



ANNUAL STATEMENT
For the Year Ended December 31, 2024
OF THE CONDITION AND AFFAIRS OF THE
WESTERN AGRICULTURAL INSURANCE COMPANY

NAIC Group Code 00513, 00513 NAIC Company Code 27871 Employer's ID Number 86-0259779
Organized under the Laws of Iowa, State of Domicile or Port of Entry Iowa
Country of Domicile United States
Incorporated/Organized 10/15/1971 Commenced Business 01/01/1972
Statutory Home Office 5400 University Avenue, West Des Moines, IA, US 50266-5997
Main Administrative Office 5400 University Avenue, West Des Moines, IA, US 50266-5997
Mail Address 5400 University Avenue, West Des Moines, IA, US 50266-5997
Primary Location of Books and Records 5400 University Avenue, West Des Moines, IA, US 50266-5997
Internet Web Site Address www.fbfs.com
Statutory Statement Contact Connie Teresa Dresen, 515-225-5400
connie.dresen@fbfs.com (E-Mail Address), 515-226-6966 (Fax Number)

OFFICERS

Table with 4 columns: Name, Title, Name, Title. Officers include DANIEL DAVID PITCHER (Chief Executive Officer), DONALD JOSEPH SEIBEL (Chief Financial Officer, Treasurer), MARTIN JOSEPH SCHWAGER (Sr. V.P. & Secretary).

OTHER OFFICERS

Table with 4 columns: Name, Title, Name, Title. Other officers include MARK ALLEN MCHARGUE (Chairman), MARK DAVID WICKHAM # (General Counsel), JEFFREY ARNOLD WHITEHEAD (Chief Investment Officer), RONALD LEE MEAD (Chief Operating Officer-Casualty), KELLI ANN EDDY (Vice President-Property Casualty), DANIEL MARVIN KOSTER (Vice President-Marketing & Agency Services), SANJEEV KUMAR SINGH (Chief Information Officer).

DIRECTORS OR TRUSTEES

Table with 4 columns: Name, Name, Name, Name. Directors/Trustees include WESLEY KIM AUSTEN, DONALD KENNETH KEMP, SCOTT EVERETT VANDERWAL, BRENT EUGENE JOHNSON, WILLIAM R. FRAZEE, DANIEL ALLEN HENRY, STEVEN BRADLEY MCCLLOUD, KATHRINE ANN OLSON, LARRY WAYNE REAGAN, BRIAN RICHARD FELDPAUSCH, JOSEPH VINCENT NEWLAND, VALJAY RIGBY #, GLENN EDWARD BRUNKOW #.

State of Iowa, County of Polk

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.

Signatures of DANIEL DAVID PITCHER (Chief Executive Officer), DONALD JOSEPH SEIBEL (Chief Financial Officer, Treasurer), and CONNIE TERESA DRESEN (Accounting Vice President).

Subscribed and sworn to before me this 7th day of February, 2025

- 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

Signature of Lori Lynn Merkley, PC Accounting Manager, August 09, 2025



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

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).....	3,009,013		3,009,013	3,013,454
2. Stocks (Schedule D):				
2.1 Preferred stocks .....				
2.2 Common stocks .....	3,597,230		3,597,230	3,126,804
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 \$ ..... encumbrances).....				
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....				
4.3 Properties held for sale (less \$ ..... encumbrances) .....				
5. Cash (\$ .....3,126,376 , Schedule E-Part 1), cash equivalents (\$ ..... , Schedule E-Part 2) and short-term investments (\$ ..... , Schedule DA).....	3,126,376		3,126,376	(6,032,007)
6. Contract loans (including \$ ..... premium notes).....				
7. Derivatives (Schedule DB).....				
8. Other invested assets (Schedule BA) .....				
9. Receivables for securities .....	1,625		1,625	1,937
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) .....	9,734,244		9,734,244	110,188
13. Title plants less \$ ..... charged off (for Title insurers only).....				
14. Investment income due and accrued .....	4,449		4,449	4,436
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	400,249		400,249	257,676
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums).....				
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	799,367		799,367	904,823
16.2 Funds held by or deposited with reinsured companies .....	40,061		40,061	40,060
16.3 Other amounts receivable under reinsurance contracts .....	218,881		218,881	209,724
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.....				
19. Guaranty funds receivable or on deposit .....	32,417		32,417	132,109
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 .....	4,117,530		4,117,530	12,948,563
24. Health care (\$ ..... ) and other amounts receivable.....				
25. Aggregate write-ins for other-than-invested assets .....	249,290	49,290	200,000	200,000
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	15,596,488	49,290	15,547,198	14,807,579
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....				
28. Total (Lines 26 and 27)	15,596,488	49,290	15,547,198	14,807,579
<b>DETAILS OF WRITE-INS</b>				
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. Other Assets.....	249,290	49,290	200,000	200,000
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)	249,290	49,290	200,000	200,000

## LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8) .....		
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6) .....	163,631	45,597
3. Loss adjustment expenses (Part 2A, Line 35, Column 9) .....		
4. Commissions payable, contingent commissions and other similar charges .....		
5. Other expenses (excluding taxes, licenses and fees) .....	774	774
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....	170,198	74,501
7.1 Current federal and foreign income taxes (including \$ ..... on realized capital gains (losses)) .....	49,181	46,951
7.2 Net deferred tax liability .....	1,109,039	1,063,144
8. Borrowed money \$ ..... and interest thereon \$ .....		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ .....217,383,984 and including warranty reserves of \$ ..... and accrued accident and health experience rating refunds including \$ ..... for medical loss ratio rebate per the Public Health Service Act) .....		
10. Advance premium .....		
11. Dividends declared and unpaid:		
11.1 Stockholders .....		
11.2 Policyholders .....		
12. Ceded reinsurance premiums payable (net of ceding commissions) .....	2,493,449	2,947,080
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20) .....	8,000	27,100
14. Amounts withheld or retained by company for account of others .....		
15. Remittances and items not allocated .....	797,687	104,401
16. Provision for reinsurance (including \$ .....3,000 certified) (Schedule F, Part 3, Column 78) .....	3,000	
17. Net adjustments in assets and liabilities due to foreign exchange rates .....		
18. Drafts outstanding .....		
19. Payable to parent, subsidiaries and affiliates .....	286	
20. Derivatives .....		
21. Payable for securities .....		
22. Payable for securities lending .....		
23. Liability for amounts held under uninsured plans .....		
24. Capital notes \$ ..... and interest thereon \$ .....		
25. Aggregate write-ins for liabilities .....	233,851	334,622
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) .....	5,029,096	4,644,170
27. Protected cell liabilities .....		
28. Total liabilities (Lines 26 and 27) .....	5,029,096	4,644,170
29. Aggregate write-ins for special surplus funds .....		
30. Common capital stock .....	2,808,650	2,808,650
31. Preferred capital stock .....		
32. Aggregate write-ins for other-than-special surplus funds .....		
33. Surplus notes .....		
34. Gross paid in and contributed surplus .....	6,184,704	6,184,704
35. Unassigned funds (surplus) .....	1,524,748	1,170,055
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 30 \$ .....)		
36.2 ..... shares preferred (value included in Line 31 \$ .....)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39) .....	10,518,102	10,163,409
38. Totals (Page 2, Line 28, Col. 3)	15,547,198	14,807,579
<b>DETAILS OF WRITE-INS</b>		
2501. Deferred Compensation .....	213,851	207,622
2502. Other Liabilities .....	20,000	127,000
2503. ....		
2598. Summary of remaining write-ins for Line 25 from overflow page .....		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	233,851	334,622
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)		

STATEMENT OF INCOME

	1 Current Year	2 Prior Year
<b>UNDERWRITING INCOME</b>		
1. Premiums earned (Part 1, Line 35, Column 4) .....		
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7) .....		
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1) .....		
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2) .....		
5. Aggregate write-ins for underwriting deductions .....		
6. Total underwriting deductions (Lines 2 through 5) .....		
7. Net income of protected cells .....		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7) .....		
<b>INVESTMENT INCOME</b>		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17) .....	31,639	31,636
10. Net realized capital gains (losses) less capital gains tax of \$ ..... (Exhibit of Capital Gains (Losses)).....		
11. Net investment gain (loss) (Lines 9 + 10) .....	31,639	31,636
<b>OTHER INCOME</b>		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ ..... amount charged off \$ ..... ) .....		
13. Finance and service charges not included in premiums .....		
14. Aggregate write-ins for miscellaneous income .....		
15. Total other income (Lines 12 through 14) .....		
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15) .....	31,639	31,636
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) .....	31,639	31,636
19. Federal and foreign income taxes incurred .....	49,187	47,017
20. Net income (Line 18 minus Line 19) (to Line 22) .....	(17,548)	(15,381)
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2) .....	10,163,409	9,992,980
22. Net income (from Line 20) .....	(17,548)	(15,381)
23. Net transfers (to) from Protected Cell accounts .....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ ..... 98,789 .....	371,637	132,647
25. Change in net unrealized foreign exchange capital gain (loss) .....		
26. Change in net deferred income tax .....	52,894	36,913
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3) .....	(49,290)	16,250
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1) .....	(3,000)	
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) .....	354,693	170,429
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37) .....	10,518,102	10,163,409
<b>DETAILS OF WRITE-INS</b>		
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. ....		
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) .....		
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) .....		

**CASH FLOW**

	1 Current Year	2 Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance .....	(596,204)	(223,289)
2. Net investment income .....	36,066	36,035
3. Miscellaneous income .....	(19,100)	(76,888)
4. Total (Lines 1 through 3) .....	(579,238)	(264,142)
5. Benefit and loss related payments .....	(907,620)	(291,568)
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....		
7. Commissions, expenses paid and aggregate write-ins for deductions .....	(45,327)	(259,770)
8. Dividends paid to policyholders .....		
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	46,957	251,783
10. Total (Lines 5 through 9) .....	(905,990)	(299,555)
11. Net cash from operations (Line 4 minus Line 10) .....	326,752	35,413
<b>Cash from Investments</b>		
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 .....	312	1
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	312	1
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....		
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) .....		
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) .....	312	1
<b>Cash from Financing and Miscellaneous Sources</b>		
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) .....	8,831,319	(4,631,177)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	8,831,319	(4,631,177)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	9,158,383	(4,595,763)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	(6,032,007)	(1,436,244)
19.2 End of year (Line 18 plus Line 19.1) .....	3,126,376	(6,032,007)

Part 1 - Premiums Earned

**NONE**

Part 1A - Recapitulation of All Premiums

**NONE**

# UNDERWRITING AND INVESTMENT EXHIBIT

## PART 1B - PREMIUMS WRITTEN

Line of Business	1	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3-4-5
	Direct Business (a)	2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire .....			103,155	103,155		
2.1 Allied lines .....	12,265			12,265		
2.2 Multiple peril crop .....	173,539,761				173,539,761	
2.3 Federal flood .....						
2.4 Private crop .....	13,941,467				13,941,467	
2.5 Private flood .....						
3. Farmowners multiple peril .....	40,308,051			37,547,610	2,760,441	
4. Homeowners multiple peril .....	98,352,537			89,337,976	9,014,561	
5.1 Commercial multiple peril (non-liability portion) .....	58,428,045			50,589,548	7,838,497	
5.2 Commercial multiple peril (liability portion) .....	9,285,159			7,891,463	1,393,696	
6. Mortgage guaranty .....						
8. Ocean marine .....						
9.1 Inland marine .....	1,621,745			1,557,794	63,951	
9.2 Pet insurance plans .....						
10. Financial guaranty .....						
11.1 Medical professional liability-occurrence .....						
11.2 Medical professional liability-claims-made .....						
12. Earthquake .....						
13.1 Comprehensive (hospital and medical) 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 .....	37,157,333		627,877	34,288,360	3,496,850	
17.1 Other liability-occurrence .....	9,316,349			8,158,240	1,158,109	
17.2 Other liability-claims-made .....						
17.3 Excess workers' compensation .....						
18.1 Products liability-occurrence .....						
18.2 Products liability-claims-made .....						
19.1 Private passenger auto no-fault (personal injury protection) .....	1,941,216			1,936,247	4,969	
19.2 Other private passenger auto liability .....	46,717,580		37,778	46,643,007	112,351	
19.3 Commercial auto no-fault (personal injury protection) .....	106,073			105,760	313	
19.4 Other commercial auto liability .....	7,142,269			7,123,646	18,623	
21.1 Private passenger auto physical .....	60,370,315			58,220,231	2,150,084	
21.2 Commercial auto physical damage .....	8,180,462			7,878,262	302,200	
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	566,420,627		768,810	351,393,564	215,795,873	
<b>DETAILS OF WRITE-INS</b>						
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 WESTERN AGRICULTURAL INSURANCE COMPANY**

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2 - LOSSES PAID AND INCURRED**

Line of Business	Losses Paid Less Salvage			4 Net Payments (Cols. 1 + 2 - 3)	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 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered					
1. Fire		42,322	42,322					
2.1 Allied lines	6,025		6,025					
2.2 Multiple peril crop	166,308,307		166,308,307					
2.3 Federal flood								
2.4 Private crop	9,480,974		9,480,974					
2.5 Private flood								
3. Farmowners multiple peril	15,531,675		15,531,675					
4. Homeowners multiple peril	76,658,873		76,658,873					
5.1 Commercial multiple peril (non-liability portion)	24,616,340		24,616,340					
5.2 Commercial multiple peril (liability portion)	6,419,266		6,419,266					
6. Mortgage guaranty								
8. Ocean marine								
9.1 Inland marine	899,780		899,780					
9.2 Pet insurance plans								
10. Financial guaranty								
11.1 Medical professional liability-occurrence								
11.2 Medical professional liability-claims-made								
12. Earthquake								
13.1. Comprehensive (hospital and medical) 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	8,360,473	346,515	8,706,988					
17.1 Other liability-occurrence	3,025,000		3,025,000					
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)	993,037		993,037					
19.2 Other private passenger auto liability	23,082,526	61,488	23,144,014					
19.3 Commercial auto no-fault (personal injury protection)	20,047		20,047					
19.4 Other commercial auto liability	3,649,353		3,649,353					
21.1 Private passenger auto physical damage	36,084,905		36,084,905					
21.2 Commercial auto physical damage	6,100,103		6,100,103					
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	675	675					
33. Reinsurance-nonproportional assumed financial lines	XXX							
34. Aggregate write-ins for other lines of business								
35. TOTALS	381,236,684	451,000	381,687,684					
<b>DETAILS OF WRITE-INS</b>								
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 WESTERN AGRICULTURAL INSURANCE COMPANY**

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES**

Line of Business	Reported Losses			4 Net Losses Excl. Incurred But Not Reported (Cols. 1+2-3)	Incurred But Not Reported			8 Net Losses Unpaid (Cols. 4+5+6-7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable		5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire		7,106	7,106						
2.1 Allied lines									
2.2 Multiple peril crop	28,075,497		28,075,497		3,684,362		3,684,362		
2.3 Federal flood									
2.4 Private crop	89,047		89,047		430,000		430,000		
2.5 Private flood									
3. Farmowners multiple peril	5,658,111		5,658,111		4,967,000		4,967,000		
4. Homeowners multiple peril	12,918,702		12,918,702		16,594,000		16,594,000		
5.1 Commercial multiple peril (non-liability portion)	6,003,273		6,003,273		8,117,000		8,117,000		
5.2 Commercial multiple peril (liability portion)	3,885,011		3,885,011		6,850,000		6,850,000		
6. Mortgage guaranty									
8. Ocean marine									
9.1 Inland marine	38,194		38,194						
9.2 Pet insurance plans									
10. Financial guaranty									
11.1 Medical professional liability-occurrence									
11.2 Medical professional liability-claims-made									
12. Earthquake									
13.1 Comprehensive (hospital and medical) 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	20,379,017	823,071	21,202,088		13,599,000	327,939	13,926,939		
17.1 Other liability-occurrence	2,235,501		2,235,501		1,454,000		1,454,000		
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)	457,540		457,540		43,000		43,000		
19.2 Other private passenger auto liability	24,767,008	84,402	24,851,410		15,680,000	39,026	15,719,026		
19.3 Commercial auto no-fault (personal injury protection)	(19,304)		(19,304)		16,000		16,000		
19.4 Other commercial auto liability	1,357,015		1,357,015		4,753,000		4,753,000		
21.1 Private passenger auto physical damage	1,789,440		1,789,440		2,130,000		2,130,000		
21.2 Commercial auto physical damage	77,021		77,021		262,000		262,000		
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	9,821	9,821		XXX	7,123	7,123		
33. Reinsurance-nonproportional assumed financial lines	XXX				XXX				
34. Aggregate write-ins for other lines of business									
35. TOTALS	107,711,073	924,400	108,635,473		78,579,362	374,088	78,953,450		
<b>DETAILS OF WRITE-INS</b>									
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 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1. Claim adjustment services:				
1.1 Direct .....	5,455,841			5,455,841
1.2 Reinsurance assumed .....	2,993			2,993
1.3 Reinsurance ceded .....	5,458,834			5,458,834
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3) .....				
2. Commission and brokerage:				
2.1 Direct, excluding contingent .....		48,889,877		48,889,877
2.2 Reinsurance assumed, excluding contingent .....		212,193		212,193
2.3 Reinsurance ceded, excluding contingent .....		49,102,070		49,102,070
2.4 Contingent-direct .....				
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) .....				
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 .....				
12. Travel and travel items .....				
13. Rent and rent items .....				
14. Equipment .....				
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 .....				
19. Totals (Lines 3 to 18) .....				
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ .....				
20.2 Insurance department licenses and fees .....				
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) .....				
21. Real estate expenses .....				
22. Real estate taxes .....				
23. Reimbursements by uninsured plans .....				
24. Aggregate write-ins for miscellaneous expenses .....				
25. Total expenses incurred .....			(a)	
26. Less unpaid expenses-current year .....			774	774
27. Add unpaid expenses-prior year .....			774	774
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)				
<b>DETAILS OF WRITE-INS</b>				
2401. ....				
2402. ....				
2403. ....				
2498. Summary of remaining write-ins for Line 24 from overflow page .....				
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)				

(a) Includes management fees of \$ ..... 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) 31,591	31,604
1.1 Bonds exempt from U.S. tax	(a)	
1.2 Other bonds (unaffiliated)	(a)	
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) 1	1
7. Derivative instruments	(f)	
8. Other invested assets		
9. Aggregate write-ins for investment income	34	34
10. Total gross investment income	31,626	31,639
11. Investment expenses		(g)
12. Investment taxes, licenses and fees, excluding federal income taxes		(g)
13. Interest expense		(h)
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)		
17. Net investment income (Line 10 minus Line 16)		31,639
<b>DETAILS OF WRITE-INS</b>		
0901. MISCELLANEOUS	34	34
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)	34	34
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 \$ 95 accrual of discount less \$ 4,535 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 \$ 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 \$ 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)					
1.3 Bonds of affiliates					
2.1 Preferred stocks (unaffiliated)					
2.11 Preferred stocks of affiliates					
2.2 Common stocks (unaffiliated)				470,426	
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)				470,426	
<b>DETAILS OF WRITE-INS</b>					
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.....			
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.....			
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 .....	49,290		(49,290)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	49,290		(49,290)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
28. Total (Lines 26 and 27)	49,290		(49,290)
<b>DETAILS OF WRITE-INS</b>			
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. Other Assets.....	49,290		(49,290)
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)	49,290		(49,290)

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

## NOTES TO FINANCIAL STATEMENTS

### 1. Summary of Significant Accounting Policies and Going Concern

#### A. Accounting Practices

The accompanying financial statements of Western Agricultural Insurance Company (we or the Company) are presented on the basis of accounting practices prescribed or permitted by the Insurance Division, Department of Commerce, of the State of Iowa.

The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual (NAIC SAP) has been adopted by the state of Iowa. The state has the right to prescribe practices that differ from those found in NAIC SAP. In addition, the Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices.

A reconciliation of the Company's net income and surplus between NAIC SAP and practices prescribed or permitted by the State of Iowa is shown below.

	SSAP #	F/S Page	F/S Line #	2024	2023
<b>NET INCOME</b>					
(1) Company state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ (17,548)	\$ (15,381)
(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	<u>\$ (17,548)</u>	<u>\$ (15,381)</u>
<b>SURPLUS</b>					
(5) Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 10,518,102	\$ 10,163,409
(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	<u>\$ 10,518,102</u>	<u>\$ 10,163,409</u>

#### B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with accounting practices prescribed or permitted by the Insurance Division, Department of Commerce, of the State of Iowa requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the statutory-basis financial statements and the reported amounts of revenue and expenses during the reporting 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 on a pro-rata basis over the terms of the policies and are stated net of reinsurance placed with other companies.

Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments, cash and cash equivalents are stated at amortized cost.
- (2) Bonds not backed by other loans are stated at amortized cost using the effective interest method. NAIC 3-6 rated bonds not backed by other loans are stated at the lower of cost or fair value. We review for credit deterioration on an ongoing basis. If the review indicates a decline in market value that is deemed other than temporary, the Company will reduce the carrying value to fair value through a specific write down to realized capital losses.
- (3) Common stocks are stated at NAIC value or fair value.
- (4) The Company has no preferred stock.
- (5) The Company has no mortgage loans.
- (6) The Company does not own any loan-backed securities.
- (7) The Company does not hold investments in affiliated entities.
- (8) The Company has no ownership interest in joint ventures.
- (9) The Company has no derivative instruments.
- (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) The reserves for losses and loss adjustment expenses are determined using case-basis evaluations and statistical analysis and represent estimates of the ultimate net cost of all unpaid losses incurred through December 31 of each year. These reserves include estimates of future trends in claim severity, frequency and other factors that could vary as the losses are ultimately settled. Although considerable variability is inherent in such estimates, management believes that the reserves for losses and loss adjustment expenses are adequate. The estimates are continually reviewed and, as adjustments to these reserves become necessary, such adjustments are reflected in current operations. These reserves have been stated net of reinsurance recoverable from other companies and salvage and subrogation recoverable.
- (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's assessment of the relevant conditions as of the issue date of this report do not give rise to substantial doubt of the Company's ability to continue as a going concern.

