



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT
For the Year Ended December 31, 2024
OF THE CONDITION AND AFFAIRS OF THE

PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

NAIC Group Code	02698	02698	NAIC Company Code	15647	Employer's ID Number	47-2511641
	(Current Period)	(Prior Period)				
Organized under the Laws of	District of Columbia			State of Domicile or Port of Entry	District of Columbia	
Country of Domicile	United States					
Incorporated/Organized	01/01/2015			Commenced Business	11/01/2015	
Statutory Home Office	1050 CONNECTICUT AVENUE, N.W. SUITE 1100			WASHINGTON, DC, US 20036-5403		
	(Street and Number)			(City or Town, State, Country and Zip Code)		
Main Administrative Office	100 BROOKWOOD PLACE			BIRMINGHAM, AL, US 35209	205-877-4400	
	(Street and Number)			(City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)	
Mail Address	PO BOX 590009			BIRMINGHAM, AL, US 35259-0009		
	(Street and Number or P.O. Box)			(City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	100 BROOKWOOD PLACE			BIRMINGHAM, AL, US 35209	205-877-4400	
	(Street and Number)			(City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)	
Internet Web Site Address	www.proassurance.com					
Statutory Statement Contact	ELAINE MARIE SPARKS			615-301-1445		
	(Name)			(Area Code) (Telephone Number) (Extension)		
	FinancialFilings@proassurance.com			615-324-9169		
	(E-Mail Address)			(Fax Number)		

OFFICERS

Name	Title	Name	Title
ROBERT DAVID FRANCIS	PRESIDENT AND CHAIRMAN	KATHRYN ANNE NEVILLE	SECRETARY
DANA SHANNON HENDRICKS	TREASURER		

OTHER OFFICERS

DIRECTORS OR TRUSTEES			
ROBERT DAVID FRANCIS	MARY TODD PETERSON	RICHARD WALTER IRONS	

State of ALABAMA
County of JEFFERSON

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.

ROBERT DAVID FRANCIS	KATHRYN ANNE NEVILLE	DANA SHANNON HENDRICKS
PRESIDENT AND CHAIRMAN	SECRETARY	TREASURER

Subscribed and sworn to before me
this 18th day of FEBRUARY, 2025

LAQUITA JACKSON
NOTARY PUBLIC
ALABAMA - STATE AT LARGE
My Commission Expires 09/19/2026

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D).....	10,232,808		10,232,808	10,194,116
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks				
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens				
3.2 Other than first liens				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$0 encumbrances).....				
4.2 Properties held for the production of income (less \$0 encumbrances)				
4.3 Properties held for sale (less \$0 encumbrances)				
5. Cash (\$(17,733) , Schedule E-Part 1), cash equivalents (\$2,593,811 , Schedule E-Part 2) and short-term investments (\$0 , Schedule DA).....	2,576,078		2,576,078	2,697,754
6. Contract loans (including \$0 premium notes).....				
7. Derivatives (Schedule DB).....				
8. Other invested assets (Schedule BA)				
9. Receivables for securities				
10. Securities lending reinvested collateral assets (Schedule DL).....				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	12,808,886		12,808,886	12,891,870
13. Title plants less \$0 charged off (for Title insurers only).....				
14. Investment income due and accrued	21,090		21,090	23,163
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	27,937	60	27,877	7,748
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums).....	455,481		455,481	901,635
15.3 Accrued retrospective premiums (\$0) and contracts subject to redetermination (\$0)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	144,487		144,487	143,998
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon				
18.2 Net deferred tax asset.....	47,476	6,573	40,903	32,611
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software.....				
21. Furniture and equipment, including health care delivery assets (\$0)				
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates				
24. Health care (\$0) and other amounts receivable.....				
25. Aggregate write-ins for other-than-invested assets	31,337		31,337	711
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	13,536,694	6,633	13,530,061	14,001,736
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....				
28. Total (Lines 26 and 27)	13,536,694	6,633	13,530,061	14,001,736
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501. State income taxes recoverable.....	31,337		31,337	711
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	31,337		31,337	711

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	1,013,947	1,108,998
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	459,803	553,028
4. Commissions payable, contingent commissions and other similar charges	1,707	59,424
5. Other expenses (excluding taxes, licenses and fees)	44,942	53,927
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		37,236
7.1 Current federal and foreign income taxes (including \$0 on realized capital gains (losses))	8,340	37,486
7.2 Net deferred tax liability		
8. Borrowed money \$0 and interest thereon \$0		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$2,431,131 and including warranty reserves of \$0 and accrued accident and health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health Service Act)	64,862	100,558
10. Advance premium	2,069	2,080
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	139,829	483,692
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$0 certified) (Schedule F, Part 3, Column 78)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates	106,664	127,071
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$0 and interest thereon \$0		
25. Aggregate write-ins for liabilities	84,463	168,270
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	1,926,626	2,731,770
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	1,926,626	2,731,770
29. Aggregate write-ins for special surplus funds		
30. Common capital stock		
31. Preferred capital stock		
32. Aggregate write-ins for other-than-special surplus funds		
33. Surplus notes	10,000,000	10,000,000
34. Gross paid in and contributed surplus		
35. Unassigned funds (surplus)	1,603,435	1,269,966
36. Less treasury stock, at cost:		
36.1 .....0 shares common (value included in Line 30 \$0)		
36.2 .....0 shares preferred (value included in Line 31 \$0)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	11,603,435	11,269,966
38. Totals (Page 2, Line 28, Col. 3)	13,530,061	14,001,736
DETAILS OF WRITE-INS		
2501. Excess ceding commission liability.....	84,463	168,270
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	84,463	168,270
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4)	189,778	247,581
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7)	(38,818)	290,029
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	(32,754)	(64,481)
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	(205,809)	(616,509)
5. Aggregate write-ins for underwriting deductions		
6. Total underwriting deductions (Lines 2 through 5)	(277,381)	(390,961)
7. Net income of protected cells		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	467,159	638,542
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	(122,576)	382,151
10. Net realized capital gains (losses) less capital gains tax of \$0 (Exhibit of Capital Gains (Losses)).....		
11. Net investment gain (loss) (Lines 9 + 10)	(122,576)	382,151
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$0 amount charged off \$680)	(680)	
13. Finance and service charges not included in premiums.....		
14. Aggregate write-ins for miscellaneous income		1,300
15. Total other income (Lines 12 through 14)	(680)	1,300
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	343,903	1,021,993
17. Dividends to policyholders		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	343,903	1,021,993
19. Federal and foreign income taxes incurred	48,143	151,599
20. Net income (Line 18 minus Line 19) (to Line 22)	295,760	870,394
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	11,269,966	10,024,490
22. Net income (from Line 20)	295,760	870,394
23. Net transfers (to) from Protected Cell accounts		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$5,879	22,120	153,955
25. Change in net unrealized foreign exchange capital gain (loss)		
26. Change in net deferred income tax	20,744	73,536
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)	(5,155)	147,591
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
29. Change in surplus notes		
30. Surplus (contributed to) withdrawn from protected cells		
31. Cumulative effect of changes in accounting principles		
32. Capital changes:		
32.1 Paid in		
32.2 Transferred from surplus (Stock Dividend)		
32.3 Transferred to surplus		
33. Surplus adjustments:		
33.1 Paid in		
33.2 Transferred to capital (Stock Dividend)		
33.3 Transferred from capital		
34. Net remittances from or (to) Home Office		
35. Dividends to stockholders		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		
37. Aggregate write-ins for gains and losses in surplus		
38. Change in surplus as regards policyholders for the year (Lines 22 through 37)	333,469	1,245,476
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	11,603,435	11,269,966
DETAILS OF WRITE-INS		
0501.		
0502.		
0503.		
0598. Summary of remaining write-ins for Line 5 from overflow page		
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)		
1401. Miscellaneous income.....		1,300
1402.		
1403.		
1498. Summary of remaining write-ins for Line 14 from overflow page		
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)		1,300
3701.		
3702.		
3703.		
3798. Summary of remaining write-ins for Line 37 from overflow page		
3799. Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	179,933	205,534
2. Net investment income	(131,195)	361,705
3. Miscellaneous income	(680)	1,300
4. Total (Lines 1 through 3)	48,058	568,539
5. Benefit and loss related payments	140,529	(1,505,949)
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	(48,087)	(727,162)
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)	77,289	(196,535)
10. Total (Lines 5 through 9)	169,731	(2,429,646)
11. Net cash from operations (Line 4 minus Line 10)	(121,673)	2,998,185
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds		
12.2 Stocks		
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7 Miscellaneous proceeds		
12.8 Total investment proceeds (Lines 12.1 to 12.7)		
13. Cost of investments acquired (long-term only):		
13.1 Bonds		1,566,884
13.2 Stocks		
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets		
13.6 Miscellaneous applications		
13.7 Total investments acquired (Lines 13.1 to 13.6)		1,566,884
14. Net increase/(decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)		(1,566,884)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		
16.6 Other cash provided (applied)		
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)		
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(121,673)	1,431,301
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	2,697,751	1,266,450
19.2 End of year (Line 18 plus Line 19.1)	2,576,078	2,697,751

UNDERWRITING AND INVESTMENT EXHIBIT
PART 1 - PREMIUMS EARNED

		1	2	3	4
Line of Business		Net Premiums Written per Column 6, Part 1B	Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	Premiums Earned During Year (Cols. 1 + 2 - 3)
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				
9.1	Inland marine				
9.2	Pet insurance plans				
10.	Financial guaranty				
11.1	Medical professional liability-occurrence	21,002	6,664	387	27,279
11.2	Medical professional liability-claims-made	133,080	93,894	64,475	162,499
12.	Earthquake				
13.1	Comprehensive (hospital and medical) individual				
13.2	Comprehensive (hospital and medical) group				
14.	Credit accident and health (group and individual)				
15.1	Vision only				
15.2	Dental only				
15.3	Disability income				
15.4	Medicare supplement				
15.5	Medicaid Title XIX				
15.6	Medicare Title XVIII				
15.7	Long-term care				
15.8	Federal employees health benefits plan				
15.9	Other health				
16.	Workers' compensation				
17.1	Other liability-occurrence				
17.2	Other liability-claims-made				
17.3	Excess workers' compensation				
18.1	Products liability-occurrence				
18.2	Products liability-claims-made				
19.1	Private passenger auto no-fault (personal injury protection)				
19.2	Other private passenger auto liability				
19.3	Commercial auto no-fault (personal injury protection)				
19.4	Other commercial auto liability				
21.1	Private passenger auto physical damage				
21.2	Commercial auto physical damage				
22.	Aircraft (all perils)				
23.	Fidelity				
24.	Surety				
26.	Burglary and theft				
27.	Boiler and machinery				
28.	Credit				
29.	International				
30.	Warranty				
31.	Reinsurance-nonproportional assumed property				
32.	Reinsurance-nonproportional assumed liability				
33.	Reinsurance-nonproportional assumed financial lines				
34.	Aggregate write-ins for other lines of business				
35.	TOTALS	154,082	100,558	64,862	189,778
DETAILS OF WRITE-INS					
3401.	.....				
3402.	.....				
3403.	.....				
3498.	Sum. of remaining write-ins for Line 34 from overflow page				
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)				

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

UNDERWRITING AND INVESTMENT EXHIBIT
PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business		1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned but Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1+2+3+4
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					
9.1	Inland marine					
9.2	Pet insurance plans					
10.	Financial guaranty					
11.1	Medical professional liability-occurrence	387				387
11.2	Medical professional liability-claims-made	64,475				64,475
12.	Earthquake					
13.1	Comprehensive (hospital and medical) individual					
13.2	Comprehensive (hospital and medical) group					
14.	Credit accident and health (group and individual)					
15.1	Vision only					
15.2	Dental only					
15.3	Disability income					
15.4	Medicare supplement					
15.5	Medicaid title XIX					
15.6	Medicare title XVIII					
15.7	Long-term care					
15.8	Federal employees health benefits plan					
15.9	Other health					
16.	Workers' compensation					
17.1	Other liability-occurrence					
17.2	Other liability-claims-made					
17.3	Excess workers' compensation					
18.1	Products liability-occurrence					
18.2	Products liability-claims-made					
19.1	Private passenger auto no-fault (personal injury protection)					
19.2	Other private passenger auto liability					
19.3	Commercial auto no-fault (personal injury protection)					
19.4	Other commercial auto liability					
21.1	Private passenger auto physical damage					
21.2	Commercial auto physical damage					
22.	Aircraft (all perils)					
23.	Fidelity					
24.	Surety					
26.	Burglary and theft					
27.	Boiler and machinery					
28.	Credit					
29.	International					
30.	Warranty					
31.	Reinsurance-nonproportional assumed property					
32.	Reinsurance-nonproportional assumed liability					
33.	Reinsurance-nonproportional assumed financial lines					
34.	Aggregate write-ins for other lines of business					
35.	TOTALS	64,862				64,862
36.	Accrued retrospective premiums based on experience					
37.	Earned but unbilled premiums					
38.	Balance (Sum of Lines 35 through 37)					64,862
DETAILS OF WRITE-INS						
3401.	.....					
3402.	.....					
3403.	.....					
3498.	Sum. of remaining write-ins for Line 34 from overflow page					
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)					

(a) State here basis of computation used in each case. Column 1: Daily pro rata; Column 2: DDR reserves actuarially determined.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

UNDERWRITING AND INVESTMENT EXHIBIT
PART 1B - PREMIUMS WRITTEN

Line of Business		1	Reinsurance Assumed		Reinsurance Ceded		6
		Direct Business (a)	2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	Net Premiums Written Cols. 1+2+3-4-5
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						
9.1	Inland marine						
9.2	Pet insurance plans						
10.	Financial guaranty						
11.1	Medical professional liability-occurrence	420,050			399,048		21,002
11.2	Medical professional liability-claims-made	2,682,752			2,549,672		133,080
12.	Earthquake						
13.1	Comprehensive (hospital and medical) individual						
13.2	Comprehensive (hospital and medical) group						
14.	Credit accident and health (group and individual)						
15.1	Vision only						
15.2	Dental only						
15.3	Disability income						
15.4	Medicare supplement						
15.5	Medicaid Title XIX						
15.6	Medicare Title XVIII						
15.7	Long-term care						
15.8	Federal employees health benefits plan						
15.9	Other health						
16.	Workers' compensation						
17.1	Other liability-occurrence						
17.2	Other liability-claims-made						
17.3	Excess workers' compensation						
18.1	Products liability-occurrence						
18.2	Products liability-claims-made						
19.1	Private passenger auto no-fault (personal injury protection)						
19.2	Other private passenger auto liability						
19.3	Commercial auto no-fault (personal injury protection)						
19.4	Other commercial auto liability						
21.1	Private passenger auto physical						
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.	Reinsurance-nonproportional assumed property	XXX					
32.	Reinsurance-nonproportional assumed liability	XXX					
33.	Reinsurance-nonproportional assumed financial lines	XXX					
34.	Aggregate write-ins for other lines of business						
35.	TOTALS	3,102,802			2,948,720		154,082
DETAILS OF WRITE-INS							
3401.	.....						
3402.	.....						
3403.	.....						
3498.	Sum. Of remaining write-ins for Line 34 from overflow page						
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)						

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X]
If yes: 1. The amount of such installment premiums \$
2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business		Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A, Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
		1	2	3	4				
		Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 - 3)				
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								
9.1	Inland marine								
9.2	Pet insurance plans								
10.	Financial guaranty								
11.1	Medical professional liability-occurrence	220,000		209,000	11,000	89,541	102,380	(1,839)	(6.7)
11.2	Medical professional liability-claims-made	904,660		859,427	45,233	914,774	995,973	(35,966)	(22.1)
12.	Earthquake								
13.1.	Comprehensive (hospital and medical) individual								
13.2.	Comprehensive (hospital and medical) group								
14.	Credit accident and health (group and individual)								
15.1.	Vision only								
15.2.	Dental only								
15.3.	Disability income								
15.4.	Medicare supplement								
15.5.	Medicaid Title XIX								
15.6.	Medicare Title XVIII								
15.7.	Long-term care								
15.8.	Federal employees health benefits plan								
15.9.	Other health								
16.	Workers' compensation								
17.1	Other liability-occurrence					6,952	7,405	(453)	
17.2	Other liability-claims-made					2,680	3,240	(560)	
17.3	Excess workers' compensation								
18.1	Products liability-occurrence								
18.2	Products liability-claims-made								
19.1	Private passenger auto no-fault (personal injury protection)								
19.2	Other private passenger auto liability								
19.3	Commercial auto no-fault (personal injury protection)								
19.4	Other commercial auto liability								
21.1	Private passenger auto physical damage								
21.2	Commercial auto physical damage								
22.	Aircraft (all perils)								
23.	Fidelity								
24.	Surety								
26.	Burglary and theft								
27.	Boiler and machinery								
28.	Credit								
29.	International								
30.	Warranty								
31.	Reinsurance-nonproportional assumed property	XXX							
32.	Reinsurance-nonproportional assumed liability	XXX							
33.	Reinsurance-nonproportional assumed financial lines	XXX							
34.	Aggregate write-ins for other lines of business								
35.	TOTALS	1,124,660		1,068,427	56,233	1,013,947	1,108,998	(38,818)	(20.5)
DETAILS OF WRITE-INS									
3401.	.....								
3402.	.....								
3403.	.....								
3498.	Sum. of remaining write-ins for Line 34 from overflow page								
3499.	Totals (Lines 3401 through 3403 + 3498) (Line 34 above)								

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business		Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Cols. 4+5+6-7)	9 Net Unpaid Loss Adjustment Expenses
		1	2	3	4	5	6	7		
		Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excl. Incurred But Not Reported (Cols. 1+2-3)	Direct	Reinsurance Assumed	Reinsurance Ceded		
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									
9.1	Inland marine									
9.2	Pet insurance plans									
10.	Financial guaranty									
11.1	Medical professional liability-occurrence	1,350,000		1,282,500	67,500	567,327		545,286	89,541	42,365
11.2	Medical professional liability-claims-made	15,882,835		15,166,193	716,642	3,850,612		3,652,480	914,774	409,794
12.	Earthquake									
13.1	Comprehensive (hospital and medical) individual								(a)	
13.2	Comprehensive (hospital and medical) group								(a)	
14.	Credit accident and health (group and individual)									
15.1	Vision only								(a)	
15.2	Dental only								(a)	
15.3	Disability income								(a)	
15.4	Medicare supplement								(a)	
15.5	Medicaid Title XIX								(a)	
15.6	Medicare Title XVIII								(a)	
15.7	Long-term care								(a)	
15.8	Federal employees health benefits plan								(a)	
15.9	Other health								(a)	
16.	Workers' compensation									
17.1	Other liability-occurrence	100,000		95,000	5,000	49,510		47,556	6,952	4,676
17.2	Other liability-claims-made	50,000		47,500	2,500	3,594		3,414	2,680	2,966
17.3	Excess workers' compensation									
18.1	Products liability-occurrence									
18.2	Products liability-claims-made									
19.1	Private passenger auto no-fault (personal injury protection)									
19.2	Other private passenger auto liability									
19.3	Commercial auto no-fault (personal injury protection)									
19.4	Other commercial auto liability									
21.1	Private passenger auto physical damage									
21.2	Commercial auto physical damage									
22.	Aircraft (all perils)									
23.	Fidelity									
24.	Surety									
26.	Burglary and theft									
27.	Boiler and machinery									
28.	Credit									
29.	International									
30.	Warranty									
31.	Reinsurance-nonproportional assumed property	XXX				XXX				
32.	Reinsurance-nonproportional assumed liability	XXX				XXX				
33.	Reinsurance-nonproportional assumed financial lines	XXX				XXX				
34.	Aggregate write-ins for other lines of business									
35.	TOTALS	17,382,835		16,591,193	791,642	4,471,043		4,248,738	1,013,947	459,803
DETAILS OF WRITE-INS										
3401.	.....									
3402.	.....									
3403.	.....									
3498.	Sum. of remaining write-ins for Line 34 from overflow page									
3499.	Totals (Lines 3401 through 3403 + 3498) (Line 34 above)									

