3	31	49	66	80	87	89
6. 2018.....	XXX	XXX	XXX	XXX	8	26	38	49	61	75
7. 2019.....	XXX	XXX	XXX	XXX	XXX	5	21	41	62	78
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	8	18	35	59
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9	28	44
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	27
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8

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.....	177	125	82	71	63	8	7	6	3	3
2. 2014.....	49	46	25	21	7	3	4	1	1	1
3. 2015.....	XXX	64	59	46	24	12	3	1		
4. 2016.....	XXX	XXX	69	62	51	23	15	11	11	7
5. 2017.....	XXX	XXX	XXX	50	57	52	33	18	9	4
6. 2018.....	XXX	XXX	XXX	XXX	51	58	50	41	24	10
7. 2019.....	XXX	XXX	XXX	XXX	XXX	65	74	66	46	26
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	40	70	54	37
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	55	61	53
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56	86
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	55

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.....	84	45	28	13	7	5	2			1
2. 2014.....	85	127	157	170	177	178	180	180	180	180
3. 2015.....	XXX	119	174	206	222	229	231	232	232	234
4. 2016.....	XXX	XXX	91	135	167	186	196	198	203	204
5. 2017.....	XXX	XXX	XXX	67	130	164	180	186	188	189
6. 2018.....	XXX	XXX	XXX	XXX	77	130	155	172	180	189
7. 2019.....	XXX	XXX	XXX	XXX	XXX	89	146	184	205	215
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	62	127	158	191
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	81	129	156
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	78	165
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	77

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

Schedule P - Part 5T - Warranty - Section 1

NONE

Schedule P - Part 5T - Warranty - Section 2

NONE

Schedule P - Part 5T - Warranty - Section 3

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
1. Prior.....											
2. 2014.....	285	285	285	285	285	285	285	285	285	285	
3. 2015.....	XXX	279	279	279	279	279	279	279	279	279	
4. 2016.....	XXX	XXX	275	275	275	275	275	275	275	275	
5. 2017.....	XXX	XXX	XXX	265	265	265	265	265	265	265	
6. 2018.....	XXX	XXX	XXX	XXX	248	248	248	248	248	248	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	282	282	282	282	282	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	196	196	196	196	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	172	172	172	
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	152	152	
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	135	135
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	135
13. Earned Premiums (Sch P-Pt. 1)	285	279	275	265	248	282	196	172	152	135	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	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		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

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

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.....	60	60	60	60	60	60	60	60	60	60	
3. 2015.....	XXX	61	61	61	61	61	61	61	61	61	
4. 2016.....	XXX	XXX	62	62	62	62	62	62	62	62	
5. 2017.....	XXX	XXX	XXX	62	62	62	62	62	62	62	
6. 2018.....	XXX	XXX	XXX	XXX	62	62	62	62	62	62	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	61	61	61	61	61	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	59	59	59	59	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	58	58	58	
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56	56	
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52	52
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52
13. Earned Premiums (Sch P-Pt. 1)	60	61	62	62	62	61	59	58	56	52	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	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		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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 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	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		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 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	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		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

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

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.....	47,958	47,958	47,958	47,958	47,958	47,958	47,958	47,958	47,958	47,958	
3. 2015.....	XXX	51,915	51,915	51,915	51,915	51,915	51,915	51,915	51,915	51,915	
4. 2016.....	XXX	XXX	55,768	55,768	55,768	55,768	55,768	55,768	55,768	55,768	
5. 2017.....	XXX	XXX	XXX	62,102	62,102	62,102	62,102	62,102	62,102	62,102	
6. 2018.....	XXX	XXX	XXX	XXX	67,829	67,829	67,829	67,829	67,829	67,829	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	70,089	70,089	70,089	70,089	70,089	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	71,293	71,293	71,293	71,293	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	71,591	71,591	71,591	
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	72,851	72,851	
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	74,720	74,720
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	74,720
13. Earned Premiums (Sch P-Pt. 1)	47,958	51,915	55,768	62,102	67,829	70,089	71,293	71,591	72,851	74,720	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	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		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B

NONE

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B

NONE

Schedule P - Part 6M - International - Section 1

NONE

Schedule P - Part 6M - International - Section 2

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

SCHEDULE P INTERROGATORIES

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

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

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

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

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

5. What were the net premiums in force at the end of the year for:
(in thousands of dollars)

5.1 Fidelity
5.2 Surety

6. Claim count information is reported per claim or per claimant (Indicate which)per claimant.....
If not the same in all years, explain in Interrogatory 7.

- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [X] No []

- 7.2 (An extended statement may be attached.)

Effective for 2023, the Company has revised its loss reserve process by recording reserves net of anticipated salvage and subrogation recoveries as permitted by NAIC Statutory Accounting Principles and the State of Rhode Island. This has resulted in a reduction to Direct and Assumed Bulk + IBNR Losses Unpaid (Part 1, Column 15) totaling \$123,861,599 as of December 31, 2023. Refer to Part 1, Column 23 for break out of anticipated salvage and subrogation by line of business and accident year. Notable catastrophe losses for the 2022 accident year include Hurricane Ian and Winter Storm Elliot, driving net incurred losses of \$75,000,337 and \$34,611,116, respectively. These figures include outstanding losses of \$26.1M for Hurricane Ian as of December 31, 2023. Hurricane Ian has shown favorable development of \$25.0 million while Winter Storm Elliot has shown adverse development of \$14.6 million. The Company expects to recover approximately \$24.2M related to Hurricane Ian through contracted reinsurance programs, including the Florida Hurricane Catastrophe Fund (FHCF) and the Florida Reinsurance to Assist Policyholders (RAP) program. In 2023, there were catastrophe losses related to the Texas Hailstorm event and New England Winter Storm, driving net incurred losses of \$22,500,514 and \$25,000,458, respectively.

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

Allocated by States and Territories

States, Etc.	Direct Business Only					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 AMICA MUTUAL 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)
19976	05-0348344	Amica Mutual Insurance Company	1,700,000	(27,000,000)			18,675,481	(3,749,804)			(10,374,323)	(68,750,337)
72222	05-0340166	Amica Life Insurance Company		27,000,000			(6,985,192)				20,014,808	
12287	26-0115568	Amica Property and Casualty Insurance Company					(9,687,803)	3,749,804			(5,937,999)	68,750,337
	05-0430401	Amica General Agency, LLC	(1,700,000)				(2,002,486)				(3,702,486)	
9999999 Control Totals												
									XXX			

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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?	NO
35. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	NO
36. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO
37. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING	
38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

Explanations:

- 11.
- 12.
- 13.
- 14.
- 15.
- 16.
- 17.
- 18.
- 21.
- 22.
- 23.
- 24.
- 25.
- 26.
- 27.
- 30.
- 31.
- 32.
- 33.
- 34.
- 35.
- 36.
- 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 AMICA MUTUAL 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]



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



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



36. Private Flood Insurance Supplement [Document Identifier 560]



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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
2504. Travel advances	10,380	10,380		
2505. Postage inventory	940,484	940,484		
2506. Prepaid expenses	26,267,700	26,267,700		
2507. Prepaid pension contribution	793,445,022	400,405,973	393,039,049	348,700,185
2508. Pension overfunded asset	(393,039,049)		(393,039,049)	(348,700,185)
2509. Miscellaneous deposits	3,677,433	2,082,774	1,594,659	5,448,637
2510. Receivable for other surcharges	205,572		205,572	299,212
2511. Miscellaneous receivable	14,010,569		14,010,569	10,284,483
2512. Prepaid retirees' medical expense	62,374,391	62,374,391		
2513. Prepaid Retired Life Reserve	7,543,239	7,543,239		
2597. Summary of remaining write-ins for Line 25 from overflow page	515,435,741	499,624,941	15,810,800	16,032,332

Additional Write-ins for Statement of Income Line 37

	1 Current Year	2 Prior Year
3704. Change in pension overfunded asset	(44,338,864)	(96,212,383)
3705. Change in retired life reserve overfunded asset	(2,320,167)	13,908,893
3706. Change in unfunded retired life benefit liability	(302,232)	2,994,530
3707. Change in retiree medical benefit liability	(460,941)	12,851,439
3708. Miscellaneous surplus adjustment		(29,142)
3797. Summary of remaining write-ins for Line 37 from overflow page	(47,422,204)	(66,486,663)