### 2. Accounting Changes and Corrections of Errors

The Company had no accounting changes and corrections of errors during the two-year period ended December 31, 2024.

### 3. Business Combinations and Goodwill

#### A. Statutory Purchase Method

The Company was not party to any business combinations under the statutory purchase method during the two-year period ended December 31, 2024.

#### B. Statutory Merger

The Company was not party to any statutory merger during the two-year period ended December 31, 2024.

#### C. Impairment Loss

No impairment losses were recognized in 2024 or 2023.

#### D. Subcomponents and Calculation of Adjusted Surplus and Total Admitted Goodwill

The Company was not party to any goodwill transactions during the two-year period ended December 31, 2024.

### 4. Discontinued Operations

The Company had no discontinued operations during the two-year period ended December 31, 2024.

### 5. Investments

#### A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company had no mortgage loans outstanding during the two-year period ended December 31, 2024.

#### B. Debt Restructuring

The Company was not involved in debt restructuring during the two-year period ended December 31, 2024.

#### C. Reverse Mortgages

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

The Company has no reverse mortgages.

D. Loan-Backed Securities

(1)-(5) The Company does not own any loan-backed securities.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

The Company has no repurchase agreements.

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

The Company has no real estate.

K. Low-Income Housing Tax Credits (LIHTC)

The Company has no low-income housing tax credits.

L. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted						
	Current Year					6 Total From Prior Year	7 Increase/ (Decrease) (5 minus 6)
	1 Total General Account (G/A)	2 G/A Supporting Protected Cell Account Activity (a)	3 Total Protected Cell Account Restricted Assets	4 Protected Cell Account Assets Supporting G/A Activity (b)	5 Total (1 plus 3)		
a. Subject to contractual obligation for which liability is not shown	\$	\$	\$	\$	\$	\$	\$
b. Collateral held under security lending agreements							
c. Subject to repurchase agreements							
d. Subject to reverse repurchase agreements							
e. Subject to dollar repurchase agreements							
f. Subject to dollar reverse repurchase agreements							
g. Placed under option contracts							
h. Letter stock or securities restricted as to sale – excluding FHLB capital stock							
i. FHLB capital stock							
j. On deposit with states	2,859,027				2,859,027	2,863,497	(4,470)
k. On deposit with other regulatory bodies							
l. Pledged as collateral to FHLB (including assets backing funding agreements)							
m. Pledged as collateral not captured in other categories							
n. Other restricted assets							
o. Total Restricted Assets (Sum of a through n)	\$ 2,859,027	\$	\$	\$	\$ 2,859,027	\$ 2,863,497	\$ (4,470)

(a) Subset of column 1

(b) Subset of column 3

Restricted Asset Category	Current Year			
	8	9	Percentage	
	Total Nonadmitted Restricted	Total Admitted Restricted (5 minus 8)	10 Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	11 Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown	\$	\$	%	%
b. Collateral held under security lending agreements				
c. Subject to repurchase agreements				
d. Subject to reverse repurchase agreements				
e. Subject to dollar repurchase agreements				
f. Subject to dollar reverse repurchase agreements				
g. Placed under option contracts				
h. Letter stock or securities restricted as to sale – excluding FHLB capital stock				
i. FHLB capital stock				
j. On deposit with states		2,859,027	18.3	18.4
k. On deposit with other regulatory bodies				
l. Pledged as collateral to FHLB (including assets backing funding agreements)				
m. Pledged as collateral				

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

Restricted Asset Category	Total Nonadmitted Restricted	Total Admitted Restricted (5 minus 8)	10 Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	11 Admitted Restricted to Total Admitted Assets (d)
not captured in other categories				
n. Other restricted assets				
<b>o. Total Restricted Assets (Sum of a through n)</b>	\$	\$ 2,859,027	18.3 %	18.4 %

(c) Column 5 divided by Asset Page, Column 1 Line 28  
(d) Column 9 divided by Asset Page, Column 3 Line 28

(2) -(4) The Company has none.

**M. Working Capital Finance Investments**

The Company has no working capital finance investments.

**N. Offsetting and Netting of Assets and Liabilities**

The Company has no offsetting and netting of assets and liabilities.

**O. 5GI Securities**

The Company has no 5GI securities.

**P. Short Sales**

The Company has no short sales.

**Q. Prepayment Penalty and Acceleration Fees**

The Company has no prepayment penalty and acceleration fees.

**S. Aggregate Collateral Loans by Qualifying Investment Collateral**

The Company has no aggregate collateral loans.

**6. Joint Ventures, Partnerships and Limited Liability Companies**

**A. Investments in Joint Ventures, Partnerships and Limited Liability Companies that Exceed 10% of its admitted assets**

The Company has no investment in joint ventures, partnerships or limited liability companies.

**B. Investments in Impaired Joint Ventures, Partnerships and Limited Liability Companies in the year of the Impairment Write-Down**

The Company had no impairment write-downs during the two-year period ended December 31, 2024.

**7. Investment Income**

**A. Due and Accrued Income that was Excluded from Surplus on the following basis**

Bonds and preferred stocks: All past due interest if deemed un-collectible is excluded from investment income. Interest more than 90 days overdue and deemed collectible is non-admitted.

**B. Total Amount Excluded**

The total amount excluded was \$0.

**C. Gross, nonadmitted and admitted amounts for interest income due and accrued.**

The gross and admitted amount for interest income due and accrued is \$4,449 with no non-admitted.

**D. Aggregate deferred interest.**

The Company had no deferred interest.

**E. Cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance.**

The Company had no Cumulative paid-in-kind interest.

**8. Derivative Instruments**

The Company has no investments in derivative instruments.

**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	\$ 55,260	\$	\$ 55,260
(b)	Statutory Valuation Allowance Adjustments	\$	\$	\$
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 55,260	\$	\$ 55,260
(d)	Deferred Tax Assets Nonadmitted	\$	\$	\$
(e)	Subtotal Net Admitted Deferred Tax Asset (1c -1d )	\$ 55,260	\$	\$ 55,260
(f)	Deferred Tax Liabilities	\$ 63,746	\$ 1,100,553	\$ 1,164,299
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ (8,486)	\$ (1,100,553)	\$ (1,109,039)

		12/31/2023		
		(4)	(5)	(6)
		Ordinary	Capital	(Col 4+5) Total
(a)	Gross Deferred Tax Assets	\$ 43,600	\$	\$ 43,600
(b)	Statutory Valuation Allowance Adjustments	\$	\$	\$
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 43,600	\$	\$ 43,600
(d)	Deferred Tax Assets Nonadmitted	\$	\$	\$
(e)	Subtotal Net Admitted Deferred Tax Asset (1c -1d )	\$ 43,600	\$	\$ 43,600
(f)	Deferred Tax Liabilities	\$ 94,786	\$ 1,011,958	\$ 1,106,744
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ (51,186)	\$ (1,011,958)	\$ (1,063,144)

		Change		
		(7)	(8)	(9)
		(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
(a)	Gross Deferred Tax Assets	\$ 11,660	\$	\$ 11,660

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

(b) Statutory Valuation Allowance Adjustments (c) Adjusted Gross Deferred Tax Assets (1a - 1b) (d) Deferred Tax Assets Nonadmitted (e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d ) (f) Deferred Tax Liabilities (g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ .....	\$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ .....	\$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ .....
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2.

12/31/2024		
(1)	(2)	(3)
Ordinary	Capital	(Col 1+2) Total

Admission Calculation Components SSAP No. 101

(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks. (b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The 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. (c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities. (d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ .....	\$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ .....	\$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ .....
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12/31/2023		
(4)	(5)	(6)
Ordinary	Capital	(Col 4+5) Total

(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks. (b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The 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. (c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities. (d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ .....	\$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ .....	\$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ .....
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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. (b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The 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. (c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities. (d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ .....	\$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ .....	\$ ..... \$ ..... \$ ..... \$ ..... \$ ..... \$ .....
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3.

2024	2023
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(a) Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount. (b) Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	..... \$ .....	..... \$ .....	..... \$ .....
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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	..... ..... ..... .....	..... ..... ..... .....	..... ..... ..... .....
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12/31/2024	
(1)	(2)
Ordinary	Capital

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

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

(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	..... ..... ..... .....	..... ..... ..... .....	..... ..... ..... .....
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(b) Does the Company's tax-planning strategies include the use of reinsurance? Yes ..... No ..... X .....



# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

**B. Deferred Tax Liabilities Not Recognized**

The company has no temporary differences for which deferred tax liabilities were not established.

**C. Current income taxes incurred consist of the following major components**

	(1) 12/31/2024	(2) 12/31/2023	(3) (Col 1-2) Change
<b>1. Current Income Tax</b>			
(a) Federal	\$ 49,187	\$ 46,956	\$ 2,231
(b) Foreign	\$	\$	\$
(c) Subtotal (1a+1b)	\$ 49,187	\$ 46,956	\$ 2,231
(d) Federal income tax on net capital gains	\$	\$	\$
(e) Utilization of capital loss carry-forwards	\$	\$	\$
(f) Other	\$	\$ 60	\$ (60)
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$ 49,187	\$ 47,016	\$ 2,171
<b>2. Deferred Tax Assets:</b>			
(a) Ordinary			
(1) Discounting of unpaid losses	\$	\$	\$
(2) Unearned premium reserve	\$	\$	\$
(3) Policyholder reserves	\$	\$	\$
(4) Investments	\$	\$	\$
(5) Deferred acquisition costs	\$	\$	\$
(6) Policyholder dividends accrual	\$	\$	\$
(7) Fixed assets	\$	\$	\$
(8) Compensation and benefits accrual	\$ 44,909	\$ 43,600	\$ 1,309
(9) Pension accrual	\$	\$	\$
(10) Receivables - nonadmitted	\$	\$	\$
(11) Net operating loss carry-forward	\$	\$	\$
(12) Tax credit carry-forward	\$	\$	\$
(13) Other	\$ 10,351	\$	\$ 10,351
(99) Subtotal (sum of 2a1 through 2a13)	\$ 55,260	\$ 43,600	\$ 11,660
(b) Statutory valuation allowance adjustment	\$	\$	\$
(c) Nonadmitted	\$	\$	\$
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ 55,260	\$ 43,600	\$ 11,660
(e) Capital:			
(1) Investments	\$	\$	\$
(2) Net capital loss carry-forward	\$	\$	\$
(3) Real estate	\$	\$	\$
(4) Other	\$	\$	\$
(99) Subtotal (2e1+2e2+2e3+2e4)	\$	\$	\$
(f) Statutory valuation allowance adjustment	\$	\$	\$
(g) Nonadmitted	\$	\$	\$
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$	\$	\$
(i) Admitted deferred tax assets (2d + 2h)	\$ 55,260	\$ 43,600	\$ 11,660
<b>3. Deferred Tax Liabilities:</b>			
(a) Ordinary			
(1) Investments	\$	\$	\$
(2) Fixed assets	\$	\$	\$
(3) Deferred and uncollected premium	\$	\$	\$
(4) Policyholder reserves	\$ 32,574	\$ 65,148	\$ (32,574)
(5) Other	\$ 31,172	\$ 29,638	\$ 1,534
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$ 63,746	\$ 94,786	\$ (31,040)
(b) Capital:			
(1) Investments	\$ 1,100,553	\$ 1,011,958	\$ 88,595
(2) Real estate	\$	\$	\$
(3) Other	\$	\$	\$
(99) Subtotal (3b1+3b2+3b3)	\$ 1,100,553	\$ 1,011,958	\$ 88,595
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 1,164,299	\$ 1,106,744	\$ 57,555
<b>4. Net deferred tax assets/liabilities (2i - 3c)</b>	<b>\$ (1,109,039)</b>	<b>\$ (1,063,144)</b>	<b>\$ (45,895)</b>

**D. Among the more significant book to tax adjustments were the following:**

The provision for statutory income taxes is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes. The significant items causing this difference are as follows:

	Amount	Tax Effect	Effective Tax Rate
Net income after capital gains / losses and before all other federal income taxes	\$ 31,639	\$ 6,644	
Tax expense (benefit) on capital gains / losses	0	0	
	31,639	6,644	21.00%
Deferred tax on surplus items	421,136	88,438	279.53%
Other tax credit	—	—	0.00%
<b>Total</b>	<b>452,775</b>	<b>95,082</b>	<b>300.52%</b>
Federal income tax incurred [expense (benefit)]		49,187	155.46%
Deferred tax expense (benefit), excluding tax on unrealized gains / losses		(52,894)	(167.18)%
Deferred tax expenses (benefit) on unrealized gains/losses		98,789	312.24%
Total statutory income taxes		<u>\$ 95,082</u>	<u>300.52%</u>

**E. Operating Loss and Tax Credit Carryforwards**

(1) At December 31, 2024, the Company had no net operating loss carryforwards.

(2) The following is income tax expense for 2022, 2023 and 2024 that is available for recoupment in the event of future net losses:

Year	Ordinary	Capital	Total
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# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

2022	—	—	—	—
2023	—	—	—	—
2024	69,869	—	—	69,869
<b>Total</b>	<b>\$ 69,869</b>	<b>\$ —</b>	<b>\$ —</b>	<b>\$ 69,869</b>

(3) At December 31, 2024, the Company had \$0 in deposits admitted under Section 6603 of the Internal Revenue Code.

**F. Consolidated Federal Income Tax Return**

(1) The Company's federal income tax return is consolidated with the following entities:

- Farm Bureau Property & Casualty Insurance Company
- Farm Bureau Mutual Holding Company
- Farm Bureau Multi-State Services, Inc.

(2) The method of allocation between the companies is subject to written agreement, approved by the Board of Directors. Allocation is based upon separate return calculations with current credit provided for net losses utilized. Intercompany tax balances are settled annually. As a member of the consolidated tax group, the Company has joint and several liability for the tax liabilities of each member of the group should such member be unable to satisfy its obligations under the agreement.

**G. Federal or Foreign Income Tax Loss Contingencies**

The Company believes that the liability related to any federal or foreign tax loss contingencies will not change significantly in the next 12 months.

**H. Repatriation Transition Tax (RTT)**

The Company is not subject to the Repatriation Transition tax.

**I. Alternative Minimum Tax Credit**

At December 31, 2024, the Company had no AMT credit carryforwards.

The Inflation Reduction Act (the Act) was enacted on August 16th, 2022. The Act includes a corporate alternative minimum tax (CAMT) that will apply to corporate taxpayers with average "adjusted financial statement income" of \$1 billion or more, for tax years beginning after December 31, 2022. The company has determined that it does not expect to be subject to the CAMT. Accordingly, the company's financial statements for the current reporting period do not reflect any impact of the Act's enactment.

**10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties**

**A., B. and C.**

The Company had no material related party transactions requiring disclosure.

**D. Amounts Due From or To Related Parties**

At December 31, 2024, the Company reported \$4.1 million as amounts receivable from affiliates and an immaterial amount payable to affiliates. These balances arise out of the ordinary course of business and generally are settled within 30 days.

**E. Material Management or Service Contracts and Cost-Sharing Arrangements**

The Company is party to several management or service contracts with affiliates, the expense associated with these agreements is immaterial for 2024 and 2023 due to the intercompany pooling agreement (see note 26).

**F. Guarantees or Undertakings**

The Company has made no material guarantees for the benefit of an affiliate.

**G. Nature of the Control Relationship**

Farm Bureau Property & Casualty Insurance Company (FBPCIC), a property-casualty insurer domiciled in the state of Iowa, owns 100% of the Company's outstanding common stock. The Company's Board of Directors is the same as that of FBPCIC, giving FBPCIC control of the Company.

**H. Amount Deducted for Investment in Upstream Intermediate Entity or Ultimate Parent Owned**

The Company does not own any shares of an upstream intermediate or ultimate parent company.

**I. Investments in SCA that Exceed 10% of Admitted Assets**

The Company holds no investment in subsidiary, controlled or affiliated investments that exceed 10% of admitted assets.

**J. Investments in Impaired SCAs**

The Company did not recognize any impairment write-downs for subsidiary, controlled or affiliated companies during the statement period.

**K. Investment in Foreign Insurance Subsidiary**

The Company has no investments in a foreign insurance subsidiary.

**L. Investment in Downstream Noninsurance Holding Company**

The Company has no investment in a downstream noninsurance holding company.

**M. All SCA Investments**

M-O. The Company has no investments in SCA entities.

**11. Debt**

**A. All Other Debt**

The Company has no capital notes or other debt outstanding.

**B. FHLB (Federal Home Loan Bank) Agreements**

The Company has no FHLB (Federal Home Loan Bank) agreements.

**12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans**

Retirement Plans, Deferred Compensation, Post-employment Benefits and Compensated Absences and Other Postretirement Benefit Plans  
FBL Financial Group, Inc. sponsors or participates in multiple benefit plans, including a multiemployer defined benefit plan, a defined contribution plan and postretirement benefit plans. Most employees are direct employees of FBL Financial Group, Inc. and related plan expenses are allocated to the Company and affiliates. The Company has no direct legal obligation for benefits under these plans. Also, the Company, incurred no expense in 2024 or 2023 due to its 0% pooling percentage (see note 26).

The multiemployer defined benefit plan is considered qualified under Internal Revenue Service regulations and covers substantially all employees of the group who were employed on January 1, 2013 having attained age 21 and one year of service. Benefits are based on years of service as defined in the plan and employees' compensation. Pension cost of the plan is allocated between participants generally on a basis of time incurred by the respective employees for each employer. Such allocations are reviewed annually. Supplemental pension benefits are provided to employees with salaries and/or pension benefits in excess of the qualified plan limits imposed by federal tax law, as well as benefits to former employees who accepted an early retirement program.

The 401(k) defined contribution plan covers substantially all employees of the group. Employees contributions are matched and certain employees receive an additional discretionary company contribution. Costs are allocated among the affiliates on a basis of time incurred by the respective employees for each company.

**13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations**

**A. Number of Shares of Each Class of Capital Stock, Authorized, Issued and Outstanding and the Par or Stated Value of Each Class**

The Company has Class A voting common stock. There are 3,000,000 shares of authorized voting stock, with 1,404,325 shares issued and outstanding with a par value of \$2 per share.

**B. Dividend Rate, Liquidation Value and Redemption Schedule of Preferred Stock Issues**

The Company has no preferred stock outstanding at December 31, 2024.

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

C. Dividend Restrictions

The Company's ability to pay stockholder dividends is limited by law to earned surplus (statutory unassigned surplus) as of the date the dividend is paid, as determined in accordance with accounting practices prescribed by insurance regulatory authorities of the state of Iowa. In addition, under the Iowa Insurance Company Holding Act, a non-life insurer may not pay an "extraordinary" dividend without prior notice to and approval by the Iowa Insurance Commissioner. An "extraordinary" dividend is defined under the Iowa Insurance Holding Company Act as any dividend or distribution of cash or other property whose fair market value, together with that of other dividends or distributions made within the preceding 12 months, exceeds the greater of (i) 10% of policyholders' surplus (total statutory capital stock and statutory surplus) as of December 31 of the preceding year, or (ii) the statutory net income from operations of the insurer for the 12-month period ending December 31 of the preceding year. During 2025, \$1,051,810 is available for distribution without prior approval.

D. Dates and Amounts of Dividends Paid

The Company did not pay any common stock dividends in 2024 or 2023.

E. Profits that may be Paid as Ordinary Dividends to Stockholders

Within the limitations of (C) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.

F. Restrictions on Unassigned Funds (Surplus)

The Company has no restrictions on unassigned surplus.

G. Mutual Reciprocal Amounts of Advances to Surplus not Repaid

Not applicable because the Company is a stock property-casualty insurance company.

H. Amount of Stock Held for Special Purposes

The Company does not hold stock, including stock of affiliates, for special purposes.

I. Reasons for Changes in Balance of Special Surplus Funds from Prior Period

The Company has no special surplus funds.

J. Changes in Unassigned Funds

The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses, net of deferred taxes is \$0.7 million.

K. Surplus Notes

The Company has issued no surplus notes.

L. The Impact of any Restatement Due to Prior Quasi-Reorganizations

Not applicable because the Company has not had a quasi-reorganization.

M. Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization

Not applicable because the Company has not had a quasi-reorganization.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

The Company has made no contingent commitments or guarantees.

B. Assessments

From time to time, assessments are levied on the Company by guaranty associations in most states in which the Company is licensed. These assessments, which are accrued for, are to cover losses of policyholders of insolvent or rehabilitated companies. In some states, these assessments can be partially recovered through a reduction in future premium taxes.

(2)

a.	Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end	\$	..... 132,109
b.	Decreases current year:		
	.....	\$	..... 107,785
c.	Increases current year:		
	.....	\$	..... 8,093
d.	Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end	\$	..... 32,417

C. Gain Contingencies

The Company has not realized any gains on gain contingencies as of December 31, 2024, subsequent to that balance sheet date.

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits

The company paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits.

	Direct
Claims related ECO and bad faith losses paid during the reporting period	\$

Number of claims where amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits during the reporting period.

(a) 0-25 Claims	(b) 26-50 Claims	(c) 51-100 Claims	(d) 101-500 Claims	(e) More than 500 Claims
X				

Indicate whether claim count information is disclosed per claim or per claimant.

(f) Per Claim [ X ]                      (g) Per Claimant [ ]

E. Product Warranties

The Company does not have any product warranty liabilities

F. Joint and Several Liabilities

The Company has no joint or several liabilities accounted for under SSAP No. 5R.