(a) Including \$ for present value of life indemnity claims reported in lines 13 and 15.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct	(1,100,864)			(1,100,864)
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	(415,562)			(415,562)
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)	(685,302)			(685,302)
2. Commission and brokerage:				
2.1 Direct, excluding contingent		318,798		318,798
2.2 Reinsurance assumed, excluding contingent				
2.3 Reinsurance ceded, excluding contingent		1,115,859		1,115,859
2.4 Contingent-direct		2,714		2,714
2.5 Contingent-reinsurance assumed				
2.6 Contingent-reinsurance ceded				
2.7 Policy and membership fees				
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)		(794,347)		(794,347)
3. Allowances to manager and agents				
4. Advertising				
5. Boards, bureaus and associations				
6. Surveys and underwriting reports				
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries				
8.2 Payroll taxes				
9. Employee relations and welfare				
10. Insurance				
11. Directors' fees		18,000		18,000
12. Travel and travel items				
13. Rent and rent items				
14. Equipment		4,149		4,149
15. Cost or depreciation of EDP equipment and software				
16. Printing and stationery				
17. Postage, telephone and telegraph, exchange and express				
18. Legal and auditing	2,548	(2,500)	2,257	2,305
19. Totals (Lines 3 to 18)	2,548	19,649	2,257	24,454
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$0		90,581		90,581
20.2 Insurance department licenses and fees		16,252		16,252
20.3 Gross guaranty association assessments				
20.4 All other (excluding federal and foreign income and real estate)				
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)		106,833		106,833
21. Real estate expenses				
22. Real estate taxes				
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses	650,000	462,056		1,112,056
25. Total expenses incurred	(32,754)	(205,809)	2,257 (a)	(236,306)
26. Less unpaid expenses-current year	459,801	46,647		506,448
27. Add unpaid expenses-prior year	553,028	150,587		703,615
28. Amounts receivable relating to uninsured plans, prior year				
29. Amounts receivable relating to uninsured plans, current year				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	60,473	(101,869)	2,257	(39,139)
DETAILS OF WRITE-INS				
2401. Captive Management Fee.....		62,056		62,056
2402. Program Management Fee.....	650,000	400,000		1,050,000
2403.				
2498. Summary of remaining write-ins for Line 24 from overflow page				
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)	650,000	462,056		1,112,056

(a) Includes management fees of \$ 1,112,056 to affiliates and \$ to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a).....71,942	72,004
1.1 Bonds exempt from U.S. tax	(a).....	.....
1.2 Other bonds (unaffiliated)	(a).....292,743	292,743
1.3 Bonds of affiliates	(a).....	.....
2.1 Preferred stocks (unaffiliated)	(b).....	.....
2.11 Preferred stocks of affiliates	(b).....	.....
2.2 Common stocks (unaffiliated) .....	.....	.....
2.21 Common stocks of affiliates .....	.....	.....
3. Mortgage loans	(c).....	.....
4. Real estate	(d).....	.....
5. Contract loans.....	.....	.....
6. Cash, cash equivalents and short-term investments	(e).....150,749	148,615
7. Derivative instruments	(f).....	.....
8. Other invested assets .....	.....	.....
9. Aggregate write-ins for investment income .....	.....	.....
10. Total gross investment income	515,434	513,362
11. Investment expenses		(g).....2,257
12. Investment taxes, licenses and fees, excluding federal income taxes		(g).....
13. Interest expense		(h).....633,681
14. Depreciation on real estate and other invested assets		(i).....
15. Aggregate write-ins for deductions from investment income .....		.....
16. Total deductions (Lines 11 through 15)		635,938
17. Net investment income (Line 10 minus Line 16)		(122,576)
DETAILS OF WRITE-INS		
0901. ....	.....	.....
0902. ....	.....	.....
0903. ....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page .....	.....	.....
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above) .....	.....	.....
1501. ....	.....	.....
1502. ....	.....	.....
1503. ....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page .....	.....	.....
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15 above) .....	.....	.....

(a) Includes \$14,635 accrual of discount less \$3,943 amortization of premium and less \$paid for accrued interest on purchases.
(b) Includes \$accrual of discount less \$amortization of premium and less \$paid for accrued dividends on purchases.
(c) Includes \$accrual of discount less \$amortization of premium and less \$paid for accrued interest on purchases.
(d) Includes \$for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
(e) Includes \$8,436 accrual of discount less \$amortization of premium and less \$paid for accrued interest on purchases.
(f) Includes \$accrual of discount less \$amortization of premium.
(g) Includes \$investment expenses and \$investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
(h) Includes \$633,681 interest on surplus notes and \$ interest on capital notes.
(i) Includes \$depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds					
1.1 Bonds exempt from U.S. tax					
1.2 Other bonds (unaffiliated)				28,000	
1.3 Bonds of affiliates					
2.1 Preferred stocks (unaffiliated)					
2.11 Preferred stocks of affiliates					
2.2 Common stocks (unaffiliated)					
2.21 Common stocks of affiliates					
3. Mortgage loans					
4. Real estate					
5. Contract loans					
6. Cash, cash equivalents and short-term investments					
7. Derivative instruments					
8. Other invested assets					
9. Aggregate write-ins for capital gains (losses)					
10. Total capital gains (losses)				28,000	
DETAILS OF WRITE-INS					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page					
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)					

EXHIBIT OF NONADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			
2. Stocks (Schedule D):			
2.1 Preferred stocks			
2.2 Common stocks			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			
3.2 Other than first liens			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			
4.2 Properties held for the production of income.....			
4.3 Properties held for sale			
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			
6. Contract loans			
7. Derivatives (Schedule DB).....			
8. Other invested assets (Schedule BA)			
9. Receivables for securities			
10. Securities lending reinvested collateral assets (Schedule DL).....			
11. Aggregate write-ins for invested assets			
12. Subtotals, cash and invested assets (Lines 1 to 11)			
13. Title plants (for Title insurers only).....			
14. Investment income due and accrued			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....	60	1,478	1,418
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			
15.3 Accrued retrospective premiums and contracts subject to redetermination			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			
16.2 Funds held by or deposited with reinsured companies			
16.3 Other amounts receivable under reinsurance contracts			
17. Amounts receivable relating to uninsured plans			
18.1 Current federal and foreign income tax recoverable and interest thereon			
18.2 Net deferred tax asset.....	6,573		(6,573)
19. Guaranty funds receivable or on deposit			
20. Electronic data processing equipment and software.....			
21. Furniture and equipment, including health care delivery assets.....			
22. Net adjustment in assets and liabilities due to foreign exchange rates			
23. Receivables from parent, subsidiaries and affiliates			
24. Health care and other amounts receivable.....			
25. Aggregate write-ins for other-than-invested assets			
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	6,633	1,478	(5,155)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
28. Total (Lines 26 and 27)	6,633	1,478	(5,155)
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
2501.			
2502.			
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)			

NOTES TO FINANCIAL STATEMENTS

Note 1 - Summary of Significant Accounting Policies and Going Concern

A. Accounting practices

The accompanying financial statements of ProAssurance American Mutual, A Risk Retention Group (the Company) have been completed in compliance with National Association of Insurance Commissioners Statutory Accounting Principles (NAIC SAP) as adopted by the Department of Insurance, Securities and Banking (DISB) of the District of Columbia.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the District of Columbia is shown below:

	SSAP #	F/S Page	F/S Line #	Year-to-date period ended	
				December 31, 2024	December 31, 2023
NET INCOME					
(1) State basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 295,760	\$ 870,394
(2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP:				—	—
(3) State Permitted Practices that are an increase/ (decrease) from NAIC SAP:				—	—
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 295,760	\$ 870,394
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 11,603,435	\$ 11,269,966
(6) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP:				—	—
(7) State Permitted Practices that are an increase/ (decrease) from NAIC SAP:				—	—
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 11,603,435	\$ 11,269,966

The term “none” or “no significant change” is used in the following notes to indicate that the Company does not have any items requiring disclosure under the respective note.

B. Use of estimates in the preparation of the financial statements

The preparation of financial statements in conformity with NAIC SAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business and are based on internal reports. Unearned premiums for Death, Disability, and Retirement premiums are determined actuarially.

Expenses in connection with acquiring new business, including acquisition costs, are deferred and recognized as the related premiums are earned in accordance with NAIC SAP. Expenses incurred are reduced for ceding allowances received or receivable. Any excess ceding commission income over acquisition costs is deferred and recognized over the policy term.

In addition, the Company also uses the following accounting policies:

- (1) Short-term investments are securities with an original maturity greater than three months but less than one year. Short-term investments are reported at amortized cost. Cash and cash equivalents includes all short-term, highly liquid investments that are readily convertible to cash and were acquired with an original maturity of three months or less.
- (2) Bonds not backed by loans are reported at amortized cost or at the lower of amortized cost or fair value, if rated NAIC 3 or below, in accordance with SSAP No. 26 - Bonds, Excluding Loan-Backed and Structured Securities. Premiums and discounts on bonds are amortized or accreted, respectively, over the life of the related debt security as an adjustment to yield using the scientific method. Interest income is recognized when it is earned. Additionally, per SSAP No. 26R, SVO-Identified investments are reported at fair value.
- (3) The Company has no investment in common stocks.
- (4) The Company has no investment in preferred stocks.
- (5) The Company has no investment in mortgage loans.
- (6) Loan-backed securities are reported at amortized cost provided that the SVO's designation is 1 or 2. If the SVO's designation is 3 or greater, the security is reported at the lower of amortized cost or fair value. The Company uses the prospective method to make valuation adjustments when necessary.

NOTES TO FINANCIAL STATEMENTS

- (7) The Company has no subsidiaries.
- (8) The Company has no investments in joint ventures, partnerships, or limited liability companies.
- (9) The Company has no investment in derivatives.
- (10) The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53, Property-Casualty Contracts - Premiums.
- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an actuarially determined amount, based on past experience, for losses incurred but not reported and development on reported claims. Such liabilities are based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined.
- (12) The Company has not modified its capitalization policy from the prior period.
- (13) The Company has no pharmaceutical rebate receivables.

D. Going Concern

Management has concluded that there is no doubt regarding the Company's ability to continue as a going concern.

Note 2 - Accounting Changes and Corrections of Errors - None.

Note 3 - Business Combinations and Goodwill - None.

Note 4 - Discontinued Operations - None.

Note 5 - Investments

- A. Mortgage loans, including mezzanine real estate loans - None.
- B. Debt restructuring - None.
- C. Reverse mortgages - None.
- D. Loan-backed securities - None.
- E. Dollar repurchase agreements and/or securities lending transactions - None.
- F. Repurchase agreements transactions accounted for as secured borrowing - None.
- G. Reverse repurchase agreements transactions accounted for as secured borrowing - None.
- H. Repurchase agreements transactions accounted for as a sale - None.
- I. Reverse repurchase agreements transactions accounted for as a sale - None.
- J. Real estate - None.
- K. Low-income housing tax credits (LIHTC) - None.
- L. Restricted assets - None.
- M. Working capital finance investments - None.
- N. Offsetting and netting of assets and liabilities - None.
- O. 5GI Securities - None.
- P. Short sales - None.
- Q. Prepayment penalty and acceleration fees - None.
- R. Reporting entity's share of cash pool by asset type - None.
- S. Aggregate Collateral Loans by Qualifying Investment Collateral - None.

NOTES TO FINANCIAL STATEMENTS

Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

- A. Detail for those greater than 10% of admitted assets - None.
- B. Write-downs for impairments - None.

Note 7 - Investment Income

- A. Accrued investment income - None.
- B. Amounts nonadmitted - None.
- C. The gross, nonadmitted and admitted amounts for interest income due and accrued.

Interest Income Due and Accrued		<u>Amount</u>
1. Gross	\$	21,090
2. Nonadmitted	\$	—
3. Admitted	\$	21,090

- D. The aggregate deferred interest - None.
- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance - None.

Note 8 - Derivative Instruments - None.

NOTES TO FINANCIAL STATEMENTS

Note 9 - Income Taxes

A. The components of the net deferred tax asset/(liability) at December 31 are as follows:

1.

12/31/2024		
(1)	(2)	(3)
Ordinary	Capital	(Col 1+2) Total
(a) Gross Deferred Tax Assets	\$ 51,103	\$ 65,120
(b) Statutory Valuation Allowance Adjustments	—	65,120
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	51,103	—
(d) Deferred Tax Assets Nonadmitted	6,573	—
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	44,530	—
(f) Deferred Tax Liabilities	3,627	—
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability)(1e-1f)	\$ 40,903	\$ —

12/31/2023		
(4)	(5)	(6)
Ordinary	Capital	(Col 4+5) Total
(a) Gross Deferred Tax Assets	\$ 72,133	\$ 71,000
(b) Statutory Valuation Allowance Adjustments	39,141	71,000
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	32,992	—
(d) Deferred Tax Assets Nonadmitted	—	—
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	32,992	—
(f) Deferred Tax Liabilities	381	—
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability)(1e-1f)	\$ 32,611	\$ —

Change		
(7)	(8)	(9)
(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
(a) Gross Deferred Tax Assets	\$ (21,030)	\$ (5,880)
(b) Statutory Valuation Allowance Adjustments	(39,141)	(5,880)
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	18,111	—
(d) Deferred Tax Assets Nonadmitted	6,573	—
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	11,538	—
(f) Deferred Tax Liabilities	3,246	—
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability)(1e-1f)	\$ 8,292	\$ —

NOTES TO FINANCIAL STATEMENTS

2.

Admission Calculation Components SSAP No. 101

12/31/2024		
(1)	(2)	(3)
Ordinary	Capital	(Col 1+2) Total
(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$ 40,904	\$ — \$ 40,904
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Lesser of 2(b)1 and 2(b)2 Below)	\$ —	\$ — \$ —
(1) Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date	\$ —	\$ — \$ —
(2) Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX \$ 1,734,380
(c) Adjusted Gross Deferred Tax Assets Offset by Gross Deferred Tax Liabilities	\$ 3,626	\$ — \$ 3,626
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101	\$ 44,530	\$ — \$ 44,530

12/31/2023		
(4)	(5)	(6)
Ordinary	Capital	(Col 4+5) Total
(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$ 32,992	\$ — \$ 32,992
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Lesser of 2(b)1 and 2(b)2 Below)	\$ —	\$ — \$ —
(1) Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date	\$ —	\$ — \$ —
(2) Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX \$ 1,685,603
(c) Adjusted Gross Deferred Tax Assets Offset by Gross Deferred Tax Liabilities	\$ —	\$ — \$ —
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101	\$ 32,992	\$ — \$ 32,992

Change		
(7)	(8)	(9)
(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$ 7,912	\$ — \$ 7,912
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Lesser of 2(b)1 and 2(b)2 Below)	\$ —	\$ — \$ —
(1) Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date	\$ —	\$ — \$ —
(2) Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX \$ 48,777
(c) Adjusted Gross Deferred Tax Assets Offset by Gross Deferred Tax Liabilities	\$ 3,626	\$ — \$ 3,626
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101	\$ 11,538	\$ — \$ 11,538

3.

	12/31/2024	12/31/2023
(a) Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount	3,223 %	3,058 %
(b) Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation in 2(b)2 Above	\$ 11,562,532	\$ 11,237,355

NOTES TO FINANCIAL STATEMENTS

4.

Impact of Tax-Planning Strategies

- (a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.
- 1 Adjusted Gross DTAs Amount From Note 9A1(c)
 - 2 Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies
 - 3 Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)
 - 4 Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies

12/31/2024	
(1)	(2)
Ordinary	Capital

\$	51,103	\$	—
	—		—
	44,530		—
	—		—

- (a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.
- 1 Adjusted Gross DTAs Amount From Note 9A1(c)
 - 2 Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies
 - 3 Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)
 - 4 Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies

12/31/2023	
(3)	(4)
Ordinary	Capital

\$	32,992	\$	—
	—		—
	32,992		—
	—		—

- (a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.
- 1 Adjusted Gross DTAs Amount From Note 9A1(c)
 - 2 Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies
 - 3 Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)
 - 4 Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies

Change	
(5)	(6)
(Col 1-3)	(Col 2-4)
Ordinary	Capital

\$	18,111	\$	—
	—		—
	11,538		—
	—		—

- (b) Does the Company's tax-planning strategies include the use of reinsurance?

No

B. Deferred Tax Liabilities Not Recognized - None.

NOTES TO FINANCIAL STATEMENTS

C. Current income taxes consist of the following major components:

	(1)	(2)	(3)
	12/31/2024	12/31/2023	(Col 1-2) Change
1. Current Income Tax			
(a) Federal	\$ 48,640	\$ 155,292	\$ (106,652)
(b) Foreign	—	—	—
(c) Subtotal (1a+1b)	48,640	155,292	(106,652)
(d) Federal income tax on net capital gains	—	—	—
(e) Utilization of capital loss carry-forwards	—	—	—
(f) Other	(497)	(3,693)	3,196
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$ 48,143	\$ 151,599	\$ (103,456)
2. Deferred Tax Assets:			
(a) Ordinary			
(1) Discounting of unpaid losses	\$ 21,695	\$ 25,461	\$ (3,766)
(2) Unearned premium reserve	2,811	4,311	(1,500)
(3) Policyholder reserves	—	—	—
(4) Investments	—	—	—
(5) Deferred acquisition costs	—	—	—
(6) Policyholder dividends accrual	—	—	—
(7) Fixed assets	—	—	—
(8) Compensation and benefits accrual	—	—	—
(9) Pension accrual	—	—	—
(10) Receivables - nonadmitted	—	—	—
(11) Net operating loss carry-forward	—	—	—
(12) Tax credit carry-forward	—	—	—
(13) Other	26,597	42,361	(15,764)
(99) Subtotal (sum of 2a1 through 2a13)	\$ 51,103	\$ 72,133	\$ (21,030)
(b) Statutory valuation allowance adjustment	—	39,141	(39,141)
(c) Nonadmitted	6,573	—	6,573
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ 44,530	\$ 32,992	\$ 11,538
(e) Capital			
(1) Investments	\$ 65,120	\$ 71,000	\$ (5,880)
(2) Net capital loss carry-forward	—	—	—
(3) Real estate	—	—	—
(4) Other	—	—	—
(99) Subtotal (2e1+2e2+2e3+2e4)	\$ 65,120	\$ 71,000	\$ (5,880)
(f) Statutory valuation allowance adjustment	65,120	71,000	(5,880)
(g) Nonadmitted	—	—	—
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$ —	\$ —	\$ —
(i) Admitted deferred tax assets (2d + 2h)	\$ 44,530	\$ 32,992	\$ 11,538
3. Deferred Tax Liabilities:			
(a) Ordinary			
(1) Investments	\$ 3,361	\$ —	\$ 3,361
(2) Fixed assets	—	—	—
(3) Deferred and uncollected premium	—	—	—
(4) Policyholder reserves	—	—	—
(5) Other	266	381	(115)
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$ 3,627	\$ 381	\$ 3,246
(b) Capital			
(1) Investments	\$ —	\$ —	\$ —
(2) Real estate	—	—	—
(3) Other	—	—	—
(99) Subtotal (3b1+3b2+3b3)	\$ —	\$ —	\$ —
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 3,627	\$ 381	\$ 3,246
4. Net deferred tax assets/liabilities (2i - 3c)	\$ 40,903	\$ 32,611	\$ 8,292

NOTES TO FINANCIAL STATEMENTS

	12/31/2024	12/31/2023	Change
Total deferred tax assets	\$ 51,103	\$ 32,992	\$ 18,111
Total deferred tax liabilities	3,627	381	3,246
Net deferred tax asset	47,476	32,611	14,865
Tax effect of unrealized [(gains)/losses]	65,121	71,000	(5,879)
Change in net deferred income tax [(charge)/benefit]	\$ (17,645)	\$ (38,389)	\$ 20,744

D. Reconciliation of federal income tax rate to actual effective rate

Among the more significant book to tax adjustments were the following:

December 31, 2024		
Amount	Tax Effect	Effective Tax Rate
Provision computed at statutory rate	\$ 343,903	\$ 72,223 21.0 %
Change in statutory valuation allowance	—	(45,021) (13.1)%
Change in nonadmitted assets	939	197 0.1 %
Other	—	— — %
Totals	\$ 344,842	\$ 27,399 8.0 %
Federal income taxes incurred [expense/(benefit)]		\$ 48,143 14.0 %
Tax on gains/(losses)		— — %
Change in net deferred income tax [charge/(benefit)]		(20,744) (6.0)%
Total statutory income taxes		\$ 27,399 8.0 %

E. Operating loss and tax credit carryforwards and protective tax deposits

1. At December 31, 2024, the Company did not have any unused operating loss carryforwards available to offset against future taxable income.
2. The following is income tax expense for 2024 and 2023 that is available for recoupment in the event of future net losses.

