



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2016
OF THE CONDITION AND AFFAIRS OF THE

Ohio Mutual Insurance Company

NAIC Group Code	0963 (Current)	0963 (Prior)	NAIC Company Code	10202	Employer's ID Number	34-4320350
Organized under the Laws of Country of Domicile	OHIO			State of Domicile or Port of Entry United States of America		OH
Incorporated/Organized	03/05/1901			Commenced Business	03/05/1901	
Statutory Home Office	1725 Hopley Avenue (Street and Number)			Bucyrus , OH, US 44820-0111 (City or Town, State, Country and Zip Code)		
Main Administrative Office	1725 Hopley Avenue (Street and Number)			Bucyrus , OH, US 44820-0111 (City or Town, State, Country and Zip Code)		
				419-562-3011 (Area Code) (Telephone Number)		
Mail Address	1725 Hopley Avenue (Street and Number or P.O. Box)			Bucyrus , OH, US 44820-0111 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	1725 Hopley Avenue (Street and Number)			Bucyrus , OH, US 44820-0111 (City or Town, State, Country and Zip Code)		
				419-562-3011 (Area Code) (Telephone Number)		
Internet Website Address	www.omig.com					
Statutory Statement Contact	Charles Elmer Easum Mr. (Name)			419-563-0810 (Area Code) (Telephone Number)		
	ceasum@omig.com (E-mail Address)			877-753-0580 (FAX Number)		

OFFICERS

President Mark Clarence Russell, Mr. Secretary Albert Michael Heister, Mr.
Treasurer David Gary Hendrix, Mr.

OTHER

Todd Emery Albert, Mr., Vice President Information Systems	Howard Lowell Barber, Mr. #, Vice President Sales	Michael Alexander Brogan, Mr., Vice President Claims
Chad Philip Combs, Mr. #, Vice President Personal Lines Underwriting	David Alan Grove, Mr., Vice President Product Management	Gary Thomas Johnson, Mr. #, Vice President Commercial Lines Underwriting
Susan Elizabeth Kent, Mrs. #, Vice President Business Analytics	Marcella Sloane Smith, Mrs. #, Vice President Human Resources	

DIRECTORS OR TRUSTEES

Robert Bruce Albro, Mr.	Albert Michael Heister, Mr.	Susan Porter, Mrs.
John Redon Purse, Mr.	Mark Clarence Russell, Mr.	David Anthony Siebenburgen, Mr.
Randy Lee Walker, Mr.	Thomas Eugene Woolley, Mr.	

State of Ohio SS: _____
County of Crawford _____

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.

Mark Clarence Russell
President and CEO

David Gary Hendrix
Treasurer and CFO

Michael Alexander Brogan
Assistant Secretary

Subscribed and sworn to before me this
____ day of _____

a. Is this an original filing?

b. If no,

1. State the amendment number.....
2. Date filed
3. Name of previous filer.....

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	63,541,120		63,541,120	61,352,251
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks	185,838,030	26,051	185,811,979	169,760,480
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)	4,106,514		4,106,514	4,303,560
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$ 4,025,529 , Schedule E - Part 1), cash equivalents (\$ 999,694 , Schedule E - Part 2) and short-term investments (\$ 1,476,227 , Schedule DA)	6,501,450		6,501,450	5,822,360
6. Contract loans (including \$ premium notes)				
7. Derivatives (Schedule DB)				
8. Other invested assets (Schedule BA)				
9. Receivable 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)	259,987,114	26,051	259,961,063	241,238,651
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	512,675		512,675	499,641
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	618,486	73,139	545,347	621,052
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	13,087,349		13,087,349	11,792,408
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	1,064		1,064	259
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	2,120,265		2,120,265	2,153,779
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software	1,648,169	1,648,169		
21. Furniture and equipment, including health care delivery assets (\$)	30,712	30,712		
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	416,704		416,704	520,880
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	278,422,538	1,778,071	276,644,467	256,826,670
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	278,422,538	1,778,071	276,644,467	256,826,670
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)				
2501. Goodwill	416,704		416,704	520,880
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	416,704		416,704	520,880

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	22,644,404	21,098,651
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	5,394,899	5,083,463
4. Commissions payable, contingent commissions and other similar charges	1,834,977	2,122,018
5. Other expenses (excluding taxes, licenses and fees)	90,423	45,784
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	39,352	35,459
7.1 Current federal and foreign income taxes (including \$ 50,248 on realized capital gains (losses))	1,200,354	1,415,554
7.2 Net deferred tax liability		
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 71,123,359 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)	26,235,477	24,622,261
10. Advance premium	393,091	535,831
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	44,172	(286,624)
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)	131,583	112,946
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated	215	516
16. Provision for reinsurance (including \$ certified) (Schedule F, Part 8)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates	1,009,524	700,139
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		
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	59,018,471	55,485,998
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	59,018,471	55,485,998
29. Aggregate write-ins for special surplus funds		
30. Common capital stock		
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus		
35. Unassigned funds (surplus)	217,625,996	201,340,672
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)	217,625,996	201,340,672
38. TOTALS (Page 2, Line 28, Col. 3)	276,644,467	256,826,670
DETAILS OF WRITE-INS		
2501.		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)		
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 thru 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 thru 3203 plus 3298)(Line 32 above)		