G. All Other Contingencies

All Other Contingencies: In the normal course of business, the Company may be involved in litigation where amounts are alleged that are substantially in excess of contractual policy benefits or certain other agreements. At December 31, 2024, management is not aware of any claims for which a material loss is reasonably possible.

15. Leases

A. Lessee Operating Lease

The Company does not have any material lease obligations.

B. Lessor Leases

Leasing is not a significant part of the Company's business activities.

16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk

The Company has no financial instruments with off-balance sheet risk.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

- A. Transfers of Receivables Reported as Sales  
The Company has not sold or transferred premiums receivable.
- B. Transfer and Servicing of Financial Assets  
The Company has not sold or transferred financial assets.
- C. Wash Sales  
The Company did not have any wash sales.

**18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans**  
The Company does not serve as administrator for any uninsured or partially insured A&H plans.

**19. Direct Premium Written/Produced by Managing General Agents/Third-Party Administrators**

For the year ended December 31, 2024, Rain and Hail LLC, a managing general agency, offered 2024 and 2025 crop year Federal Multi-peril Crop Insurance (MPCI) and Federal Livestock Risk Protection Insurance and 2024 Crop Hail insurance.

Name and Address of Managing General Agent or Third Party Administration	FEIN Number	Exclusive Contract	Types of Business Written	Types of Authority Granted	Total Direct Premium Written/Produced By
Rain and Hail LLC	42-1454388	No	MPCI		\$ 162,453,338
Rain and Hail LLC	42-1454388	No	Livestock		\$ 11,086,423
Rain and Hail LLC	42-1454388	No	Crop Hail		\$ 13,941,467
<b>Total</b>					<b>\$ 187,481,228</b>

Rain and Hail LLC has the following authority granted; Claims Payment, Claims Adjustment, Binding Authority, Premium Collection and Underwriting.

**20. Fair Value Measurements**

A. Assets and Liabilities Measured at Fair Value

Fair Value Measurements

In the discussion that follows, we have ranked our financial instruments by the level of judgment used in the determination of the fair values. The levels are defined as follows:

- Level 1 - Fair values are based on unadjusted quoted prices in active markets for identical assets or liabilities.
- Level 2 - Fair values are based on inputs, other than quoted prices from active markets, that are observable for the asset or liability, either directly or indirectly.
- Level 3 - Fair values are based on significant unobservable inputs for the asset or liability.

In certain cases, the inputs used to measure fair value may fall into different levels of the fair value hierarchy. In such cases, a financial instrument's level within the fair value hierarchy is based on the lowest level of input that is significant to the fair value measurement. Our assessment of the significance of a particular input to the fair value measurement in its entirety requires judgment and considers factors specific to the financial instrument. From time to time there may be movements between levels as inputs become more or less observable, which may depend on several factors including the activity of the market for the specific security, the activity of the market for similar securities, the level of risk spreads and the source of the information from which we obtain the information.

The following methods and assumptions were used in estimating the fair value of our financial instruments:

Bonds:

Level 1 bonds consist of U.S. Treasury issues that are actively traded, allowing us to use current market prices as an estimate of their fair value.

Common stocks:

Level 3 common stocks include privately held stock for which no active market exists, and fair value estimates are based on the underlying equity of the private company financial statements.

Cash, cash equivalents and short-term:

Level 1 cash, cash equivalents and short-term are highly liquid instruments for which historical cost approximates fair value.

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Perpetual Preferred Stock	\$	\$	\$	\$	\$
Bonds	\$	\$	\$	\$	\$
Common Stock - Industrial	\$	\$	3,597,230	\$	3,597,230
Common Stock - Parent, Sub, Aff	\$	\$	\$	\$	\$
Total assets at fair value/NAV	\$	\$	3,597,230	\$	3,597,230

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

Description	Beginning Balance at 01/01/2024	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains And (losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2024
a. Assets:										
Common Stock	3,126,804				470,426					3,597,230
Total Assets	3,126,804				470,426					3,597,230

(3) There were no transfers in or out of Level 3.

(4) Fair value is based on an exit price, which is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. As not all financial instruments are actively traded, various valuation methods may be used to estimate fair value. These methods rely on observable market data and where observable market data is not available, the best information available. Significant judgment may be required to interpret the data and select the assumptions used in the valuation estimates, particularly when observable market data is not available.

(5) The Company has no derivative assets or liabilities.

B. Other Fair Value Disclosures

None

C. Fair Value of Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 2,858,743	\$ 3,009,013	\$ 2,858,743	\$	\$	\$	\$
Preferred Stocks	\$	\$	\$	\$	\$	\$	\$
Common Stocks	\$ 3,597,230	\$ 3,597,230	\$	\$	\$ 3,597,230	\$	\$
Cash, cash equivalents and short-term	\$ 3,126,376	\$ 3,126,376	\$ 3,126,376	\$	\$	\$	\$

D. Not Practicable to Estimate Fair Value

None

E. Investments Measured using the NAV as Practical Expedient

None

**21. Other Items**

A. Unusual or Infrequent Items

The Company recorded no extraordinary items during the two-year period ended December 31, 2024.

B. Troubled Debt Restructuring: Debtors

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

The Company was not a party to any troubled debt restructuring during the two-year period ended December 31, 2024.

C. Other Disclosures

The Company has no additional disclosures during the two-year period ended December 31, 2024.

D. Business Interruption Insurance Recoveries

The Company received no business interruption insurance recoveries during the two-year period ended December 31, 2024.

E. State Transferable and Non-transferable Tax Credits

(1) Carrying Value of Transferable and Non-transferable State Tax Credits Gross of any Related Tax Liabilities and Total Unused Transferable and Non-transferable State Tax Credits by State and in Total

Description of State Transferable and Non-transferable Tax Credits	State NE	Carrying Value 200,000	Unused Amount 200,000
Sugar Creek Housing Tax Credit		200,000	200,000
Total		200,000	200,000

(2) Method of Estimating Utilization of Remaining Transferable and Non-transferable State Tax Credits: The company's 2024 premiums are sufficient to fully utilize the unused credits on the 2024 premium tax return.

(3) The Company did not recognize any impairments on the carrying amount of transferable or non-transferable tax credits.

(4) State Tax Credits Admitted and Nonadmitted

	Total Admitted	Total Nonadmitted
a. Transferable	200,000	
b. Non-transferable		

F. Subprime-Mortgage-Related Risk Exposure

(1) The Company has no subprime exposure risk

(2) The Company has no exposure through investments in directly held subprime mortgage loans.

(3) The Company has no direct exposure to subprime mortgage risk.

(4) The Company has no underwriting exposure to subprime mortgage risk through Mortgage Guaranty, Financial Guaranty, Directors and Officers liability or Errors and Omissions liability coverages.

G. Insurance-Linked Securities (ILS) Contracts

The Company does not have any insurance-linked securities.

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

The Company does not have any Life Insurance where it is owner, beneficiary, or has other rights to control the policy.

22. Events Subsequent

Subsequent events have been considered through February 17, 2025 for the statutory statement dated December 31, 2024. There have been no Type I or Type II events subsequent to the close of the books and accounts for this statement that have a material effect on the financial condition of the Company.

23. Reinsurance

A. Unsecured Reinsurance Recoverables

Unsecured recoverable for losses, paid and unpaid including IBNR, loss adjustment expenses and unearned premiums from individual reinsurers that exceed 3% of the Company's policyholder surplus are listed below. Also refer to Note 26, any unsecured recoverables with non-affiliated reinsurers that would result in a write-off would be subject to pooling with Farm Bureau Property & Casualty Insurance Company – with the Company retaining 0%.

	FEIN	NAIC Group Code	Amount	
Farm Bureau Property & Casualty Ins. Co.	42-0331872	13773	\$	339,840,000
Ace American Ins. Co.	95-2371728	22667	\$	64,545,000
American Agricultural Ins. Co.	36-2661954	10103	\$	3,101,000
Berkley Ins. Co.	47-0574325	32603		1,472,000
Factory Mutual Ins. Co.	05-0316605	21482	\$	2,359,000
Hartford Steam Boiler Inspection & Ins. Co.	06-0384680	11452	\$	843,000
Safety National Casualty Corp.	43-0727872	15105	\$	4,000,000
Technology Ins. Co. Inc.	02-0449082	42376	\$	558,000
Yosemite Ins. Co.	94-1590201	26220	\$	361,000
Hanover Rueck SE	CR-1340125	00000	\$	1,088,000
Hannover Re (Bermuda) Ltd	RJ-3190060	00000	\$	357,000

B. Reinsurance Recoverable in Dispute

The Company has no reinsurance recoverable in dispute.

C. Reinsurance Assumed and Ceded

(1)

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates	\$ .....	\$ .....	\$ ..180,622,346	\$ ...45,191,711	\$ ..(180,622,346)	\$ ..(45,191,711)
b. All Other	\$ .....245,952	\$ .....68,105	\$ ...36,761,638	\$ ....1,266,777	\$ ..(36,515,686)	\$ ....(1,198,672)
c. TOTAL (a+b)	\$ .....245,952	\$ .....68,105	\$ ..217,383,984	\$ ...46,458,488	\$ ..(217,138,032)	\$ ..(46,390,383)
d. Direct Unearned Premium Reserve			\$ ..217,138,032			

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

(2) There were no additional or return commissions accrued as of December 31, 2024.

(3) The Company has no risks that are covered by a protected cell as of December 31, 2024.

D. Uncollectible Reinsurance

The Company did not write-off any uncollectible reinsurance during the year.

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

E. **Commutation of Ceded Reinsurance**

The Company did not commute any material ceded reinsurance agreements during the year.

F. **Retroactive Reinsurance**

The Company has evaluated its reinsurance contracts and determined that none are retroactive contracts.

G. **Reinsurance Accounted for as a Deposit**

The Company has no reinsurance agreements accounted for as a deposit.

H. **Disclosures for the Transfer of Property and Casualty Run-off Agreements**

The Company has not entered into any agreements that would qualify under SSAP No. 62R for P&C Run-off Accounting Treatment.

I. **Certified Reinsurer Rating Downgraded or Status Subject to Revocation**

The Company did not have any certified reinsurers for downgrade or subject to revocation.

J. **Reinsurance Agreements Qualifying for Reinsurer Aggregation**

The Company has no reinsurance agreements qualifying for reinsurance aggregation.

K. **Reinsurance Credit**

The Company does not write health business.

**24. Retrospectively Rated Contracts & Contracts Subject to Redetermination**

The Company has no direct retrospectively rated contracts or contracts subject to redetermination.

**25. Changes in Incurred Losses and Loss Adjustment Expenses**

The Company does not have any provision for incurred losses and loss adjustment expenses as of December 31, 2024.

**26. Intercompany Pooling Arrangements**

The Company is a participant in an intercompany pooling agreement with an affiliated company. The pool participants and their respective percentage shares of the pooled business are as follows:

<u>Pool Participant Companies</u>	<u>NAIC Co. Code</u>	<u>2024 - Prior</u>
Farm Bureau Property & Casualty Insurance Company (Lead)	13773	100%
Western Agricultural Ins.Co.	27871	—%

All premiums, losses and expenses are subject to the pooling agreement.

Pool participants have reinsurance ceded agreements for underlying property risks, occurrence and aggregate property catastrophe, liability and work comp excess of loss, umbrella excess and quota share, crop quota share and excess, and various other quota share coverages. All pool companies are named insureds on the reinsurance treaties except for the crop quota share and crop excess contracts. Cessions to nonaffiliated reinsurers occur prior to the cession of pooled business to the lead company. Each company has the contractual right of direct recovery from the non-affiliated reinsurers.

There are no discrepancies between entries for pooled business on the reinsurance schedules of the lead company and the corresponding entries on the reinsurance schedules of the other pool participants.

The provision for reinsurance is retained by the individual pool participant company whose cession to a non-affiliated reinsurer prior to the cession to the pool gave rise to the provision. Write-offs of any uncollectible reinsurance are shared by pool participant companies based on the applicable pool participation percentages.

**27. Structured Settlements**

A. **Amount of Reserves No Longer Carried**

The Company has no structured settlements.

B. **Insurance Company Information and Aggregate Statement Value of Annuities due from Life Insurer**

The Company has not purchased annuities with aggregate values which equal or exceed 1% of the Company's policyholder surplus from any one life insurer.

**28. Health Care Receivables**

The Company has no health care receivables.

**29. Participating Policies**

The Company has not issued any participating contracts that are not property-casualty contracts.

**30. Premium Deficiency Reserves**

- 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 [ ]

**31. High Deductibles**

The Company has issued no high deductible policies.

**32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses**

The Company does not discount liabilities for unpaid losses or unpaid loss adjustment expenses.

**33. Asbestos/Environmental Reserves**

A. **Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of a liability due to asbestos losses?**

Yes (x) No ( )

The potential exposure arises from the issuance of general liability, farmowners and commercial package policies. Reported claim activity levels on direct business to-date is not material. However, the possible existence of these claims does give rise to uncertainty. Estimation of ultimate liabilities for these claims is unusually difficult due to the extreme latency of claim activity, issues related to allocation of claim costs (including defense costs) across policy years and insurers, and the potential for coverage disputes with insured and other insurers (regarding allocation of such costs). Therefore, due to the above considerations and the sparseness of data, no estimations of case, IBNR or expense reserves have been made.

B. **Amount of Ending Reserves for Bulk + IBNR Included in A (Loss & LAE)**

The Company holds no reserves for unreported asbestos claims.

C. **Amount of Ending Reserves for Loss Adjustment Expenses Included in A (Case, Bulk + IBNR)**

The Company holds no reserves for allocated loss adjustment expenses on asbestos claims.

D. **Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of, a liability due to environmental losses?**

Yes (x) No ( )

The potential exposure arises from the issuance of general liability, farmowners and commercial package policies. Reported claim activity levels on direct business to-date is not material. However, the possible existence of these claims does give rise to uncertainty. Estimation of ultimate liabilities for these claims is unusually difficult due to the extreme latency of claim activity, issues related to allocation of claim costs (including defense costs) across policy years and insurers, and the potential for coverage disputes with insured and other insurers (regarding allocation of such costs). Therefore, due to the above considerations and the sparseness of data, no estimations of case, IBNR or expense reserves have been made.

E. **Amount of Ending Reserves for Bulk + IBNR Included in D (Loss & LAE)**

The Company holds no reserves for unreported environmental claims.

F. **Amount of Ending Reserves for Loss Adjustment Expenses Included in D (Case, Bulk + IBNR)**

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

The Company holds no reserves for allocated loss adjustment expenses on environmental claims.

**34. Subscriber Savings Accounts**

The Company is not a reciprocal insurance company and therefore has no subscriber savings accounts.

**35. Multiple Peril Crop Insurance**

The Company does not have a Multiple Peril Crop Insurance unearned premium reserve at December 31, 2024. The Company had no loss expenses for expense payments associated with catastrophe coverage in 2024 or 2023. All the underwriting expense and loss adjusting expenses are recognized by the managing general agencies that administer this business.

**36. Financial Guaranty Insurance**

The Company does not market financial guaranty insurance.

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**  
**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? Yes  No   
 If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.
- 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? Iowa.....
- 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. ....
- 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. ....12/31/2021
- 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. ....12/31/2021
- 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). ....05/24/2023
- 3.4 By what department or departments? Iowa Department of Commerce - Insurance Division.....
- 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? Yes  No   
 4.12 renewals? 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? Yes  No   
 4.22 renewals? Yes  No
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes  No   
 If yes, complete and file the merger history data file with the NAIC.
- 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
FBL Marketing Services, LLC.....	West Des Moines, Iowa.....	NO	NO	NO	YES

- 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? Forvis Mazars, LLP, West Des Moines, Iowa.....
- 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 WESTERN AGRICULTURAL INSURANCE COMPANY  
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
- 10.6 If the response to 10.5 is no or n/a, please explain \_\_\_\_\_

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?  
Mark B. Anderson, FCAS, Managing Actuary (employee of FBL Financial Group, Inc.), 5400 University Avenue, West Des Moines, Iowa 50266.....

- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes  No
- 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.  
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
- 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
- 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
- 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 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 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  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  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  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
- 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
- 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
- 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
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$.....4,117,530
- 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
- 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 Name of Third-Party	2 Is the Third-Party Agent a Related Party (Yes/No)
.....	.....

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES**

1 Name of Third-Party	2 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 [ X ] No [ ]
- 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 \$ .....2,859,027
- 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 Nature of Restriction	2 Description	3 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 [ X ]
- 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:

1 Name of Custodian(s)	2 Custodian's Address
Citibank.....	New York, NY.....

- 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:

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES**

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
Jeff Whitehead.....	
Mike Warmuth.....	
Mark Sandbulte.....	

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.....	3,009,014	2,858,743	(150,271)
31.2 Preferred Stocks.....			
31.3 Totals	3,009,014	2,858,743	(150,271)

31.4 Describe the sources or methods utilized in determining the fair values:  
ICE Data Pricing and Reference.....

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:

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 ]

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**  
**PART 1 - COMMON INTERROGATORIES**

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 [  ]

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 [  ]

38.1 Does the reporting entity directly hold cryptocurrencies? Yes [  ] No [  ]

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 [  ]

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.

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.

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.

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.

1 Name	2 Amount Paid
.....	\$ .....
.....	\$ .....
.....	\$ .....

**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	\$ .....	\$ .....	\$ .....
2.3	Premium Ratio (2.1/2.2)	.....		.....
2.4	Reserve Numerator	\$ .....	\$ .....	\$ .....
2.5	Reserve Denominator	\$ .....	\$ .....	\$ .....
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 [ ]  
 4.2 Does the reporting entity issue non-assessable policies?..... Yes [ ] 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: .....  
 Reinsurance contracts of \$39.0 million excess of \$1.0 million (no change in 2025) in Arizona, Iowa, Kansas, Nebraska, New Mexico, South Dakota and Utah. In Minnesota all losses reinsured excess of \$1.0 million (no change in 2025) .....
- 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: .....  
 The catastrophe exposure in all states is analyzed using the Verisk Touchstone and RMS RiskLink models to evaluate severity amounts at projected event frequencies. The analysis is used to purchase catastrophe reinsurance limit to the more conservative of the two models one-in-1000 year event.....
- 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?.....  
 The analysis is used to purchase catastrophe reinsurance limit to the more conservative of the two models one-in-1000 year event .....
- 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 [ X ] No [ ]
- 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 unreinsured catastrophic loss .....
- 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, Yes [ ] No [ X ]  
 (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 Yes [ ] No [ X ]  
 (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 ]
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 [X] No [ ] N/A [ ]

## 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 [X] N/A [ ]
- 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): ..... \$ .....
- 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. .... 4
- 14.1 Is the reporting entity a cedant in a multiple cedant reinsurance contract?..... Yes [ X ] No [ ]
- 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:  
 Premiums are allocated on a pro-rata basis using the SMP of each of the Companies for each treaty. Additional premiums due under the catastrophe reinsurance treaty as a result of loss occurrences in excess of retention are allocated on a pro-rata basis using the SMP of each of the Companies.....
- 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 [ X ]
- 14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?..... Yes [ X ] 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 WESTERN AGRICULTURAL INSURANCE COMPANY

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
<b>Gross Premiums Written</b> (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)	103,046,475	78,189,039	66,043,644	59,072,783	39,768,296
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	257,769,170	263,386,330	282,639,756	212,691,651	149,457,722
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	206,373,792	151,989,396	120,505,768	101,876,149	62,777,989
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)	567,189,437	493,564,765	469,189,168	373,640,583	252,004,007
<b>Net Premiums Written</b> (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)					(14,454,022)
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)					(12,472,705)
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					(28,567,337)
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)					(55,494,064)
<b>Statement of Income</b> (Page 4)					
13. Net underwriting gain (loss) (Line 8)					15,022,243
14. Net investment gain (loss) (Line 11)	31,639	31,636	32,637	53,604	7,368,764
15. Total other income (Line 15)					
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	49,187	47,017	251,832	223,760	(600,782)
18. Net income (Line 20)	(17,548)	(15,381)	(219,195)	(170,156)	22,991,789
<b>Balance Sheet Lines</b> (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	15,547,198	14,807,579	15,522,910	15,700,254	14,764,424
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	400,249	257,676	366,704	308,064	304,442
20.2 Deferred and not yet due (Line 15.2)					
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	5,029,096	4,644,170	5,529,930	5,657,250	7,762,441
22. Losses (Page 3, Line 1)					
23. Loss adjustment expenses (Page 3, Line 3)					
24. Unearned premiums (Page 3, Line 9)					
25. Capital paid up (Page 3, Lines 30 & 31)	2,808,650	2,808,650	2,808,650	2,808,650	2,808,650
26. Surplus as regards policyholders (Page 3, Line 37)	10,518,102	10,163,409	9,992,980	10,043,004	7,001,983
<b>Cash Flow</b> (Page 5)					
27. Net cash from operations (Line 11)	326,752	35,413	(739,467)	7,066,165	(6,449,305)
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital	10,518,102	10,163,409	9,992,980	10,043,004	7,001,983
29. Authorized control level risk-based capital	1,212,437	1,971,466	1,711,530	1,872,830	1,562,533
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b> (Page 2, Col. 3)(Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1)	30.9	2,734.8	66.4	60.3	47.0
31. Stocks (Lines 2.1 & 2.2)	37.0	2,837.7	65.1	45.5	
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)	32.1	(5,474.3)	(31.6)	(28.5)	52.7
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)					
38. Receivables for securities (Line 9)	0.0	1.8	0.0	22.7	0.2
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
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
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)					

**FIVE-YEAR HISTORICAL DATA**

(Continued)

	1 2024	2 2023	3 2022	4 2021	5 2020
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24) .....	371,637	132,647	(62,883)	283,578	(6,359,703)
52. Dividends to stockholders (Line 35) .....					(138,329,986)
53. Change in surplus as regards policyholders for the year (Line 38) .....	354,693	170,429	(50,024)	3,041,021	(128,282,456)
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
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) .....	39,538,439	33,691,406	30,799,090	29,977,184	50,381,462
55. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	218,922,416	323,727,696	234,734,771	91,168,399	94,380,625
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	123,226,154	103,557,758	95,421,221	65,394,986	85,425,622
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....					
58. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....	675	804	417	551	32,166
59. Total (Line 35) .....	381,687,684	460,977,664	360,955,499	186,541,120	230,219,875
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
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) .....					23,414,291
61. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....					2,109,062
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....					11,798,644
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....					31,288
65. Total (Line 35) .....					37,353,285
<b>Operating Percentages (Page 4)</b> (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) .....					
68. Loss expenses incurred (Line 3) .....					
69. Other underwriting expenses incurred (Line 4) .....					
70. Net underwriting gain (loss) (Line 8) .....					
<b>Other Percentages</b>					
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) .....					27.1
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0) .....					
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) .....					(792.5)
<b>One Year Loss Development (\$000 omitted)</b>					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) .....					
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) .....					
<b>Two Year Loss Development (\$000 omitted)</b>					
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) .....					
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) .....					