December 31, 2024	\$	48,640
December 31, 2023	\$	154,794

3. The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.

F. Consolidated federal income tax return - None.

G. Federal or Foreign Income Tax Loss Contingencies - None.

H. Repatriation Transition Tax (RTT) - None.

I. Alternative Minimum Tax (AMT) Credit - None.

J. Inflation Reduction Act - Corporate Alternative Minimum Tax (CAMT)

1. The Act was enacted on August 16, 2022.
2. The Company has determined that it does not expect to be liable for CAMT in 2024.
3. Based upon adjusted financial statement income for 2024, the Company has determined that average "adjusted financial statement income" is below the thresholds for the 2024 tax year such that it does not expect to be required to perform the CAMT calculations.

NOTES TO FINANCIAL STATEMENTS

Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Nature of relationships

The Company is a risk retention group that was organized in the District of Columbia on January 1, 2015 by ProAssurance Indemnity Company, Inc. (PRA Indemnity). PRA Indemnity has no equity ownership in the Company because the Company is owned exclusively by its policyholders as its members. PRA Indemnity has been engaged by the Company to act as the third party administrator for its policies under a Program Management Agreement between the Company and PRA Indemnity and PRA Indemnity also serves as the captive manager pursuant to a Captive Manager Agreement. PRA Indemnity provided the initial capital of the Company by advancing \$10,000,000 in exchange for a surplus note issued by the Company to PRA Indemnity. The bylaws of the Company include certain covenants that will remain in effect so long as the surplus note is outstanding.

Effective January 15, 2024, affiliate Medmarc Casualty Insurance Company paid a dividend in the form of its subsidiary, Hamilton Resources Corporation, whereby Hamilton Resources Corporation became a subsidiary of Medmarc's parent, PRA Professional Liability Group, Inc.

Effective July 18, 2024, affiliate FD Insurance Company was redomiciled from Florida to Alabama. The change is reflected on the organization chart.

- B. Detail of transactions greater than 0.5% of admitted assets - None.
- C. Transactions with related parties who are not reported on Schedule Y - None.
- D. Amounts due (to) or from related parties:

	December 31, 2024	December 31, 2023
ProAssurance Indemnity Company, Inc.	\$ (106,664)	\$ (127,071)
Subtotal: due to affiliates	(106,664)	(127,071)
Total due to affiliates	<u>\$ (106,664)</u>	<u>\$ (127,071)</u>

E. Management, service contracts, cost sharing agreements

All Agreements are effective January 1, 2015 and were filed with the DISB and the Alabama Department of Insurance and were either approved or not disapproved.

The Company participates in a Captive Manager Agreement (Management Agreement) and a Program Manager Agreement (Program Management Agreement) as well as a Quota Share Reinsurance Agreement with PRA Indemnity.

Under the Management Agreement amended effective July 1, 2016, PRA Indemnity will provide administrative, managerial, organizational and regulatory services for the Company pursuant to the terms of the agreement.

The Company amended its Management Agreement effective August 15, 2022 to reduce the management fee. Notice of Form D was provided to and approved by the DISB and Alabama Department of Insurance.

Under the Program Management Agreement amended October 1, 2019, PRA Indemnity will provide program management services including, but not limited to, administration, accounting, underwriting, claims, and information systems for the Company pursuant to the terms of the agreement.

Under the Quota Share Reinsurance Agreement amended January 1, 2016, the Company shall cede and PRA Indemnity shall accept 95% quota share participation of the Company's gross liability on risks under all policies covered, for coverage limits of \$1 million per claim or less. The Company also shall cede and PRA Indemnity shall accept 100% quota share participation of the Company's gross liability for the portion of coverage limits in excess of \$1 million per claim and 100% of the gross liability for any CyberAssurance or limited network related coverages.

- F. Guarantees or contingencies for related parties - None.
- G. Nature of control relationships - None.
- H. Amounts deducted from value of upstream intermediate entity or ultimate parent owned - None.
- I. Investments in SCA entities exceeding 10% of admitted assets - None.
- J. Impairments of SCA entities - None.
- K. Investments in foreign insurance subsidiaries - None.
- L. Valuation of downstream noninsurance holding company - None.
- M. All SCA Investments - None.
- N. Investment in Insurance SCAs - None.
- O. SCA and SSAP No. 48 Entity Loss Tracking - None.

NOTES TO FINANCIAL STATEMENTS

Note 11 - Debt - None.

Note 12 - Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

- A - D. Defined benefit plans - None.
- E. Defined contribution plans - None.
- F. Multiemployer plans - None.
- G. Consolidated/Holding company plans - None.
- H. Postemployment benefits and compensated absences - None.
- I. Impact of Medicare Modernization Act on postretirement benefits - None.

Note 13 - Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

- A. Capital stock outstanding - Not applicable.
- B. Dividend rate of preferred stock - Not applicable.
- C. Dividend restrictions

There is no statutory formula for dividends paid by RRGs; however, no dividends can be declared or paid by a risk retention group domiciled in the District of Columbia without obtaining the approval of the DISB. Additionally, the Company's bylaws prevent the Company from paying a dividend as long as the surplus note (see Note 13.K) is outstanding without the prior consent of the holder of the note, PRA Indemnity.

- D. Dates and amounts of dividends paid - None.
- E. Amount of ordinary dividends that may be paid - See Note 13.C.
- F. Restrictions on unassigned funds - See Note 13.K.
- G. Advances to surplus not repaid for mutual reciprocals - Not applicable.
- H. Stock held for special purposes - Not applicable.
- I. Changes in balances of special surplus funds - None.
- J. Unassigned funds represented by cumulative unrealized gains / (losses)

The portion of unassigned funds (surplus) represented by cumulative unrealized capital gains / (losses) is \$(310,097).

NOTES TO FINANCIAL STATEMENTS

K. Surplus notes

(1) Item Number	(2) Date Issued	(3) Interest Rate	(4) Original Issue Amount of Note	(5) Is Surplus Note Holder a Related Party? (Y/N)	(6) Carrying Value of Note Prior Year	(7) Carrying Value of Note Current Year*	(8) Unapproved Interest And/Or Principal	(9) Current Year Interest Expense Recognized
1	01/08/2015	6.250	\$ 10,000,000	YES	\$ 10,000,000	\$ 10,000,000	\$ 4,439,236	\$ 633,681
Total	XXX	XXX	\$ 10,000,000	XXX	\$ 10,000,000	\$ 10,000,000	\$ 4,439,236	\$ 633,681

*Total should agree with Page 3, Line 33.

(1) Item Number	(10) Life-To-Date Interest Expense Recognized	(11) Current Year Interest Offset Percentage (not including amounts paid to a 3rd party liquidity provider).	(12) Current Year Principal Paid	(13) Life-To-Date Principal Paid	(14) Date of Maturity	(15) Are Surplus Note Payments Contractually Linked? (Y/N)	(16) Surplus Note Payments Subject to Administrative Offsetting Provisions? (Y/N)
1	\$ 1,902,778	0.000	\$ —	\$ —	01/08/2040	YES	NO
Total	\$ 1,902,778	XXX	\$ —	\$ —	XXX	XXX	XXX

(1) Item Number	(17) Were Surplus Note Proceeds Used to Purchase An Asset Directly From the Holder of the Surplus Note? (Y/N)	(18) Is Asset Issuer a Related Party? (Y/N)	(19) Type of Assets Received Upon Issuance	(20) Principal Amount of Assets Received Upon Issuance	(21) Book/Adjusted Carry Value of Assets	(22) Is Liquidity Source a Related Party to the Surplus Note Issuer? (Y/N)
1	NO	YES	cash	\$ 10,000,000	\$ 10,000,000	NO
Total	XXX	XXX	XXX	\$ 10,000,000	\$ 10,000,000	XXX

A surplus note in the amount of \$10,000,000 was issued on January 8, 2015 under a Subordinated Surplus Note Agreement between the Company by and through PRA Indemnity to lend the Company the amount of Ten Million Dollars (\$10,000,000) as initial capital to facilitate the formation and operation of the Company. Each payment of principal and interest may be made only with the prior approval of the DISB Commissioner and only to the extent the Company has free and divisible surplus to make such payment. In the event of a liquidation proceeding or dissolution, repayment shall be paid to PRA Indemnity out of any assets remaining after the payment of all policy obligations and all other liabilities, but before distribution of assets to members.

Due to the surplus requirements, the first two annual interest payments were approved for payment and remitted during 2021 and the 2018 interest payment was approved and paid in June of 2024. The remaining seven interest payments of approximately \$634,000 each, due January 8, 2019, 2020, 2021, 2022, 2023, 2024, and 2025, have not been submitted for approval to the DISB Commissioner as PRA Indemnity notified the Company it would defer its right to collect the interest payments due so as not to place an undue financial hardship on the Company. The Company’s financial position is evaluated annually to determine if additional interest payments should be submitted to the DISB Commissioner for approval.

- L. Impact of quasi-reorganization - None.
- M. Effective date of quasi-reorganization - None.

Note 14 - Liabilities, Contingencies and Assessments

- A. Contingent commitments - None.
- B. Assessments - None.
- C. Gain contingencies - None.
- D. Claims related extra contractual obligation and bad faith losses stemming from lawsuits - None.
- E. Product warranties - None.
- F. Joint and several liabilities - None.
- G. All other contingencies - None.

Note 15 - Leases - None.

Note 16 - Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk - None.

Note 17 - Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities - None.

NOTES TO FINANCIAL STATEMENTS

Note 18 - Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans - None.

Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - None.

Note 20 - Fair Value Measurements

A. Fair value measurements

(1) Fair value measurements at reporting date:

December 31, 2024					
Description	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Bonds	\$ 8,654,240	\$ —	\$ —	\$ —	\$ 8,654,240
Cash equivalents	2,593,811	—	—	—	2,593,811
Total assets at fair value/NAV	\$ 11,248,051	\$ —	\$ —	\$ —	\$ 11,248,051

December 31, 2023					
Description	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
Assets at fair value					
Bonds	\$ 8,626,240	\$ —	\$ —	\$ —	\$ 8,626,240
Cash equivalents	2,306,005	—	—	—	2,306,005
Total assets at fair value/NAV	\$ 10,932,245	\$ —	\$ —	\$ —	\$ 10,932,245

(2) Fair value measurements in (Level 3) of the fair value hierarchy - None.

(3) The Company’s policy is to recognize transfers between levels at the end of the reporting period.

(4) Valuation techniques and inputs used in the fair value measurements categorized within Level 2 and Level 3 - None.

(5) Fair value of derivative assets and liabilities - None.

B. Additional fair value disclosures - None.

C. Fair values of financial instruments

December 31, 2024							
Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 10,239,146	\$ 10,232,808	\$ 8,654,240	\$ 1,584,906	\$ —	\$ —	\$ —
Cash equivalents	2,593,811	2,593,811	2,593,811	—	—	—	—
Short term investments	—	—	—	—	—	—	—

December 31, 2023							
Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 10,219,459	\$ 10,194,116	\$ 8,626,240	\$ 1,593,219	\$ —	\$ —	\$ —
Cash equivalents	2,698,505	2,697,569	2,306,005	392,500	—	—	—
Short term investments	—	—	—	—	—	—	—

The Company values securities in the Level 1 category using unadjusted quoted prices for identical assets and liabilities in active markets accessible at the measurement date.

Bonds in Level 1 are comprised of SVO-identified ETFs and are reported at fair value.

Cash equivalents in Level 1 are comprised of money market mutual funds that are reported at fair value using net asset value as a practical expedient as prescribed by the NAIC.

NOTES TO FINANCIAL STATEMENTS

Level 2 Valuation Methodologies

Below is a summary description of the valuation methodologies primarily used by the pricing services for bonds included in the Level 2 category, by security type:

U.S. Government obligations, including treasury bills classified as cash equivalents and/or short term investments, are valued based on quoted prices for identical assets, or, in markets that are not active, quotes for similar assets, taking into consideration adjustments for variations in contractual cash flows and yields to maturity.

Short term investments in Level 2 are evaluated using the same methodology previously described for U.S. Government-sponsored enterprise obligations.

- D. Items for which it is not practicable to estimate fair value - None.
- E. Investments measured using the NAV practical expedient - None.

Note 21 - Other Items

- A. Unusual or infrequent items - None.
- B. Troubled debt restructuring: debtors - None.
- C. Other disclosures

Agents' Balances Certification, Section 625.012(5), Florida Statutes

At December 31, 2024, the Company had admitted assets of \$27,877 in accounts receivable for amounts due from policyholders and agents. The Company routinely assesses the collectibility of these receivables and establishes an allowance for uncollectible amounts. There are no amounts due from "controlled" or "controlling" persons included in this balance.

- D. Business interruption insurance recoveries - None.
- E. State transferable and non-transferable tax credits - None.
- F. Subprime-mortgage-related risk exposure - None.
- G. Insurance-linked securities (ILS) contracts - None.
- H. The amount that could be realized on life insurance where the reporting entity is owner and beneficiary or has otherwise obtained rights to control the policy - None.

Note 22 - Events Subsequent

Subsequent events have been considered through February 18, 2025 for the statutory statement filed on or before March 1, 2025.

- Type I - Recognized subsequent events - None.
- Type II - Nonrecognized subsequent events - None.

Note 23 - Reinsurance

- A. Unsecured reinsurance recoverables

The Company has an unsecured aggregate recoverable from the following reinsurer for losses greater than three percent (3%) of capital and surplus at December 31, 2024. This aggregate recoverable consists of amounts paid and unpaid, including IBNR, loss adjustment expenses, and unearned premiums net of Ceded Payable, Letters of Credit and Funds Held.

NAIC Code	Federal ID #	Name of Reinsurer	Amount
33391	63-0720042	ProAssurance Indemnity Company, Inc.	\$ 32,606,037

- B. Reinsurance recoverable in dispute - None.

NOTES TO FINANCIAL STATEMENTS

C. Reinsurance assumed and ceded

(1)

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Unearned Premium	Commission Equity	Unearned Premium	Commission Equity	Unearned Premium	Commission Equity
a. Affiliates	\$ —	\$ —	\$ 2,431,131	\$ 850,896	\$ (2,431,131)	\$ (850,896)
b. All other	—	—	—	—	—	—
c. Total	<u>\$ —</u>	<u>\$ —</u>	<u>\$ 2,431,131</u>	<u>\$ 850,896</u>	<u>\$ (2,431,131)</u>	<u>\$ (850,896)</u>
d. Direct Unearned Premium Reserve:			\$ 2,495,993			

Line (c) of Ceded Reinsurance Premium Reserve Column must equal Page 3, Line 9, first inside amount.

(2) Additional or return commission predicated on loss experience or other profit sharing arrangements - None.

(3) The Company does not use protected cells as an alternative to traditional reinsurance.

D. Uncollectible reinsurance - None.

E. Commutation of ceded reinsurance - None.

F. Retroactive reinsurance - None.

G. Reinsurance accounted for as a deposit - None.

H. Disclosures for transfer of property and casualty run-off agreements - None.

I. Certified reinsurer rating downgraded or status subject to revocation - None.

J. Reinsurance agreements qualifying for reinsurer aggregation - None.

K. Reinsurance credit - None.

Note 24 - Retrospectively Rated Contracts & Contracts Subject to Redetermination - None.

Note 25 - Change in Incurred Losses and Loss Adjustment Expenses

Combined reserves for incurred losses and loss adjustment expenses attributable to insured events as of December 31, 2023 were \$1,662,026. The following provides information concerning the re-estimation of those reserves during the year ended December 31, 2024:

Losses and loss adjustment expenses December 31, 2023	\$ 1,662,026
Re-estimation of reserves (favorable) / unfavorable	<u>(275,000)</u>
Re-estimated December 31, 2023 losses and loss adjustment expenses	\$ 1,387,026

The re-estimation amount above relates to the medical professional liability line of insurance, principally for prior years' development, and is the result of ongoing analysis of recent loss trends. Original estimates are increased or decreased as additional information becomes available.

Note 26 - Intercompany Pooling Arrangements - None.

Note 27 - Structured Settlements - None.

Note 28 - Health Care Receivables - None.

Note 29 - Participating Policies - None.

Note 30 - Premium Deficiency Reserves

(1)

1. Liability carried for premium deficiency reserves	\$ —
2. Date of the most recent evaluation of this liability	12/31/2024
3. Was anticipated investment income utilized in the calculation?	Yes [X] No []

NOTES TO FINANCIAL STATEMENTS

Note 31 - High Deductibles - None.

Note 32 - Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses - None.

Note 33 - Asbestos/Environmental Reserves - None.

Note 34 - Subscriber Savings Accounts - None.

Note 35 - Multiple Peril Crop Insurance - None.

Note 36 - Financial Guaranty Insurance - None.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.

Yes ☒ No ☐
- 1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

Yes ☒ No ☐ N/A ☐
- 1.3

State Regulating? DISTRICT OF COLUMBIA.....
- 1.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes ☒ No ☐
- 1.5

If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

0001127703.....
- 2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ☐ No ☒
- 2.2

If yes, date of change:

.....
- 3.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

.....12/31/2020
- 3.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

.....12/31/2020
- 3.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

.....04/18/2022
- 3.4

By what department or departments? DEPARTMENT OF INSURANCE, SECURITIES AND BANKING OF THE DISTRICT OF COLUMBIA
- 3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ☐ No ☐ N/A ☒
- 3.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes ☐ No ☐ N/A ☒
- 4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business?
4.12 renewals?

Yes ☒ No ☐
Yes ☒ No ☐
- 4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business?
4.22 renewals?

Yes ☐ No ☒
Yes ☐ No ☒
- 5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?
If yes, complete and file the merger history data file with the NAIC.

Yes ☐ No ☒
- 5.2

If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
.....		
.....		
.....		

- 6.1

Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes ☐ No ☒
- 6.2

If yes, give full information
- 7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes ☐ No ☒
- 7.2

If yes,
7.21 State the percentage of foreign control%
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity
.....	
.....	
.....	

- 8.1

Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board?

Yes ☐ No ☒
- 8.2

If response to 8.1 is yes, please identify the name of the DIHC.
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes ☐ No ☒
- 8.4

If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
.....					

- 8.5

Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company?

Yes ☐ No ☒
- 8.6

If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule?