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....	54,788,275	52,705,843
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7).....	28,849,360	27,749,135
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....	4,961,609	4,711,285
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2).....	18,842,473	18,474,440
5. Aggregate write-ins for underwriting deductions.....		
6. Total underwriting deductions (Lines 2 through 5).....	52,653,442	50,934,860
7. Net income of protected cells.....		
8. Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7).....	2,134,833	1,770,983
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	1,388,537	1,327,204
10. Net realized capital gains or (losses) less capital gains tax of \$ 50,248 (Exhibit of Capital Gains (Losses)).....	100,088	181,800
11. Net investment gain (loss) (Lines 9 + 10).....	1,488,625	1,509,004
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ 48,531 amount charged off \$ 306,274).....	(257,743)	(247,833)
13. Finance and service charges not included in premiums.....	807,495	826,031
14. Aggregate write-ins for miscellaneous income.....	326,045	306,525
15. Total other income (Lines 12 through 14).....	875,797	884,723
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	4,499,255	4,164,710
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).....	4,499,255	4,164,710
19. Federal and foreign income taxes incurred.....	1,150,678	1,283,332
20. Net income (Line 18 minus Line 19)(to Line 22).....	3,348,577	2,881,378
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	201,340,672	187,504,522
22. Net income (from Line 20).....	3,348,577	2,881,378
23. Net transfers (to) from Protected Cell accounts.....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ 320,622.....	13,769,702	10,922,019
25. Change in net unrealized foreign exchange capital gain (loss).....		
26. Change in net deferred income tax.....	287,108	243,706
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3).....	(1,120,063)	(210,953)
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....		
29. Change in surplus notes.....		
30. Surplus (contributed to) withdrawn from protected cells.....		
31. Cumulative effect of changes in accounting principles.....		
32. Capital changes:		
32.1 Paid in.....		
32.2 Transferred from surplus (Stock Dividend).....		
32.3 Transferred to surplus.....		
33. Surplus adjustments:		
33.1 Paid in.....		
33.2 Transferred to capital (Stock Dividend).....		
33.3 Transferred from capital.....		
34. Net remittances from or (to) Home Office.....		
35. Dividends to stockholders.....		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....		
37. Aggregate write-ins for gains and losses in surplus.....		
38. Change in surplus as regards policyholders for the year (Lines 22 through 37).....	16,285,324	13,836,150
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	217,625,996	201,340,672
DETAILS OF WRITE-INS		
0501.....		
0502.....		
0503.....		
0598. Summary of remaining write-ins for Line 5 from overflow page.....		
0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above).....		
1401. Rental and Related Services.....	326,083	326,083
1402. Other Expense.....	(38)	(19,558)
1403.....		
1498. Summary of remaining write-ins for Line 14 from overflow page.....		
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above).....	326,045	306,525
3701.....		
3702.....		
3703.....		
3798. Summary of remaining write-ins for Line 37 from overflow page.....		
3799. Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above).....		

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	55,426,580	53,074,599
2. Net investment income	2,183,498	2,066,326
3. Miscellaneous income	875,797	884,723
4. Total (Lines 1 through 3)	58,485,875	56,025,648
5. Benefit and loss related payments	27,304,412	25,225,654
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	24,912,499	22,696,598
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$	50,248	tax on capital gains (losses)
	1,416,126	1,201,548
10. Total (Lines 5 through 9)	53,633,037	49,123,800
11. Net cash from operations (Line 4 minus Line 10)	4,852,838	6,901,848
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	12,930,554	10,825,914
12.2 Stocks	1,125,205	1,178,950
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	(1)	(1)
12.7 Miscellaneous proceeds		
12.8 Total investment proceeds (Lines 12.1 to 12.7)	14,055,758	12,004,863
13. Cost of investments acquired (long-term only):		
13.1 Bonds	15,654,466	16,458,725
13.2 Stocks	2,963,906	2,134,184
13.3 Mortgage loans		
13.4 Real estate	43,029	45,842
13.5 Other invested assets		
13.6 Miscellaneous applications		16,902
13.7 Total investments acquired (Lines 13.1 to 13.6)	18,661,401	18,655,653
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)	(4,605,643)	(6,650,790)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		
16.6 Other cash provided (applied)	431,895	(30,306)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	431,895	(30,306)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	679,090	220,752
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	5,822,360	5,601,608
19.2 End of period (Line 18 plus Line 19.1)	6,501,450	5,822,360

Note: Supplemental disclosures of cash flow information for non-cash transactions:

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ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Fire	4,837,522	2,644,121	2,650,449	4,831,194
2. Allied lines	37,544	17,530	19,416	35,658
3. Farmowners multiple peril	5,253,343	2,670,881	2,638,687	5,285,537
4. Homeowners multiple peril	9,401,160	5,016,557	5,182,668	9,235,049
5. Commercial multiple peril	6,540,553	3,107,967	3,227,784	6,420,736
6. Mortgage guaranty				
8. Ocean marine				
9. Inland marine	225,078	116,387	118,160	223,305
10. Financial guaranty				
11.1 Medical professional liability - occurrence				
11.2 Medical professional liability - claims-made				
12. Earthquake				
13. Group accident and health				
14. Credit accident and health (group and individual)				
15. Other accident and health	857	547	472	932
16. Workers' compensation				
17.1 Other liability - occurrence	759,400	583,092	394,881	947,611
17.2 Other liability - claims-made				
17.3 Excess workers' compensation				
18.1 Products liability - occurrence	49,044	26,306	23,158	52,192
18.2 Products liability - claims-made				
19.1, 19.2 Private passenger auto liability	13,142,848	4,173,274	5,033,597	12,282,525
19.3, 19.4 Commercial auto liability	4,374,144	2,018,314	2,100,028	4,292,430
21. Auto physical damage	11,586,387	4,085,014	4,731,646	10,939,755
22. Aircraft (all perils)				
23. Fidelity				
24. Surety				
26. Burglary and theft	193,611	162,271	114,531	241,351
27. Boiler and machinery				
28. Credit				
29. International				
30. Warranty				
31. Reinsurance - nonproportional assumed property				
32. Reinsurance - nonproportional assumed liability				
33. Reinsurance - nonproportional assumed financial lines				
34. Aggregate write-ins for other lines of business				
35. TOTALS	56,401,491	24,622,261	26,235,477	54,788,275
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page				
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)				

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned But Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1. Fire	2,650,449				2,650,449
2. Allied lines	19,416				19,416
3. Farmowners multiple peril	2,638,687				2,638,687
4. Homeowners multiple peril	5,182,668				5,182,668
5. Commercial multiple peril	3,227,784				3,227,784
6. Mortgage guaranty					
8. Ocean marine					
9. Inland marine	118,160				118,160
10. Financial guaranty					
11.1 Medical professional liability - occurrence					
11.2 Medical professional liability - claims-made					
12. Earthquake					
13. Group accident and health					
14. Credit accident and health (group and individual)					
15. Other accident and health	472				472
16. Workers' compensation					
17.1 Other liability - occurrence	394,881				394,881
17.2 Other liability - claims-made					
17.3 Excess workers' compensation					
18.1 Products liability - occurrence	23,158				23,158
18.2 Products liability - claims-made					
19.1, 19.2 Private passenger auto liability	5,033,597				5,033,597
19.3, 19.4 Commercial auto liability	2,100,028				2,100,028
21. Auto physical damage	4,731,646				4,731,646
22. Aircraft (all perils)					
23. Fidelity					
24. Surety					
26. Burglary and theft	114,531				114,531
27. Boiler and machinery					
28. Credit					
29. International					
30. Warranty					
31. Reinsurance - nonproportional assumed property					
32. Reinsurance - nonproportional assumed liability					
33. Reinsurance - nonproportional assumed financial lines					
34. Aggregate write-ins for other lines of business					
35. TOTALS	26,235,477				26,235,477
36. Accrued retrospective premiums based on experience					
37. Earned but unbilled premiums					
38. Balance (Sum of Line 35 through 37)					26,235,477
DETAILS OF WRITE-INS					
3401.					
3402.					
3403.					
3498. Summary of remaining write-ins for Line 34 from overflow page					
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)					

(a) State here basis of computation used in each case

Property premiums are determined by location covered. Casualty premiums are determined by insured address.