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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2024

NAIC Company Code 27871

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Commercial Multiple Peril, and a TOTAL row at the bottom.

19.AL

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2024

NAIC Company Code 27871

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

DETAILS OF WRITE-INS

Table with columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include 3401, 3402, 3403, 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 \$ 11,088

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

19.AZ



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2024

NAIC Company Code 27871

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Medical Professional Liability, Earthquake, etc., ending with a TOTAL (a) row showing 1,736.

DETAILS OF WRITE-INS

Summary table for write-ins with rows 3401, 3402, 3403, 3498 (Summary of remaining write-ins for Line 34 from overflow page), and 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

19.AR



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.CO

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.ID

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.1L

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.IN

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.1A

(a) Finance and service charges not included in Lines 1 to 35 \$ 20,053

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2024

NAIC Company Code 27871

Table with 12 columns: Line of Business, 1 Direct Premiums Written, 2 Direct Premiums Earned, 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. Rows include Fire, Multiple Peril Crop, Federal Flood, Private Crop, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Pet Insurance Plans, Financial Guaranty, Medical Professional Liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A & H (group and individual), Vision Only (b), Dental Only (b), Disability Income (b), Medicare Supplement (b), Medicaid Title XIX (b), Medicare Title XVIII (b), Long-Term Care (b), Federal Employees Health Benefits Plan (b), Other Health (b), Workers' Compensation, Other Liability-Occurrence, Other Liability-Claims-Made, Excess Workers' Compensation, Products liability-Occurrence, Products liability-Claims-Made, Private Passenger Auto No-Fault (Personal Injury Protection), Other Private Passenger Auto Liability, Commercial Auto No-Fault (Personal Injury Protection), Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate write-ins for other lines of business, TOTAL (a), and DETAILS OF WRITE-INS (3401-3499).

19.KS

(a) Finance and service charges not included in Lines 1 to 35 \$ 18,048

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2024

NAIC Company Code 27871

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Medical Professional Liability, Earthquake, etc., ending with a TOTAL (a) row showing 250 in the last column.

DETAILS OF WRITE-INS

Summary table for write-ins with rows 3401, 3402, 3403, 3498 (Summary of remaining write-ins for Line 34 from overflow page), and 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

19.MI



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.MN

(a) Finance and service charges not included in Lines 1 to 35 \$ 9,842

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.MO

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.MT

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2024

NAIC Company Code 27871

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

(a) Finance and service charges not included in Lines 1 to 35 \$ 11,476

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

19.NE





ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.NV

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2024

NAIC Company Code 27871

Table with columns: Line of Business, Gross Premiums, Direct Premiums Written/Earned, Dividends Paid, Direct Unearned Premium Reserves, Direct Losses Paid, Direct Losses Incurred/Unpaid, Direct Defense and Cost Containment Expense Paid/Incurred/Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Includes sub-section 'DETAILS OF WRITE-INS' at the bottom.

19.NM

(a) Finance and service charges not included in Lines 1 to 35 \$ 7,036

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2024

NAIC Company Code 27871

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

DETAILS OF WRITE-INS

Summary table for write-ins with rows 3401, 3402, 3403, 3498 (Summary of remaining write-ins for Line 34 from overflow page), and 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

19.ND



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.OH

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2024

NAIC Company Code 27871

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

(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

19.OK



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2024

NAIC Company Code 27871

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		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												2,003
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A & H (group and individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability-Occurrence												
17.2 Other Liability-Claims-Made												
17.3 Excess Workers' Compensation												
18.1. Products liability-Occurrence												
18.2. Products liability-Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
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)												2,003
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
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 .....

19.SC



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2024

NAIC Company Code 27871

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

DETAILS OF WRITE-INS

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include 3401, 3402, 3403, 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 \$ 3,744

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

19.SD



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2024

NAIC Company Code 27871

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

(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

19.TN





ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.TX

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.UT

(a) Finance and service charges not included in Lines 1 to 35 \$ 6,044

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2024

NAIC Company Code 27871

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple Peril Crop, Federal Flood, etc., ending with a TOTAL (a) row showing 2,200 in the Taxes, Licenses and Fees column.

DETAILS OF WRITE-INS

Table with 12 columns for details of write-ins, including rows 3401, 3402, 3403, 3498 (Summary of remaining write-ins for Line 34 from overflow page), and 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

19.VA



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.WI

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2024

NAIC Company Code 27871

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

19.WY

(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 WESTERN AGRICULTURAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 00513

BUSINESS IN THE STATE OF Consolidated

DURING THE YEAR 2024

NAIC Company Code 27871

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

(a) Finance and service charges not included in Lines 1 to 35 \$ 87,331

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

19.GT

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 1**

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 +7							
Other U.S. Unaffiliated Insurers														
36-2661954	10103	AMERICAN AGRICULTURAL INS CO	IN				10	10						
16-1486064	10687	UTICA NATL ASSUR CO	NY								40			
0999999 - Total Other U.S. Unaffiliated Insurers							10	10			40			
Pools and Associations - Mandatory Pools, Associations or Other Similar Facilities														
AA-9991118	00000	IOWA COMMERCIAL AUTO INS PROCEDURE	IA	38		84	84			16				
AA-9991209	00000	KANSAS FAIR PLAN	KS	103	65	8	73		192	53				
AA-9992118	00000	NATIONAL WORKERS COMP REINS POOL	NY	628	99	823	922		208	177				
1099999 - Pools and Associations - Mandatory Pools, Associations or Other Similar Facilities				769	164	915	1,079		400	246				
1299999 - Pools and Associations - Total Pools and Associations				769	164	915	1,079		400	246				
9999999 Totals				769	164	925	1,089		400	246	40			

## SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effectuated or (Canceled) during Current Year

1 ID Number	2 NAIC Company Code	3 Name of Company	4 Date of Contract	5 Original Premium	6 Reinsurance Premium
0199999 Total Reinsurance Ceded by Portfolio					
0299999 Total Reinsurance Assumed by Portfolio					
NONE					



**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3**

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute Included in Column 15	17 Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held By Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers				
Authorized - Affiliates - U.S. Intercompany Pooling																					
42-0331872	13773	FARM BUREAU PROP & CAS INS CO	IA		351,394			69,366		69,871	19,981	180,622		339,840				339,840			
0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling																					
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates																					
Authorized - Other U.S. Unaffiliated Insurers																					
38-3207001	10166	ACCIDENT FUND INS CO OF AMER	MI		409			157						157		2		155			
95-2371728	22667	ACE AMER INS CO	PA		187,481			28,164		4,114		32,267		64,545				64,545			
95-3187355	35300	ALLIANZ GLOBAL RISKS US INS CO	IL		(8)	2		5		23				30				30			
06-1182357	22730	ALLIED WORLD INS CO	NH			1		2						3				3			
36-2661954	10103	AMERICAN AGRICULTURAL INS CO	IN		1,336	35	49	1,698		592	900	111		3,385		284		3,101			
06-1430254	10348	ARCH REINS CO	DE		26										5			(5)			
51-0434766	20370	AXIS REINS CO	NY		(1)	1		1		5				7				7			
47-0574325	32603	BERKLEY INS CO	DE		1,337			1,109		210		377		1,696		224		1,472			
42-0234980	21415	EMPLOYERS MUT CAS CO	IA			52	1	67		16				136				136			
22-2005057	26921	EVEREST REINS CO	DE		1,440							65		65		(132)		197			
05-0316605	21482	FACTORY MUT INS CO	RI		5,296	416	11	195				2,639		3,261		902		2,359			
13-6108721	26433	HARCO NATL INS CO	IL		177	3		1		16				20		12		8			
06-0384680	11452	HARTFORD STEAM BOIL INSPEC & INS CO	CT		1,713	9		77				851		937		94		843			
74-2195939	42374	HOUSTON CAS CO	TX		278	1				4				5		33		(28)			
95-2769232	27847	INSURANCE CO OF THE WEST	CA		74											8		(8)			
04-1543470	23043	LIBERTY MUT INS CO	MA		110	2		18		8				28		12		16			
06-1481194	10829	MARKEL GLOBAL REINS CO	DE			4	1	220		14				239				239			
13-4924125	10227	MUNICH REINS AMER INC	DE		360			1				138		139		52		87			
31-4177100	23787	NATIONWIDE MUT INS CO	OH		48			11						11		5		6			
13-3138390	42307	NAVIGATORS INS CO	NY		144	3		1		17				21		9		12			
47-0698507	23680	ODYSSEY REINS CO	CT		391	3		56		94		5		158		8		150			
95-2379438	20338	PALOMAR SPECIALTY INS CO	OR		8											1		(1)			
13-3031176	38636	PARTNER REINS CO OF THE US	NY					23						23				23			
35-6021485	12416	PROTECTIVE INS CO	IN		1			1						1				1			
52-1952955	10357	RENAISSANCE REINS US INC	MD		393			19				6		25		44		(19)			
43-0727872	15105	SAFETY NATL CAS CORP	MO		1,133	18	3	3,438		775				4,234		234		4,000			
75-1444207	30058	SCOR REINS CO	NY					10						10				10			
75-1980552	12831	STATE NATL INS CO INC	TX			2		3		15				20				20			
13-1675535	25364	SWISS REINS AMER CORP	NY		312	5		208		108				321		10		311			
02-0449082	42376	TECHNOLOGY INS CO INC	DE			7	1	523		27				558				558			
31-0542366	10677	THE CINCINNATI INS CO	OH		163	1		54		85				140		5		135			
13-5616275	19453	TRANSATLANTIC REINS CO	NY		131											(13)		13			
87-2252307	22225	TRISURA INS CO	OK		95											6		(6)			
42-0644327	13021	UNITED FIRE & CAS CO	IA		32			43						43		7		36			
20-3145738	12537	UNITED SPECIALTY INS CO	DE		(1)																
13-3088732	40517	WCF NATL INS CO	UT		116			157						157		24		133			
13-1290712	20583	XL REINS AMER INC	NY		421							156		156		60		96			
94-1590201	26220	YOSEMITE INS CO	OK			4	1	341		15				361				361			
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers																					
Authorized - Pools - Mandatory Pools																					
AA-9991423	00000	MINNESOTA WORKERS COMP	MN		101					96				96		103		(7)			
1099999 - Total Authorized - Pools - Mandatory Pools																					
Authorized - Other Non-U.S. Insurers																					
AA-1120337	00000	Aspen Ins UK Ltd	GBR			2	1	127		7				137				137			
AA-3194122	00000	DaVinci Reins Ltd	BMU		(1)	1		2						3				3			
AA-1126033	00000	Lloyd's Syndicate Number 33	GBR		(1)	2		4						4				4			
AA-1126510	00000	Lloyd's Syndicate Number 510	GBR		(1)	1		1						2				2			
AA-1126780	00000	Lloyd's Syndicate Number 780	GBR		(1)	1		1						1				1			
AA-1120156	00000	Lloyd's Syndicate Number 1686	GBR		(1)	1		2						3				3			
AA-1120157	00000	Lloyd's Syndicate Number 1729	GBR		(1)	1		1						2				2			
AA-1120171	00000	Lloyd's Syndicate Number 1856	GBR		(1)	1		2						3				3			
AA-1120186	00000	Lloyd's Syndicate Number 1947	GBR		(1)	1															
AA-1120106	00000	Lloyd's Syndicate Number 1969	GBR		(2)	(1)								(1)		(1)					

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3**

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute Included in Column 15	17 Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
AA-1128001	00000	Lloyd's Syndicate Number 2001	GBR		(1)	2		3						5			5			
AA-1128010	00000	Lloyd's Syndicate Number 2010	GBR		(1)	1		2						3			3			
AA-1128987	00000	Lloyd's Syndicate Number 2987	GBR		(1)	2		2						4			4			
AA-1120086	00000	Lloyd's Syndicate Number 4141	GBR			1		1						2			2			
AA-1120181	00000	Lloyd's Syndicate Number 5886	GBR		(1)	1		1						2	(1)		3			
AA-1840000	00000	Mapfre Re Compania de Reaseguros SA	ESP			1		1						2			2			
AA-3190829	00000	Markel Bermuda Ltd	BMU		224			286						2		46	240			
AA-3190339	00000	RENAISSANCE REINS LTD	BMU		(1)	1		2						3			3			
1299999 - Total Authorized - Other Non-U.S. Insurers						210		436		7				461		44	417			
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)						555,119		586		68		106,405		76,112		20,881	217,237	421,289	2,043	419,246
Unauthorized - Other non-U.S. Insurers																				
AA-3191448	00000	Ada Re Ltd	BMU		938			251			366			617		105	512			
AA-3191518	00000	AdVantage Retro I Ltd	BMU		413											46	(46)			
AA-3191298	00000	Antares Reins Co Ltd	BMU		31	3		4		15				22		2	20			
AA-9240012	00000	China Prop & Cas Reins Co Ltd	CHN		123	2		91		145				238		14	224			
AA-9240020	00000	China Reins Grp Corp	CHN			1		2						3			3			
AA-3191435	00000	Conduit Reins Ltd	BMU			1		2		8				11			11			
AA-1340028	00000	Devk Ruckversicherungs und Beteiligungs AG	DEU		(1)	3		4		18				25			25			
AA-3194130	00000	Endurance Specialty Ins Ltd	BMU			2		3						5			5			
AA-3191289	00000	Fidelis Ins Bermuda Ltd	BMU			2		2						4			4			
AA-1120175	00000	Fidelis Underwriting Ltd	GBR		(2)	2		3						5			5			
AA-5340310	00000	GEN INS CORP OF INDIA	IND			1		1						2			2			
AA-3191190	00000	Hamilton Re Ltd	BMU		(1)	3		3						6			6			
AA-3190060	00000	Hannover Re (Bermuda) Ltd	BMU		(3)	10		24		70				104	(1)		105			
AA-1460080	00000	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	CHE		111							3		3	12		(9)			
AA-5420050	00000	KOREAN REINS CO	KOR		82	4		75		11				90	14		76			
AA-1440060	00000	LANSFORSKRINGS BOLAG ENS AB	SWE		27	1		2		5				8	3		5	5		
AA-3191239	00000	Lumen Re Ltd	BMU			1		3		14				18			18			
AA-8310008	00000	Humboldt Re Ltd	GGY			1		2						3			3	3		
AA-1460019	00000	MS Amlin AG	CHE			1		1						2			2			
AA-5340660	00000	NEW INDIA ASSUR CO LTD	IND			1		2						3			3			
AA-5320039	00000	Peak Reins Co Ltd	HKG		(2)	6		7		36				49	(1)		50			
AA-9240065	00000	PICC Reins Co Ltd	CHN		30									1			(1)			
AA-1340004	00000	R V Versicherung AG	DEU		753	10		182		311				503	62		441			
AA-1440076	00000	SiriusPoint Intl Ins Corp (publ)	SWE			1		1						2			2			
AA-5324100	00000	Taiping Reins Co Ltd	HKG		26	3		5		21				29	3		26			
AA-3191432	00000	Vantage Risk Ltd	BMU			2		4		19				25			25			
AA-3191388	00000	Vermeer Reins Ltd	BMU			4		4						8			8			
2699999 - Total Unauthorized - Other Non-U.S. Insurers						2,525	65		678		1,039		3	1,785		260	1,525	8		
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)						2,525	65		678		1,039		3	1,785		260	1,525	8		
Certified - Other Non-U.S. Insurers																				
CR-3194126	00000	Arch Reins Ltd	BMU			(1)								(1)			(1)			
CR-1340125	00000	Hannover Rueck SE	DEU		(1)	5		2		71				78	(1)		79			
CR-3190875	00000	Hiscox Ins Co (Bermuda) Ltd	BMU			9		41		138				188			188			
CR-1460100	00000	New Reins Co Ltd	CHE			1		2						3			3			
CR-3190686	00000	Partner Reins Co Ltd	BMU		(1)	3		5		19				27			27			
4099999 - Total Certified - Other Non-U.S. Insurers						(2)	17		50		228			295	(1)		296			
4299999 - Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)						(2)	17		50		228			295	(1)		296			
Reciprocal Jurisdiction - Other Non-U.S. Insurers																				
RJ-3194126	00000	Arch Reins Ltd	BMU		1,116										(95)		95			
RJ-3191352	00000	Ascot Reins Co Ltd	BMU		171										(2)		2			
RJ-3191435	00000	Conduit Reins Ltd	BMU		216			84		122				206	24		182			
RJ-1120191	00000	Convex Ins UK Ltd	GBR			2		1		10				13	(12)		25			
RJ-3191400	00000	Convex Re Ltd	BMU		194	2		1		10				13	(12)		25			
RJ-3194122	00000	DaVinci Reins Ltd	BMU			4		1		18				23			23			
RJ-1340028	00000	Devk Ruckversicherungs und Beteiligungs AG	DEU		166			33		49				82	5		77			
RJ-3191190	00000	Hamilton Re Ltd	BMU		252	4		6		29				39	14		25			

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**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3**

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsur- ance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute Included in Column 15	17 Reinsurance Payable		19 Net Amount Recover- able From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Cols. 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
RJ-3190060	00000	Hannover Re (Bermuda) Ltd.	BMU		475			167		244				411		54		357		
RJ-1340125	00000	Hannover Rueck SE	DEU		841			890		263				1,153		136		1,017		
RJ-3190875	00000	Hiscox Ins Co (Bermuda) Ltd.	BMU		138											15		(15)		
RJ-3190871	00000	Lancashire Ins Co Ltd.	BMU		89											10		(10)		
RJ-1126033	00000	Lloyd's Syndicate Number 33	GBR		138	3		8		32				43		15		28		
RJ-1126435	00000	Lloyd's Syndicate Number 435	GBR		80	1				4				5				5		
RJ-1126510	00000	Lloyd's Syndicate Number 510	GBR		2	4		6		31				41				41		
RJ-1126609	00000	Lloyd's Syndicate Number 609	GBR		18											1		(1)		
RJ-1126623	00000	Lloyd's Syndicate Number 623	GBR		46											3		(3)		
RJ-1126727	00000	Lloyd's Syndicate Number 727	GBR		61			17		24				41		2		39		
RJ-1120085	00000	Lloyd's Syndicate Number 1274	GBR		106	1		1		5				7		6		1		
RJ-1127301	00000	Lloyd's Syndicate Number 1301	GBR		220	2				10				12		(3)		15		
RJ-1127414	00000	Lloyd's Syndicate Number 1414	GBR		385									144		55		89		
RJ-1120198	00000	Lloyd's Syndicate Number 1618	GBR		35											7		(7)		
RJ-1120156	00000	Lloyd's Syndicate Number 1686	GBR		3	3		4		21				28		2		28		
RJ-1120157	00000	Lloyd's Syndicate Number 1729	GBR		24	3		3		19				25		2		23		
RJ-1120171	00000	Lloyd's Syndicate Number 1856	GBR		38	2				7				9		4		5		
RJ-1120096	00000	Lloyd's Syndicate Number 1880	GBR		10	1		2		8				11		2		9		
RJ-1120083	00000	Lloyd's Syndicate Number 1910	GBR			6		37		127				170				170		
RJ-1120084	00000	Lloyd's Syndicate Number 1955	GBR		145					3				3		(4)		7		
RJ-1128001	00000	Lloyd's Syndicate Number 2001	GBR		334	5		10		47				62		(26)		88		
RJ-1128003	00000	Lloyd's Syndicate Number 2003	GBR		273											45		(45)		
RJ-1128010	00000	Lloyd's Syndicate Number 2010	GBR		110	2		2		13				17		5		12		
RJ-1128121	00000	Lloyd's Syndicate Number 2121	GBR		69					2				2		6		(4)		
RJ-1128623	00000	Lloyd's Syndicate Number 2623	GBR		118											7		(7)		
RJ-1128791	00000	Lloyd's Syndicate Number 2791	GBR		629	6		190		323				519		20		499		
RJ-1128987	00000	Lloyd's Syndicate Number 2987	GBR		53											11		(11)		
RJ-1129000	00000	Lloyd's Syndicate Number 3000	GBR		75											15		(15)		
RJ-1120075	00000	Lloyd's Syndicate Number 4020	GBR		39											4		(4)		
RJ-1126004	00000	Lloyd's Syndicate Number 4444	GBR		185											16		(16)		
RJ-1126006	00000	Lloyd's Syndicate Number 4472	GBR		95											20		(20)		
RJ-1120090	00000	Lloyd's Syndicate Number 4711	GBR		14											3		(3)		
RJ-1120181	00000	Lloyd's Syndicate Number 5886	GBR			3		1		14				18		(1)		19		
RJ-3191239	00000	Lumen Re Ltd	BMU		112											3		(3)		
RJ-3190686	00000	Partner Reins Co Ltd	BMU		894											(60)		60		
RJ-3190339	00000	RENAISSANCE REINS LTD	BMU		1,384	9		38		139				186		(104)		290		
5499999 - Total Reciprocal Jurisdiction - Other Non-U.S. Insurers					9,547	63		1,502		1,574			144	3,283		191		3,092		
5699999 - Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					9,547	63		1,502		1,574			144	3,283		191		3,092		
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					567,189	731	68	108,635		78,953	20,881	217,384		426,652	2,493		424,159		8	
<b>9999999 Totals</b>					<b>567,189</b>	<b>731</b>	<b>68</b>	<b>108,635</b>		<b>78,953</b>	<b>20,881</b>	<b>217,384</b>		<b>426,652</b>	<b>2,493</b>		<b>424,159</b>		<b>8</b>	