Yes ☐ No ☒ N/A ☐
9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
ERNST & YOUNG LLP, 1901 6TH AVENUE NORTH, SUITE 1200, BIRMINGHAM, AL 35203.....
- 10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes ☐ No ☒
- 10.2

If the response to 10.1 is yes, provide information related to this exemption:
- 10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as

Yes ☐ No ☒

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

- allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?
- 10.4 If the response to 10.3 is yes, provide information related to this exemption:
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [] No [] N/A [X]
- 10.6 If the response to 10.5 is no or n/a, please explain
THE CAPTIVE MANAGER FOR THE COMPANY HAS DESIGNATED AN AUDIT COMMITTEE TO SERVE AS THE COMPANY'S AUDIT COMMITTEE.....
11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
ALISON M. MILFORD, ACAS, MAAA, WTW, 5 CONCOURSE PARKWAY, 18TH FLOOR, ATLANTA, GA 30328.....
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
- 12.11 Name of real estate holding company
- 12.12 Number of parcels involved
- 12.13 Total book/adjusted carrying value \$.....
- 12.2 If yes, provide explanation
13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []
- 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
c. Compliance with applicable governmental laws, rules and regulations;
d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
e. Accountability for adherence to the code.
Yes [X] No []
- 14.11 If the response to 14.1 is no, please explain:
- 14.2 Has the code of ethics for senior managers been amended? Yes [] No [X]
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).
- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1	2	3	4
American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount
.....			
.....			
.....			
.....			
.....			
.....			
.....			
.....			
.....			
.....			
.....			
.....			
.....			
.....			

- BOARD OF DIRECTORS
16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes [X] No []

- FINANCIAL
19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers \$.....

20.12 To stockholders not officers \$.....

20.13 Trustees, supreme or grand (Fraternal only) \$.....
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers \$.....

20.22 To stockholders not officers \$.....

20.23 Trustees, supreme or grand (Fraternal only) \$.....
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

- 21.2

If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others

\$.....
- 21.22 Borrowed from others

\$.....
- 21.23 Leased from others

\$.....
- 21.24 Other

\$.....
- 22.1

Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments?
- Yes

[]

No

[X]
- 22.2

If answer is yes:
- 22.21 Amount paid as losses or risk adjustment

\$.....
- 22.22 Amount paid as expenses

\$.....
- 22.23 Other amounts paid

\$.....
- 23.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?
- Yes

[]

No

[X]
- 23.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:
- \$.....
- 24.1

Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days?
- Yes

[]

No

[X]
- 24.2

If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

1	2
Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)

INVESTMENT

- 25.01

Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03)
- Yes

[X]

No

[]
- 25.02

If no, give full and complete information, relating thereto
- 25.03

For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
- 25.04

For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions.
- \$.....
- 25.05

For the reporting entity's securities lending program, report amount of collateral for other programs.
- \$.....
- 25.06

Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?
- Yes

[]

No

[]

NA

[X]
- 25.07

Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?
- Yes

[]

No

[]

NA

[X]
- 25.08

Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?
- Yes

[]

No

[]

NA

[X]
- 25.09

For the reporting entity's securities lending program, state the amount of the following as of December 31 of the current year:
- 25.091

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2
- \$.....
- 25.092

Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2
- \$.....
- 25.093

Total payable for securities lending reported on the liability page
- \$.....
- 26.1

Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 24.1 and 25.03).
- Yes

[]

No

[X]
- 26.2

If yes, state the amount thereof at December 31 of the current year:
- 26.21

Subject to repurchase agreements
- \$.....
- 26.22

Subject to reverse repurchase agreements
- \$.....
- 26.23

Subject to dollar repurchase agreements
- \$.....
- 26.24

Subject to reverse dollar repurchase agreements
- \$.....
- 26.25

Placed under option agreements
- \$.....
- 26.26

Letter stock or securities restricted as to sale – excluding FHLB Capital Stock
- \$.....
- 26.27

FHLB Capital Stock
- \$.....
- 26.28

On deposit with states
- \$.....
- 26.29

On deposit with other regulatory bodies
- \$.....
- 26.30

Pledged as collateral – excluding collateral pledged to an FHLB
- \$.....
- 26.31

Pledged as collateral to FHLB – including assets backing funding agreements
- \$.....
- 26.32

Other
- \$.....
- 26.3

For category (26.26) provide the following:

1	2	3
Nature of Restriction	Description	Amount

- 27.1

Does the reporting entity have any hedging transactions reported on Schedule DB?
- Yes

[]

No

[X]
- 27.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.
- Yes

[]

No

[]

N/A

[]
- LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:
- 27.3

Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity?
- Yes

[]

No

[]
- 27.4

If the response to 27.3 is YES, does the reporting entity utilize:
- 27.41

Special accounting provision of SSAP No. 108
- Yes

[]

No

[]
- 27.42

Permitted accounting practice
- Yes

[]

No

[]
- 27.43

Other accounting guidance
- Yes

[]

No

[]
- 27.5

By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:
- Yes

[]

No

[]
- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.
- 28.1

Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?
- Yes

[]

No

[X]
- 28.2

If yes, state the amount thereof at December 31 of the current year.
- \$.....
29.

Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping agreements of the NAIC *Financial Condition Examiners Handbook*?
- Yes

[X]

No

[]
- 29.01

For agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

1 Name of Custodian(s)	2 Custodian's Address
US BANK.....	2204 LAKESHORE DRIVE, SUITE 302, BIRMINGHAM, AL 35209.....

29.02 For all agreements that do not comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year? Yes [] No [X]
29.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

29.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. This includes both primary and sub-advisors. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
LAWRENCE COCHRAN.....	I.....

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets? Yes [] No [X]

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? Yes [] No [X]

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D - Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])? Yes [] No [X]
30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
30.2001		
30.2002		
30.2003		
30.2999 TOTAL		

30.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds.....	10,232,808	10,239,147	6,339
31.2 Preferred Stocks.....			
31.3 Totals	10,232,808	10,239,147	6,339

31.4 Describe the sources or methods utilized in determining the fair values:
THE COMPANY OBTAINS FAIR VALUES FROM SVO, THIRD-PARTY PRICING SERVICES, AND/OR INVESTMENT MANAGERS.....

32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [] No [X]
32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [] No []
32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
SEE FOOTNOTE 32.3.....

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GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

- 33.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []
- 33.2 If no, list exceptions:
- 34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:
a.Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
b.Issuer or obligor is current on all contracted interest and principal payments.
c.The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
Has the reporting entity self-designated 5GI securities? Yes [] No [X]
- 35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:
a. The security was either:
i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.
Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual? Yes [] No [X]
- 36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
a. The shares were purchased prior to January 1, 2019.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
d. The fund only or predominantly holds bonds in its portfolio.
e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]
- 37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:
a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
b. If the investment is with a nonrelated party or nonaffiliated then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a -37.c are reported as long-term investments.
Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [] NA [X]
- 38.1 Does the reporting entity directly hold cryptocurrencies? Yes [] No [X]
- 38.2 If the response to 38.1 is yes, on what schedule are they reported?
- 39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies? Yes [] No [X]
- 39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?
39.21 Held directly Yes [] No []
39.22 Immediately converted to U.S. dollars Yes [] No []
- 39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

Table with 3 columns: 1 Name of Cryptocurrency, 2 Immediately Converted to USD, Directly Held, or Both, 3 Accepted for Payment of Premiums

OTHER

- 40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$
- 40.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations, and statistical or rating bureaus during the period covered by this statement.

Table with 2 columns: 1 Name, 2 Amount Paid

- 41.1 Amount of payments for legal expenses, if any? \$
- 41.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

Table with 2 columns: 1 Name, 2 Amount Paid

- 42.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers, or departments of government, if any? \$
- 42.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

Table with 2 columns: 1 Name, 2 Amount Paid

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

32.3 If the pricing service does not provide a price, prices are obtained from the dealers/market makers for the securities. These prices are non-binding but represent their best estimate of fair value per market conditions. Alternatively, management may estimate fair value using pricing models that utilize market based assumptions which have limited observable inputs and compares those results to the prices provided by the broker or custodian.

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No [X]
1.2 If yes, indicate premium earned on U. S. business only. \$
1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$
1.31 Reason for excluding
.....
1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. \$
1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$
1.6 Individual policies:
Most current three years:
1.61 Total premium earned \$
1.62 Total incurred claims \$
1.63 Number of covered lives
All years prior to most current three years:
1.64 Total premium earned \$
1.65 Total incurred claims \$
1.66 Number of covered lives
1.7 Group policies:
Most current three years:
1.71 Total premium earned \$
1.72 Total incurred claims \$
1.73 Number of covered lives
All years prior to most current three years:
1.74 Total premium earned \$
1.75 Total incurred claims \$
1.76 Number of covered lives
2. Health Test:
1 2
Current Year Prior Year
2.1 Premium Numerator \$ \$
2.2 Premium Denominator \$189,778 \$247,581
2.3 Premium Ratio (2.1/2.2)
2.4 Reserve Numerator \$ \$
2.5 Reserve Denominator \$1,538,612 \$1,762,584
2.6 Reserve Ratio (2.4/2.5)
3.1 Did the reporting entity issue participating policies during the calendar year? Yes [] No [X]
3.2 If yes, provide the amount of premium written for participating and/or non-participating policies during the calendar year:
3.21 Participating policies..... \$
3.22 Non-participating policies..... \$
4. For Mutual reporting entities and Reciprocal Exchanges only:
4.1 Does the reporting entity issue assessable policies?..... Yes [] No [X]
4.2 Does the reporting entity issue non-assessable policies?..... Yes [X] No []
4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders?..... %
4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. \$
5. For Reciprocal Exchanges Only:
5.1 Does the exchange appoint local agents?..... Yes [] No []
5.2 If yes, is the commission paid:
5.21 Out of Attorney's-in-fact compensation..... Yes [] No [] N/A []
5.22 As a direct expense of the exchange..... Yes [] No [] N/A []
5.3 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?
.....
5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred?..... Yes [] No []
5.5 If yes, give full information
.....

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

6.1

What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss:

N/A.....

6.2

Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:

N/A.....

6.3

What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?.....

N/A.....

6.4

Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?.....

Yes [] No [X]

6.5

If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss
DUE TO THE NATURE OF MEDICAL PROFESSIONAL AND OTHER PROFESSIONAL LIABILITY COVERAGES, THE COMPANY IS NOT EXPOSED TO CATASTROPHIC OCCURRENCES.....

7.1

Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?.....

Yes [] No [X]

7.2

If yes, indicate the number of reinsurance contracts containing such provisions.....

7.3

If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?.....

Yes [] No []

8.1

Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?.....

Yes [] No [X]

8.2

If yes, give full information

9.1

Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
(c) Aggregate stop loss reinsurance coverage;
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.....

Yes [] No [X]

9.2

Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.....

Yes [] No [X]

9.3

If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.....

9.4

Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62R - Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?.....

Yes [] No [X]

9.5

If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.

9.6

The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
(a) The entity does not utilize reinsurance; or,
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.....

Yes [] No [X]
Yes [] No [X]
Yes [] No [X]

10.

If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?.....

Yes [] No [] N/A [X]

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

11.1

Has the reporting entity guaranteed policies issued by any other entity and now in force:

Yes [] No [X]

11.2

If yes, give full information

12.1

If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:

12.11

Unpaid losses

\$

12.12

Unpaid underwriting expenses (including loss adjustment expenses)

\$

12.2

Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?

\$

12.3

If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?

Yes [] No [] N/A [X]

12.4

If yes, provide the range of interest rates charged under such notes during the period covered by this statement:

12.41

From

%

12.42

To

%

12.5

Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies?

Yes [] No [X]

12.6

If yes, state the amount thereof at December 31 of current year:

12.61

Letters of Credit

\$

12.62

Collateral and other funds

\$

13.1

Largest net aggregate amount insured in any one risk (excluding workers' compensation):

\$50,000

13.2

Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?

Yes [] No [X]

13.3

State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.

14.1

Is the reporting entity a cedant in a multiple cedant reinsurance contract?

Yes [] No [X]

14.2

If yes, please describe the method of allocating and recording reinsurance among the cedants:

14.3

If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?

Yes [] No []

14.4

If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?

Yes [] No []

14.5

If the answer to 14.4 is no, please explain:

15.1

Has the reporting entity guaranteed any financed premium accounts?

Yes [] No [X]

15.2

If yes, give full information

16.1

Does the reporting entity write any warranty business?

Yes [] No [X]

If yes, disclose the following information for each of the following types of warranty coverage:

	1	2	3	4	5
	Direct Losses Incurred	Direct Losses Unpaid	Direct Written Premium	Direct Premium Unearned	Direct Premium Earned
16.11 Home	\$	\$	\$	\$	\$
16.12 Products	\$	\$	\$	\$	\$
16.13 Automobile	\$	\$	\$	\$	\$
16.14 Other*	\$	\$	\$	\$	\$

* Disclose type of coverage:

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F – Part 3 that is exempt from the statutory provision for unauthorized reinsurance? Yes [] No [X]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:

17.11	Gross amount of unauthorized reinsurance in Schedule F – Part 3 exempt from the statutory provision for unauthorized reinsurance.....	\$.....
17.12	Unfunded portion of Interrogatory 17.11.....	\$.....
17.13	Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$.....
17.14	Case reserves portion of Interrogatory 17.11.....	\$.....
17.15	Incurred but not reported portion of Interrogatory 17.11.....	\$.....
17.16	Unearned premium portion of Interrogatory 17.11.....	\$.....
17.17	Contingent commission portion of Interrogatory 17.11.....	\$.....

18.1 Do you act as a custodian for health savings accounts? Yes [] No [X]

18.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$.....

18.3 Do you act as an administrator for health savings accounts? Yes [] No [X]

18.4 If yes, please provide the balance of the funds administered as of the reporting date. \$.....

19. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []

19.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No []

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e., 17.6.

	1 2024	2 2023	3 2022	4 2021	5 2020
Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	3,102,802	5,035,183	4,402,485	4,584,457	5,703,484
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)	3,102,802	5,035,183	4,402,485	4,584,457	5,703,484
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	154,082	248,183	217,483	226,703	263,878
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12. Total (Line 35)	154,082	248,183	217,483	226,703	263,878
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	467,159	638,542	(43,592)	(288,333)	(453,400)
14. Net investment gain (loss) (Line 11)	(122,576)	382,151	148,246	(1,139,262)	173,611
15. Total other income (Line 15)	(680)	1,300	(68)	(23,519)	(9,940)
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	48,143	151,599	(608)	(205,843)	(67,864)
18. Net income (Line 20)	295,760	870,394	105,194	(1,245,271)	(221,865)
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	13,530,061	14,001,736	12,874,745	12,785,995	15,492,712
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	27,877	7,748	154,336	224,987	326,209
20.2 Deferred and not yet due (Line 15.2)	455,481	901,635	782,187	187,112	347,327
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	1,926,626	2,731,770	2,850,255	2,481,530	3,449,428
22. Losses (Page 3, Line 1)	1,013,947	1,108,998	823,197	886,971	982,485
23. Loss adjustment expenses (Page 3, Line 3)	459,803	553,028	690,327	698,013	702,047
24. Unearned premiums (Page 3, Line 9)	64,862	100,558	99,956	82,133	99,312
25. Capital paid up (Page 3, Lines 30 & 31)					
26. Surplus as regards policyholders (Page 3, Line 37)	11,603,435	11,269,966	10,024,490	10,304,465	12,043,284
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	(121,673)	2,998,185	(1,211,761)	(2,526,573)	1,086,218
Risk-Based Capital Analysis					
28. Total adjusted capital	11,603,435	11,269,966	10,024,490	10,304,465	12,043,284
29. Authorized control level risk-based capital	358,948	367,668	355,557	416,887	121,068
Percentage Distribution of Cash, Cash Equivalents and Invested Assets					
(Page 2, Col. 3)(Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1)	79.9	79.1	86.9	78.5	65.0
31. Stocks (Lines 2.1 & 2.2)					
32. Mortgage loans on real estate (Lines 3.1 and 3.2)					
33. Real estate (Lines 4.1, 4.2 & 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)	20.1	20.9	13.1	21.5	35.0
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)					
38. Receivables for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds, (Sch. D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1)					
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47					
49. Total Investment in parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)					

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

FIVE-YEAR HISTORICAL DATA

	1 2024	2 2023	3 2022	4 2021	5 2020
(Continued)					
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)	22,120	153,955	(491,064)	(183,154)	202,619
52. Dividends to stockholders (Line 35)					
53. Change in surplus as regards policyholders for the year (Line 38)	333,469	1,245,476	(279,975)	(1,738,819)	(48,434)
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	1,124,660	84,561	6,269,472	4,054,933	1,612,750
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59. Total (Line 35)	1,124,660	84,561	6,269,472	4,054,933	1,612,750
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3 & 19.4)	56,233	4,228	190,966	202,748	80,635
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65. Total (Line 35)	56,233	4,228	190,966	202,748	80,635
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2)	(20.5)	117.1	63.7	44.0	134.1
68. Loss expenses incurred (Line 3)	(17.3)	(26.0)	42.7	34.8	163.0
69. Other underwriting expenses incurred (Line 4)	(108.4)	(249.0)	15.5	139.5	(55.2)
70. Net underwriting gain (loss) (Line 8)	246.2	257.9	(21.8)	(118.2)	(142.0)
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	(133.1)	(248.9)	14.2	160.4	(63.0)
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	(37.7)	91.1	106.4	78.7	297.2
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	1.3	2.2	2.2	2.2	2.2
One Year Loss Development (\$000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11)	(283)	(43)	4	(51)	387
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)	(2.5)	(0.4)	0.0	(0.4)	3.2
Two Year Loss Development (\$000 omitted)					
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	(308)	(71)	(88)	389	205
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)	(3.1)	(0.7)	(0.7)	3.2	1.8

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3 - Accounting Changes and Correction of Errors? Yes [] No []

If no, please explain



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Alabama				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made											314	60
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)											314	60
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Alaska				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												230
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b)												
13.2.	Comprehensive (hospital and medical) group (b)												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence												
17.2	Other Liability-Claims-Made												
17.3	Excess Workers' Compensation												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx
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)												230
DETAILS OF WRITE-INS													
3401.	One												
3402.	Two												
3403.	Three												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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

..... and number of persons insured under indemnity only products

.....