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3+4-5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire	2,898,359	15,208,495	5,092	13,079,230	195,194	4,837,522
2. Allied lines		139,053		101,509		37,544
3. Farmowners multiple peril	1,964,679	17,704,579	2,724	14,203,485	215,154	5,253,343
4. Homeowners multiple peril	13,187,346	22,371,954	17,936	25,417,948	758,128	9,401,160
5. Commercial multiple peril		24,224,270		17,683,717		6,540,553
6. Mortgage guaranty						
8. Ocean marine						
9. Inland marine	16,801	817,787	30	608,545	995	225,078
10. Financial guaranty						
11.1 Medical professional liability - occurrence						
11.2 Medical professional liability - claims-made						
12. Earthquake						
13. Group accident and health						
14. Credit accident and health (group and individual)						
15. Other accident and health		3,173		2,316		857
16. Workers' compensation						
17.1 Other liability - occurrence	262,681	2,550,975		2,053,192	1,064	.759,400
17.2 Other liability - claims-made						
17.3 Excess workers' compensation						
18.1 Products liability - occurrence		181,645		132,601		49,044
18.2 Products liability - claims-made						
19.1, 19.2 Private passenger auto liability	21,868,240	26,933,871		35,534,368	124,895	13,142,848
19.3, 19.4 Commercial auto liability		16,200,533		11,826,389		4,374,144
21. Auto physical damage	19,137,502	24,212,265	13,263	31,326,156	450,487	11,586,387
22. Aircraft (all perils)						
23. Fidelity						
24. Surety						
26. Burglary and theft	94,188	622,890		523,467		193,611
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	59,429,796	151,171,490	39,045	152,492,923	1,745,917	56,401,491
DETAILS OF WRITE-INS						
3401.						
3402.						
3403.						
3498. Summary of remaining write-ins for Line 34 from overflow page						
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)						

(a) 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 reported on an annualized basis \$

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	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	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire	524,385	5,124,030	4,123,344	1,525,071	404,021	401,831	1,527,261	31.6
2. Allied lines		39,357	28,730	10,627	1,479	1,005	11,101	31.1
3. Farmowners multiple peril	429,084	7,552,227	5,826,697	2,154,614	860,732	1,021,900	1,993,446	37.7
4. Homeowners multiple peril	4,174,299	9,784,491	10,193,704	3,765,086	1,267,639	1,217,792	3,814,933	41.3
5. Commercial multiple peril		10,272,068	7,498,610	2,773,458	3,142,670	3,027,476	2,888,652	45.0
6. Mortgage guaranty								
8. Ocean marine								
9. Inland marine		449,393	328,057	121,336	3,991	102,816	22,511	10.1
10. Financial guaranty								
11.1 Medical professional liability - occurrence								
11.2 Medical professional liability - claims-made								
12. Earthquake								
13. Group accident and health								
14. Credit accident and health (group and individual)								
15. Other accident and health		635	464	171	270	1,041	(600)	(64.4)
16. Workers' compensation								
17.1 Other liability - occurrence	63,865	619,995	499,218	184,642	1,186,450	1,055,753	315,339	33.3
17.2 Other liability - claims-made								
17.3 Excess workers' compensation								
18.1 Products liability - occurrence		1,553	1,134	419	1,548	974	993	1.9
18.2 Products liability - claims-made								
19.1, 19.2 Private passenger auto liability	11,229,073	17,092,224	20,674,547	7,646,750	10,138,465	9,354,162	8,431,053	68.6
19.3, 19.4 Commercial auto liability		7,706,477	5,625,728	2,080,749	4,779,185	4,059,401	2,800,533	65.2
21. Auto physical damage	10,453,549	15,428,354	18,893,792	6,988,111	840,521	835,709	6,992,923	63.9
22. Aircraft (all perils)								
23. Fidelity								
24. Surety								
26. Burglary and theft	34,192	160,522	142,141	52,573	17,433	18,791	51,215	21.2
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	26,908,447	74,231,326	73,836,166	27,303,607	22,644,404	21,098,651	28,849,360	52.7
DETAILS OF WRITE-INS								
3401.								
3402.								
3403.								
3498. Summary of remaining write-ins for Line 34 from overflow page								
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)								

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8	9
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire	67,892	1,040,183	808,895	.299,180	21,982	366,317	.283,458	.404,021	.50,995
2. Allied lines .....						.5,477	.3,998	.1,479	169
3. Farmowners multiple peril	93,385	1,013,400	807,953	.298,832	59,743	2,021,367	.1,519,210	.860,732	.141,723
4. Homeowners multiple peril	1,131,330	2,366,941	.2,555,088	.943,183	649,605	.552,083	.877,232	.1,267,639	.169,145
5. Commercial multiple peril		7,616,991	5,560,403	2,056,588		4,022,527	.2,936,445	.3,142,670	.1,721,696
6. Mortgage guaranty									
7. Ocean marine									
8. Inland marine .....		.600	.438	.162		14,181	.10,352	.3,991	.741
9. Financial guaranty									
10. Medical professional liability - occurrence									
11.1 Medical professional liability - claims-made									
12. Earthquake									
13. Group accident and health								(a)	
14. Credit accident and health (group and individual) .....			.1,000	.730	.270			(a)	.270
15. Other accident and health .....									.15
16. Workers' compensation									
17.1 Other liability - occurrence	55,500	2,120,627	1,588,573	.587,554	82,056	2,136,077	.1,619,237	.1,186,450	.422,787
17.2 Other liability - claims-made									
17.3 Excess workers' compensation									
18.1 Products liability - occurrence .....		.4,000	2,921	.1,079		.1,737	.1,268	.1,548	.476
18.2 Products liability - claims-made									
19.1, 19.2 Private passenger auto liability	11,950,688	14,544,093	19,342,894	.7,151,887	4,443,354	.6,618,046	.8,074,822	.10,138,465	.1,775,813
19.3, 19.4 Commercial auto liability		11,446,368	.8,355,848	3,090,520		.6,254,316	.4,565,651	.4,779,185	.1,015,149
21. Auto physical damage	662,972	1,020,268	1,228,775	.454,465	.478,150	.951,691	.1,043,785	.840,521	.94,718
22. Aircraft (all perils)									
23. Fidelity									
24. Surety									
26. Burglary and theft .....		.43,000	.31,390	.11,610	.5,752	.15,815	.15,744	.17,433	.1,472
27. Boiler and machinery									
28. Credit									
29. International									
30. Warranty									
31. Reinsurance - nonproportional assumed property	XXX				XXX				
32. Reinsurance - nonproportional assumed liability	XXX				XXX				
33. Reinsurance - nonproportional assumed financial lines	XXX				XXX				
34. Aggregate write-ins for other lines of business									
35. TOTALS	13,961,767	41,217,471	40,283,908	14,895,330	5,740,642	22,959,634	20,951,202	22,644,404	5,394,899
DETAILS OF WRITE-INS									
3401.									
3402.									
3403.									
3498. Summary of remaining write-ins for Line 34 from overflow page									
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)									

(a) Including \$ for present value of life indemnity claims.