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**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 - 27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29 - 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	Reinsurer Designation Equivalent	Credit Risk Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
Authorized - Affiliates - U.S. Intercompany Pooling																	
42-0331872	FARM BUREAU PROP & CAS INS CO					339,840			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling																	
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates																	
Authorized - Other U.S. Unaffiliated Insurers																	
38-3207001	ACCIDENT FUND INS CO OF AMER					2	155		157	188	2	186		186	3		5
95-2371728	ACE AMER INS CO						64,545		64,545	77,454		77,454		77,454	1		1,239
95-3187355	ALLIANZ GLOBAL RISKS US INS CO						30		30	36		36		36	2		1
06-1182357	ALLIED WORLD INS CO						3		3	4		4		4	3		
36-2661954	AMERICAN AGRICULTURAL INS CO					284	3,101		3,385	4,062	284	3,778		3,778	3		106
06-1430254	ARCH REINS CO														2		
51-0434766	AXIS REINS CO						7		7	8		8		8	3		
47-0574325	BERKLEY INS CO					224	1,472		1,696	2,035	224	1,811		1,811	2		38
42-0234980	EMPLOYERS MUT CAS CO						136		136	163		163		163	3		5
22-2005057	EVEREST REINS CO						197	(132)	65	78	(132)	210		210	2		4
05-0316605	FACTORY MUT INS CO					902	2,359		3,261	3,913	902	3,011		3,011	2		63
13-6108721	HARCO NATL INS CO					12	8		20	24		12		12	4		
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO					94	843		937	1,124	94	1,030		1,030	1		16
74-2195939	HOUSTON CAS CO					5			5	6		6		6	1		
95-2769232	INSURANCE CO OF THE WEST														3		
04-1543470	LIBERTY MUT INS CO					12	16		28	34	12	22		22	3		1
06-1481194	MARKEL GLOBAL REINS CO						239		239	287		287		287	3		8
13-4924125	MUNICH REINS AMER INC					52	87		139	167	52	115		115	2		2
31-4177100	NATIONWIDE MUT INS CO					5	6		11	13	5	8		8	3		
13-3138390	NAVIGATORS INS CO					9	12		21	25	9	16		16	2		
47-0698507	ODYSSEY REINS CO					8	150		158	190	8	182		182	2		4
95-2379438	PALOMAR SPECIALTY INS CO														3		
13-3031176	PARTNER REINS CO OF THE US						23		23	28		28		28	2		1
35-6021485	PROTECTIVE INS CO						1		1	1		1		1	3		
52-1952955	RENAISSANCE REINS US INC					25			25	30		30		30	2		
43-0727872	SAFETY NATL CAS CORP					234	4,000		4,234	5,081	234	4,847		4,847	1		78
75-1444207	SCOR REINS CO						10		10	12		12		12	3		
75-1980552	STATE NATL INS CO INC						20		20	24		24		24	3		1
13-1675535	SWISS REINS AMER CORP					10	311		321	385	10	375		375	2		8
02-0449082	TECHNOLOGY INS CO INC						558		558	670		670		670	4		22
31-0542366	THE CINCINNATI INS CO					5	135		140	168	5	163		163	2		3
13-5616275	TRANSATLANTIC REINS CO					(13)	13				(13)	13		13	1		
87-2252307	TRISURA INS CO														4		
42-0644327	UNITED FIRE & CAS CO					7	36		43	52	7	45		45	4		1
20-3145738	UNITED SPECIALTY INS CO														3		
13-3088732	WCF NATL INS CO					24	133		157	188	24	164		164	3		5
13-1290712	XL REINS AMER INC					60	96		156	187	60	127		127	2		3
94-1590201	YOSEMITE INS CO						361		361	433		433		433	6		52
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers																	
Authorized - Pools - Mandatory Pools																	
AA-9991423	MINNESOTA WORKERS COMP					96			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999 - Total Authorized - Pools - Mandatory Pools																	
Authorized - Other Non-U.S. Insurers																	
AA-1120337	Aspen Ins UK Ltd						137		137	164		164		164	3		5
AA-3194122	DaVinci Reins Ltd						3		3	4		4		4	3		
AA-1126033	Lloyd's Syndicate Number 33						4		4	5		5		5	2		

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 - 27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29 - 30)	32 Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	34 Reinsurer Designation Equivalent	35 Credit Risk Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-1126510	Lloyd's Syndicate Number 510						2	2	2			2	2	2	2		
AA-1126780	Lloyd's Syndicate Number 780						1	1	1			1	1	1	1		
AA-1120156	Lloyd's Syndicate Number 1686						3	3	4			4	4	4	4		
AA-1120157	Lloyd's Syndicate Number 1729						2	2	2			2	2	2	2		
AA-1120171	Lloyd's Syndicate Number 1856						3	3	4			4	4	4	4		
AA-1120186	Lloyd's Syndicate Number 1947														2		
AA-1120106	Lloyd's Syndicate Number 1969					(1)					(1)	1	1	1	2		
AA-1128001	Lloyd's Syndicate Number 2001						5	5	6			6	6	6	6		
AA-1128010	Lloyd's Syndicate Number 2010						3	3	4			4	4	4	4		
AA-1128987	Lloyd's Syndicate Number 2987						4	4	5			5	5	5	5		
AA-1120086	Lloyd's Syndicate Number 4141						2	2	2			2	2	2	2		
AA-1120181	Lloyd's Syndicate Number 5886					(1)	3	2	2		(1)	3	3	3	2		
AA-1840000	Mapfre Re Compania de Reaseguros SA						2	2	2			2	2	2	3		
AA-3190829	Markel Bermuda Ltd.					46	240	286	343			46	297	297	3		8
AA-3190339	RENAISSANCE REINS LTD.						3	3	4			4	4	4	2		
1299999 - Total Authorized - Other Non-U.S. Insurers				XXX		44	417			462	554	44	510		510	XXX	14
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				XXX		1,969	419,320			81,354	97,625	1,879	95,746		95,746	XXX	1,681
Unauthorized - Other non-U.S. Insurers																	
AA-3191448	Ada Re Ltd.				512	617		617	740	105	635	512	123	6	6	15	15
AA-3191518	AdVantage Retro I Ltd.													6	6		
AA-3191298	Antares Reins Co Ltd.	20	1			22		22	26	2	24	20	4	4	4	1	
AA-9240012	China Prop & Cas Reins Co Ltd.	224	2			238		238	286	14	272	224	48	3	3	6	1
AA-9240020	China Reins Grp Corp.	3	2			3		3	4		4	3	1	1	3		
AA-3191435	Conduit Reins Ltd.	11	3			11		11	13		13	11	2	4	2		
AA-1340028	Devk Ruckversicherungs und Beteiligungs AG	25	4			25		25	30		30	25	5	3	3	1	
AA-3194130	Endurance Specialty Ins Ltd.	5				5		5	6		6	5	1	2	2		
AA-3191289	Fidelis Ins Bermuda Ltd.	4	5			4		4	5		5	4	1	3	3		
AA-1120175	Fidelis Underwriting Ltd.	5	6			5		5	6		6	5	1	3	3		
AA-5340310	GEN INS CORP OF INDIA	2	7			2		2	2		2	2		4	4		
AA-3191190	Hamilton Re Ltd.	6	8			6		6	7		7	6	1	3	3		
AA-3190060	Hannover Re (Bermuda) Ltd.		9			104		104	125	(1)	126	105	21	2	2	2	
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS					3		3	4		4		3	3	3		
AA-5420050	KOREAN REINS CO.	76	10			90		90	108	14	94	76	18	3	3	2	1
AA-1440060	LANSFORSKRINGS BOLAG ENS AB					8		8	10		8	2	2	3	3		
AA-3191239	Lumen Re Ltd.	18	11			18		18	22		22	18	4	3	3	1	
AA-8310008	Humboldt Re Ltd.					3		3	4		3	1	1	4	4		
AA-1460019	MS Amlin AG	2	12			2		2	2		2	2		2	2		
AA-5340660	NEW INDIA ASSUR CO LTD.	3	13			3		3	4		4	3	1	5	5		
AA-5320039	Peak Reins Co Ltd.	50	14			49		49	59	(1)	60	50	10	4	4	2	
AA-9240065	PICC Reins Co Ltd.													4	4		
AA-1340004	R V Versicherung AG	441	15			503		503	604		62	542	441	101	3	12	3
AA-1440076	SiriusPoint Intl Ins Corp (publ)	2	16			2		2	2		2	2		4	4		
AA-5324100	Taiping Reins Co Ltd.	26	17			29		29	35		3	32	26	6	3	1	
AA-3191432	Vantage Risk Ltd.	25	18			25		25	30		30	25	5	4	4	1	
AA-3191388	Vermeer Reins Ltd.	8	19			8		8	10		10	8	2	3	3		
2699999 - Total Unauthorized - Other Non-U.S. Insurers		5	1,056	XXX	512	1,785		1,785	2,142	213	1,929	1,573	356	XXX	45	45	21
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		5	1,056	XXX	512	1,785		1,785	2,142	213	1,929	1,573	356	XXX	45	45	21
Certified - Other Non-U.S. Insurers																	
CR-3194126	Arch Reins Ltd.					(1)								2	2		
CR-1340125	Hannover Rueck SE	8				7		7	94	(1)	95	8	87	2	2		2

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15 - 27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29 - 30)	Total Collateral (Cols. 21 + 22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	Reinsurer Designation Equivalent	Credit Risk Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
CR-3190875	Hiscox Ins Co (Bermuda) Ltd.		38	20		38	150		188	226		226	38	188	3	1	5
CR-1460100	New Reins Co Ltd.						3	3							2		
CR-3190686	Partner Reins Co Ltd.	5				5	22		27	32		32	5	27	2		1
4099999 - Total Certified - Other Non-U.S. Insurers		13	38	XXX		49	246	3	293	352	(1)	353	51	302	XXX	1	8
4299999 - Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		13	38	XXX		49	246	3	293	352	(1)	353	51	302	XXX	1	8
Reciprocal Jurisdiction - Other Non-U.S. Insurers																	
RJ-3194126	Arch Reins Ltd.					(95)	95					(95)	95		2		2
RJ-3191352	Ascot Reins Co Ltd.					(2)	2					(2)	2		3		
RJ-3191435	Conduit Reins Ltd.					24	182		206	247		24	223		4		7
RJ-1120191	Convex Ins UK Ltd.					(12)	25		13	16		(12)	28		3		1
RJ-3191400	Convex Re Ltd.					(12)	25		13	16		(12)	28		3		1
RJ-3194122	DaVinci Reins Ltd.						23		23	28		28	28		3		1
RJ-1340028	Devk Ruckversicherungs und Beteiligungs AG					5	77		82	98		5	93		3		3
RJ-3191190	Hamilton Re Ltd.					14	25		39	47		14	33		3		1
RJ-3190060	Hannover Re (Bermuda) Ltd.					54	357		411	493		54	439		2		9
RJ-1340125	Hannover Rueck SE					136	1,017		1,153	1,384		136	1,248		2		26
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd.														3		
RJ-3190871	Lancashire Ins Co Ltd.														3		
RJ-1126033	Lloyd's Syndicate Number 33					15	28		43	52		15	37		2		1
RJ-1126435	Lloyd's Syndicate Number 435						5		5	6			6		2		
RJ-1126510	Lloyd's Syndicate Number 510						41		41	49			49		2		1
RJ-1126609	Lloyd's Syndicate Number 609														2		
RJ-1126623	Lloyd's Syndicate Number 623														2		
RJ-1126727	Lloyd's Syndicate Number 727					2	39		41	49		2	47		2		1
RJ-1120085	Lloyd's Syndicate Number 1274					6	1		7	8		6	2		2		
RJ-1127301	Lloyd's Syndicate Number 1301					(3)	15		12	14		(3)	17		2		
RJ-1127414	Lloyd's Syndicate Number 1414					55	89		144	173		55	118		2		2
RJ-1120198	Lloyd's Syndicate Number 1618														2		
RJ-1120156	Lloyd's Syndicate Number 1686						28		28	34			34		2		1
RJ-1120157	Lloyd's Syndicate Number 1729					2	23		25	30		2	28		2		1
RJ-1120171	Lloyd's Syndicate Number 1856					4	5		9	11		4	7		2		
RJ-1120096	Lloyd's Syndicate Number 1880					2	9		11	13		2	11		2		
RJ-1120083	Lloyd's Syndicate Number 1910						170		170	204			204		2		4
RJ-1120084	Lloyd's Syndicate Number 1955					(4)	7		3	4		(4)	8		2		
RJ-1128001	Lloyd's Syndicate Number 2001					(26)	88		62	74		(26)	100		2		2
RJ-1128003	Lloyd's Syndicate Number 2003														2		
RJ-1128010	Lloyd's Syndicate Number 2010					5	12		17	20		5	15		2		
RJ-1128121	Lloyd's Syndicate Number 2121					2			2	2		2			2		
RJ-1128623	Lloyd's Syndicate Number 2623														2		
RJ-1128791	Lloyd's Syndicate Number 2791					20	499		519	623		20	603		2		13
RJ-1128987	Lloyd's Syndicate Number 2987														2		
RJ-1129000	Lloyd's Syndicate Number 3000														2		
RJ-1120075	Lloyd's Syndicate Number 4020														2		
RJ-1126004	Lloyd's Syndicate Number 4444														2		
RJ-1126006	Lloyd's Syndicate Number 4472														2		
RJ-1120090	Lloyd's Syndicate Number 4711														2		
RJ-1120181	Lloyd's Syndicate Number 5886					(1)	19		18	22		(1)	23		2		
RJ-3191239	Lumen Re Ltd.														3		
RJ-3190686	Partner Reins Co Ltd.					(60)	60					(60)	60		2		1
RJ-3190339	RENAISSANCE REINS LTD.					(104)	290		186	223		(104)	327		2		7



**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 43 - 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20% (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37	Overdue					43										
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)										
Authorized - Affiliates - U.S. Intercompany Pooling																		
42-0331872	FARM BUREAU PROP & CAS INS CO																	YES
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling																	XXX
0899999	Total Authorized - Affiliates - Total Authorized - Affiliates																	XXX
Authorized - Other U.S. Unaffiliated Insurers																		
38-3207001	ACCIDENT FUND INS CO OF AMER																	YES
95-2371728	ACE AMER INS CO																	YES
95-3187355	ALLIANZ GLOBAL RISKS US INS CO	2						2		2								YES
06-1182357	ALLIED WORLD INS CO	1						1		1								YES
36-2661954	AMERICAN AGRICULTURAL INS CO	84						84		84								YES
06-1430254	ARCH REINS CO																	YES
51-0434766	AXIS REINS CO	1						1		1								YES
47-0574325	BERKLEY INS CO																	YES
42-0234980	EMPLOYERS MUT CAS CO	1	52					52		53				98.113				YES
22-2005057	EVEREST REINS CO																	YES
05-0316605	FACTORY MUT INS CO	427						427		427								YES
13-6108721	HARCO NATL INS CO	3						3		3								YES
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	9						9		9								YES
74-2195939	HOUSTON CAS CO	1						1		1								YES
95-2769232	INSURANCE CO OF THE WEST																	YES
04-1543470	LIBERTY MUT INS CO	2						2		2								YES
06-1481194	MARKEL GLOBAL REINS CO	5						5		5								YES
13-4924125	MUNICH REINS AMER INC																	YES
31-4177100	NATIONWIDE MUT INS CO																	YES
13-3138390	NAVIGATORS INS CO	3						3		3								YES
47-0698507	ODYSSEY REINS CO	3						3		3								YES
95-2379438	PALOMAR SPECIALTY INS CO																	YES
13-3031176	PARTNER REINS CO OF THE US																	YES
35-6021485	PROTECTIVE INS CO																	YES
52-1952955	RENAISSANCE REINS US INC																	YES
43-0727872	SAFETY NATL CAS CORP	21						21		21								YES
75-1444207	SCOR REINS CO																	YES
75-1980552	STATE NATL INS CO INC	2						2		2								YES
13-1675535	SWISS REINS AMER CORP	5						5		5								YES
02-0449082	TECHNOLOGY INS CO INC	8						8		8								YES
31-0542366	THE CINCINNATI INS CO	1						1		1								YES
13-5616275	TRANSATLANTIC REINS CO																	YES
87-2252307	TRISURA INS CO																	YES
42-0644327	UNITED FIRE & CAS CO																	YES
20-3145738	UNITED SPECIALTY INS CO																	YES
13-3088732	WCF NATL INS CO																	YES
13-1290712	XL REINS AMER INC																	YES
94-1590201	YOSEMITE INS CO	5						5		5								YES
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	584	52					636		636				8.176				XXX
Authorized - Pools - Mandatory Pools																		
AA-9991423	MINNESOTA WORKERS COMP																	YES
1099999	Total Authorized - Pools - Mandatory Pools																	XXX
Authorized - Other Non-U.S. Insurers																		
AA-1120337	Aspen Ins UK Ltd	3						3		3								YES



**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 43 - 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20% (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	38 Overdue				43 Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)										
			1 - 29 Days	30 - 90 Days	91 - 120 Days	Over 120 Days											
AA-3194122	DaVinci Reins Ltd.	1					1			1							YES
AA-1126033	Lloyd's Syndicate Number 33	2					2			2							YES
AA-1126510	Lloyd's Syndicate Number 510	1					1			1							YES
AA-1126780	Lloyd's Syndicate Number 780																YES
AA-1120156	Lloyd's Syndicate Number 1686	1					1			1							YES
AA-1120157	Lloyd's Syndicate Number 1729	1					1			1							YES
AA-1120171	Lloyd's Syndicate Number 1856	1					1			1							YES
AA-1120186	Lloyd's Syndicate Number 1947																YES
AA-1120106	Lloyd's Syndicate Number 1969	(1)					(1)			(1)							YES
AA-1128001	Lloyd's Syndicate Number 2001	2					2			2							YES
AA-1128010	Lloyd's Syndicate Number 2010	1					1			1							YES
AA-1128987	Lloyd's Syndicate Number 2987	2					2			2							YES
AA-1120086	Lloyd's Syndicate Number 4141	1					1			1							YES
AA-1120181	Lloyd's Syndicate Number 5886	1					1			1							YES
AA-1840000	Mapfre Re Compania de Reaseguros SA	1					1			1							YES
AA-3190829	Markel Bermuda Ltd.																YES
AA-3190339	RENAISSANCE REINS LTD.	1					1			1							YES
1299999 - Total Authorized - Other Non-U.S. Insurers		18					18			18							XXX
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		602	52				52	654		654		7.951					XXX
Unauthorized - Other non-U.S. Insurers																	
AA-3191448	Ada Re Ltd.																YES
AA-3191518	AdVantage Retro I Ltd.																YES
AA-3191298	Antares Reins Co Ltd.	3					3			3							YES
AA-9240012	China Prop & Cas Reins Co Ltd.	2					2			2							YES
AA-9240020	China Reins Grp Corp.	1					1			1							YES
AA-3191435	Conduit Reins Ltd.	1					1			1							YES
AA-1340028	Devk Ruckversicherungs und Beteiligungs AG.	3					3			3							YES
AA-3194130	Endurance Specialty Ins Ltd.	2					2			2							YES
AA-3191289	Fidelis Ins Bermuda Ltd.	2					2			2							YES
AA-1120175	Fidelis Underwriting Ltd.	2					2			2							YES
AA-5340310	GEN INS CORP OF INDIA	1					1			1							YES
AA-3191190	Hamilton Re Ltd.	3					3			3							YES
AA-3190060	Hannover Re (Bermuda) Ltd.	10					10			10							YES
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS																YES
AA-5420050	KOREAN REINS CO.	4					4			4							YES
AA-1440060	LANSFORSKRINGS BOLAG ENS AB	1					1			1							YES
AA-3191239	Lumen Re Ltd.	1					1			1							YES
AA-8310008	Humboldt Re Ltd.	1					1			1							YES
AA-1460019	MS Amlin AG	1					1			1							YES
AA-5340660	NEW INDIA ASSUR CO LTD.	1					1			1							YES
AA-5320039	Peak Reins Co Ltd.	6					6			6							YES
AA-9240065	PICC Reins Co Ltd.																YES
AA-1340004	R V Versicherung AG	10					10			10							YES
AA-1440076	SiriusPoint Intl Ins Corp (publ)	1					1			1							YES
AA-5324100	Taiping Reins Co Ltd.	3					3			3							YES
AA-3191432	Vantage Risk Ltd.	2					2			2							YES
AA-3191388	Vermeer Reins Ltd.	4					4			4							YES
2699999 - Total Unauthorized - Other Non-U.S. Insurers		65					65			65							XXX
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		65					65			65							XXX