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Arizona				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												265
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												265
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

..... and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Arkansas				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												265
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												265
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Colorado					DURING THE YEAR 2024			NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												250
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												250
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Delaware			DURING THE YEAR 2024						NAIC Company Code 15647		
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												315
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												315
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF District of Columbia			DURING THE YEAR 2024						NAIC Company Code 15647		
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												22,361
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												22,361
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Florida				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence						(6,852)			(2,936)			
11.2	Medical Professional Liability – Claims-Made	247,903	199,811		229,638	104,610	24,272	264,964	20,257	(25,786)	101,944	37,965	12,395
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)	247,903	199,811		229,638	104,610	17,420	264,964	20,257	(28,722)	101,944	37,965	12,395
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

..... and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Georgia				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												255
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												255
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Hawaii				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												180
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b)												
13.2.	Comprehensive (hospital and medical) group (b)												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence												
17.2	Other Liability-Claims-Made												
17.3	Excess Workers' Compensation												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												180
DETAILS OF WRITE-INS													
3401.	One												
3402.	Two												
3403.	Three												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Illinois				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												250
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												250
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Indiana				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												340
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b)												
13.2.	Comprehensive (hospital and medical) group (b)												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence												
17.2	Other Liability-Claims-Made												
17.3	Excess Workers' Compensation												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												340
DETAILS OF WRITE-INS													
3401.	One												
3402.	Two												
3403.	Three												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Iowa			DURING THE YEAR 2024						NAIC Company Code 15647		
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												100
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												100
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Kentucky			DURING THE YEAR 2024						NAIC Company Code 15647		
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												51
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												51
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Louisiana			DURING THE YEAR 2024						NAIC Company Code 15647		
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												250
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												250
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Maryland			DURING THE YEAR 2024						NAIC Company Code 15647		
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												15
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business												
35.	TOTAL (a)												15
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Massachusetts				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												125
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Michigan				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												.8
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Missouri				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												403
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												403
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

..... and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Montana				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												15
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business												
35.	TOTAL (a)												15
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Nebraska				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												265
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												265
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Nevada				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												530
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												530
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF New Hampshire				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												550
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												550
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

..... and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF New Jersey					DURING THE YEAR 2024			NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												100
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												100
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF New Mexico			DURING THE YEAR 2024						NAIC Company Code 15647		
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												215
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												215
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

..... and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF New York				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence	420,050	545,594		7,908	220,000	589,087	1,917,327	53,555	211,735	821,711	21,003	9,490
11.2	Medical Professional Liability – Claims-Made	2,434,849	3,089,134		2,258,447	800,050	(1,291,008)	19,468,483	467,056	(1,282,324)	7,490,420	262,230	55,007
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.....							149,510			64,076		
17.2	Other Liability-Claims-Made.....						(11,192)	53,594	15,989	11,192	22,969		
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business												
35.	TOTAL (a)	2,854,899	3,634,728		2,266,355	1,020,050	(713,113)	21,588,912	536,601	(1,059,396)	8,399,176	283,233	64,497
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

..... and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF North Dakota				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												420
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												420
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Oklahoma			DURING THE YEAR 2024						NAIC Company Code 15647		
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												265
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												265
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Oregon				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												350
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b)												
13.2.	Comprehensive (hospital and medical) group (b)												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b)												
15.2	Dental Only (b)												
15.3	Disability Income (b)												
15.4	Medicare Supplement (b)												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b)												
15.8	Federal Employees Health Benefits Plan (b)												
15.9	Other Health (b)												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence												
17.2	Other Liability-Claims-Made												
17.3	Excess Workers' Compensation												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												350
DETAILS OF WRITE-INS													
3401.	One												
3402.	Two												
3403.	Three												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Rhode Island				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												100
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx
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)												100
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF South Carolina			DURING THE YEAR 2024						NAIC Company Code 15647		
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												253
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												253
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

..... and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Tennessee				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												280
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												280
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Texas			DURING THE YEAR 2024						NAIC Company Code 15647		
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												250
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												250
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

..... and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Virginia				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												300
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx
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)												300
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF West Virginia				DURING THE YEAR 2024				NAIC Company Code 15647			
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												95
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												95
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Wyoming			DURING THE YEAR 2024						NAIC Company Code 15647		
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability – Claims-Made												230
12.	Earthquake												
13.1.	Comprehensive (hospital and medical) ind (b).....												
13.2.	Comprehensive (hospital and medical) group (b).....												
14.	Credit A & H (group and individual)												
15.1	Vision Only (b).....												
15.2	Dental Only (b).....												
15.3	Disability Income (b).....												
15.4	Medicare Supplement (b).....												
15.5	Medicaid Title XIX (b)												
15.6	Medicare Title XVIII (b)												
15.7	Long-Term Care (b).....												
15.8	Federal Employees Health Benefits Plan (b).....												
15.9	Other Health (b).....												
16.	Workers' Compensation												
17.1	Other Liability-Occurrence.....												
17.2	Other Liability-Claims-Made.....												
17.3	Excess Workers' Compensation.....												
18.1.	Products liability-Occurrence												
18.2.	Products liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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)												230
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 02698		BUSINESS IN THE STATE OF Consolidated			DURING THE YEAR 2024						NAIC Company Code 15647		
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												
9.1	Inland Marine												
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability-Occurrence	420,050	545,594		7,908	220,000	582,235	1,917,327	53,555	208,799	821,711	21,003	9,490
11.2	Medical Professional Liability-Claims-Made	2,682,752	3,288,945		2,488,085	904,660	(1,266,737)	19,733,447	487,313	(1,308,110)	7,592,364	300,509	97,343
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.....							149,510			64,076		
17.2	Other Liability-Claims-Made.....						(11,192)	53,594	15,989	11,192	22,969		
17.3	Excess Workers' Compensation.....												
18.1.	Products Liability-Occurrence												
18.2.	Products Liability-Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2	Other Private Passenger Auto Liability												
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
21.2	Commercial Auto Physical Damage												
22.	Aircraft (all perils)												
23.	Fidelity												
24.	Surety												
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx
32.	Reins nonproportional assumed liability	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx
33.	Reins nonproportional assumed financial lines	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx
34.	Aggregate Write-Ins for Other Lines of Business												
35.	TOTAL (a)	3,102,802	3,834,539		2,495,993	1,124,660	(695,693)	21,853,877	556,858	(1,088,118)	8,501,120	321,512	106,833
DETAILS OF WRITE-INS													
3401.	One.....												
3402.	Two.....												
3403.	Three.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page												
3499.	Totals (Lines 3401 through 3403 Plus 3498) (Line 34 above)												

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

..... and number of persons insured under indemnity only products

Schedule F - Part 1

NONE

Schedule F - Part 2

NONE

22

22

22

22

SCHEDULE F - PART 3 (Continued)

(Credit Risk)

23

SCHEDULE F - PART 3 (Continued)

(Aging of Ceded Reinsurance)

24

SCHEDULE F - PART 3 (Continued)

(Provision for Reinsurance for Certified Reinsurers)

25

26

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

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

(Total Provision for Reinsurance)

[illegible]

SCHEDULE F - PART 4

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

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
		NONE		
Total				

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

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

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

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
6.	PROASSURANCE INDEMNITY COMPANY, INC.....	32,746	2,949	Yes [X] No []
7.				Yes [] No []
8.				Yes [] No []
9.				Yes [] No []
10.				Yes [] No []

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance			
	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)	12,808,886		12,808,886
2. Premiums and considerations (Line 15)	483,358		483,358
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	144,487	(144,487)	
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	93,330	32,606,037	32,699,367
6. Net amount recoverable from reinsurers			
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	13,530,061	32,461,550	45,991,611
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	1,473,750	30,170,248	31,643,998
10. Taxes, expenses, and other obligations (Lines 4 through 8)	54,989		54,989
11. Unearned premiums (Line 9)	64,862	2,431,131	2,495,993
12. Advance premiums (Line 10)	2,069		2,069
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)	139,829	(139,829)	
15. Funds held by company under reinsurance treaties (Line 13)			
16. Amounts withheld or retained by company for account of others (Line 14)			
17. Provision for reinsurance (Line 16)			
18. Other liabilities	191,127		191,127
19. Total liabilities excluding protected cell business (Line 26)	1,926,626	32,461,550	34,388,176
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	11,603,435	X X X	11,603,435
22. Totals (Line 38)	13,530,061	32,461,550	45,991,611

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
NONE

Schedule H - Part 2
NONE

Schedule H - Part 3
NONE

Schedule H - Part 4
NONE

Schedule H - Part 5 - Health Claims
NONE

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES
SCHEDULE P - PART 1 - SUMMARY

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				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. 2015	15	15	1									XXX
3. 2016	638	607	30	1	1	58	55	112	106		9	XXX
4. 2017	1,990	1,881	108	246	234	343	326	182	173		39	XXX
5. 2018	6,285	6,014	271	4,786	4,547	1,910	1,815	1,057	1,004		388	XXX
6. 2019	7,971	7,617	354	5,288	5,058	2,307	2,192	1,630	1,549		426	XXX
7. 2020	6,364	6,044	319	3,178	3,106	568	539	581	551		129	XXX
8. 2021	5,559	5,315	244	16	15	418	397	531	504		48	XXX
9. 2022	4,043	3,844	200	93	88	209	198	208	198		25	XXX
10. 2023	5,018	4,771	248	33	31	45	42	102	97		9	XXX
11. 2024	3,835	3,645	190	9	9	20	19	68	64		5	XXX
12. Totals	XXX	XXX	XXX	13,649	13,089	5,878	5,584	4,470	4,247		1,078	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1.													
2.													
3.													
4.													
5.	5,550	5,335	(698)	(706)	429	408	785	751	156	148		287	8
6.	3,827	3,636	(788)	(737)	551	523	751	719	296	281		214	15
7.	925	879	368	354	196	187	358	342	84	80		89	4
8.	3,908	3,728	(34)	(32)	644	612	1,016	972	276	262		268	14
9.	1,861	1,767	801	771	394	374	747	714	187	178		184	8
10.	1,253	1,190	2,201	2,105	142	135	1,338	1,277	116	110		232	5
11.	59	56	2,623	2,493	47	44	1,103	1,048	175	166		199	13
12.	17,383	16,591	4,471	4,249	2,404	2,284	6,097	5,823	1,289	1,224		1,474	67

	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.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.											
3.	171	163	9	26.8	26.8	28.4					
4.	771	732	39	38.7	38.9	35.6					
5.	13,976	13,302	674	222.4	221.2	248.8				223	64
6.	13,862	13,221	641	173.9	173.6	180.9				140	75
7.	6,257	6,038	218	98.3	99.9	68.3				59	30
8.	6,774	6,458	316	121.9	121.5	129.8				178	90
9.	4,498	4,288	210	111.3	111.6	105.1				123	62
10.	5,229	4,988	241	104.2	104.6	97.4				158	74
11.	4,103	3,899	203	107.0	107.0	107.2				133	66
12.	XXX	XXX	XXX	XXX	XXX	XXX			XXX	1,014	460

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements, which will reconcile Part 1 with Parts 2 and 4.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior												
2. 2015	1	1	1									
3. 2016	XXX	27	28	29	22	22	22	22	22	3	(19)	(19)
4. 2017	XXX	XXX	79	83	30	60	65	65	32	29	(3)	(35)
5. 2018	XXX	XXX	XXX	257	475	491	492	538	538	614	76	76
6. 2019	XXX	XXX	XXX	XXX	392	732	729	597	622	544	(78)	(53)
7. 2020	XXX	XXX	XXX	XXX	XXX	481	428	478	384	185	(200)	(293)
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	214	255	280	276	(4)	21
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	196	228	190	(38)	(6)
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	248	230	(17)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	191	XXX	XXX
12. Totals											(283)	(308)

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	000										XXX	XXX
2. 2015											XXX	XXX
3. 2016	XXX		1	1	2	2	3	3	3	3	XXX	XXX
4. 2017	XXX	XXX		16	18	21	27	29	29	29	XXX	XXX
5. 2018	XXX	XXX	XXX	6	39	115	227	295	305	335	XXX	XXX
6. 2019	XXX	XXX	XXX	XXX	14	74	203	314	330	345	XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX	3	12	72	78	100	XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	1	10	17	22	XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	7	15	XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	4	XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

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
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015	1	1	1							
3. 2016	XXX	26	6	6	(1)		(1)	(1)		
4. 2017	XXX	XXX	77	27	8	(2)	(5)	(5)	3	
5. 2018	XXX	XXX	XXX	3	11	(119)	(66)	(16)	(18)	42
6. 2019	XXX	XXX	XXX	XXX	220	84	107	5	13	(19)
7. 2020	XXX	XXX	XXX	XXX	XXX	417	230	178	189	29
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	181	158	81	42
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	187	122	62
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	186	157
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	184

Schedule P - Part 1A - Home/Farm

NONE

Schedule P - Part 1B - Private Passenger

NONE

Schedule P - Part 1C - Comm Auto/Truck

NONE

Schedule P - Part 1D - Workers' Comp

NONE

Schedule P - Part 1E - Comm Multi Peril

NONE

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

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10		11
				4	5	6	7	8	9		
	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX								XXX
2. 2015											
3. 2016	10	10									
4. 2017											
5. 2018	214	204	10	200	190	22	21	41	39	13	1
6. 2019	575	555	20	2,153	2,081	275	261	182	173	96	8
7. 2020	542	519	23	24	23	76	72	27	25	6	1
8. 2021	478	423	55			7	7	24	23	2	1
9. 2022	256	244	13								
10. 2023	282	268	14	20	19	2	2	1	1	1	1
11. 2024	546	518	27								
12. Totals	XXX	XXX	XXX	2,397	2,312	383	363	275	261	118	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	13	14	15	16	17	18	19	20	Direct and Assumed	Ceded			
1.													
2.													
3.													
4.													
5.			9	8			4	4				1	
6.	350	333	68	66	86	81	93	89	39	37		29	2
7.	250	238	30	30	24	23	96	91	20	19		19	1
8.	750	713	(209)	(197)	3	2	229	219	20	19		37	1
9.			144	138			62	59				9	
10.			182	174			78	74	1	1		12	
11.			344	327			147	140				25	
12.	1,350	1,283	567	545	113	107	709	676	79	75		132	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	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.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.											
3.											
4.											
5.	276	262	14	128.7	128.5	132.1					
6.	3,246	3,121	125	564.8	562.6	627.4				19	10
7.	546	521	26	100.8	100.4	109.7				13	7
8.	824	786	38	172.5	186.0	69.0				25	12
9.	206	197	9	80.3	80.6	74.2				7	3
10.	284	270	13	100.7	101.1	93.4				8	4
11.	491	466	25	90.0	90.0	90.0				17	7
12.	XXX	XXX	XXX	XXX	XXX	XXX			XXX	90	42

SCHEDULE P - PART 1F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12	
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10		11
				4	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2015	.15	.15	.1									
3. 2016	.628	.598	.30	.1	.1	.58	.55	.112	.106		.9	.1
4. 2017	1,978	1,870	108	246	234	343	326	182	173		39	.2
5. 2018	6,037	5,778	259	4,586	4,357	1,888	1,794	1,016	965		375	.65
6. 2019	7,350	7,018	332	3,135	2,978	2,032	1,931	1,448	1,376		331	.82
7. 2020	5,770	5,477	293	3,154	3,084	492	468	554	526		123	.20
8. 2021	5,024	4,831	194	16	15	410	390	507	482		47	.19
9. 2022	3,744	3,560	185	93	88	185	176	163	155		22	.15
10. 2023	4,708	4,476	232	13	12	43	41	100	95		8	.8
11. 2024	3,289	3,126	162	9	9	20	19	68	64		5	15
12. Totals	XXX	XXX	XXX	11,252	10,777	5,472	5,198	4,150	3,942		956	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	13	14	15	16	17	18	19	20	Direct and Assumed	Ceded			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1.													
2.													
3.													
4.													
5.	5,550	5,335	(707)	(715)	429	408	781	747	156	148		286	.8
6.	3,477	3,303	(856)	(803)	465	442	658	630	257	244		185	.13
7.	.675	.641	.320	.308	.172	.163	.254	.243	.64	.61		.69	.3
8.	3,158	3,015	158	148	642	610	779	746	256	243		231	.13
9.	1,711	1,625	658	635	357	339	658	629	117	111		161	.6
10.	1,253	1,190	1,999	1,912	142	135	1,251	1,195	115	109		219	.5
11.	59	56	2,279	2,166	47	44	955	908	175	166		174	13
12.	15,883	15,166	3,851	3,652	2,255	2,142	5,338	5,098	1,140	1,083		1,325	61

	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.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.											
3.	.171	.163	.9	.27.3	.27.2	.28.8					
4.	.771	.732	.39	.39.0	.39.2	.35.8					
5.	13,700	13,040	661	226.9	225.7	255.1				223	64
6.	10,617	10,101	516	144.4	143.9	155.3				120	65
7.	5,685	5,494	191	.98.5	100.3	.65.2				.46	23
8.	5,925	5,648	277	.117.9	.116.9	143.2				152	78
9.	3,943	3,759	184	105.3	105.6	.99.3				109	53
10.	4,916	4,689	227	104.4	104.8	.97.6				149	70
11.	3,612	3,433	179	109.8	109.8	110.1				116	58
12.	XXX	XXX	XXX	XXX	XXX	XXX			XXX	915	410

SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	12
				4	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2015												XXX
3. 2016												XXX
4. 2017												XXX
5. 2018												XXX
6. 2019												XXX
7. 2020												XXX
8. 2021												XXX
9. 2022												XXX
10. 2023												XXX
11. 2024												XXX
12. Totals	XXX	XXX	XXX									XXX

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

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	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.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.											
3.											
4.											
5.											
6.											
7.											
8.											
9.											
10.											
11.											
12.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

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

(\$000 OMITTED)												
Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12	
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10		11
				4	5	6	7	8	9			
Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed	
1. Prior	XXX	XXX	XXX									XXX
2. 2015												
3. 2016												
4. 2017	12	11	1									
5. 2018	32	31	2									
6. 2019	46	43	2									
7. 2020	51	49	2									
8. 2021	56	61	(5)									
9. 2022	43	40	2					21	20		1	1
10. 2023	29	27	1					1	1			
11. 2024												
12. Totals	XXX	XXX	XXX					22	21		1	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1.													
2.													
3.													
4.													
5.													
6.													
7.			18	17			8	7				1	
8.			18	17			8	7				1	
9.	100	95	(6)	(5)	10	10	31	29	34	32		8	1
10.			20	19			9	8				1	
11.													
12.	100	95	50	48	10	10	54	52	34	32		12	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	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.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.											
3.											
4.											
5.											
6.											
7.	25	24	1	48.7	48.7	48.4				1	
8.	25	24	1	44.5	39.1	(23.5)				1	
9.	190	181	9	445.8	447.2	420.8				4	4
10.	29	28	1	102.4	102.4	102.4				1	
11.											
12.	XXX	XXX	XXX	XXX	XXX	XXX			XXX	7	5

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

(\$000 OMITTED)												
Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12	
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10		11
				4	5	6	7	8	9			
Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed	
1. Prior	XXX	XXX	XXX									XXX
2. 2015												
3. 2016												
4. 2017												
5. 2018	1	1										
6. 2019	1	1										
7. 2020												
8. 2021												
9. 2022						23	22	24	23		2	1
10. 2023												
11. 2024												
12. Totals	XXX	XXX	XXX			23	22	24	23		2	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1.													
2.													
3.													
4.													
5.													
6.													
7.													
8.													
9.	50	48	4	3	27	25	(4)	(3)	36	34		6	1
10.													
11.													
12.	50	48	4	3	27	25	(4)	(3)	36	34		6	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	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.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.											
3.											
4.											
5.											
6.											
7.											
8.											
9.	160	152	8							3	3
10.											
11.											
12.	XXX	XXX	XXX	XXX	XXX	XXX			XXX	3	3

Schedule P - Part 1I - Special Property
NONE

Schedule P - Part 1J - Auto Physical
NONE

Schedule P - Part 1K - Fidelity/Surety
NONE

Schedule P - Part 1L - Other
NONE

Schedule P - Part 1M - International
NONE

Schedule P - Part 1N - Reinsurance
NONE

Schedule P - Part 1O - Reinsurance
NONE

Schedule P - Part 1P - Reinsurance
NONE

Schedule P - Part 1R - Prod Liab Occur
NONE

Schedule P - Part 1R - Prod Liab Claims
NONE

Schedule P - Part 1S-Fin./Mtg. Guaranty
NONE

Schedule P - Part 1T - Warranty
NONE

Schedule P - Part 1U - Pet Insurance Plans
NONE

Schedule P - Part 2A
NONE

Schedule P - Part 2B
NONE

Schedule P - Part 2C

NONE

Schedule P - Part 2D

NONE

Schedule P - Part 2E

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

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	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior												
2. 2015												
3. 2016	XXX	1	1	1	1							
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX	8	9	9	9	8	8	12	4	4
6. 2019	XXX	XXX	XXX	XXX	25	90	95	130	155	114	(41)	(16)
7. 2020	XXX	XXX	XXX	XXX	XXX	25	28	25	25	23	(2)	(2)
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	20	22	22	36	14	14
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	13	9	(4)	(4)
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	13	(1)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25	XXX	XXX
12. Totals											(29)	(3)