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
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	1,998,651			1,998,651
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	25,930			25,930
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)	1,972,721			1,972,721
2. Commission and brokerage:				
2.1 Direct excluding contingent		8,954,936		8,954,936
2.2 Reinsurance assumed, excluding contingent		4,716		4,716
2.3 Reinsurance ceded, excluding contingent		480,989		480,989
2.4 Contingent - direct		1,159,605		1,159,605
2.5 Contingent - reinsurance assumed				
2.6 Contingent - reinsurance ceded		31,530		31,530
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)		9,606,738		9,606,738
3. Allowances to managers and agents				
4. Advertising	61,996	185,986		247,982
5. Boards, bureaus and associations	125,361	284,188		409,549
6. Surveys and underwriting reports	151,084	453,253		604,337
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries	1,321,954	4,041,949		5,363,903
8.2 Payroll taxes	76,921	308,879		385,800
9. Employee relations and welfare	370,164	1,048,863		1,419,027
10. Insurance	26,610	79,831		106,441
11. Directors' fees	5,744	157,770		163,514
12. Travel and travel items	51,659	143,642		195,301
13. Rent and rent items	45,670	137,010		182,680
14. Equipment	193,874	581,623		775,497
15. Cost or depreciation of EDP equipment and software	31,148	93,443		124,591
16. Printing and stationery	4,347	73,756		78,103
17. Postage, telephone and telegraph, exchange and express	94,915	283,773		378,688
18. Legal and auditing	139,782	498,791	316,820	955,393
19. Totals (Lines 3 to 18)	2,701,229	8,372,757	316,820	11,390,806
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$	255,231	765,694		1,020,925
20.2 Insurance department licenses and fees	26,303	78,910		105,213
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)	281,534	844,604		1,126,138
21. Real estate expenses				
22. Real estate taxes .....	.6,125	18,374		24,499
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses				
25. Total expenses incurred	4,961,609	18,842,473	316,820	(a) 24,120,902
26. Less unpaid expenses - current year	5,394,899	1,913,953	50,799	7,359,651
27. Add unpaid expenses - prior year	5,083,463	2,157,477	45,784	7,286,723
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)	4,650,173	19,085,997	311,805	24,047,974
DETAILS OF WRITE-INS				
2401.				
2402.				
2403.				
2498. Summary of remaining write-ins for Line 24 from overflow page				
2499. Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above)				

(a) Includes management fees of \$ to affiliates and \$ to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) 42,216	40,879
1.1 Bonds exempt from U.S. tax	(a) 779,530	826,252
1.2 Other bonds (unaffiliated)	(a) 743,005	712,759
1.3 Bonds of affiliates	(a) .....	.....
2.1 Preferred stocks (unaffiliated)	(b) .....	.....
2.11 Preferred stocks of affiliates	(b) .....	.....
2.2 Common stocks (unaffiliated)	347,605	345,416
2.21 Common stocks of affiliates .....	.....	.....
3. Mortgage loans	(c) .....	.....
4. Real estate	(d) 16,600	16,600
5. Contract loans .....	.....	.....
6. Cash, cash equivalents and short-term investments	(e) 3,444	3,526
7. Derivative instruments	(f) .....	.....
8. Other invested assets .....	.....	.....
9. Aggregate write-ins for investment income .....	.....	.....
10. Total gross investment income	1,932,400	1,945,432
11. Investment expenses	(g)	316,820
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)	240,075
15. Aggregate write-ins for deductions from investment income .....	.....	.....
16. Total deductions (Lines 11 through 15) .....	.....	556,895
17. Net investment income (Line 10 minus Line 16) .....	.....	1,388,537
DETAILS OF WRITE-INS		
0901. .....	.....	.....
0902. .....	.....	.....
0903. .....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page .....	.....	.....
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	.....	.....
1501. .....	.....	.....
1502. .....	.....	.....
1503. .....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page .....	.....	.....
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above) .....	.....	.....

(a) Includes \$ 15,993 accrual of discount less \$ 578,896 amortization of premium and less \$ 12,834 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 \$.91 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	14,178	.....	14,178	.....	.....
1.2 Other bonds (unaffiliated)	16,411	.....	16,411	(2,731)	.....
1.3 Bonds of affiliates .....	.....	.....	.....	.....	.....
2.1 Preferred stocks (unaffiliated) .....	.....	.....	.....	.....	.....
2.11 Preferred stocks of affiliates .....	.....	.....	.....	.....	.....
2.2 Common stocks (unaffiliated)	119,748	.....	119,748	.945,739	.....
2.21 Common stocks of affiliates .....	.....	.....	.....	13,147,318	.....
3. Mortgage loans .....	.....	.....	.....	.....	.....
4. Real estate .....	.....	.....	.....	.....	.....
5. Contract loans .....	.....	.....	.....	.....	.....
6. Cash, cash equivalents and short-term investments	(1)	.....	(1)	.....	.....
7. Derivative instruments .....	.....	.....	.....	.....	.....
8. Other invested assets .....	.....	.....	.....	.....	.....
9. Aggregate write-ins for capital gains (losses) .....	.....	.....	.....	.....	.....
10. Total capital gains (losses)	150,336	.....	150,336	14,090,326	.....
DETAILS OF WRITE-INS			.....	.....	.....
0901. .....	.....	.....	.....	.....	.....
0902. .....	.....	.....	.....	.....	.....
0903. .....	.....	.....	.....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page .....	.....	.....	.....	.....	.....
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	.....	.....	.....	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
EXHIBIT OF NON-ADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 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	26,051	26,048	(3)
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)	26,051	26,048	(3)
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	73,139	129,408	56,269
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	1,648,169	484,767	(1,163,402)
21. Furniture and equipment, including health care delivery assets	30,712	17,785	(12,927)
22. Net adjustment in assets and liabilities due to foreign exchange rates			
23. Receivables from parent, subsidiaries and affiliates			
24. Health care and other amounts receivable			
25. Aggregate write-ins for other than invested assets			
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	1,778,071	658,008	(1,120,063)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28. Total (Lines 26 and 27)	1,778,071	658,008	(1,120,063)
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)			
2501.			
2502.			
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)			

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of Ohio Mutual Insurance Company are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance (ODI).