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 43 - 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20% (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37	Overdue					43										
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38 + 39 + 40 + 41	Total Due Cols. 37 + 42 (In total should equal Cols. 7 + 8)										
Certified - Other Non-U.S. Insurers																		
CR-3194126	Arch Reins Ltd.	(1)					(1)			(1)								YES
CR-1340125	Hannover Rueck SE	5					5			5								YES
CR-3190875	Hiscox Ins Co (Bermuda) Ltd.	9					9			9								YES
CR-1460100	New Reins Co Ltd.	1					1			1								YES
CR-3190686	Partner Reins Co Ltd.	3					3			3								YES
4099999	Total Certified - Other Non-U.S. Insurers	17					17			17								XXX
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	17					17			17								XXX
Reciprocal Jurisdiction - Other Non-U.S. Insurers																		
RJ-3194126	Arch Reins Ltd.																	YES
RJ-3191352	Ascot Reins Co Ltd.																	YES
RJ-3191435	Conduit Reins Ltd.																	YES
RJ-1120191	Convex Ins UK Ltd.	2					2			2								YES
RJ-3191400	Convex Re Ltd.	2					2			2								YES
RJ-3194122	DaVinci Reins Ltd.	4					4			4								YES
RJ-1340028	Devk Ruckversicherungs und Beteiligungs AG																	YES
RJ-3191190	Hamilton Re Ltd.	4					4			4								YES
RJ-3190060	Hannover Re (Bermuda) Ltd.																	YES
RJ-1340125	Hannover Rueck SE																	YES
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd.																	YES
RJ-3190871	Lancashire Ins Co Ltd.																	YES
RJ-1126033	Lloyd's Syndicate Number 33	3					3			3								YES
RJ-1126435	Lloyd's Syndicate Number 435	1					1			1								YES
RJ-1126510	Lloyd's Syndicate Number 510	4					4			4								YES
RJ-1126609	Lloyd's Syndicate Number 609																	YES
RJ-1126623	Lloyd's Syndicate Number 623																	YES
RJ-1126727	Lloyd's Syndicate Number 727																	YES
RJ-1120085	Lloyd's Syndicate Number 1274	1					1			1								YES
RJ-1127301	Lloyd's Syndicate Number 1301	2					2			2								YES
RJ-1127414	Lloyd's Syndicate Number 1414																	YES
RJ-1120198	Lloyd's Syndicate Number 1618																	YES
RJ-1120156	Lloyd's Syndicate Number 1686	3					3			3								YES
RJ-1120157	Lloyd's Syndicate Number 1729	3					3			3								YES
RJ-1120171	Lloyd's Syndicate Number 1856	2					2			2								YES
RJ-1120096	Lloyd's Syndicate Number 1880	1					1			1								YES
RJ-1120083	Lloyd's Syndicate Number 1910	6					6			6								YES
RJ-1120084	Lloyd's Syndicate Number 1955																	YES
RJ-1128001	Lloyd's Syndicate Number 2001	5					5			5								YES
RJ-1128003	Lloyd's Syndicate Number 2003																	YES
RJ-1128010	Lloyd's Syndicate Number 2010	2					2			2								YES
RJ-1128121	Lloyd's Syndicate Number 2121																	YES
RJ-1128623	Lloyd's Syndicate Number 2623																	YES
RJ-1128791	Lloyd's Syndicate Number 2791	6					6			6								YES
RJ-1128987	Lloyd's Syndicate Number 2987																	YES
RJ-1129000	Lloyd's Syndicate Number 3000																	YES
RJ-1120075	Lloyd's Syndicate Number 4020																	YES
RJ-1126004	Lloyd's Syndicate Number 4444																	YES
RJ-1126006	Lloyd's Syndicate Number 4472																	YES
RJ-1120090	Lloyd's Syndicate Number 4711																	YES
RJ-1120181	Lloyd's Syndicate Number 5886	3					3			3								YES

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 43 - 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/ [Cols. 46 + 48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20% (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37	Overdue				43										
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38 + 39 + 40 + 41										
RJ-3191239	Lumen Re Ltd.																YES
RJ-3190686	Partner Reins Co Ltd.																YES
RJ-3190339	RENAISSANCE REINS LTD.	9					9		9								YES
5499999	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers	63					63		63								XXX
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	63					63		63								XXX
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	747	52				52	799	799			6.508					XXX
9999999	Totals	747	52				52	799	799			6.508					XXX

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**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20+Col. 21+Col. 22+Col. 24]/Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57+[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20+Col. 21+Col. 22+Col. 24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	20% of Amount in Col. 67		
Authorized - Affiliates - U.S. Intercompany Pooling																		
42-0331872	FARM BUREAU PROP & CAS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling																		
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates																		
Authorized - Other U.S. Unaffiliated Insurers																		
38-3207001	ACCIDENT FUND INS CO OF AMER	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-2371728	ACE AMER INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-3187355	ALLIANZ GLOBAL RISKS US INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1182357	ALLIED WORLD INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36-2661954	AMERICAN AGRICULTURAL INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1430254	ARCH REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
51-0434766	AXIS REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0574325	BERKLEY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0234980	EMPLOYERS MUT CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
22-2005057	EVEREST REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
05-0316605	FACTORY MUT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-6108721	HARCO NATL INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
74-2195939	HOUSTON CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-2769232	INSURANCE CO OF THE WEST	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
04-1543470	LIBERTY MUT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1481194	MARKEL GLOBAL REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-4924125	MUNICH REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
31-4177100	NATIONWIDE MUT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3138390	NAVIGATORS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0698507	ODYSSEY REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-2379438	PALOMAR SPECIALTY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3031176	PARTNER REINS CO OF THE US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35-6021485	PROTECTIVE INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
52-1952955	RENAISSANCE REINS US INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43-0727872	SAFETY NATL CAS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
75-1444207	SCOR REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
75-1980552	STATE NATL INS CO INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1675535	SWISS REINS AMER CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
02-0449082	TECHNOLOGY INS CO INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
31-0542366	THE CINCINNATI INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-5616275	TRANSATLANTIC REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
87-2252307	TRISURA INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0644327	UNITED FIRE & CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
20-3145738	UNITED SPECIALTY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3088732	WCF NATL INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1290712	XL REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
94-1590201	YOSEMITE INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers																		
Authorized - Pools - Mandatory Pools																		
AA-9991423	MINNESOTA WORKERS COMP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999 - Total Authorized - Pools - Mandatory Pools																		
Authorized - Other Non-U.S. Insurers																		

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 – Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ((Col. 20+Col. 21+Col. 22+Col. 24)/Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57+[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 – Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20+Col. 21+Col. 22+Col. 24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	20% of Amount in Col. 67		
AA-1120337	Aspen Ins UK Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194122	DaVinci Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126033	Lloyd's Syndicate Number 33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126510	Lloyd's Syndicate Number 510	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126780	Lloyd's Syndicate Number 780	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120156	Lloyd's Syndicate Number 1686	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120157	Lloyd's Syndicate Number 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120171	Lloyd's Syndicate Number 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120186	Lloyd's Syndicate Number 1947	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120106	Lloyd's Syndicate Number 1969	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128001	Lloyd's Syndicate Number 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128010	Lloyd's Syndicate Number 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128987	Lloyd's Syndicate Number 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120086	Lloyd's Syndicate Number 4141	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120181	Lloyd's Syndicate Number 5886	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1840000	Mapfre Re Compania de Reaseguros SA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190829	Markel Bermuda Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190339	RENAISSANCE REINS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1299999	- Total Authorized - Other Non-U.S. Insurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999	- Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Unauthorized - Other non-U.S. Insurers																		
AA-3191448	Ada Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191518	AdVantage Retro I Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191298	Antares Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9240012	China Prop & Cas Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9240020	China Reins Grp Corp	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191435	Conduit Reins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340028	Devk Ruckversicherungs und Beteiligungs AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3194130	Endurance Specialty Ins Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191289	Fidelis Ins Bermuda Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120175	Fidelis Underwriting Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5340310	GEN INS CORP OF INDIA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191190	Hamilton Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190060	Hannover Re (Bermuda) Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5420050	KOREAN REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1440060	LANSFORSKRINGS BOLAG ENS AB	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191239	Lumen Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-8310008	Humboldt Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460019	MS Amlin AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5340660	NEW INDIA ASSUR CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5320039	Peak Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9240065	PICC Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340004	R V Versicherung AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1440076	SiriusPoint Intl Ins Corp (publ)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5324100	Taiping Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191432	Vantage Risk Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ((Col. 20+Col. 21+Col. 22+Col. 24)/Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57+[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20+Col. 21+Col. 22+Col. 24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	20% of Amount in Col. 67		
AA-3191388	Vermeer Reins Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2699999 - Total Unauthorized - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Certified - Other Non-U.S. Insurers																		
CR-3194126	Arch Reins Ltd.	3	05/06/2016	20.000		(1)												
CR-1340125	Hannover Rueck SE	2	09/22/2014	10.000		79	8	10.000	100.000		79							
CR-3190875	Hiscox Ins Co (Bermuda) Ltd.	3	06/13/2017	20.000		188	38	20.000	100.000		188							
CR-1460100	New Reins Co Ltd.	2	05/09/2018	10.000		3						3						
CR-3190686	Partner Reins Co Ltd.	3	08/08/2019	20.000		27	5	20.000	100.000		27							
4099999 - Total Certified - Other Non-U.S. Insurers		XXX	XXX	XXX		296	51	XXX	XXX		294	3						
4299999 - Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	XXX	XXX		296	51	XXX	XXX		294	3						
Reciprocal Jurisdiction - Other Non-U.S. Insurers																		
RJ-3194126	Arch Reins Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-3191352	Ascot Reins Co Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-3191435	Conduit Reins Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120191	Convex Ins UK Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-3191400	Convex Re Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-3194122	DaVinci Reins Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1340028	Devk Ruckversicherungs und Beteiligungs AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-3191190	Hamilton Re Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-3190060	Hannover Re (Bermuda) Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1340125	Hannover Rueck SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-3190871	Lancashire Ins Co Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1126033	Lloyd's Syndicate Number 33	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1126435	Lloyd's Syndicate Number 435	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1126510	Lloyd's Syndicate Number 510	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1126609	Lloyd's Syndicate Number 609	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1126623	Lloyd's Syndicate Number 623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1126727	Lloyd's Syndicate Number 727	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120085	Lloyd's Syndicate Number 1274	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1127301	Lloyd's Syndicate Number 1301	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1127414	Lloyd's Syndicate Number 1414	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120198	Lloyd's Syndicate Number 1618	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120156	Lloyd's Syndicate Number 1686	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120157	Lloyd's Syndicate Number 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120171	Lloyd's Syndicate Number 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120096	Lloyd's Syndicate Number 1880	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120083	Lloyd's Syndicate Number 1910	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120084	Lloyd's Syndicate Number 1955	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1128001	Lloyd's Syndicate Number 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1128003	Lloyd's Syndicate Number 2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1128010	Lloyd's Syndicate Number 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1128121	Lloyd's Syndicate Number 2121	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1128623	Lloyd's Syndicate Number 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1128791	Lloyd's Syndicate Number 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1128987	Lloyd's Syndicate Number 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ((Col. 20+Col. 21+Col. 22+Col. 24)/Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57+[Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20+Col. 21+Col. 22+ Col. 24; not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63-Col. 66)	20% of Amount in Col. 67		
RJ-1129000	Lloyd's Syndicate Number 3000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120075	Lloyd's Syndicate Number 4020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1126004	Lloyd's Syndicate Number 4444	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1126006	Lloyd's Syndicate Number 4472	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120090	Lloyd's Syndicate Number 4711	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120181	Lloyd's Syndicate Number 5886	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-3191239	Lumen Re Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-3190686	Partner Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-3190339	RENAISSANCE REINS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5499999 - Total Reciprocal Jurisdiction - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5699999 - Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5799999 - Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		XXX	XXX	XXX		296		51	XXX	XXX		294	3					
9999999 Totals		XXX	XXX	XXX		296		51	XXX	XXX		294	3					

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**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0  20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0  Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or [Col. 40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Col. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
Authorized - Affiliates - U.S. Intercompany Pooling										
42-0331872	FARM BUREAU PROP & CAS INS CO		xxx	xxx				xxx	xxx	
0199999 - Total Authorized - Affiliates - U.S. Intercompany Pooling										
0899999 - Total Authorized - Affiliates - Total Authorized - Affiliates										
Authorized - Other U.S. Unaffiliated Insurers										
38-3207001	ACCIDENT FUND INS CO OF AMER		xxx	xxx				xxx	xxx	
95-2371728	ACE AMER INS CO		xxx	xxx				xxx	xxx	
95-3187355	ALLIANZ GLOBAL RISKS US INS CO		xxx	xxx				xxx	xxx	
06-1182357	ALLIED WORLD INS CO		xxx	xxx				xxx	xxx	
36-2661954	AMERICAN AGRICULTURAL INS CO		xxx	xxx				xxx	xxx	
06-1430254	ARCH REINS CO		xxx	xxx				xxx	xxx	
51-0434766	AXIS REINS CO		xxx	xxx				xxx	xxx	
47-0574325	BERKLEY INS CO		xxx	xxx				xxx	xxx	
42-0234980	EMPLOYERS MUT CAS CO		xxx	xxx				xxx	xxx	
22-2005057	EVEREST REINS CO		xxx	xxx				xxx	xxx	
05-0316605	FACTORY MUT INS CO		xxx	xxx				xxx	xxx	
13-6108721	HARCO NATL INS CO		xxx	xxx				xxx	xxx	
06-0384680	HARTFORD STEAM BOIL INSPEC & INS CO		xxx	xxx				xxx	xxx	
74-2195939	HOUSTON CAS CO		xxx	xxx				xxx	xxx	
95-2769232	INSURANCE CO OF THE WEST		xxx	xxx				xxx	xxx	
04-1543470	LIBERTY MUT INS CO		xxx	xxx				xxx	xxx	
06-1481194	MARKEL GLOBAL REINS CO		xxx	xxx				xxx	xxx	
13-4924125	MUNICH REINS AMER INC		xxx	xxx				xxx	xxx	
31-4177100	NATIONWIDE MUT INS CO		xxx	xxx				xxx	xxx	
13-3138390	NAVIGATORS INS CO		xxx	xxx				xxx	xxx	
47-0698507	ODYSSEY REINS CO		xxx	xxx				xxx	xxx	
95-2379438	PALOMAR SPECIALTY INS CO		xxx	xxx				xxx	xxx	
13-3031176	PARTNER REINS CO OF THE US		xxx	xxx				xxx	xxx	
35-6021485	PROTECTIVE INS CO		xxx	xxx				xxx	xxx	
52-1952955	RENAISSANCE REINS US INC		xxx	xxx				xxx	xxx	
43-0727872	SAFETY NATL CAS CORP		xxx	xxx				xxx	xxx	
75-1444207	SCOR REINS CO		xxx	xxx				xxx	xxx	
75-1980552	STATE NATL INS CO INC		xxx	xxx				xxx	xxx	
13-1675535	SWISS REINS AMER CORP		xxx	xxx				xxx	xxx	
02-0449082	TECHNOLOGY INS CO INC		xxx	xxx				xxx	xxx	
31-0542366	THE CINCINNATI INS CO		xxx	xxx				xxx	xxx	
13-5616275	TRANSATLANTIC REINS CO		xxx	xxx				xxx	xxx	
87-2252307	TRISURA INS CO		xxx	xxx				xxx	xxx	
42-0644327	UNITED FIRE & CAS CO		xxx	xxx				xxx	xxx	
20-3145738	UNITED SPECIALTY INS CO		xxx	xxx				xxx	xxx	
13-3088732	WCF NATL INS CO		xxx	xxx				xxx	xxx	
13-1290712	XL REINS AMER INC		xxx	xxx				xxx	xxx	
94-1590201	YOSEMITE INS CO		xxx	xxx				xxx	xxx	
0999999 - Total Authorized - Other U.S. Unaffiliated Insurers										
Authorized - Pools - Mandatory Pools										
AA-9991423	MINNESOTA WORKERS COMP		xxx	xxx				xxx	xxx	
1099999 - Total Authorized - Pools - Mandatory Pools										



**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0  20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0  Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or [Col. 40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Col. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
Authorized - Other Non-U.S. Insurers										
AA-1120337	Aspen Ins UK Ltd.		XXX	XXX					XXX	XXX
AA-3194122	DaVinci Reins Ltd.		XXX	XXX					XXX	XXX
AA-1126033	Lloyd's Syndicate Number 33		XXX	XXX					XXX	XXX
AA-1126510	Lloyd's Syndicate Number 510		XXX	XXX					XXX	XXX
AA-1126780	Lloyd's Syndicate Number 780		XXX	XXX					XXX	XXX
AA-1120156	Lloyd's Syndicate Number 1686		XXX	XXX					XXX	XXX
AA-1120157	Lloyd's Syndicate Number 1729		XXX	XXX					XXX	XXX
AA-1120171	Lloyd's Syndicate Number 1856		XXX	XXX					XXX	XXX
AA-1120186	Lloyd's Syndicate Number 1947		XXX	XXX					XXX	XXX
AA-1120106	Lloyd's Syndicate Number 1969		XXX	XXX					XXX	XXX
AA-1128001	Lloyd's Syndicate Number 2001		XXX	XXX					XXX	XXX
AA-1128010	Lloyd's Syndicate Number 2010		XXX	XXX					XXX	XXX
AA-1128987	Lloyd's Syndicate Number 2987		XXX	XXX					XXX	XXX
AA-1120086	Lloyd's Syndicate Number 4141		XXX	XXX					XXX	XXX
AA-1120181	Lloyd's Syndicate Number 5886		XXX	XXX					XXX	XXX
AA-1840000	Mapfre Re Compania de Reaseguros SA		XXX	XXX					XXX	XXX
AA-3190829	Markel Bermuda Ltd.		XXX	XXX					XXX	XXX
AA-3190339	RENAISSANCE REINS LTD.		XXX	XXX					XXX	XXX
1299999 - Total Authorized - Other Non-U.S. Insurers			XXX	XXX					XXX	XXX
1499999 - Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX					XXX	XXX
Unauthorized - Other non-U.S. Insurers										
AA-3191448	Ada Re Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-3191518	AdVantage Retro I Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-3191298	Antares Reins Co Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-9240012	China Prop & Cas Reins Co Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-9240020	China Reins Grp Corp.				XXX	XXX	XXX	XXX	XXX	XXX
AA-3191435	Conduit Reins Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-1340028	Devk Ruckversicherungs und Beteiligungs AG				XXX	XXX	XXX	XXX	XXX	XXX
AA-3194130	Endurance Specialty Ins Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-3191289	Fidelis Ins Bermuda Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-1120175	Fidelis Underwriting Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-5340310	GEN INS CORP OF INDIA				XXX	XXX	XXX	XXX	XXX	XXX
AA-3191190	Hamilton Re Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-3190060	Hannover Re (Bermuda) Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS				XXX	XXX	XXX	XXX	XXX	XXX
AA-5420050	KOREAN REINS CO.				XXX	XXX	XXX	XXX	XXX	XXX
AA-1440060	LANSFORSKRINGS BOLAG ENS AB				XXX	XXX	XXX	XXX	XXX	XXX
AA-3191239	Lumen Re Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-8310008	Humboldt Re Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-1460019	MS Amlin AG				XXX	XXX	XXX	XXX	XXX	XXX
AA-5340660	NEW INDIA ASSUR CO LTD.				XXX	XXX	XXX	XXX	XXX	XXX
AA-5320039	Peak Reins Co Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-9240065	PICC Reins Co Ltd.				XXX	XXX	XXX	XXX	XXX	XXX
AA-1340004	R V Versicherung AG				XXX	XXX	XXX	XXX	XXX	XXX