Additional Write-ins for Exhibit of Nonadmitted Assets Line 25

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
2504. Prepaid Pension Contribution	400,405,973	436,485,928	36,079,955
2505. Miscellaneous Deposits	2,082,774	2,275,573	192,799
2506. Amica Companies Supplemental Retirement Trust	23,240,548	22,650,931	(589,617)
2507. Prepaid Retirees' Medical Expense	62,374,391	59,680,997	(2,693,394)
2508. Prepaid Retired Life Reserve	7,543,239	9,475,302	1,932,063
2597. Summary of remaining write-ins for Line 25 from overflow page	495,646,925	530,568,731	34,921,806



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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 0028

NAIC Company Code 19976

	Direct Business Only			
	Prior Year	Current Year		
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
1. Completed operations				
2. Errors & omissions (E&O)				
3. Directors & officers (D&O)				
4. Environmental liability				
5. Excess workers' compensation				
6. Commercial excess & umbrella				
7. Personal umbrella	73,692,139	76,765,925	44,185,843	114,972,511
8. Employment liability				
9. Aggregate write-ins for facilities & premises (CGL)				
10. Internet & cyber liability				
11. Aggregate write-ins for other				
12. Total ASL 17 - other liability (sum of Lines 1 through 11)	73,692,139	76,765,925	44,185,843	114,972,511
DETAILS OF WRITE-INS				
0901.				
0902.				
0903.				
0998. Summary of remaining write-ins for Line 9 from overflow page				
0999. Totals (Lines 0901 thru 0903 plus 0998)(Line 9 above)				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)				



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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: Alabama

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
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FOR THE STATE OF: Alaska

NAIC Group Code 0028

NAIC Company Code 19976

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



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
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FOR THE STATE OF: Arizona

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Arkansas

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: California

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Colorado

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Connecticut

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Delaware

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: District of Columbia

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Florida

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Georgia

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Hawaii

NAIC Group Code 0028

NAIC Company Code 19976

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



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FOR THE STATE OF: Idaho

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Illinois

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Indiana

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Iowa

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Kansas

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Kentucky

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Louisiana

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Maine

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Maryland

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
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FOR THE STATE OF: Massachusetts

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
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FOR THE STATE OF: Michigan

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
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FOR THE STATE OF: Minnesota

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Mississippi

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Missouri

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Montana

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Nebraska

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Nevada

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: New Hampshire

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: New Jersey

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
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FOR THE STATE OF: New Mexico

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: New York

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: North Carolina

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: North Dakota

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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FOR THE STATE OF: Ohio

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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: Oklahoma

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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: Oregon

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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: Pennsylvania

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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 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: South Carolina

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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: South Dakota

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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: Tennessee

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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: Texas

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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: Utah

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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FOR THE STATE OF: Vermont

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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 (To Be Filed by March 1)

FOR THE STATE OF: Virginia

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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

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 (To Be Filed by March 1)

FOR THE STATE OF: Washington

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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: West Virginia

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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 (To Be Filed by March 1)

FOR THE STATE OF: Wisconsin

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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 (To Be Filed by March 1)

FOR THE STATE OF: Wyoming

NAIC Group Code 0028

NAIC Company Code 19976

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	YES
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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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: American Samoa

NAIC Group Code 0028

NAIC Company Code 19976

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



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL INSURANCE COMPANY
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FOR THE STATE OF: Guam

NAIC Group Code 0028

NAIC Company Code 19976

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



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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: Puerto Rico

NAIC Group Code 0028

NAIC Company Code 19976

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



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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: U.S. Virgin Islands

NAIC Group Code 0028

NAIC Company Code 19976

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



SUPPLEMENT FOR THE YEAR 2023 OF THE AMICA MUTUAL 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: Northern Mariana Islands

NAIC Group Code 0028

NAIC Company Code 19976

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



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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: Canada

NAIC Group Code 0028

NAIC Company Code 19976

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