The ODI recognizes only statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company. The National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* has been adopted as a component of prescribed or permitted accounting practices by the State of Ohio.

A reconciliation of the Company's net income and capital surplus between NAIC Statutory Accounting Practices and practices prescribed and permitted by the State of Ohio is shown below:

	F/S SSAP #	F/S Page	F/S Line #	2016	2015
<u>NET INCOME</u>					
(1) Ohio Mutual Insurance Company state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 3,348,578	\$ 2,881,378
(2) State Prescribed Practices that increase/(decrease) NAIC SAP:	_____	_____	_____	_____	_____
(3) State Permitted Practices that increase/(decrease) NAIC SAP:	_____	_____	_____	_____	_____
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 3,348,578	\$ 2,881,378
<u>SURPLUS</u>					
(5) Ohio Mutual Insurance Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 217,625,996	\$ 201,340,672
(6) State Prescribed Practices that increase/(decrease) NAIC SAP:	_____	_____	_____	_____	_____
(7) State Permitted Practices that increase/(decrease) NAIC SAP:	_____	_____	_____	_____	_____
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 217,625,996	\$ 201,340,672

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

The preparation of financial statements in conformity with the Annual Statement Instructions and the *Accounting Practices and Procedures Manual* requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business.

Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the Company uses the following accounting policies:

- (1) All short-term investments are stated at amortized cost.
- (2) Bonds not backed by other loans are stated at either amortized cost, using the scientific interest method or the lower of amortized cost or fair market value.
- (3) Unaffiliated common stocks are stated at fair market value. Common stocks of uncombined subsidiaries and affiliates in which the company has an interest of 20% or more are carried on the equity basis.
- (4) The Company had no preferred stock at December 31, 2016 or 2015.
- (5) The Company has no mortgage loans on real estate.
- (6) Loan-backed securities are stated at either amortized cost, using the interest method or the lower of amortized cost or fair market value. The retrospective adjustment method is used to value all securities except for interest only securities, EITF 99-20 eligible securities or securities where the yield has become negative are valued using the prospective method.
- (7) The Company's non-insurance subsidiaries are Centurion Financial, Inc., Ohio United Agency, Inc. and United Premium Budget Service Inc. They are carried at equity value.
- (8) The Company has no ownership interest in any significant joint ventures.
- (9) The Company owns 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) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.

NOTES TO FINANCIAL STATEMENTS

(12) The Company has not modified its capitalization policy from the prior period.

2. Accounting Changes and Corrections of Errors

There were no significant accounting changes or corrections of errors during 2016 or 2015.

3. Business Combinations and Goodwill

The Company has Goodwill recorded in the amount of \$416,704 and \$520,880 in 2016 and 2015 respectively. Amortization equaled \$104,176 each year for both 2016 and 2015.

4. Discontinued Operations

The Company has no discontinued operations to report.

5. Investments

- A. The Company has no mortgage loans.
- B. The Company has no debt restructuring.
- C. The Company has no reverse mortgages.
- D. Loan-Backed Securities

(1) Prepayment assumptions for Mortgage-backed securities, Collateralized Mortgage Obligations and Other Structured Securities were generated using a purchased prepayment model. The prepayment model uses a number of factors to estimate prepayment activity including the time of year (seasonality), current levels of interest rates (refinancing incentive), economic activity (including housing turnover) and term and age of the underlying collateral (burnout, seasoning). On an ongoing basis, we monitor the rate of prepayment and calibrate the model to reflect actual experience, market factors, and viewpoint.

(2)

- a. The Company had no securities it intended to sell for which it recognized other-than-temporary impairment losses.
- b. The Company had no securities for which it lacked the ability or intent to retain an investment in for a period of time sufficient to recover the amortized cost basis.

(3) The Company had no other-than-temporary impairments for the year ended December 31, 2016.

(4) All temporarily impaired securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss in 2016 are as follows:

a.	The aggregate amount of unrealized losses:	
	1. Less than 12 Months	\$ (152,438)
	2. 12 Months or Longer	\$ -
b.	The aggregate related fair value of securities with unrealized losses:	
	1. Less than 12 Months	\$ 7,451,136
	2. 12 Months or Longer	\$ -

(5) Management regularly reviews the value of the Company's investments. If the value of any investment falls below its cost basis, the decline is analyzed to determine whether it is an other-than-temporary decline in value. To make this determination for each security, the following is considered:

- The length of time and the extent to which the fair value has been below cost;
- The financial condition and near-term prospects of the issuer of the security, including any specific events that may affect its operations or earnings potential;
- Management's intent and ability to hold the security long enough for it to recover its value;

Management concluded that the remaining investments held with unrealized losses were not other-than-temporarily impaired on the basis that the Company had the ability and intent to hold the investments for a period of time sufficient for a forecasted market price recovery up to or beyond the cost of the investment. Also, in management's opinion, evidence indicating the cost of the investment was recoverable within a reasonable period of time outweighed evidence to the contrary in considering the severity and duration of the impairment in relation to the forecasted market price recovery.

E. The Company has no repurchase agreements or securities lending transactions.

F. Real Estate

- (1) The Company has no impaired real estate.
- (2) The Company has not sold or classified real estate investments as held for sale.
- (3) The Company has no planned sales of real estate investments.
- (4) The Company does not engage in retail land sales operations.
- (5) The Company holds no real estate investments with participating mortgage loan features.