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance					
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or [Col. 40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Col. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)		
AA-1440076	SiriusPoint Intl Ins Corp (publ)				xxx	xxx	xxx	xxx	xxx	xxx		
AA-5324100	Taiping Reins Co Ltd				xxx	xxx	xxx	xxx	xxx	xxx		
AA-3191432	Vantage Risk Ltd				xxx	xxx	xxx	xxx	xxx	xxx		
AA-3191388	Vermeer Reins Ltd				xxx	xxx	xxx	xxx	xxx	xxx		
2699999 - Total Unauthorized - Other Non-U.S. Insurers					xxx	xxx	xxx	xxx	xxx	xxx		
2899999 - Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					xxx	xxx	xxx	xxx	xxx	xxx		
Certified - Other Non-U.S. Insurers												
CR-3194126	Arch Reins Ltd	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
CR-1340125	Hannover Rueck SE	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
CR-3190875	Hiscox Ins Co (Bermuda) Ltd	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
CR-1460100	New Reins Co Ltd	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	3	3
CR-3190686	Partner Reins Co Ltd	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
4099999 - Total Certified - Other Non-U.S. Insurers		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	3	3
4299999 - Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	3	3
Reciprocal Jurisdiction - Other Non-U.S. Insurers												
RJ-3194126	Arch Reins Ltd		xxx	xxx						xxx	xxx	
RJ-3191352	Ascot Reins Co Ltd		xxx	xxx						xxx	xxx	
RJ-3191435	Conduit Reins Ltd		xxx	xxx						xxx	xxx	
RJ-1120191	Convex Ins UK Ltd		xxx	xxx						xxx	xxx	
RJ-3191400	Convex Re Ltd		xxx	xxx						xxx	xxx	
RJ-3194122	DaVinci Reins Ltd		xxx	xxx						xxx	xxx	
RJ-1340028	Devk Ruckversicherungs und Beteiligungs AG		xxx	xxx						xxx	xxx	
RJ-3191190	Hamilton Re Ltd		xxx	xxx						xxx	xxx	
RJ-3190060	Hannover Re (Bermuda) Ltd		xxx	xxx						xxx	xxx	
RJ-1340125	Hannover Rueck SE		xxx	xxx						xxx	xxx	
RJ-3190875	Hiscox Ins Co (Bermuda) Ltd		xxx	xxx						xxx	xxx	
RJ-3190871	Lancashire Ins Co Ltd		xxx	xxx						xxx	xxx	
RJ-1126033	Lloyd's Syndicate Number 33		xxx	xxx						xxx	xxx	
RJ-1126435	Lloyd's Syndicate Number 435		xxx	xxx						xxx	xxx	
RJ-1126510	Lloyd's Syndicate Number 510		xxx	xxx						xxx	xxx	
RJ-1126609	Lloyd's Syndicate Number 609		xxx	xxx						xxx	xxx	
RJ-1126623	Lloyd's Syndicate Number 623		xxx	xxx						xxx	xxx	
RJ-1126727	Lloyd's Syndicate Number 727		xxx	xxx						xxx	xxx	
RJ-1120085	Lloyd's Syndicate Number 1274		xxx	xxx						xxx	xxx	
RJ-1127301	Lloyd's Syndicate Number 1301		xxx	xxx						xxx	xxx	
RJ-1127414	Lloyd's Syndicate Number 1414		xxx	xxx						xxx	xxx	
RJ-1120198	Lloyd's Syndicate Number 1618		xxx	xxx						xxx	xxx	
RJ-1120156	Lloyd's Syndicate Number 1686		xxx	xxx						xxx	xxx	
RJ-1120157	Lloyd's Syndicate Number 1729		xxx	xxx						xxx	xxx	
RJ-1120171	Lloyd's Syndicate Number 1856		xxx	xxx						xxx	xxx	
RJ-1120096	Lloyd's Syndicate Number 1880		xxx	xxx						xxx	xxx	
RJ-1120083	Lloyd's Syndicate Number 1910		xxx	xxx						xxx	xxx	
RJ-1120084	Lloyd's Syndicate Number 1955		xxx	xxx						xxx	xxx	
RJ-1128001	Lloyd's Syndicate Number 2001		xxx	xxx						xxx	xxx	
RJ-1128003	Lloyd's Syndicate Number 2003		xxx	xxx						xxx	xxx	

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**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or [Col. 40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Col. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
RJ-1128010	Lloyd's Syndicate Number 2010		XXX	XXX				XXX	XXX	XXX
RJ-1128121	Lloyd's Syndicate Number 2121		XXX	XXX				XXX	XXX	XXX
RJ-1128623	Lloyd's Syndicate Number 2623		XXX	XXX				XXX	XXX	XXX
RJ-1128791	Lloyd's Syndicate Number 2791		XXX	XXX				XXX	XXX	XXX
RJ-1128987	Lloyd's Syndicate Number 2987		XXX	XXX				XXX	XXX	XXX
RJ-1129000	Lloyd's Syndicate Number 3000		XXX	XXX				XXX	XXX	XXX
RJ-1120075	Lloyd's Syndicate Number 4020		XXX	XXX				XXX	XXX	XXX
RJ-1126004	Lloyd's Syndicate Number 4444		XXX	XXX				XXX	XXX	XXX
RJ-1126006	Lloyd's Syndicate Number 4472		XXX	XXX				XXX	XXX	XXX
RJ-1120090	Lloyd's Syndicate Number 4711		XXX	XXX				XXX	XXX	XXX
RJ-1120181	Lloyd's Syndicate Number 5886		XXX	XXX				XXX	XXX	XXX
RJ-3191239	Lumen Re Ltd		XXX	XXX				XXX	XXX	XXX
RJ-3190686	Partner Reins Co Ltd		XXX	XXX				XXX	XXX	XXX
RJ-3190339	RENAISSANCE REINS LTD		XXX	XXX				XXX	XXX	XXX
5499999	- Total Reciprocal Jurisdiction - Other Non-U.S. Insurers		XXX	XXX				XXX	XXX	XXX
5699999	- Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		XXX	XXX				XXX	XXX	XXX
5799999	- Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)								3	3
9999999	Totals								3	3

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**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**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
1	1	026009632	Bank of Tokyo-Mitsubishi UFG	.20
2	1	026001591	Standard Chartered Bank	.227
3	1	026002655	Lloyds Bank PLC	.11
4	1	026013453	Landesbank Baden-Wuerttemberg, New York Branch	.25
5	1	021000089	Citibank Europe PLC	.4
6	1	026002655	Lloyds Bank PLC	.5
7	1	026002574	Barclays Bank PLC	.2
8	1	026007993	UBS AG	.6
9	1	026008008	UniCredit Bank AG	.105
10	1	026004307	Mizuho Bank Ltd	.76
11	1	026009179	Credit Suisse AG	.18
12	2	026002574	Barclays Bank PLC	
12	2	026002655	Lloyds Bank PLC	
12	2	026007728	National Australia Bank, A.B.N	
12	2	026007689	BNP Paribas	
12	2	026008044	Commerzbank AG	
13	1	026002574	Barclays Bank PLC	.3
14	1	026007728	National Australia Bank, A.B.N	.50
15	1	021000089	Citibank Europe PLC	.441
16	1	021000089	Citibank Europe PLC	.2
17	1	026009917	ANZ Bank New York	.26
18	1	121000248	Wells Fargo Bank, N.A.	.25
19	1	021000089	Citibank Europe PLC	.8
20	1	026007728	National Australia Bank, A.B.N	.38
<b>Total</b>				<b>1,094</b>

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE F - PART 5**

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

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

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

	1	2	3	4
	<u>Name of Reinsurer</u>	<u>Total Recoverables</u>	<u>Ceded Premiums</u>	<u>Affiliated</u>
6.	FARM BUREAU PROP & CAS INS CO.....	339,840	351,394	Yes [ X ] No [ ]
7.	ACE AMER INS CO.....	64,545	187,481	Yes [ ] No [ X ]
8.	SAFETY NATL CAS CORP.....	4,234	1,133	Yes [ ] No [ X ]
9.	AMERICAN AGRICULTURAL INS CO.....	3,385	1,336	Yes [ ] No [ X ]
10.	FACTORY MUT INS CO.....	3,261	5,296	Yes [ ] No [ X ]

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)
<b>ASSETS</b> (Page 2, Col. 3)			
1. Cash and invested assets (Line 12) .....	9,734,244		9,734,244
2. Premiums and considerations (Line 15) .....	400,249		400,249
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) .....	799,367	(799,367)	
4. Funds held by or deposited with reinsured companies (Line 16.2) .....	40,061		40,061
5. Other assets .....	4,573,277		4,573,277
6. Net amount recoverable from reinsurers .....		426,724,283	426,724,283
7. Protected cell assets (Line 27) .....			
8. Totals (Line 28) .....	15,547,198	425,924,916	441,472,114
<b>LIABILITIES</b> (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	163,631	208,469,499	208,633,130
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	1,329,192	2,575,882	3,905,074
11. Unearned premiums (Line 9) .....		217,383,984	217,383,984
12. Advance premiums (Line 10) .....			
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....			
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12) .....	2,493,449	(2,493,449)	
15. Funds held by company under reinsurance treaties (Line 13) .....	8,000	(8,000)	
16. Amounts withheld or retained by company for account of others (Line 14) .....			
17. Provision for reinsurance (Line 16) .....	3,000	(3,000)	
18. Other liabilities .....	1,031,824		1,031,824
19. Total liabilities excluding protected cell business (Line 26) .....	5,029,096	425,924,916	430,954,012
20. Protected cell liabilities (Line 27) .....			
21. Surplus as regards policyholders (Line 37) .....	10,518,102	X X X	10,518,102
22. Totals (Line 38) .....	15,547,198	425,924,916	441,472,114

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

If yes, give full explanation:

The company participates in a reinsurance pooling agreement with an affiliated company. Under the terms of the agreement, the Company cedes to the affiliate all of its business.....

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 - Part 1 - Summary

**NONE**

Schedule P - Part 2 - Summary

**NONE**

Schedule P - Part 3 - Summary

**NONE**

Schedule P - Part 4 - Summary

**NONE**



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 - Med Pro Liab Occ

**NONE**

Schedule P - Part 1F - Med Pro Liab Clm

**NONE**

Schedule P - Part 1G - Special Liability

**NONE**

Schedule P - Part 1H - Other Liab Occur

**NONE**

Schedule P - Part 1H - Other Liab Claims

**NONE**

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**

Schedule P - Part 2F - Section 1

**NONE**

Schedule P - Part 2F - Med Pro Liab Clm

**NONE**

Schedule P - Part 2G

**NONE**

Schedule P - Part 2H - Other Liab Occur

**NONE**

Schedule P - Part 2H - Other Liab Claim

**NONE**

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**

Schedule P - Part 3F - Med Pro Liab Occ

**NONE**

Schedule P - Part 3F - Med Pro Liab Clm

**NONE**

Schedule P - Part 3G

**NONE**

Schedule P - Part 3H - Other Liab Occur

**NONE**

Schedule P - Part 3H - Other Liab Claims

**NONE**

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**

Schedule P - Part 4F - Med Pro Liab Occ

**NONE**

Schedule P - Part 4F - Med Pro Liab Clm

**NONE**

Schedule P - Part 4G

**NONE**

Schedule P - Part 4H - Other Liab Occur

**NONE**

Schedule P - Part 4H - Other Liab Claims

**NONE**

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- SN1A

**NONE**

Schedule P - Part 5F- SN2A

**NONE**

Schedule P - Part 5F- SN3A

**NONE**

Schedule P - Part 5F- SN1B

**NONE**

Schedule P - Part 5F- SN2B

**NONE**

Schedule P - Part 5F- SN3B

**NONE**

Schedule P - Part 5H- SN1A

**NONE**

Schedule P - Part 5H- SN2A

**NONE**

Schedule P - Part 5H- SN3A

**NONE**

Schedule P - Part 5H- SN1B

**NONE**

Schedule P - Part 5H- SN2B

**NONE**

Schedule P - Part 5H- SN3B

**NONE**

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**

Schedule P - Part 6E - SN1

**NONE**

Schedule P - Part 6E - SN2

**NONE**

Schedule P - Part 6H - SN1A

**NONE**

Schedule P - Part 6H - SN2A

**NONE**

Schedule P - Part 6H - SN1B

**NONE**

Schedule P - Part 6H - SN2B

**NONE**

Schedule P - Part 6M - SN1

**NONE**

Schedule P - Part 6M - SN2

**NONE**

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**

Schedule P - Part 7A - Section 1

**NONE**

Schedule P - Part 7A - Section 2

**NONE**

Schedule P - Part 7A - Section 3

**NONE**

Schedule P - Part 7A - Section 4

**NONE**

Schedule P - Part 7A - Section 5

**NONE**

Schedule P - Part 7B - Section 1

**NONE**

Schedule P - Part 7B - Section 2

**NONE**

Schedule P - Part 7B - Section 3

**NONE**

Schedule P - Part 7B - Section 4

**NONE**

Schedule P - Part 7B - Section 5

**NONE**

Schedule P - Part 7B - Section 6

**NONE**

Schedule P - Part 7B - Section 7

**NONE**

Schedule P Interrogatories

**NONE**

**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	L							
2. Alaska	AK	N							
3. Arizona	AZ	L	45,050,706	40,662,996	19,255,704	25,091,830	22,814,829	11,088	
4. Arkansas	AR	L							
5. California	CA	N							
6. Colorado	CO	L	516,424	390,047	190,794	155,533	327,494		
7. Connecticut	CT	N							
8. Delaware	DE	N							
9. Dist. Columbia	DC	N							
10. Florida	FL	N							
11. Georgia	GA	N							
12. Hawaii	HI	N							
13. Idaho	ID	L	60,348	44,264	13,556	19,172	7,241		
14. Illinois	IL	L	17,782	17,782	23,922	23,863	(176)		
15. Indiana	IN	L	1,866,648	2,088,960	1,928,997	802,901	398,460		
16. Iowa	IA	L	133,088,071	122,428,162	66,897,295	46,899,559	37,373,077	20,053	
17. Kansas	KS	L	152,119,439	147,274,601	131,036,142	111,615,297	40,965,372	18,048	
18. Kentucky	KY	N							
19. Louisiana	LA	N							
20. Maine	ME	N							
21. Maryland	MD	N							
22. Massachusetts	MA	N							
23. Michigan	MI	L							
24. Minnesota	MN	L	43,904,016	39,100,820	24,944,413	18,860,810	14,466,080	9,842	
25. Mississippi	MS	N							
26. Missouri	MO	L	182,218	182,218	71,515	39,960	(1,853)		
27. Montana	MT	L	38,833	32,953	55,032	50,099	11,394		
28. Nebraska	NE	L	89,800,807	79,321,756	76,698,220	71,668,616	33,925,922	11,476	
29. Nevada	NV	L	1,234,451	1,017,194	1,065,457	1,400,443	526,825		
30. New Hampshire	NH	N							
31. New Jersey	NJ	N							
32. New Mexico	NM	L	24,453,989	22,483,067	20,922,740	22,164,984	11,114,052	7,036	
33. New York	NY	N							
34. No. Carolina	NC	N							
35. No. Dakota	ND	L	291,952	289,782	282,893	(69,165)	74,800		
36. Ohio	OH	L	3,549,362	2,178,566	1,924,439	549,317	513,264		
37. Oklahoma	OK	L	200,545	239,918	96,360	94,140	(155)		
38. Oregon	OR	N							
39. Pennsylvania	PA	N							
40. Rhode Island	RI	N							
41. So. Carolina	SC	L							
42. So. Dakota	SD	L	22,734,450	20,985,242	7,583,904	8,019,872	6,148,920	3,744	
43. Tennessee	TN	L							
44. Texas	TX	L	220,564	161,862	137,662	196,161	78,175		
45. Utah	UT	L	45,923,963	42,076,373	27,319,261	28,103,778	17,338,163	6,044	
46. Vermont	VT	N							
47. Virginia	VA	L							
48. Washington	WA	N							
49. West Virginia	WV	N							
50. Wisconsin	WI	L	1,100,814	851,250	780,428	861,867	193,502		
51. Wyoming	WY	L	65,245	65,388	7,950	18,547	15,049		
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		566,420,627	521,893,201	381,236,684	336,567,584	186,290,435	87,331	
<b>DETAILS OF WRITE-INS</b>									
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 ..... 27
- 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 ..... 30

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

Gross premiums were allocated to states based on location of risk.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

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

Allocated By States and Territories

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

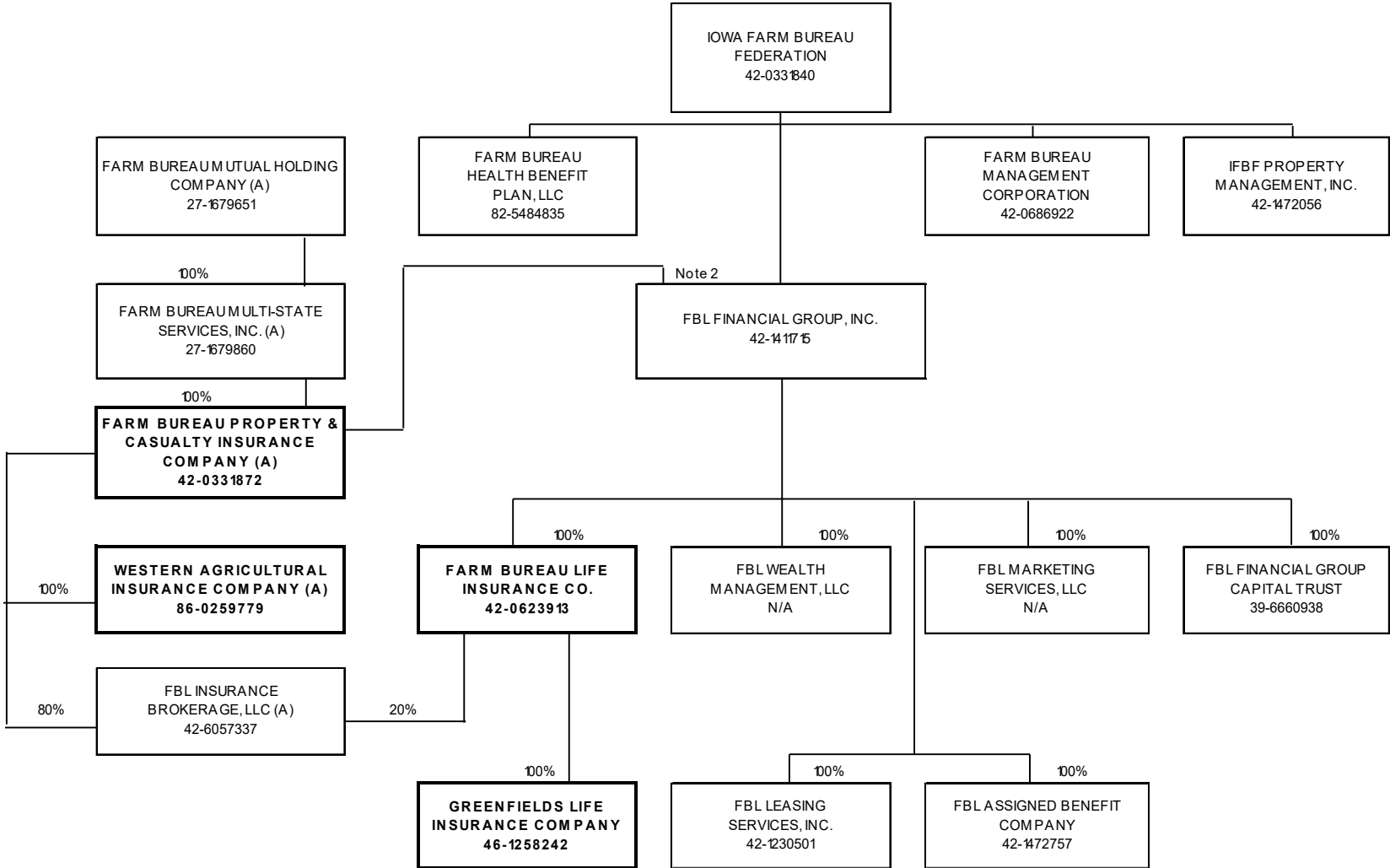
NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

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Notes to Organization Chart dated December 31, 2024

1. NAIC Company codes and state abbreviations for domestic insurers:

Farm Bureau Life Insurance Company	63088	IA
Farm Bureau Property & Casualty Insurance Company	13773	IA
Western Agricultural Insurance Company	27871	IA
Greenfields Life Insurance Company	14908	IA

2. Ownership of FBL Financial Group, Inc., by class of voting stock, is as follows:

	Common Stock	Series B Preferred Stock	Total Voting Interest
Iowa Farm Bureau Federation	60.5%	100.0%	72.0%
Farm Bureau Property & Casualty Insurance Company	39.5%	-	28.0%

Legend

— Ownership

(A) Managed by FBL Financial Group, Inc.



**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	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)	*
00513	IOWA FARM BUREAU GROUP OF IOWA	63088	42-0623913	2506551	0000911209		FARM BUREAU LIFE INSURANCE COMPANY	IA	IA	FBL FINANCIAL GROUP, INC.	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	NO	
00513	IOWA FARM BUREAU GROUP OF IOWA	13773	42-0331872				FARM BUREAU PROPERTY & CASUALTY INSUR CO	IA	UDP	FARM BUREAU MULTI-STATE SERVICES, INC.	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	YES	1
00513	IOWA FARM BUREAU GROUP OF IOWA	27871	86-0259779				WESTERN AGRICULTURAL INSURANCE COMPANY	IA	RE	FARM BUREAU PROPERTY & CASUALTY INSUR CO	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	NO	1
00513	IOWA FARM BUREAU GROUP OF IOWA	14908	46-1258242				GREENFIELDS LIFE INSURANCE COMPANY	IA	IA	FARM BUREAU LIFE INSURANCE COMPANY	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	NO	
			42-1411715	3894291	0001012771		FBL FINANCIAL GROUP, INC.	IA	NIA	IOWA FARM BUREAU FEDERATION	OWNERSHIP	72.0	IOWA FARM BUREAU FEDERATION	NO	
			42-1411715	3894291	0001012771		FBL FINANCIAL GROUP, INC.	IA	NIA	FARM BUREAU PROPERTY & CASUALTY INSUR CO	OWNERSHIP	28.0	IOWA FARM BUREAU FEDERATION	NO	
			42-0331840		0001033753		IOWA FARM BUREAU FEDERATION	IA	NIA	ELECTED BOARD OF DIRECTORS	MANAGEMENT		IOWA FARM BUREAU FEDERATION	NO	
			42-0686922				FARM BUREAU MANAGEMENT CORPORATION	IA	NIA	IOWA FARM BUREAU FEDERATION	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	NO	
			42-1472056				IFBF PROPERTY MANAGEMENT, INC	IA	NIA	IOWA FARM BUREAU FEDERATION	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	NO	
			39-6660938				FBL FINANCIAL GROUP CAPITAL TRUST	DE	NIA	FBL FINANCIAL GROUP, INC.	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	NO	
			42-6057337				FBL INSURANCE BROKERAGE, LLC	IA	NIA	FARM BUREAU PROPERTY & CASUALTY INSUR CO	OWNERSHIP	80.0	IOWA FARM BUREAU FEDERATION	NO	1
			42-6057337				FBL INSURANCE BROKERAGE, LLC	IA	NIA	FARM BUREAU LIFE INSURANCE CO	OWNERSHIP	20.0	IOWA FARM BUREAU FEDERATION	NO	1
							FBL MARKETING SERVICES, LLC	IA	NIA	FBL FINANCIAL GROUP, INC.	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	NO	
			42-1230501				FBL LEASING SERVICES, INC.	IA	NIA	FBL FINANCIAL GROUP, INC.	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	NO	
			42-1472757				FBL ASSIGNED BENEFIT COMPANY	IA	NIA	FBL FINANCIAL GROUP, INC.	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	NO	
			27-1679651				FARM BUREAU MUTUAL HOLDING COMPANY	IA	UIP	FBL FINANCIAL GROUP, INC.	MANAGEMENT		IOWA FARM BUREAU FEDERATION	NO	1
			27-1679860				FARM BUREAU MULTI-STATE SERVICES, INC.	IA	UIP	FARM BUREAU MUTUAL HOLDING COMPANY	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	NO	1
							FBL WEALTH MANAGEMENT, LLC	IA	NIA	FBL FINANCIAL GROUP, INC.	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	NO	
			82-5484835				FARM BUREAU HEALTH BENEFIT PLAN, LLC	IA	NIA	IOWA FARM BUREAU FEDERATION	OWNERSHIP	100.0	IOWA FARM BUREAU FEDERATION	NO	

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Asterisk	Explanation
1	Managed by FBL Financial Group, Inc.