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

1. Prior												
2. 2015	1	1	1									
3. 2016	XXX	26	28	28	22	22	22	22	22	3	(19)	(19)
4. 2017	XXX	XXX	79	82	29	60	64	64	32	29	(2)	(35)
5. 2018	XXX	XXX	XXX	247	465	482	482	529	529	602	73	73
6. 2019	XXX	XXX	XXX	XXX	364	639	632	465	465	430	(35)	(35)
7. 2020	XXX	XXX	XXX	XXX	XXX	453	398	450	357	160	(197)	(290)
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	191	231	256	239	(17)	8
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	181	208	169	(39)	(11)
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	232	216	(16)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	167	XXX	XXX
12. Totals											(253)	(310)

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

1. Prior												
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

1. Prior												
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX	1	1	1							
5. 2018	XXX	XXX	XXX	1	1	1	1	1	1		(1)	(1)
6. 2019	XXX	XXX	XXX	XXX	3	3	3	2	2		(2)	(2)
7. 2020	XXX	XXX	XXX	XXX	XXX	3	3	2	2	1	(1)	(1)
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	3	3	3	1	(1)	(1)
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	6	4	4
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1		XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											(1)	(1)

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

1. Prior												
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		5	5		5
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												5

Schedule P - Part 2I
NONE

Schedule P - Part 2J
NONE

Schedule P - Part 2K
NONE

Schedule P - Part 2L
NONE

Schedule P - Part 2M
NONE

Schedule P - Part 2N
NONE

Schedule P - Part 2O
NONE

Schedule P - Part 2P
NONE

Schedule P - Part 2R - Prod Liab Occur
NONE

Schedule P - Part 2R - Prod Liab Claims
NONE

Schedule P - Part 2S
NONE

Schedule P - Part 2T
NONE

Schedule P - Part 2U
NONE

Schedule P - Part 3A
NONE

Schedule P - Part 3B
NONE

Schedule P - Part 3C

NONE

Schedule P - Part 3D

NONE

Schedule P - Part 3E

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
1. Prior	.000.											
2. 2015												
3. 2016	.XXX											
4. 2017	.XXX	.XXX										
5. 2018	.XXX	.XXX	.XXX				.1	.1	.1	.11	.1	
6. 2019	.XXX	.XXX	.XXX	.XXX		.2	.5	.79	.85	.86	.5	.1
7. 2020	.XXX	.XXX	.XXX	.XXX	.XXX		.2	.4	.5	.5		
8. 2021	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX						
9. 2022	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					
10. 2023	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		.1	.1	
11. 2024	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			

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

1. Prior	.000.											
2. 2015												
3. 2016	.XXX		.1	.1	.2	.2	.3	.3	.3	.3		.1
4. 2017	.XXX	.XXX		.16	.18	.21	.27	.29	.29	.29	.1	.1
5. 2018	.XXX	.XXX	.XXX	.6	.39	.114	.227	.295	.305	.324	.17	.40
6. 2019	.XXX	.XXX	.XXX	.XXX	.14	.73	.199	.235	.245	.258	.19	.50
7. 2020	.XXX	.XXX	.XXX	.XXX	.XXX	.3	.10	.69	.73	.95	.3	.14
8. 2021	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.1	.10	.17	.21	.1	.5
9. 2022	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.1	.6	.14		.9
10. 2023	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.1	.3	.1	.2
11. 2024	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.1		.2

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

1. Prior	.000.										.XXX	.XXX
2. 2015											.XXX	.XXX
3. 2016	.XXX										.XXX	.XXX
4. 2017	.XXX	.XXX									.XXX	.XXX
5. 2018	.XXX	.XXX	.XXX								.XXX	.XXX
6. 2019	.XXX	.XXX	.XXX	.XXX							.XXX	.XXX
7. 2020	.XXX	.XXX	.XXX	.XXX	.XXX						.XXX	.XXX
8. 2021	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					.XXX	.XXX
9. 2022	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				.XXX	.XXX
10. 2023	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			.XXX	.XXX
11. 2024	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX

NONE

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

1. Prior	.000.											
2. 2015												
3. 2016	.XXX											
4. 2017	.XXX	.XXX										
5. 2018	.XXX	.XXX	.XXX									
6. 2019	.XXX	.XXX	.XXX	.XXX								
7. 2020	.XXX	.XXX	.XXX	.XXX	.XXX							
8. 2021	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX						
9. 2022	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					
10. 2023	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
11. 2024	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		

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

1. Prior	.000.											
2. 2015												
3. 2016	.XXX											
4. 2017	.XXX	.XXX										
5. 2018	.XXX	.XXX	.XXX									
6. 2019	.XXX	.XXX	.XXX	.XXX								
7. 2020	.XXX	.XXX	.XXX	.XXX	.XXX							
8. 2021	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX						
9. 2022	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			.1		
10. 2023	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
11. 2024	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			

Schedule P - Part 3I
NONE

Schedule P - Part 3J
NONE

Schedule P - Part 3K
NONE

Schedule P - Part 3L
NONE

Schedule P - Part 3M
NONE

Schedule P - Part 3N
NONE

Schedule P - Part 3O
NONE

Schedule P - Part 3P
NONE

Schedule P - Part 3R - Prod Liab Occur
NONE

Schedule P - Part 3R - Prod Liab Claims
NONE

Schedule P - Part 3S
NONE

Schedule P - Part 3T
NONE

Schedule P - Part 3U
NONE

Schedule P - Part 4A
NONE

Schedule P - Part 4B
NONE

Schedule P - Part 4C

NONE

Schedule P - Part 4D

NONE

Schedule P - Part 4E

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

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
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX	.1	.1	.1	.1					
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX	.8	.9	.8	.4	.3	.3	.1
6. 2019	XXX	XXX	XXX	XXX	21	29	31	45	47	.6
7. 2020	XXX	XXX	XXX	XXX	XXX	25	.9	.6	.6	.5
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	20	22	21	(2)
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	13	.9
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.14	.12
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25

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

1. Prior										
2. 2015	.1	.1	.1							
3. 2016	XXX	25	.5	.6	(1)		(1)	(1)		
4. 2017	XXX	XXX	.76	.27	.7	(2)	(5)	(5)	.2	
5. 2018	XXX	XXX	XXX	(7)	.1	(128)	(71)	(20)	(21)	42
6. 2019	XXX	XXX	XXX	XXX	196	53	73	(42)	(36)	(25)
7. 2020	XXX	XXX	XXX	XXX	XXX	390	219	170	181	23
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	158	134	58	43
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	173	105	52
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	171	143
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	160

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

1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX	.1	.1	.1					
5. 2018	XXX	XXX	XXX	.1	.1	.1	.1	.1	.1	
6. 2019	XXX	XXX	XXX	XXX	.3	.3	.3	2	2	
7. 2020	XXX	XXX	XXX	XXX	XXX	.3	.3	2	2	.1
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.3	3	3	.1
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	.2	.1
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.1	.1
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		2	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 4I
NONE

Schedule P - Part 4J
NONE

Schedule P - Part 4K
NONE

Schedule P - Part 4L
NONE

Schedule P - Part 4M
NONE

Schedule P - Part 4N
NONE

Schedule P - Part 4O
NONE

Schedule P - Part 4P
NONE

Schedule P - Part 4R - Prod Liab Occur
NONE

Schedule P - Part 4R - Prod Liab Claims
NONE

Schedule P - Part 4S
NONE

Schedule P - Part 4T - Warranty
NONE

Schedule P - Part 4U
NONE

Schedule P - Part 5A- SN1
NONE

Schedule P - Part 5A- SN2
NONE

Schedule P - Part 5A- SN3
NONE

Schedule P - Part 5B- SN1
NONE

Schedule P - Part 5B- SN2
NONE

Schedule P - Part 5B- SN3
NONE

Schedule P - Part 5C- SN1
NONE

Schedule P - Part 5C- SN2
NONE

Schedule P - Part 5C- SN3
NONE

Schedule P - Part 5D- SN1
NONE

Schedule P - Part 5D- SN2
NONE

Schedule P - Part 5D- SN3
NONE

Schedule P - Part 5E- SN1
NONE

Schedule P - Part 5E- SN2
NONE

Schedule P - Part 5E- SN3
NONE

SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL 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
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							1
6. 2019	XXX	XXX	XXX	XXX				4	5	5
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX			1	1	1	1	
6. 2019	XXX	XXX	XXX	XXX	4	4	6	3	2	2
7. 2020	XXX	XXX	XXX	XXX	XXX		1	1	1	1
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			1	1
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX			1	1	1	1	1
6. 2019	XXX	XXX	XXX	XXX	4	4	7	8	8	8
7. 2020	XXX	XXX	XXX	XXX	XXX		1	1	1	1
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			1	1
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX			.1	.1	.1	.1	.1	.1
5. 2018	XXX	XXX	XXX	.5	.8	.11	.14	.17	.17	.17
6. 2019	XXX	XXX	XXX	XXX	.3	.11	.15	.18	.18	.19
7. 2020	XXX	XXX	XXX	XXX	XXX			.1	.1	.3
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX			.1	.1
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.1
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX	.1	.1	.1	.1	.1	.1	.1	.2	
4. 2017	XXX	XXX	.2	.2	.1	.1	.1	.1		
5. 2018	XXX	XXX	XXX	.42	.31	.21	.14	.10	.8	.8
6. 2019	XXX	XXX	XXX	XXX	.58	.42	.32	.19	.16	.13
7. 2020	XXX	XXX	XXX	XXX	XXX	.16	.17	.14	.7	.3
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.17	.18	.15	.13
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.13	.14	.6
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.7	.5
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX	.1	.1	.1	.1	.1	.1	.1	.2	.1
4. 2017	XXX	XXX	.2	.2	.2	.2	.2	.2	.2	.2
5. 2018	XXX	XXX	XXX	.60	.65	.65	.65	.65	.65	.65
6. 2019	XXX	XXX	XXX	XXX	.78	.83	.83	.83	.83	.82
7. 2020	XXX	XXX	XXX	XXX	XXX	.19	.20	.20	.20	.20
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.18	.19	.19	.19
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.14	.15	.15
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.7	.8
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15

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
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1		1
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1		1
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1	1
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1	1
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 5R- SN1A
NONE

Schedule P - Part 5R- SN2A
NONE

Schedule P - Part 5R- SN3A
NONE

Schedule P - Part 5R- SN1B
NONE

Schedule P - Part 5R- SN2B
NONE

Schedule P - Part 5R- SN3B
NONE

Schedule P - Part 5T- SN1
NONE

Schedule P - Part 5T- SN2
NONE

Schedule P - Part 5T- SN3
NONE

Schedule P - Part 6C - SN1
NONE

Schedule P - Part 6C - SN2
NONE

Schedule P - Part 6D - SN1
NONE

Schedule P - Part 6D - SN2
NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX	12	12	12	12	12	12	12	12	
5. 2018	XXX	XXX	XXX	32	32	32	32	32	32	32	
6. 2019	XXX	XXX	XXX	XXX	46	46	46	46	46	46	
7. 2020	XXX	XXX	XXX	XXX	XXX	51	51	51	51	51	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	56	56	56	56	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43	43	43	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29	29	
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)			12	32	46	51	56	43	29		XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX	11	11	11	11	11	11	11	11	
5. 2018	XXX	XXX	XXX	31	31	31	31	31	31	31	
6. 2019	XXX	XXX	XXX	XXX	43	43	43	43	43	43	
7. 2020	XXX	XXX	XXX	XXX	XXX	49	49	49	49	49	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	61	61	61	61	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	40	40	40	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	27	
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)			11	31	43	49	61	40	27		XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX							.1	.1
6. 2019	XXX	XXX	XXX	XXX	.1	.1				.1	.1
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.1
13. Earned Premiums (Sc P-Pt 1)				1	1						XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX							.1	.1
6. 2019	XXX	XXX	XXX	XXX	.1	.1				.1	.1
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.1
13. Earned Premiums (Sc P-Pt 1)				1	1						XXX

SCHEDULE P - PART 6M - INTERNATIONAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior											
2. 2015											
3. 2016	XXX										
4. 2017	XXX	XXX									
5. 2018	XXX	XXX	XXX								
6. 2019	XXX	XXX	XXX	XXX							
7. 2020	XXX	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sc P-Pt 1)											XXX

Schedule P - Part 6N - SN1

NONE

Schedule P - Part 6N - SN2

NONE

Schedule P - Part 6O - SN1

NONE

Schedule P - Part 6O - SN2

NONE

Schedule P - Part 6R - SN1A

NONE

Schedule P - Part 6R - SN2A

NONE

Schedule P - Part 6R - SN1B

NONE

Schedule P - Part 6R - SN2B

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)

SECTION 1

	1	2	3	4	5	6
Schedule P - Part 1	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners						
2. Private Passenger Auto Liability/Medical						
3. Commercial Auto/Truck Liability/Medical.....						
4. Workers' Compensation						
5. Commercial Multiple Peril						
6. Medical Professional Liability-Occurrence	132			21		
7. Medical Professional Liability-Claims-made	1,325			133		
8. Special Liability						
9. Other Liability-Occurrence	12					
10. Other Liability-Claims-made	6					
11. Special Property						
12. Auto Physical Damage						
13. Fidelity/Surety						
14. Other						
15. International						
16. Reinsurance-Nonproportional Assumed Property	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance-Nonproportional Assumed Liability	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance-Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX	XXX	XXX
19. Products Liability-Occurrence						
20. Products Liability-Claims-made						
21. Financial Guaranty/Mortgage Guaranty						
22. Warranty						
23. Pet Insurance Plans						
24. Totals	1,474			154		

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS
(continued)

SECTION 4

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)

SECTION 1

	1	2	3	4	5	6
Schedule P - Part 1	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners						
2. Private Passenger Auto Liability/Medical						
3. Commercial Auto/Truck Liability/Medical						
4. Workers' Compensation						
5. Commercial Multiple Peril						
6. Medical Professional Liability-Occurrence	132			21		
7. Medical Professional Liability-Claims-made	1,325			133		
8. Special Liability						
9. Other Liability-Occurrence	12					
10. Other Liability-Claims-made	6					
11. Special Property						
12. Auto Physical Damage						
13. Fidelity/Surety						
14. Other						
15. International						
16. Reinsurance-Nonproportional Assumed Property						
17. Reinsurance-Nonproportional Assumed Liability						
18. Reinsurance-Nonproportional Assumed Financial Lines						
19. Products Liability-Occurrence						
20. Products Liability-Claims-made						
21. Financial Guaranty/Mortgage Guaranty						
22. Warranty						
23. Pet Insurance Plans						
24. Totals	1,474			154		

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS
(continued)

SECTION 4

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 6

Years in Which Policies Were Issued	INCURRED ADJUSTABLE COMMISSIONS REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 7

Years in Which Policies Were Issued	RESERVES FOR COMMISSION ADJUSTMENTS AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P INTERROGATORIES

1.

The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1

Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or “ERE”) benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost?
If the answer to question 1.1 is “no”, leave the following questions blank. If the answer to question 1.1 is “yes”, please answer the following questions:

Yes [X] No []
- 1.2

What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?

\$1,190,000
- 1.3

Does the company report any DDR reserve as Unearned Premium Reserve per SSAP No. 65?

Yes [X] No []
- 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 [X] N/A []
- 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	2015.....		
1.603	2016.....		
1.604	2017.....		
1.605	2018.....		
1.606	2019.....		
1.607	2020.....		
1.608	2021		
1.609	2022.....		
1.610	2023.....		
1.611	2024.....		
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).CLAIM
If not the same in all years, explain in Interrogatory 7.
- 7.1

The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses?

Yes [X] No []
- 7.2

An extended statement may be attached.
30 legal defense claims were excluded because they do not represent professional liability. The payments and reserves attributable to these are in Schedule P but we are excluding these claims from the overall Sch P claim counts. The DDR amount is direct only and ceded 100%.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated By States And Territories									
States, etc.	1 Active Status (a)	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premium Written for Federal Purchasing Groups (Included in Col. 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama AL R									
2. Alaska AK R									
3. Arizona AZ R									
4. Arkansas AR R									
5. California CA R									
6. Colorado CO R									
7. Connecticut CT R									
8. Delaware DE R									
9. Dist. Columbia DC L									
10. Florida FL R		247,903	199,811		104,610	17,420	264,964		
11. Georgia GA R									
12. Hawaii HI R									
13. Idaho ID R									
14. Illinois IL R									
15. Indiana IN R									
16. Iowa IA R									
17. Kansas KS R									
18. Kentucky KY R									
19. Louisiana LA R									
20. Maine ME R									
21. Maryland MD R									
22. Massachusetts MA R									
23. Michigan MI R									
24. Minnesota MN R									
25. Mississippi MS R									
26. Missouri MO R									
27. Montana MT R									
28. Nebraska NE R									
29. Nevada NV R									
30. New Hampshire NH R									
31. New Jersey NJ R									
32. New Mexico NM R									
33. New York NY R		2,854,899	3,634,728		1,020,050	(713,113)	21,588,912		281,194
34. No. Carolina NC R									
35. No. Dakota ND R									
36. Ohio OH R									
37. Oklahoma OK R									
38. Oregon OR R									
39. Pennsylvania PA R									
40. Rhode Island RI R									
41. So. Carolina SC R									
42. So. Dakota SD R									
43. Tennessee TN R									
44. Texas TX R									
45. Utah UT R									
46. Vermont VT R									
47. Virginia VA R									
48. Washington WA R									
49. West Virginia WV R									
50. Wisconsin WI R									
51. Wyoming WY R									
52. American Samoa AS N									
53. Guam GU N									
54. Puerto Rico PR N									
55. U.S. Virgin Islands VI N									
56. Northern Mariana Islands MP N									
57. Canada CAN N									
58. Aggregate other alien OT XXX									
59. Totals XXX		3,102,802	3,834,539		1,124,660	(695,693)	21,853,877		281,194
DETAILS OF WRITE-INS									
58001. XXX									
58002. XXX									
58003. XXX									
58998. Sum. of remaining write-ins for Line 58 from overflow page XXX									
58999. Totals (Lines 58001 through 58003 + 58998) (Line 58 above) XXX									

(a) Active Status Counts

1. L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG

2. R – Registered – Non-domiciled RRGs

3. E – Eligible – Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile – See DSLI)
4. Q – Qualified – Qualified or accredited reinsurer

5. D – Domestic Surplus Lines Insurer (DSLII) – Reporting entities authorized to write surplus lines in the state of domicile

6. N – None of the above – Not allowed to write business in the state

(b) Explanation of basis of allocation of premiums by states, etc.