G. The Company has no real estate investments that qualify for low-income housing tax credits (LIHTC).

NOTES TO FINANCIAL STATEMENTS

H. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted							Current Year			
	Current Year					6	7	8	9	Percentage	
	1	2	3	4	5					10	11
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Nonadmitted Restricted	Total Admitted Restricted (5 minus 6)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.00%	0.00%
b. Collateral held under security lending agreements	-	-	-	-	-	-	-	-	-	0.00%	0.00%
c. Subject to repurchase agreements	-	-	-	-	-	-	-	-	-	0.00%	0.00%
d. Subject to reverse repurchase agreements	-	-	-	-	-	-	-	-	-	0.00%	0.00%
e. Subject to dollar repurchase agreements	-	-	-	-	-	-	-	-	-	0.00%	0.00%
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-	-	-	-	0.00%	0.00%
g. Placed under option contracts	-	-	-	-	-	-	-	-	-	0.00%	0.00%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	-	-	-	-	-	-	-	-	-	0.00%	0.00%
i. FHLB capital stock	-	-	-	-	-	-	-	-	-	0.00%	0.00%
j. On deposit with states	1,994,579	-	-	-	1,994,579	2,002,459	(7,880)	-	1,994,579	0.72%	0.72%
k. On deposit with other regulatory bodies	-	-	-	-	-	-	-	-	-	0.00%	0.00%
l. Pledged as collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-	-	-	-	0.00%	0.00%
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-	-	-	-	0.00%	0.00%
n. Other restricted assets	-	-	-	-	-	-	-	-	-	0.00%	0.00%
o. Total Restricted Assets	\$ 1,994,579	\$ -	\$ -	\$ -	\$ 1,994,579	\$ 2,002,459	\$ (7,880)	\$ -	\$ 1,994,579	0.72%	0.72%

(a) Subset of column 1

(b) Subset of column 3

(2) The Company has no Assets Pledged as Collateral Not Captured in Other Categories.

(3) The Company has no Other Restricted Assets or Contracts that Share Similar Characteristics, such as Reinsurance and Derivatives.

(4) The Company has no Collateral Received and Reflected as Assets in the Financial Statements.

I. The Company has no Working Capital Finance Investments.

J. The Company has no Offsetting and Netting of Assets and Liabilities.

K. Structured Notes

CUSIP Identification	Actual Cost	Fair Value	Book/Adjusted Carrying Value	Mortgage Referenced Security (YES/NO)
362848PV9	\$ 250,000	\$ 250,000	\$ 250,000	NO
57563CAA0	250,000	250,000	250,000	NO
631060AQ3	200,000	200,000	200,000	NO
631663KF7	250,000	250,000	250,000	NO
64972FK62	250,000	250,000	250,000	NO
702333Z65	250,000	250,000	250,000	NO
767121DL7	245,988	238,623	250,000	NO
79642BE66	250,000	250,070	250,000	NO
914455MA5	150,000	150,000	150,000	NO
Total	\$ 2,095,988	\$ 2,088,693	\$ 2,100,000	XXX

L. The Company has no 5* Securities.

6. Joint Ventures, Partnerships and Limited Liability Companies.

The Company has no investments in Joint Ventures, Partnerships and Limited Liability Companies.

7. Investment Income

The Company has no due and accrued income excluded from surplus.

NOTES TO FINANCIAL STATEMENTS

8. Derivative Instruments

The Company owns no derivative instruments.

9. Income Taxes

A. The components of the Net Deferred Tax Asset/(Liability) at December 31 are as follows:

	12/31/2016			12/31/2015			Change		
	(1) Ordinary	(2) Capital	(3) (Col 1+2) Total	(4) Ordinary	(5) Capital	(6) (Col 4+5) Total	(7) (Col 1-4) Ordinary	(8) (Col 2-5) Capital	(9) (Col 7+8) Total
(a) Gross Deferred Tax Assets	3,139,287	5,634	3,144,921	2,847,577	7,966	2,855,543	291,710	(2,332)	289,378
(b) Statutory Valuation Allowance Adjustments	-	-	-	-	-	-	-	-	-
(c) Adjusted Gross Deferred Tax Assets (1a-1b)	3,139,287	5,634	3,144,921	2,847,577	7,966	2,855,543	291,710	(2,332)	289,378
(d) Deferred Tax Assets Nonadmitted	-	-	-	-	-	-	-	-	-
(e) Subtotal Net Admitted Deferred Tax Asset (1c-1d)	3,139,287	5,634	3,144,921	2,847,577	7,966	2,855,543	291,710	(2,332)	289,378
(f) Deferred Tax Liabilities	11,955	1,012,701	1,024,656	9,685	692,079	701,764	2,270	320,622	322,892
(g) Net Admitted Deferred Tax Asset/ (Net Deferred Tax Liability) (1e-1f)	3,127,332	(1,007,067)	2,120,265	2,837,892	(684,113)	2,153,779	289,440	(322,954)	(33,514)

2.	12/31/2016			12/31/2015			Change		
	(1) Ordinary	(2) Capital	(3) (Col 1+2) Total	(4) Ordinary	(5) Capital	(6) (Col 4+5) Total	(7) (Col 1-4) Ordinary	(8) (Col 2-5) Capital	(9) (Col 7+8) Total

Admission Calculation Components SSAP No.101

(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	2,418,927	-	2,418,927	2,288,820	-	2,288,820	130,107	-	130,107
(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)	513,436	-	513,436	332,420	-	332,420	181,016	-	181,016
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following The Balance Sheet Date	513,436	-	513,436	332,420	-	332,420	181,016	-	181,016
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	32,263,354	XXX	XXX	29,799,902	XXX	XXX	2,463,452
(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	206,924	5,634	212,558	226,337	7,966	234,303	(19,413)	(2,332)	(21,745)
(d) Deferred Tax Assets Admitted As The Result Of Application of SSAP No. 101 Total (2(a)+2(b)+2(c))	3,139,287	5,634	3,144,921	2,847,577	7,966	2,855,543	291,710	(2,332)	289,378

3.	2016		2015	
	(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			215,505,731	199,186,893

4.	12/31/2016		12/31/2015		Change	
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) (Col 1-3) Ordinary	(6) (Col 2-4) Capital

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)	3,139,287	5,634	2,847,577	7,966	291,710	(2,332)
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)	3,139,287	5,634	2,847,577	7,966	291,710	(2,332)
4. Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies						

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

Yes _____

No X

NOTES TO FINANCIAL STATEMENTS

B. Unrecognized Deferred Tax Liabilities

There are no deferred tax liabilities that have not been recognized in the current period.