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE Y**

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	42-0331840	Iowa Farm Bureau Federation										
	42-1472056	IFBF Property Management, Inc										
	42-0686922	Farm Bureau Management Corporation										
	42-1411715	FBL Financial Group, Inc	15,979,549								15,979,549	
	39-6660938	FBL Financial Group Capital Trust										
13773	42-0331872	Farm Bureau Property & Casualty Insur Co	11,300,451								11,300,451	(339,840,606)
27871	86-0259779	Western Agricultural Insurance Company										339,840,606
63088	42-0623913	Farm Bureau Life Insurance Company	(25,680,000)								(25,680,000)	
14908	46-1258242	Greenfields Life Insurance Company										
	42-1230500	FBL Financial Services, Inc										
	42-0954363	FBL Investment Management Services										
		FBL Marketing Services, LLC										
	42-1230501	FBL Leasing Services, LLC										
	42-6057337	FBL Insurance Brokerage, LLC	(1,600,000)								(1,600,000)	
	42-1472757	FBL Assigned Benefit Company										
	27-1679651	Farm Bureau Mutual Holding Company										
	27-1679860	Farm Bureau Multi-State Services, Inc										
		FBL Wealth Management, LLC										
	82-5484835	Farm Bureau Health Benefit Plan, LLC										
<b>9999999 Control Totals</b>												
												XXX

The 2024 participation percentage for the reinsurance agreement are: Farm Bureau Property & Casualty 100%, Western Agricultural 0%.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

SCHEDULE Y

PART 3 – ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY’S CONTROL

Table with 8 columns: 1 Insurers in Holding Company, 2 Owners with Greater than 10% Ownership, 3 Ownership Percentage Column 2 of Column 1, 4 Granted Disclaimer of Control/Affiliation of Column 2 Over Column 1 (Yes/No), 5 Ultimate Controlling Party, 6 U.S. Insurance Groups or Entities Controlled by Column 5, 7 Ownership Percentage (Columns 5 of Column 6), 8 Granted Disclaimer of Control/Affiliation of Column 5 Over Column 6 (Yes/No). Rows include entries for FARM BUREAU LIFE INSURANCE COMPANY, FARM BUREAU PROPERTY & CASUALTY INSUR CO, WESTERN AGRICULTURAL INSURANCE COMPANY, GREENFIELDS LIFE INSURANCE COMPANY, and IOWA FARM BUREAU FEDERATION.

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

### REQUIRED FILINGS

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

### RESPONSES

#### MARCH FILING

- |  |                 |
|--|-----------------|
| 1. Will an actuarial opinion be filed by March 1?  | ..... YES ..... |
| 2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?                    | ..... YES ..... |
| 3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?                            | ..... YES ..... |
| 4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1? | ..... YES ..... |

#### APRIL FILING

- |  |                 |
|--|-----------------|
| 5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1? | ..... YES ..... |
| 6. Will Management's Discussion and Analysis be filed by April 1?                                  | ..... YES ..... |
| 7. Will the Supplemental Investment 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?   | ..... NO .....  |
| 15. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?   | ..... NO .....  |
| 16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?   | ..... NO .....  |
| 17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?  | ..... NO .....  |
| 18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?  | ..... NO .....  |
| 19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?   | ..... YES ..... |
| 20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?   | ..... YES ..... |
| 21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?  | ..... NO .....  |
| 22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?   | ..... NO .....  |
| 23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?   | ..... YES ..... |
| 24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? | ..... NO .....  |
| 25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?       | ..... NO .....  |
| 26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?                     | ..... NO .....  |
| 27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?                  | ..... NO .....  |
| 28. Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?  | ..... YES ..... |
| 29. Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?   | ..... YES ..... |

#### APRIL FILING








- |  |                 |
|--|-----------------|
| 30. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?  | ..... NO .....  |
| 31. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?  | ..... NO .....  |
| 32. Will the Accident and Health Policy Experience Exhibit be filed by April 1?  | ..... NO .....  |
| 33. Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?                                       | ..... NO .....  |
| 34. Will the Cybersecurity Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?  | ..... YES ..... |
| 35. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit – Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? | ..... NO .....  |
| 36. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?   | ..... NO .....  |
| 37. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?  | ..... NO .....  |

#### AUGUST FILING

- |  |                 |
|--|-----------------|
| 38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? | ..... YES ..... |
|--|-----------------|

**Explanation:**

**Bar Code:**

- |     |   |
|-----|---|
| 11. |  |
| 12. |  |
| 13. |  |
| 14. |  |
| 15. |  |
| 16. |  |
| 17. |  |

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY  
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

18.   
2 7 8 7 1 2 0 2 4 3 6 5 0 0 0 0 0

21.   
2 7 8 7 1 2 0 2 4 4 0 0 0 0 0 0 0

22.   
2 7 8 7 1 2 0 2 4 5 0 0 0 0 0 0 0

24.   
2 7 8 7 1 2 0 2 4 2 2 4 0 0 0 0 0

25.   
2 7 8 7 1 2 0 2 4 2 2 5 0 0 0 0 0

26.   
2 7 8 7 1 2 0 2 4 2 2 6 0 0 0 0 0

27.   
2 7 8 7 1 2 0 2 4 5 5 5 0 0 0 0 0

30.   
2 7 8 7 1 2 0 2 4 2 3 0 5 9 0 0 0

31.   
2 7 8 7 1 2 0 2 4 3 0 6 0 0 0 0 0

32.   
2 7 8 7 1 2 0 2 4 2 1 0 5 9 0 0 0

33.   
2 7 8 7 1 2 0 2 4 2 1 6 5 9 0 0 0

35.   
2 7 8 7 1 2 0 2 4 2 9 0 5 9 0 0 0

36.   
2 7 8 7 1 2 0 2 4 5 6 0 0 0 0 0 0

37.   
2 7 8 7 1 2 0 2 4 5 6 5 0 0 0 0 0

**SUMMARY INVESTMENT SCHEDULE**

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1 Amount	2 Percentage of Column 1 Line 13	3 Amount	4 Securities Lending Reinvested Collateral Amount	5 Total (Col. 3+4) Amount	6 Percentage of Column 5 Line 13
1. Long-Term Bonds (Schedule D, Part 1):						
1.01 U.S. governments .....	3,009,013	30.912	3,009,013		3,009,013	30.912
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 .....						
1.10 Unaffiliated bank loans .....						
1.11 Unaffiliated certificates of deposit .....						
1.12 Total long-term bonds .....	3,009,013	30.912	3,009,013		3,009,013	30.912
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) .....	3,597,230	36.954	3,597,230		3,597,230	36.954
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 .....	3,597,230	36.954	3,597,230		3,597,230	36.954
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) .....	3,126,376	32.117	3,126,376		3,126,376	32.117
6.02 Cash equivalents (Schedule E, Part 2) .....						
6.03 Short-term investments (Schedule DA) .....						
6.04 Total cash, cash equivalents and short-term investments .....	3,126,376	32.117	3,126,376		3,126,376	32.117
7. Contract loans .....						
8. Derivatives (Schedule DB) .....						
9. Other invested assets (Schedule BA) .....						
10. Receivables for securities .....	1,625	0.017	1,625		1,625	0.017
11. Securities Lending (Schedule DL, Part 1) .....				XXX	XXX	XXX
12. Other invested assets (Page 2, Line 11) .....						
13. Total invested assets	9,734,244	100.000	9,734,244		9,734,244	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.....		6,140,266
2. Cost of bonds and stocks acquired, Part 3, Column 7.....		
3. Accrual of discount.....		95
4. Unrealized valuation increase/(decrease):		
4.1 Part 1, Column 12.....		
4.2 Part 2, Section 1, Column 15.....		
4.3 Part 2, Section 2, Column 13.....	470,426	
4.4 Part 4, Column 11.....		470,426
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.....		4,535
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).....		6,606,252
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....		6,606,252



**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
<b>BONDS</b>					
Governments (including all obligations guaranteed by governments)	1. United States .....	3,009,013	2,858,743	3,022,257	3,000,000
	2. Canada .....				
	3. Other Countries .....				
	4. Totals	3,009,013	2,858,743	3,022,257	3,000,000
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 .....				
	9. Canada .....				
	10. Other Countries .....				
	11. Totals				
Parent, Subsidiaries and Affiliates	12. Totals				
	<b>13. Total Bonds</b>	3,009,013	2,858,743	3,022,257	3,000,000
<b>PREFERRED STOCKS</b>					
Industrial and Miscellaneous (unaffiliated)	14. United States .....				
	15. Canada .....				
	16. Other Countries .....				
	17. Totals				
Parent, Subsidiaries and Affiliates	18. Totals				
	<b>19. Total Preferred Stocks</b>				
<b>COMMON STOCKS</b>					
Industrial and Miscellaneous (unaffiliated), Mutual Funds, Unit Investment Trusts, Closed-End Funds and Exchange Traded Funds	20. United States .....	3,597,230	3,597,230	624,613	
	21. Canada .....				
	22. Other Countries .....				
	23. Totals	3,597,230	3,597,230	624,613	
Parent, Subsidiaries and Affiliates	24. Totals				
	<b>25. Total Common Stocks</b>	3,597,230	3,597,230	624,613	
	<b>26. Total Stocks</b>	3,597,230	3,597,230	624,613	
	<b>27. Total Bonds and Stocks</b>	6,606,243	6,455,973	3,646,870	

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**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)
<b>1. U.S. Governments</b>												
1.1 NAIC 1	499,953	2,509,061				XXX	3,009,014	100.0	3,013,454	100.0	3,009,013	
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	499,953	2,509,061				XXX	3,009,014	100.0	3,013,454	100.0	3,009,013	
<b>2. All Other Governments</b>												
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						
<b>3. U.S. States, Territories and Possessions, etc., Guaranteed</b>												
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						
<b>4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed</b>												
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						
<b>5. U.S. Special Revenue &amp; Special Assessment Obligations, etc., Non-Guaranteed</b>												
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						

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**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**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)
<b>6. Industrial and Miscellaneous (unaffiliated)</b>												
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						
<b>7. Hybrid Securities</b>												
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						
<b>8. Parent, Subsidiaries and Affiliates</b>												
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						
<b>9. SVO Identified Funds</b>												
9.1 NAIC 1	XXX	XXX	XXX	XXX	XXX							
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							
<b>10. Unaffiliated Bank Loans</b>												
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						
<b>11. Unaffiliated Certificates of Deposit</b>												
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						

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**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**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)
<b>12. Total Bonds Current Year</b>												
12.1 NAIC 1	(d) 499,953	2,509,061					3,009,014	100.0	XXX	XXX	3,009,013	
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) XXX		XXX	XXX		
12.7 Totals	499,953	2,509,061					(b) 3,009,014	100.0	XXX	XXX	3,009,013	
12.8 Line 12.7 as a % of Col. 7	16.6	83.4					100.0	XXX	XXX	XXX	100.0	
<b>13. Total Bonds Prior Year</b>												
13.1 NAIC 1		3,013,454					XXX	XXX	3,013,454	100.0	3,013,454	
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	(e)			
13.7 Totals		3,013,454					XXX	XXX	(b) 3,013,454	100.0	3,013,454	
13.8 Line 13.7 as a % of Col. 9		100.0					XXX	XXX	100.0	XXX	100.0	
<b>14. Total Publicly Traded Bonds</b>												
14.1 NAIC 1	499,953	2,509,061					3,009,014	100.0	3,013,454	100.0	3,009,014	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	499,953	2,509,061					3,009,014	100.0	3,013,454	100.0	3,009,014	XXX
14.8 Line 14.7 as a % of Col. 7	16.6	83.4					100.0	XXX	XXX	XXX	100.0	XXX
14.9 Line 14.7 as a % of Line 12.7, Col. 7, Section 12	16.6	83.4					100.0	XXX	XXX	XXX	100.0	XXX
<b>15. Total Privately Placed Bonds</b>												
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 \$ \_\_\_\_\_.

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**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**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 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
1. U.S. Governments												
1.01 Issuer Obligations	499,953	2,509,061				XXX	3,009,014	100.0	3,013,454	100.0	3,009,013	
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	499,953	2,509,061				XXX	3,009,014	100.0	3,013,454	100.0	3,009,013	
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						

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**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**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							
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	499,953	2,509,061				XXX	3,009,014	100.0	XXX	XXX	3,009,013	
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				XXX	XXX		
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	499,953	2,509,061					3,009,014	100.0	XXX	XXX	3,009,013	
12.10 Lines 12.09 as a % Col. 7	16.6	83.4					100.0	XXX	XXX	XXX	100.0	
13. Total Bonds Prior Year												
13.01 Issuer Obligations		3,013,454				XXX	XXX	XXX	3,013,454	100.0	3,013,454	
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		XXX	XXX				
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		3,013,454					XXX	XXX	3,013,454	100.0	3,013,454	
13.10 Line 13.09 as a % of Col. 9		100.0					XXX	XXX	100.0	XXX	100.0	
14. Total Publicly Traded Bonds												
14.01 Issuer Obligations	499,953	2,509,061				XXX	3,009,014	100.0	3,013,454	100.0	3,009,014	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							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	499,953	2,509,061					3,009,014	100.0	3,013,454	100.0	3,009,014	XXX
14.10 Line 14.09 as a % of Col. 7	16.6	83.4					100.0	XXX	XXX	XXX	100.0	XXX
14.11 Line 14.09 as a % of Line 12.09, Col. 7, Section 12	16.6	83.4					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	

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Schedule DA - Verification Between Yrs

**NONE**

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 Yrs

**NONE**

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**



**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE D - PART 1**

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

1	2	Codes			6 NAIC Designation , NAIC Designation Modifier and SVO Administrat- ive Symbol	7 Actual Cost	Fair Value		10 Par Value	11 Book/ Adjusted Carrying Value	Change in Book / Adjusted Carrying Value				Interest					Dates	
		3 Code	4 F o r e i g n	5 Bond CHAR			8 Rate Used to Obtain Fair Value	9 Fair Value			12 Unrealized Valuation Increase/ (Decrease)	13 Current Year's (Amortization)/ Accretion	14 Current Year's Other Than Temporary Impairment Recognized	15 Total Foreign Exchange Change In B./A.C.V.	16 Rate of	17 Effective Rate of	18 When Paid	19 Admitted Amount Due & Accrued	20 Amount Rec. During Year	21 Acquired	22 Stated Contractual Maturity Date
Bonds - U.S. Governments - Issuer Obligations																					
912828-YU-8.	U S TREASURY NOTES 1.625% 11/30/26	SD			1.A	535,828	95,2200	499,905	525,000	529,250		(2,183)		1.625	1.196	MN	750	8,531	12/10/2021	11/30/2026	
912828-YX-2.	U S TREASURY NOTES 1.75% 12/31/26	SD			1.A	154,078	95,2900	142,935	150,000	151,642		(808)		1.750	1.193	JD	7	2,625	12/10/2021	12/31/2026	
912828-Z7-8.	U S TREASURY NOTES 1.5% 1/31/27	SD			1.A	329,773	94,5700	307,353	325,000	326,971		(930)		1.500	1.204	JJ	2,040	4,875	12/10/2021	01/31/2027	
912828-ZW-3.	U S TREASURY NOTES .25% 6/30/25	SD			1.A	499,531	98,0900	490,450	500,000	499,953		.95		0.250	0.269	JD	3	1,250	07/16/2020	06/30/2025	
91282C-DK-4.	U S TREASURY NOTES 1.25% 11/30/26	SD			1.A	1,503,047	94,5400	1,418,100	1,500,000	1,501,197		(615)		1.250	1.208	MN	1,648	18,750	12/10/2021	11/30/2026	
0019999999	- Bonds - U.S. Governments - Issuer Obligations					3,022,257	XXX	2,858,743	3,000,000	3,009,013		(4,441)		XXX	XXX	XXX	4,448	36,031	XXX	XXX	
0109999999	- Bonds - U.S. Governments - Subtotals - U.S. Governments					3,022,257	XXX	2,858,743	3,000,000	3,009,013		(4,441)		XXX	XXX	XXX	4,448	36,031	XXX	XXX	
2419999999	- Bonds - Total Bonds - Subtotals - Issuer Obligations					3,022,257	XXX	2,858,743	3,000,000	3,009,013		(4,441)		XXX	XXX	XXX	4,448	36,031	XXX	XXX	
<b>2509999999 Total Bonds</b>						<b>3,022,257</b>	<b>XXX</b>	<b>2,858,743</b>	<b>3,000,000</b>	<b>3,009,013</b>		<b>(4,441)</b>		<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>4,448</b>	<b>36,031</b>	<b>XXX</b>	<b>XXX</b>	

E10

1.  
Line  
Number/Book/Adjusted Carrying Value by NAIC Designation Category Footnote:  
 1A 1A \$ 3,009,013 ..... 1B \$ ..... 1C \$ ..... 1D \$ ..... 1E \$ ..... 1F \$ ..... 1G \$ .....  
 1B 2A \$ ..... 2B \$ ..... 2C \$ .....  
 1C 3A \$ ..... 3B \$ ..... 3C \$ .....  
 1D 4A \$ ..... 4B \$ ..... 4C \$ .....  
 1E 5A \$ ..... 5B \$ ..... 5C \$ .....  
 1F 6 \$ .....

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE D - PART 2 - SECTION 1**

Showing All **PREFERRED STOCKS** Owned December 31 of Current Year

1 CUSIP Identification	2 Description	Codes		5 Number Of Shares	6 Par Value Per Share	7 Rate Per Share	8 Book/ Adjusted Carrying Value	Fair Value		11 Actual Cost	Dividends			Change in Book/Adjusted Carrying Value					20 NAIC Designation, NAIC Designation Modifier and SVO Admin- istrative Symbol	21 Date Acquired	
		3 Code	4 Foreign					9 Rate Per Share Used to Obtain Fair Value	10 Fair Value		12 Declared but Unpaid	13 Amount Received During Year	14 Nonadmitted Declared But Unpaid	15 Unrealized Valuation Increase/ (Decrease)	16 Current Year's (Amortization)/ Accretion	17 Current Year's Other-Than- Temporary Impairment Recognized	18 Total Change In B./A.C.V. (15+16-17)	19 Total Foreign Exchange Change In B./A.C.V.			
<b>NONE</b>																					
450999999 Total Preferred Stocks								XXX												XXX	XXX

E11

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

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE D - PART 2 - SECTION 2**

Showing all **COMMON STOCKS** Owned December 31 of Current Year

1 CUSIP Identification	2 Description	3 Codes		5 Number of Shares	6 Book / Adjusted Carrying Value	7 Fair Value		9 Actual Cost	10 Dividends			13 Change in Book/Adjusted Carrying Value				17 Date Acquired	18 NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
		3 Code	4 Foreign			7 Rate per Share Used To Obtain Fair Value	8 Fair Value		10 Declared but Unpaid	11 Amount Received During Year	12 Nonadmitted Declared But Unpaid	13 Unrealized Valuation Increase/ (Decrease)	14 Current Year's Other-Than- Temporary Impairment Recognized	15 Total Change in B./A.C.V. (13-14)	16 Total Foreign Exchange Change in B./A.C.V.		
023731-24-8	Industrial and Miscellaneous (Unaffiliated) - Other AMERICAN AGRICULTURAL INS CO CLASS A			1,363,000	3,597,230	2,639,200	3,597,230	624,613				470,426		470,426	09/23/2005	XXX	
5029999999	- Industrial and Miscellaneous (Unaffiliated) - Other				3,597,230	XXX	3,597,230	624,613				470,426		470,426	XXX	XXX	
5109999999	- Subtotals - Industrial and Miscellaneous (Unaffiliated)				3,597,230	XXX	3,597,230	624,613				470,426		470,426	XXX	XXX	
5989999999	Total Common Stocks				3,597,230	XXX	3,597,230	624,613				470,426		470,426	XXX	XXX	
5999999999	Total Preferred and Common Stocks				3,597,230	XXX	3,597,230	624,613				470,426		470,426	XXX	XXX	

E12

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

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**





**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WESTERN AGRICULTURAL INSURANCE COMPANY**

**SCHEDULE E - PART 3 - SPECIAL DEPOSITS**

States, etc.	1 Type of Deposits	2 Purpose of Deposits	Deposits For the Benefit of All Policyholders		All Other Special 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	.B. RSD by Ins Code 23-63-206 (a) (2) (i)			151,643	142,935
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	.B. Protection of all policyholder	2,030,447	1,918,005		
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	.B. RSD by Ins Code 59A-5-19			426,961	405,443
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	.B. RSD by Ins Code 38-2-1045			249,976	245,225
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	2,030,447	1,918,005	828,580	793,603
<b>DETAILS OF WRITE-INS</b>						
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				