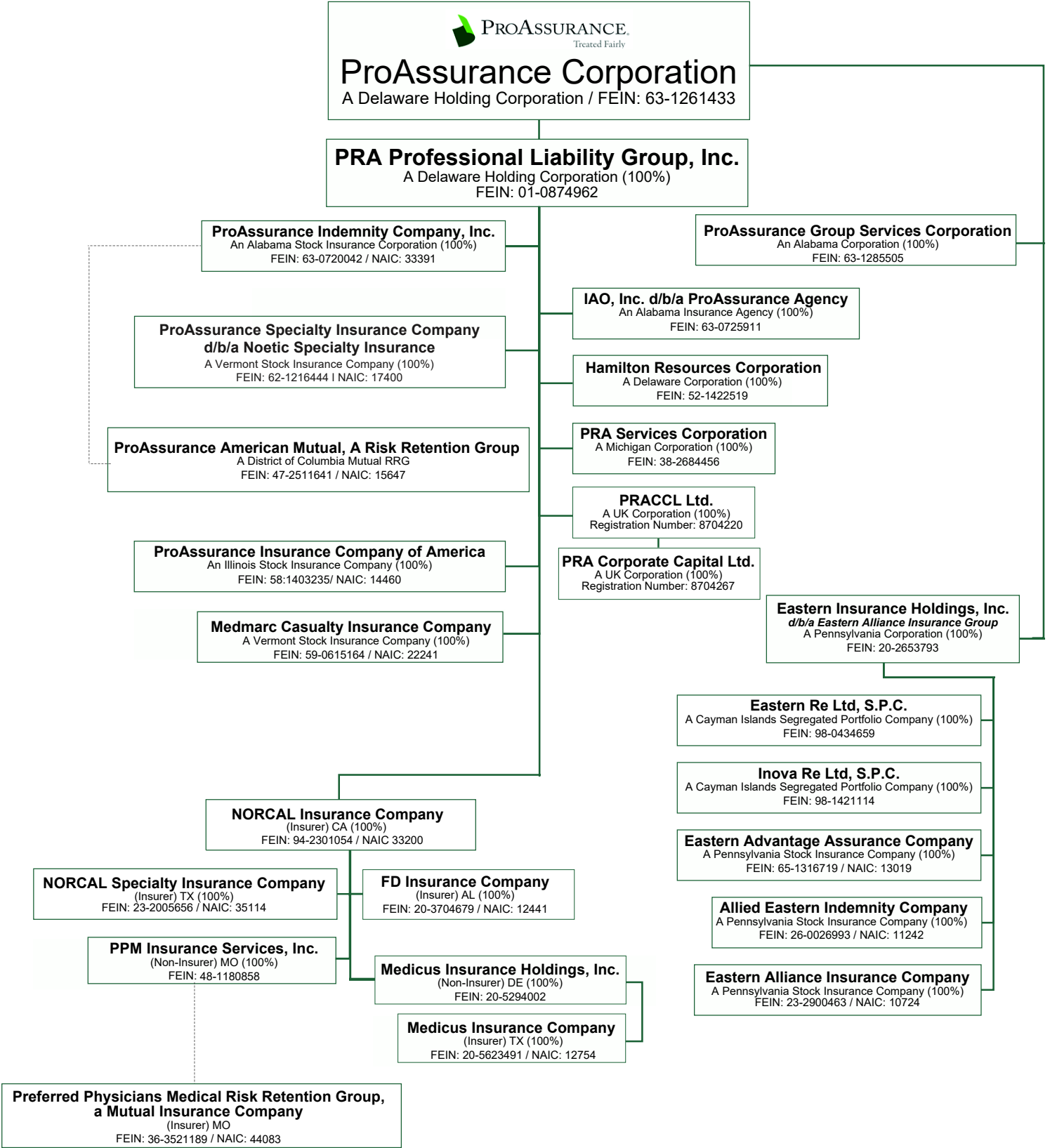
Premiums are allocated by the location of the policyholder or by the location of the majority of the exposures on the policy.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

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

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

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES
OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
		00000	63-1261433		0001127703	New York Stock Exchange	ProAssurance Corporation	DE	UIP		Board, Other			NO	
		00000	01-0874962				PRA Professional Liability Group, Inc.	DE	UIP	ProAssurance Corporation	Ownership	100.0	ProAssurance Corporation	NO	2
02698	ProAssurance Corp Group	14460	58-1403235				ProAssurance Insurance Company of America	IL	IA	PRA Professional Liability Group, Inc.	Ownership	100.0	ProAssurance Corporation	NO	
02698	ProAssurance Corp Group	33391	63-0720042				ProAssurance Indemnity Company, Inc.	AL	OTH	PRA Professional Liability Group, Inc.	Ownership	100.0	ProAssurance Corporation	NO	2
		00000	63-0725911				IA0, Inc. d/b/a ProAssurance Agency	AL	NIA	PRA Professional Liability Group, Inc.	Ownership	100.0	ProAssurance Corporation	NO	
		00000	38-2684456				PRA Services Corporation	MI	NIA	PRA Professional Liability Group, Inc.	Ownership	100.0	ProAssurance Corporation	NO	
		00000	63-1285505				ProAssurance Group Services Corporation	AL	NIA	ProAssurance Corporation	Ownership	100.0	ProAssurance Corporation	NO	
02698	ProAssurance Corp Group	22241	59-0615164				Medmarc Casualty Insurance Company	VT	IA	PRA Professional Liability Group, Inc.	Ownership	100.0	ProAssurance Corporation	NO	
02698	ProAssurance Corp Group	17400	62-1216444				ProAssurance Specialty Insurance Company d/b/a Noetic Specialty Insurance	VT	IA	PRA Professional Liability Group, Inc.	Ownership	100.0	ProAssurance Corporation	NO	
		00000	52-1422519				Hamilton Resources Corporation	DE	NIA	PRA Professional Liability Group, Inc.	Ownership	100.0	ProAssurance Corporation	NO	
		00000	00-0000000				PRACCL Ltd	GBR	NIA	PRA Professional Liability Group, Inc.	Ownership	100.0	ProAssurance Corporation	NO	
		00000	00-0000000				PRA Corporate Capital Ltd	GBR	OTH	PRACCL Ltd	Ownership	100.0	ProAssurance Corporation	NO	1
		00000	20-2653793				Eastern Insurance Holdings, Inc	PA	NIA	ProAssurance Corporation	Ownership	100.0	ProAssurance Corporation	NO	
		00000	98-0434659				Eastern Re Ltd, S.P.C.	CYM	IA	Eastern Insurance Holdings, Inc	Ownership	100.0	ProAssurance Corporation	NO	
		00000	98-1421114				Inova Re Ltd, S.P.C.	CYM	IA	Eastern Insurance Holdings, Inc	Ownership	100.0	ProAssurance Corporation	NO	
02698	ProAssurance Corp Group	13019	65-1316719				Eastern Advantage Assurance Company	PA	IA	Eastern Insurance Holdings, Inc	Ownership	100.0	ProAssurance Corporation	NO	
02698	ProAssurance Corp Group	10724	23-2900463				Eastern Alliance Insurance Company	PA	IA	Eastern Insurance Holdings, Inc	Ownership	100.0	ProAssurance Corporation	NO	
02698	ProAssurance Corp Group	11242	26-0026993				Allied Eastern Indemnity Company	PA	IA	Eastern Insurance Holdings, Inc	Ownership	100.0	ProAssurance Corporation	NO	
02698	ProAssurance Corp Group	15647	47-2511641				ProAssurance American Mutual, A Risk Retention Group	DC	RE	ProAssurance Indemnity Company, Inc	Management, Other		ProAssurance Corporation	NO	
02698	ProAssurance Corp Group	33200	94-2301054				NORCAL Insurance Company	CA	IA	PRA Professional Liability Group, Inc.	Ownership	100.0	ProAssurance Corporation	NO	2
02698	ProAssurance Corp Group	35114	23-2005656				NORCAL Specialty Insurance Company	TX	IA	NORCAL Insurance Company	Ownership	100.0	ProAssurance Corporation	NO	
02698	ProAssurance Corp Group	12441	20-3704679				FD Insurance Company	AL	IA	NORCAL Insurance Company	Ownership	100.0	ProAssurance Corporation	NO	2
00000		00000	20-5294002				Medicus Insurance Holdings, Inc	DE	NIA	NORCAL Insurance Company	Ownership	100.0	ProAssurance Corporation	YES	

98.1

[illegible]

Asterisk	Explanation
1	Corporate member - Lloyd's of London (Syndicate 1729 and Syndicate 6131).....
2	See Note 10.....

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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?

.....

WAIVED
3.

Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?

.....

YES
4.

Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?

.....

YES

APRIL FILING

5.

Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?

.....

YES
6.

Will Management's Discussion and Analysis be filed by April 1?

.....

YES
7.

Will the Supplemental Investment Risks Interrogatories be filed by April 1?

.....

YES

MAY FILING

8.

Will this company be included in a combined annual statement that is filed with the NAIC by May 1?

.....

YES

JUNE FILING

9.

Will an audited financial report be filed by June 1?

.....

YES
10.

Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?

.....

YES

SUPPLEMENTAL FILINGS

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

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?

.....

YES
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?

.....

NO

APRIL FILING

30.

Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?

.....

NO
31.

Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?

.....

NO
32.

Will the Accident and Health Policy Experience Exhibit be filed by April 1?

.....

NO
33.

Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?

.....

NO
34.

Will the Cybersecurity Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?

.....

YES
35.

Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit – Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?

.....

NO
36.

Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?

.....

NO
37.

Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?

.....

NO

AUGUST FILING

38.

Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?

.....

SEE EXPLANATION

Explanation:

38. Not required; premium threshold not met.

Bar Code:



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

17.	 1 5 6 4 7 2 0 2 4 4 0 1 0 0 0 0 0
18.	 1 5 6 4 7 2 0 2 4 3 6 5 0 0 0 0 0
21.	 1 5 6 4 7 2 0 2 4 4 0 0 0 0 0 0 0
22.	 1 5 6 4 7 2 0 2 4 5 0 0 0 0 0 0 0
23.	 1 5 6 4 7 2 0 2 4 5 0 5 0 0 0 0 0
24.	 1 5 6 4 7 2 0 2 4 2 2 4 0 0 0 0 0
25.	 1 5 6 4 7 2 0 2 4 2 2 5 0 0 0 0 0
26.	 1 5 6 4 7 2 0 2 4 2 2 6 0 0 0 0 0
27.	 1 5 6 4 7 2 0 2 4 5 5 5 0 0 0 0 0
29.	 1 5 6 4 7 2 0 2 4 6 0 0 0 0 0 0 0
30.	 1 5 6 4 7 2 0 2 4 2 3 0 5 9 0 0 0
31.	 1 5 6 4 7 2 0 2 4 3 0 6 0 0 0 0 0
32.	 1 5 6 4 7 2 0 2 4 2 1 0 5 9 0 0 0
33.	 1 5 6 4 7 2 0 2 4 2 1 6 5 9 0 0 0
35.	 1 5 6 4 7 2 0 2 4 2 9 0 5 9 0 0 0
36.	 1 5 6 4 7 2 0 2 4 5 6 0 0 0 0 0 0
37.	 1 5 6 4 7 2 0 2 4 5 6 5 0 0 0 0 0

OVERFLOW PAGE FOR WRITE-INS

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1	2	3	4	5	6
	Amount	Percentage of Column 1 Line 13	Amount	Securities Lending Reinvested Collateral Amount	Total (Col. 3+4) Amount	Percentage of Column 5 Line 13
1. Long-Term Bonds (Schedule D, Part 1):						
1.01 U.S. governments	1,578,568	12.324	1,578,568		1,578,568	12.324
1.02 All other governments						
1.03 U.S. states, territories and possessions, etc. guaranteed						
1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed						
1.05 U.S. special revenue and special assessment obligations, etc. non-guaranteed						
1.06 Industrial and miscellaneous						
1.07 Hybrid securities						
1.08 Parent, subsidiaries and affiliates						
1.09 SVO identified funds	8,654,240	67.564	8,654,240		8,654,240	67.564
1.10 Unaffiliated bank loans						
1.11 Unaffiliated certificates of deposit						
1.12 Total long-term bonds	10,232,808	79.888	10,232,808		10,232,808	79.888
2. Preferred stocks (Schedule D, Part 2, Section 1):						
2.01 Industrial and miscellaneous (Unaffiliated)						
2.02 Parent, subsidiaries and affiliates						
2.03 Total preferred stocks						
3. Common stocks (Schedule D, Part 2, Section 2):						
3.01 Industrial and miscellaneous Publicly traded (Unaffiliated)						
3.02 Industrial and miscellaneous Other (Unaffiliated)						
3.03 Parent, subsidiaries and affiliates Publicly traded						
3.04 Parent, subsidiaries and affiliates Other						
3.05 Mutual funds						
3.06 Unit investment trusts						
3.07 Closed-end funds						
3.08 Exchange traded funds						
3.09 Total common stocks						
4. Mortgage loans (Schedule B):						
4.01 Farm mortgages						
4.02 Residential mortgages						
4.03 Commercial mortgages						
4.04 Mezzanine real estate loans						
4.05 Total valuation allowance						
4.06 Total mortgage loans						
5. Real estate (Schedule A):						
5.01 Properties occupied by company						
5.02 Properties held for production of income						
5.03 Properties held for sale						
5.04 Total real estate						
6. Cash, cash equivalents and short-term investments:						
6.01 Cash (Schedule E, Part 1)	(17,733)	(0.138)	(17,733)		(17,733)	(0.138)
6.02 Cash equivalents (Schedule E, Part 2)	2,593,811	20.250	2,593,811		2,593,811	20.250
6.03 Short-term investments (Schedule DA)						
6.04 Total cash, cash equivalents and short-term investments	2,576,078	20.112	2,576,078		2,576,078	20.112
7. Contract loans						
8. Derivatives (Schedule DB)						
9. Other invested assets (Schedule BA)						
10. Receivables for securities						
11. Securities Lending (Schedule DL, Part 1)				XXX	XXX	XXX
12. Other invested assets (Page 2, Line 11)						
13. Total invested assets	12,808,886	100.000	12,808,886		12,808,886	100.000

SCHEDULE A – VERIFICATION BETWEEN YEARS

Real Estate

1. Book/adjusted carrying value, December 31 of prior year.....

2. Cost of acquired:

2.1 Actual cost at time of acquisition (Part 2, Column 6).....

2.2 Additional investment made after acquisition (Part 2, Column 9).....

3. Current year change in encumbrances:

3.1 Totals, Part 1, Column 13.....

3.2 Totals, Part 3, Column 11.....

4. Total gain (loss) on disposals, Part 3, Column 18.....

5. Deduct amounts received on disposals, Part 3, Column 15.....

6. Total foreign exchange change in book/adjusted carrying value:

6.1 Totals, Part 1, Column 15.....

6.2 Totals, Part 3, Column 13.....

7. Deduct current year's other-than-temporary impairment recognized:

7.1 Totals, Part 1, Column 12.....

7.2 Totals, Part 3, Column 10.....

8. Deduct current year's depreciation:

8.1 Totals, Part 1, Column 11.....

8.2 Totals, Part 3, Column 9.....

9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8).....

10. Deduct total nonadmitted amounts

11. Statement value at end of current period (Line 9 minus Line 10).....

NONE

SCHEDULE B – VERIFICATION BETWEEN YEARS

Mortgage Loans

1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....

2. Cost of acquired:

2.1 Actual cost at time of acquisition (Part 2, Column 7).....

2.2 Additional investment made after acquisition (Part 2, Column 8)

3. Capitalized deferred interest and other:

3.1 Totals, Part 1, Column 12.....

3.2 Totals, Part 3, Column 11

4. Accrual of discount.....

5. Unrealized valuation increase/(decrease):

5.1 Totals, Part 1, Column 9

5.2 Totals, Part 3, Column 8

6. Total gain (loss) on disposals, Part 3, Column 18.....

7. Deduct amounts received on disposals, Part 3, Column 15.....

8. Deduct amortization of premium and mortgage interest points and commitment fees.....

9. Total foreign exchange change in book value/recorded investment excluding accrued interest:

9.1 Totals, Part 1, Column 13

9.2 Totals, Part 3, Column 13

10. Deduct current year's other-than-temporary impairment recognized:

10.1 Totals, Part 1, Column 11

10.2 Totals, Part 3, Column 10

11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....

12. Total valuation allowance.....

13. Subtotal (Line 11 plus Line 12).....

14. Deduct total nonadmitted amounts.....

15. Statement value of mortgages owned at end of current period (Line 13 minus Line 14).....

NONE

SCHEDULE BA – VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year	
2.	Cost of acquired:	
2.1	Actual cost at time of acquisition (Part 2, Column 8)	
2.2	Additional investment made after acquisition (Part 2, Column 9)	
3.	Capitalized deferred interest and other:	
3.1	Totals, Part 1, Column 16	
3.2	Totals, Part 3, Column 12	
4.	Accrual of discount	
5.	Unrealized valuation increase/(decrease):	
5.1	Totals, Part 1, Column 13	
5.2	Totals, Part 3, Column 9	
6.	Total gain (loss) on disposals, Part 3, Column 19	
7.	Deduct amounts received on disposals, Part 3, Column 16	
8.	Deduct amortization of premium and depreciation	
9.	Total foreign exchange change in book/adjusted carrying value:	
9.1	Totals, Part 1, Column 17	
9.2	Totals, Part 3, Column 14	
10.	Deduct current year's other-than-temporary impairment recognized:	
10.1	Totals, Part 1, Column 15	
10.2	Totals, Part 3, Column 11	
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	
12.	Deduct total nonadmitted amounts	
13.	Statement value at end of current period (Line 11 minus Line 12)	

NONE

SCHEDULE D – VERIFICATION BETWEEN YEARS

Bonds and Stocks

1.	Book/adjusted carrying value, December 31 of prior year	10,194,116
2.	Cost of bonds and stocks acquired, Part 3, Column 7	
3.	Accrual of discount	14,635
4.	Unrealized valuation increase/(decrease):	
4.1	Part 1, Column 12	28,000
4.2	Part 2, Section 1, Column 15	
4.3	Part 2, Section 2, Column 13	
4.4	Part 4, Column 11	28,000
5.	Total gain (loss) on disposals, Part 4, Column 19	
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7	
7.	Deduct amortization of premium	3,943
8.	Total foreign exchange change in book/adjusted carrying value:	
8.1	Part 1, Column 15	
8.2	Part 2, Section 1, Column 19	
8.3	Part 2, Section 2, Column 16	
8.4	Part 4, Column 15	
9.	Deduct current year's other-than-temporary impairment recognized:	
9.1	Part 1, Column 14	
9.2	Part 2, Section 1, Column 17	
9.3	Part 2, Section 2, Column 14	
9.4	Part 4, Column 13	
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line (2)	
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	10,232,808
12.	Deduct total nonadmitted amounts	
13.	Statement value at end of current period (Line 11 minus Line 12)	10,232,808

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year					
Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS					
Governments (including all obligations guaranteed by governments)	1. United States	1,578,568	1,584,907	1,566,884	1,600,000
	2. Canada				
	3. Other Countries				
	4. Totals	1,578,568	1,584,907	1,566,884	1,600,000
U.S. States, Territories and Possessions (direct and guaranteed)	5. Totals				
U.S. Political Subdivisions of States, Territories and Possessions (direct and guaranteed)	6. Totals				
U.S. Special Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions	7. Totals				
Industrial and Miscellaneous, SVO Identified Funds, Unaffiliated Bank Loans, Unaffiliated Certificates of Deposit and Hybrid Securities (unaffiliated)	8. United States	8,654,240	8,654,240	8,964,337	
	9. Canada				
	10. Other Countries				
	11. Totals	8,654,240	8,654,240	8,964,337	
Parent, Subsidiaries and Affiliates	12. Totals				
	13. Total Bonds	10,232,808	10,239,147	10,531,221	1,600,000
PREFERRED STOCKS					
Industrial and Miscellaneous (unaffiliated)	14. United States				
	15. Canada				
	16. Other Countries				
	17. Totals				
Parent, Subsidiaries and Affiliates	18. Totals				
	19. Total Preferred Stocks				
COMMON STOCKS					
Industrial and Miscellaneous (unaffiliated), Mutual Funds, Unit Investment Trusts, Closed-End Funds and Exchange Traded Funds	20. United States				
	21. Canada				
	22. Other Countries				
	23. Totals				
Parent, Subsidiaries and Affiliates	24. Totals				
	25. Total Common Stocks				
	26. Total Stocks				
	27. Total Bonds and Stocks	10,232,808	10,239,147	10,531,221	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
1. U.S. Governments												
1.1 NAIC 1	397,356	1,181,212				XXX	1,578,568	15.4	1,959,440	18.5	1,578,568	
1.2 NAIC 2						XXX						
1.3 NAIC 3						XXX						
1.4 NAIC 4						XXX						
1.5 NAIC 5						XXX						
1.6 NAIC 6						XXX						
1.7 Totals	397,356	1,181,212				XXX	1,578,568	15.4	1,959,440	18.5	1,578,568	
2. All Other Governments												
2.1 NAIC 1						XXX						
2.2 NAIC 2						XXX						
2.3 NAIC 3						XXX						
2.4 NAIC 4						XXX						
2.5 NAIC 5						XXX						
2.6 NAIC 6						XXX						
2.7 Totals						XXX						
3. U.S. States, Territories and Possessions, etc., Guaranteed												
3.1 NAIC 1						XXX						
3.2 NAIC 2						XXX						
3.3 NAIC 3						XXX						
3.4 NAIC 4						XXX						
3.5 NAIC 5						XXX						
3.6 NAIC 6						XXX						
3.7 Totals						XXX						
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.1 NAIC 1						XXX						
4.2 NAIC 2						XXX						
4.3 NAIC 3						XXX						
4.4 NAIC 4						XXX						
4.5 NAIC 5						XXX						
4.6 NAIC 6						XXX						
4.7 Totals						XXX						
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.1 NAIC 1						XXX						
5.2 NAIC 2						XXX						
5.3 NAIC 3						XXX						
5.4 NAIC 4						XXX						
5.5 NAIC 5						XXX						
5.6 NAIC 6						XXX						
5.7 Totals						XXX						