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

	(1) 12/31/2016	(2) 12/31/2015	(3) (Col 1-2) Change
1. Current Income Tax			
(a) Federal	1,150,106	1,323,693	(173,587)
(b) Foreign	-	677	(677)
(c) Subtotal	1,150,106	1,324,370	(174,264)
(d) Federal income tax on net capital gains	50,248	91,860	(41,612)
(e) Utilization of capital loss carry-forwards	-	-	-
(f) Other	572	(41,038)	41,610
(g) Federal and foreign income taxes incurred	<u>1,200,926</u>	<u>1,375,192</u>	<u>(174,266)</u>
2. Deferred Tax Assets:			
(a) Ordinary			
(1) Discounting of unpaid losses	324,701	326,313	(1,612)
(2) Unearned premium reserve	1,810,743	1,710,750	99,993
(3) Policyholder reserves	-	-	-
(4) Investments	-	-	-
(5) Deferred acquisition costs	-	-	-
(6) Policyholder dividends accrual	-	-	-
(7) Fixed assets	352,255	175,988	176,267
(8) Compensation and benefits accrual	442,456	397,654	44,802
(9) Pension accrual	-	-	-
(10) Salvage and subrogation	167,429	173,071	(5,642)
(11) Net operating loss carry-forward	16,835	19,802	(2,967)
(12) Tax credit carry-forward	-	-	-
(13) Other (including items <5% of total ordinary tax assets)	24,868	43,999	(19,131)
(99) Subtotal	<u>3,139,287</u>	<u>2,847,577</u>	<u>291,710</u>
(b) Statutory valuation allowance adjustment	-	-	-
(c) Nonadmitted	-	-	-
(d) Admitted ordinary deferred tax assets (2a99-2b-2c)	<u>3,139,287</u>	<u>2,847,577</u>	<u>291,710</u>
(e) Capital			
(1) Investments	5,634	7,966	(2,332)
(2) Net capital loss carry-forward	-	-	-
(3) Real estate	-	-	-
(4) Other (including items <5% of total capital tax assets)	-	-	-
(99) Subtotal	<u>5,634</u>	<u>7,966</u>	<u>(2,332)</u>
(f) Statutory valuation allowance adjustment	-	-	-
(g) Nonadmitted	-	-	-
(h) Admitted capital deferred tax assets (2e99-2f-2g)	<u>5,634</u>	<u>7,966</u>	<u>(2,332)</u>
(i) Admitted deferred tax assets (2d+2h)	<u>3,144,921</u>	<u>2,855,543</u>	<u>289,378</u>
3. Deferred Tax Liabilities			
(a) Ordinary			
(1) Investments	11,955	9,685	2,270
(2) Fixed assets	-	-	-
(3) Deferred and uncollected premium	-	-	-
(4) Policyholder reserves	-	-	-
(5) Other (including items <5% of total ordinary tax liabilities)	-	-	-
(99) Subtotal	<u>11,955</u>	<u>9,685</u>	<u>2,270</u>
(b) Capital			
(1) Investments	1,012,701	692,079	320,622
(2) Real estate	-	-	-
(3) Other (including items <5% of total capital tax liabilities)	-	-	-
(99) Subtotal	<u>1,012,701</u>	<u>692,079</u>	<u>320,622</u>
(c) Deferred tax liabilities (3a99+3b99)	<u>1,024,656</u>	<u>701,764</u>	<u>322,892</u>
4. Net deferred tax assets/liabilities (2i - 3c)	<u>2,120,265</u>	<u>2,153,779</u>	<u>(33,514)</u>

NOTES TO FINANCIAL STATEMENTS

The change in net deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):

	12/31/2016	12/31/2015	Change
Total deferred tax assets	3,144,921	2,855,543	289,378
Total deferred tax liabilities	1,024,656	701,764	322,892
Net deferred tax asset	2,120,265	2,153,779	(33,514)
Tax effect of unrealized gains (losses)			320,622
Change in net deferred income tax			<u>287,108</u>

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

The provision for federal income taxes incurred 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:

Description	Amount	Tax Effect at 34%	Effective Tax Rate
Income before Federal income tax	4,549,503	1,546,831	34.00%
Tax exempt investment income	(826,252)	(280,926)	-6.17%
Dividends received deduction	(243,323)	(82,730)	-1.82%
Proration of tax exempt investment income	160,436	54,548	1.20%
Goodwill amortization	104,176	35,420	0.78%
Lobbying	8,094	2,752	0.06%
Disallowable meals and entertainment	44,356	15,081	0.33%
Penalties	8,775	2,983	0.07%
Change in non admitted assets	(1,120,060)	(380,820)	-8.37%
Other	1,997	679	0.01%
Total	2,687,702	913,818	20.09%
 Federal and foreign ordinary income taxes incurred		1,150,678	25.29%
Capital gains tax incurred		50,248	1.10%
Change in net deferred income tax		<u>(287,108)</u>	-6.30%
Total statutory income taxes		913,818	20.09%

E. Operating Loss and Tax Credit Carryforwards

1. Carryforwards, recoverable taxes, and IRC 6603 deposits

	12/31/2016	12/31/2015
The Company had net operating losses of:	49,516	58,242
The Company had capital loss carryforwards of:	-	-
The Company had AMT credit carryforwards of:	-	-
Total	49,516	58,242

The AMT credit carryforwards do not expire.

2. The following is income tax expense for 2015, 2014, and 2013 that is available for recoupment in the event of future net losses:

Year	Ordinary	Capital	Total
2014	-	64,853	64,853
2015	1,324,266	91,860	1,416,126
2016	1,150,106	50,248	1,200,354
	2,474,372	206,961	2,681,333

3. Deposits admitted under IRC § 6603

None

F. Consolidated Federal Income Tax Return

A. The Company's federal income tax return is consolidated with the following entities:

United Ohio Insurance Company
Casco Indemnity Company
Ohio United Agency, Inc.
United Premium Budget Services, Inc.
Centurion Financial, Inc.

NOTES TO FINANCIAL STATEMENTS

B. 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 for net losses. Intercompany balances are settled annually in the final quarter.

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

A. The Company is the parent company within the Ohio Mutual Insurance Group. The Company is the sole shareholder and owner of United Ohio Insurance Company (United Ohio), Casco Indemnity Company (Casco), United Premium Budget Service Inc., Centurion Financial Inc., and Ohio United Agency Inc.

B. The Company, United Ohio and Casco have entered into a reinsurance pooling agreement through which underwriting activities and operating expenses are proportionately allocated. See footnote #26 for additional information on the pooling agreement.

C. In 2016 the Company reimbursed its subsidiaries, United Ohio and Casco, \$13,125,683 and \$57,795, respectively, under the terms of the Reinsurance Pooling Agreement between the entities.

D. As of December 31, 2016, the Company owes its subsidiary, United Ohio, \$1,777,366 and its subsidiary, Casco, owes the Company \$196,735 under the terms of the Reinsurance Pooling Agreement. As of December 31, 2016, the Company's subsidiary, United Ohio, owes the Company \$571,107 under the terms of the Cost Sharing Agreement.

E. The Company has no guarantees or undertakings at December 31, 2016.

F. The Company and its subsidiaries, United Ohio and Casco, entered into a Cost Sharing Agreement effective, January 1, 2011, through which certain common costs are shared proportionally between the entities.