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
6. Industrial and Miscellaneous (unaffiliated)												
6.1 NAIC 1						XXX						
6.2 NAIC 2						XXX						
6.3 NAIC 3						XXX						
6.4 NAIC 4						XXX						
6.5 NAIC 5						XXX						
6.6 NAIC 6						XXX						
6.7 Totals						XXX						
7. Hybrid Securities												
7.1 NAIC 1						XXX						
7.2 NAIC 2						XXX						
7.3 NAIC 3						XXX						
7.4 NAIC 4						XXX						
7.5 NAIC 5						XXX						
7.6 NAIC 6						XXX						
7.7 Totals						XXX						
8. Parent, Subsidiaries and Affiliates												
8.1 NAIC 1						XXX						
8.2 NAIC 2						XXX						
8.3 NAIC 3						XXX						
8.4 NAIC 4						XXX						
8.5 NAIC 5						XXX						
8.6 NAIC 6						XXX						
8.7 Totals						XXX						
9. SVO Identified Funds												
9.1 NAIC 1	.XXX	XXX	.XXX	XXX	.XXX	8,654,240	8,654,240	84.6	8,626,240	81.5	8,654,240	
9.2 NAIC 2	.XXX	XXX	.XXX	XXX	.XXX							
9.3 NAIC 3	.XXX	XXX	.XXX	XXX	.XXX							
9.4 NAIC 4	.XXX	XXX	.XXX	XXX	.XXX							
9.5 NAIC 5	.XXX	XXX	.XXX	XXX	.XXX							
9.6 NAIC 6	.XXX	XXX	.XXX	XXX	.XXX							
9.7 Totals	.XXX	XXX	.XXX	XXX	.XXX	8,654,240	8,654,240	84.6	8,626,240	81.5	8,654,240	
10. Unaffiliated Bank Loans												
10.1 NAIC 1						XXX						
10.2 NAIC 2						XXX						
10.3 NAIC 3						XXX						
10.4 NAIC 4						XXX						
10.5 NAIC 5						XXX						
10.6 NAIC 6						XXX						
10.7 Totals						XXX						
11. Unaffiliated Certificates of Deposit												
11.1 NAIC 1						XXX						
11.2 NAIC 2						XXX						
11.3 NAIC 3						XXX						
11.4 NAIC 4						XXX						
11.5 NAIC 5						XXX						
11.6 NAIC 6						XXX						
11.7 Totals						XXX						

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
12. Total Bonds Current Year												
12.1 NAIC 1	(d) 397,356	1,181,212				8,654,240	10,232,808	100.0	XXX	XXX	10,232,808	
12.2 NAIC 2	(d)								XXX	XXX		
12.3 NAIC 3	(d)								XXX	XXX		
12.4 NAIC 4	(d)								XXX	XXX		
12.5 NAIC 5	(d)								XXX	XXX		
12.6 NAIC 6	(d)						(c) (e)		XXX	XXX		
12.7 Totals	397,356	1,181,212				8,654,240	(b) 10,232,808	100.0	XXX	XXX	10,232,808	
12.8 Line 12.7 as a % of Col. 7	3.9	11.5				84.6	100.0	XXX	XXX	XXX	100.0	
13. Total Bonds Prior Year												
13.1 NAIC 1	391,564	1,567,876				8,626,240	XXX	XXX	10,585,680	100.0	10,585,679	
13.2 NAIC 2							XXX	XXX				
13.3 NAIC 3							XXX	XXX				
13.4 NAIC 4							XXX	XXX				
13.5 NAIC 5							XXX	XXX	(c)			
13.6 NAIC 6							XXX	XXX	(c)			
13.7 Totals	391,564	1,567,876				8,626,240	XXX	XXX	(b) 10,585,680	100.0	10,585,679	
13.8 Line 13.7 as a % of Col. 9	3.7	14.8				81.5	XXX	XXX	100.0	XXX	100.0	
14. Total Publicly Traded Bonds												
14.1 NAIC 1	397,356	1,181,212				8,654,240	10,232,808	100.0	10,585,680	100.0	10,232,808	XXX
14.2 NAIC 2												XXX
14.3 NAIC 3												XXX
14.4 NAIC 4												XXX
14.5 NAIC 5												XXX
14.6 NAIC 6												XXX
14.7 Totals	397,356	1,181,212				8,654,240	10,232,808	100.0	10,585,680	100.0	10,232,808	XXX
14.8 Line 14.7 as a % of Col. 7	3.9	11.5				84.6	100.0	XXX	XXX	XXX	100.0	XXX
14.9 Line 14.7 as a % of Line 12.7, Col. 7, Section 12	3.9	11.5				84.6	100.0	XXX	XXX	XXX	100.0	XXX
15. Total Privately Placed Bonds												
15.1 NAIC 1											XXX	
15.2 NAIC 2											XXX	
15.3 NAIC 3											XXX	
15.4 NAIC 4											XXX	
15.5 NAIC 5											XXX	
15.6 NAIC 6											XXX	
15.7 Totals											XXX	
15.8 Line 15.7 as a % of Col. 7								XXX	XXX	XXX	XXX	
15.9 Line 15.7 as a % of Line 12.7, Col. 7, Section 12								XXX	XXX	XXX	XXX	

(a) Includes \$ _____ freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$ _____ current year of bonds with Z designations, and\$ _____ prior year of bonds with Z designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement.

(c) Includes \$ _____ current year, \$ _____ prior year of bonds with 5GI designations and \$ _____ current year, \$ _____ prior year of bonds with 6* designations. "5GI" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

(d) Includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1\$ _____; NAIC 2 \$ _____; NAIC 3 \$ _____; NAIC 4 \$ _____; NAIC 5 \$ _____; NAIC 6 \$ _____.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1	2	3	4	5	6	7	8	9	10	11	12
	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line 12.09	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed
1. U.S. Governments												
1.01 Issuer Obligations	397,356	1,181,212				XXX	1,578,568	15.4	1,959,440	18.5	1,578,568	
1.02 Residential Mortgage-Backed Securities						XXX						
1.03 Commercial Mortgage-Backed Securities						XXX						
1.04 Other Loan-Backed and Structured Securities						XXX						
1.05 Totals	397,356	1,181,212				XXX	1,578,568	15.4	1,959,440	18.5	1,578,568	
2. All Other Governments												
2.01 Issuer Obligations						XXX						
2.02 Residential Mortgage-Backed Securities						XXX						
2.03 Commercial Mortgage-Backed Securities						XXX						
2.04 Other Loan-Backed and Structured Securities						XXX						
2.05 Totals						XXX						
3. U.S. States, Territories and Possessions, Guaranteed												
3.01 Issuer Obligations						XXX						
3.02 Residential Mortgage-Backed Securities						XXX						
3.03 Commercial Mortgage-Backed Securities						XXX						
3.04 Other Loan-Backed and Structured Securities						XXX						
3.05 Totals						XXX						
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.01 Issuer Obligations						XXX						
4.02 Residential Mortgage-Backed Securities						XXX						
4.03 Commercial Mortgage-Backed Securities						XXX						
4.04 Other Loan-Backed and Structured Securities						XXX						
4.05 Totals						XXX						
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.01 Issuer Obligations						XXX						
5.02 Residential Mortgage-Backed Securities						XXX						
5.03 Commercial Mortgage-Backed Securities						XXX						
5.04 Other Loan-Backed and Structured Securities						XXX						
5.05 Totals						XXX						
6. Industrial and Miscellaneous												
6.01 Issuer Obligations						XXX						
6.02 Residential Mortgage-Backed Securities						XXX						
6.03 Commercial Mortgage-Backed Securities						XXX						
6.04 Other Loan-Backed and Structured Securities						XXX						
6.05 Totals						XXX						
7. Hybrid Securities												
7.01 Issuer Obligations						XXX						
7.02 Residential Mortgage-Backed Securities						XXX						
7.03 Commercial Mortgage-Backed Securities						XXX						
7.04 Other Loan-Backed and Structured Securities						XXX						
7.05 Totals						XXX						
8. Parent, Subsidiaries and Affiliates												
8.01 Issuer Obligations						XXX						
8.02 Residential Mortgage-Backed Securities						XXX						
8.03 Commercial Mortgage-Backed Securities						XXX						
8.04 Other Loan-Backed and Structured Securities						XXX						
8.05 Affiliated Bank Loans – Issued						XXX						
8.06 Affiliated Bank Loans – Acquired						XXX						
8.07 Totals						XXX						

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE D - PART 1A - SECTION 2 (Continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.09	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
9. SVO Identified Funds												
9.01 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX	8,654,240	8,654,240	84.6	8,626,240	81.5	8,654,240	
10. Unaffiliated Bank Loans												
10.01 Bank Loans - Issued						XXX						
10.02 Bank Loans – Acquired						XXX						
10.03 Totals						XXX						
11. Unaffiliated Certificates of Deposit												
11.01 Totals						XXX						
12. Total Bonds Current Year												
12.01 Issuer Obligations	397,356	1,181,212				XXX	1,578,568	15.4	XXX	XXX	1,578,568	
12.02 Residential Mortgage-Backed Securities						XXX			XXX	XXX		
12.03 Commercial Mortgage-Backed Securities						XXX			XXX	XXX		
12.04 Other Loan-Backed and Structured Securities						XXX			XXX	XXX		
12.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	8,654,240	8,654,240	84.6	XXX	XXX	8,654,240	
12.06 Affiliated Bank Loans						XXX			XXX	XXX		
12.07 Unaffiliated Bank Loans						XXX			XXX	XXX		
12.08 Unaffiliated Certificates of Deposit						XXX			XXX	XXX		
12.09 Totals	397,356	1,181,212				8,654,240	10,232,808	100.0	XXX	XXX	10,232,808	
12.10 Lines 12.09 as a % Col. 7	3.9	11.5				84.6	100.0	XXX	XXX	XXX	100.0	
13. Total Bonds Prior Year												
13.01 Issuer Obligations	391,564	1,567,876				XXX	XXX	XXX	1,959,440	18.5	1,959,439	
13.02 Residential Mortgage-Backed Securities						XXX	XXX	XXX				
13.03 Commercial Mortgage-Backed Securities						XXX	XXX	XXX				
13.04 Other Loan-Backed and Structured Securities						XXX	XXX	XXX				
13.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	8,626,240	XXX	XXX	8,626,240	81.5	8,626,240	
13.06 Affiliated Bank Loans						XXX	XXX	XXX				
13.07 Unaffiliated Bank Loans						XXX	XXX	XXX				
13.08 Unaffiliated Certificates of Deposit						XXX	XXX	XXX				
13.09 Totals	391,564	1,567,876				8,626,240	XXX	XXX	10,585,680	100.0	10,585,679	
13.10 Line 13.09 as a % of Col. 9	3.7	14.8				81.5	XXX	XXX	100.0	XXX	100.0	
14. Total Publicly Traded Bonds												
14.01 Issuer Obligations	397,356	1,181,212				XXX	1,578,568	15.4	1,959,440	18.5	1,578,568	XXX
14.02 Residential Mortgage-Backed Securities						XXX						XXX
14.03 Commercial Mortgage-Backed Securities						XXX						XXX
14.04 Other Loan-Backed and Structured Securities						XXX						XXX
14.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	8,654,240	8,654,240	84.6	8,626,240	81.5	8,654,240	XXX
14.06 Affiliated Bank Loans						XXX						XXX
14.07 Unaffiliated Bank Loans						XXX						XXX
14.08 Unaffiliated Certificates of Deposit						XXX						XXX
14.09 Totals	397,356	1,181,212				8,654,240	10,232,808	100.0	10,585,680	100.0	10,232,808	XXX
14.10 Line 14.09 as a % of Col. 7	3.9	11.5				84.6	100.0	XXX	XXX	XXX	100.0	XXX
14.11 Line 14.09 as a % of Line 12.09, Col. 7, Section 12	3.9	11.5				84.6	100.0	XXX	XXX	XXX	100.0	XXX
15. Total Privately Placed Bonds												
15.01 Issuer Obligations						XXX					XXX	
15.02 Residential Mortgage-Backed Securities						XXX					XXX	
15.03 Commercial Mortgage-Backed Securities						XXX					XXX	
15.04 Other Loan-Backed and Structured Securities						XXX					XXX	
15.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX						XXX	
15.06 Affiliated Bank Loans						XXX					XXX	
15.07 Unaffiliated Bank Loans						XXX					XXX	
15.08 Unaffiliated Certificates of Deposit						XXX					XXX	
15.09 Totals											XXX	
15.10 Line 15.09 as a % of Col. 7								XXX	XXX	XXX	XXX	
15.11 Line 15.09 as a % of Line 12.09, Col. 7, Section 12								XXX	XXX	XXX	XXX	

SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments					
	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets(a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year	391,564	391,564			
2. Cost of short-term investments acquired					
3. Accrual of discount	8,436	8,436			
4. Unrealized valuation increase/(decrease)					
5. Total gain (loss) on disposals					
6. Deduct consideration received on disposals	400,000	400,000			
7. Deduct amortization of premium					
8. Total foreign exchange change in book/adjusted carrying value					
9. Deduct current year's other-than-temporary impairment recognized					
10. Book adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)					
11. Deduct total nonadmitted amounts					
12. Statement value at end of current period (Line 10 minus Line 11)					

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

SCHEDULE E – PART 2 – VERIFICATION BETWEEN YEARS
(Cash Equivalents)

	1	2	3	4
	Total	Bonds	Money Market Mutual Funds	Other (a)
1. Book/adjusted carrying value, December 31 of prior year.....	2,306,005		2,306,005	
2. Cost of cash equivalents acquired.....	2,593,811		2,593,811	
3. Accrual of discount.....				
4. Unrealized valuation increase/(decrease).....				
5. Total gain (loss) on disposals.....				
6. Deduct consideration received on disposals.....	2,306,005		2,306,005	
7. Deduct amortization of premium.....				
8. Total foreign exchange change in book/adjusted carrying value.....				
9. Deduct current year's other-than-temporary impairment recognized.....				
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	2,593,811		2,593,811	
11. Deduct total nonadmitted amounts.....				
12. Statement value at end of current period (Line 10 minus Line 11)	2,593,811		2,593,811	

(a) Indicate the category of such investments, for example, joint ventures, transportation equipment

Schedule A - Part 1
NONE

Schedule A - Part 2
NONE

Schedule A - Part 3
NONE

Schedule B - Part 1
NONE

Schedule B - Part 2
NONE

Schedule B - Part 3
NONE

Schedule BA - Part 1
NONE

Schedule BA - Part 2
NONE

Schedule BA - Part 3
NONE

E10

Showing All Long-Term **BONDS** Owned December 31 of Current Year

1.

1A	\$ 1,578,568	1B	\$ 1C	\$ 1D	\$ 1E	\$ 8,654,240	1F	\$ 1G	\$
1B	2A \$	2B	\$ 2C	\$					
1C	3A \$	3B	\$ 3C	\$					
1D	4A \$	4B	\$ 4C	\$					
1E	5A \$	5B	\$ 5C	\$					
1F	6 \$								

Schedule D - Part 2 - Section 1
NONE

Schedule D - Part 2 - Section 2
NONE

Schedule D - Part 3
NONE

Schedule D - Part 4
NONE

Schedule D - Part 5
NONE

Schedule D - Part 6 - Section 1
NONE

Schedule D - Part 6 - Section 2
NONE

Schedule DA - Part 1
NONE

Schedule DB - Part A - Section 1
NONE

Schedule DB - Part A - Section 2
NONE

Schedule DB - Part B - Section 1
NONE

Schedule DB - Part B - Section 2
NONE

Schedule DB - Part D - Section 1
NONE

Schedule DB - Part D - Section 2
NONE

Schedule DB - Part E
NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Line	Number	Book/Adjusted Carrying Value by NAIC Designation Category	Footnote:
1A	1A	\$	1B \$ 1C \$ 1D \$ 1E \$ 1F \$ 1G \$
1B	2A	\$	2B \$ 2C \$ 2D \$ 2E \$ 2F \$ 2G \$
1C	3A	\$	3B \$ 3C \$ 3D \$ 3E \$ 3F \$ 3G \$
1D	4A	\$	4B \$ 4C \$ 4D \$ 4E \$ 4F \$ 4G \$
1E	5A	\$	5B \$ 5C \$ 5D \$ 5E \$ 5F \$ 5G \$
1F	6	\$	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

States, etc.	1	2	Deposits For the Benefit of All Policyholders		All Other Special Deposits	
	Type of Deposits	Purpose of Deposits	3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
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 Alien and Other OT	XXX	XXX				
59. Total	XXX	XXX				
DETAILS OF WRITE-INS						
5801.						
5802.						
5803.						
5898. Sum of remaining write-ins for Line 58 from overflow page	XXX	XXX				
5899. Totals (Lines 5801 - 5803 + 5898) (Line 58 above)	XXX	XXX				



SUPPLEMENT FOR DECEMBER 31, 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

Designate the type of health care providers reported on this page.
Physicians

SUPPLEMENT “A” TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

States, Etc.		1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
				3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
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	2,652,372	3,356,008	1,020,050	6	(362,092)	15,579,958	40	3,712,798
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 aliens	OT								
59. Totals		2,652,372	3,356,008	1,020,050	6	(362,092)	15,579,958	40	3,712,798
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998.	Sum. of remaining write-ins for Line 58 from overflow page								
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)								



SUPPLEMENT FOR DECEMBER 31, 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

Designate the type of health care providers reported on this page.
Hospitals

SUPPLEMENT “A” TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

States, Etc.		1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
				3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
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				(300,194)	1,578,001	12	310,062
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 aliens	OT							
59.	Totals					(300,194)	1,578,001	12	310,062
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998.	Sum. of remaining write-ins for Line 58 from overflow page								
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)								



SUPPLEMENT FOR DECEMBER 31, 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

Designate the type of health care providers reported on this page.
Other Health Care Professionals

SUPPLEMENT “A” TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

States, Etc.		1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
				3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
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	247,903	199,811	104,610	2	16,860	59,373	8	205,591
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	202,527	278,719			(39,075)	15,503	3	189,487
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 aliens	OT								
59. Totals		450,430	478,530	104,610	2	(22,215)	74,876	11	395,078
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998.	Sum. of remaining write-ins for Line 58 from overflow page								
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)								



SUPPLEMENT FOR DECEMBER 31, 2024 OF THE PROASSURANCE AMERICAN MUTUAL, A RISK RETENTION GROUP

Designate the type of health care providers reported on this page.
Other Health Care Facilities

SUPPLEMENT “A” TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

States, Etc.		1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
				3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
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 aliens	OT								
59. Totals									
DETAILS OF WRITE-INS									
58001.									
58002.									
58003.									
58998.	Sum. of remaining write-ins for Line 58 from overflow page								
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)								