G. All outstanding shares of its subsidiaries, United Ohio, Casco, United Premium Budget Services Inc., Ohio United Agency Inc. and Centurion Financial Inc. are owned by the Parent Company, Ohio Mutual Insurance Company, an insurance company domiciled in the State of Ohio.

H. None of the Company's capital stock is owned by downstream subsidiaries.

I. The Company owns a 100% interest in United Ohio whose carrying value is equal to or exceeds 10% of the admitted assets of the Company. The Company carries United Ohio at its statutory statement value of \$160,287,202.

Based on the Company's ownership percentage of United Ohio, the statutory statement value of United Ohio assets and liabilities as of December 31, 2016 were \$321,827,092 and \$161,539,890, respectively.

J. The Company did not recognize any impairment write down for its investments in Subsidiary, Controlled or Affiliated Companies during the statement period.

K. Not Applicable

L. Not Applicable

M. All SCA investments

(1) Balance Sheet Value (Admitted and Nonadmitted) All SCAs (Except 8bi Entities)

SCA Entity	Percentage of SCA Ownership	Gross Amount	Admitted Amount	Nonadmitted Amount
a. SSAP No. 97 8a Entities				
NONE	N/A	-	-	-
Total SSAP No. 97 8a Entities	XXX	-	-	-
b. SSAP No. 97 8b(ii) Entities				
Centurion Financial Inc.	100.0	-	-	-
Ohio United Agency Inc.	100.0	25,049	-	25,049
United Premium Budget Service Inc.	100.0	1,002	-	1,002
Total SSAP No. 97 8b(ii) Entities	XXX	26,051	-	26,051
c. SSAP No. 97 8b(iii) Entities				
NONE	N/A	-	-	-
Total SSAP No. 97 8b(iii) Entities	XXX	-	-	-
d. SSAP No. 97 8b(iv) Entities				
NONE	N/A	-	-	-
Total SSAP No. 97 8b(iv) Entities	XXX	-	-	-
e. Total SSAP No. 97 8b Entities (except 8bi entities) (b+c+d)	XXX	26,051	-	26,051
f. Aggregate Total (a+e)	XXX	26,051	-	26,051

(2) NAIC Filing Response Information

The Company did not have any NAIC filings for their 8b(ii) entities.

NOTES TO FINANCIAL STATEMENTS

N. The Company has no investments in Insurance SCAs for which the audited statutory equity reflects a departure from the NAIC statutory accounting practices and policies.

11. Debt

The Company had no outstanding debt obligations at December 31, 2016.

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

The Company has no retirement plans, deferred compensation, postemployment benefits or compensated absences or other postretirement benefit plans. All such plans are included in the Company's wholly owned subsidiary, United Ohio.

13. Capital and Surplus, Dividend Restrictions and Quasi-reorganizations.

- (1) The Company has no shares of capital stock outstanding.
- (2) The Company has no shares of preferred stock outstanding.
- (3) Unless prior approval is received by the ODI, Ohio law limits the amount of dividends that can be paid by an insurance company to the greater of: (a) 10 percent of statutory surplus as of December 31 of the year preceding the dividend payment or (b) 100 percent of statutory net income for the year ended December 31 preceding the dividend payment.
- (4) There were no ordinary or extraordinary dividends paid in either 2016 or 2015.
- (5) The portion of the Company's 2016 and 2015 surplus that may be paid as ordinary dividends in the subsequent year are \$21,762,600 and \$20,134,067 respectively.
- (6) There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.
- (7) The total amount of advances to surplus not repaid is \$0.
- (8) There is no stock held by the Company, including stock of affiliated companies, for special purposes.
- (9) The Company has not experienced any changes in balances of special surplus funds.
- (10) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$145,848,042.
- (11) The Company has no surplus debentures or similar obligations.
- (12) The Company has no restatement due to quasi-reorganizations.
- (13) There are no quasi-reorganizations to report.

14. Liabilities, Contingencies and Assessments

- A. The Company has no commitment or contingent commitment to any other entity, joint venture, partnership, or limited liability company.
- B. The Company has received notification of the insolvency of several companies. It is expected that the insolvency will result in a guaranty fund assessment against the Company at some future date. At this time the Company is unable to estimate the possible amounts, if any, of such assessments. Accordingly, the Company is unable to determine the impact, if any, such assessments may have on the Company's financial position or results of operations.
- C. The Company has no commitment or gain contingencies to any other entity, joint venture, partnership, or limited liability company.
- D. The Company paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits.

Claims related ECO and bad faith losses paid during the reporting period	<u>Direct</u> \$0
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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) <u>0-25 Claims</u> X	(b) <u>26-50 Claims</u>	(c) <u>51-100 Claims</u>	(d) <u>101-500 Claims</u>	(e) <u>More than 500 Claims</u>
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Indicate whether claim count information is disclosed per claim or per claimant.

(f) Per Claim []	(g) Per Claimant [x]
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- E. The Company has no liability for product warranties.
- F. The Company has no joint and several liabilities.
- G. The Company has no other contingencies not already stated above.

15. Leases

A. Leasing Arrangements

- (1) The Company leases computer related equipment under various operating lease arrangements that expire through December 2021. Additionally, the Company leases automobiles under various operating leases with no commitments exceeding December 31, 2016. The rental expenses for these leases for 2016 and 2015 were approximately \$219,859 and \$208,873, respectively.

NOTES TO FINANCIAL STATEMENTS

(2) At January 1, 2016, the minimum aggregate rental commitments are as follows:

	<u>Year Ending</u> <u>December 31</u>	<u>Operating Leases</u>
1.	2017	\$939,511
2.	2018	621,495
3.	2019	269,622
4.	2020	190,801
5.	2021	47,670
6.	Total	<\$2,069,099

(3) The Company is not involved in sales - leaseback transactions.

B. 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 risks.

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

The Company has no sale, transfer and servicing of financial assets or extinguishments of liabilities.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

The Company has no gain or loss to report from Uninsured Plans or the Uninsured Portion of Partially Insured Plans.

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

The Company has no direct written premium produced by managing general agents or third party administrators.

20. Fair Value Measurements

A. Fixed maturity securities that are carried at amortized cost are not included in the table below:

(1) Fair Value Measurements at Reporting Date

Description	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at fair value				
Bonds				
Industrial and Misc	\$ -	\$ 247,228	\$ -	\$ 247,228
Total Bonds	<u>\$ -</u>	<u>\$ 247,228</u>	<u>\$ -</u>	<u>\$ 247,228</u>
Common Stock				
Industrial and Misc	\$ 10,331,508	\$ -	\$ 338,878	\$ 10,670,386
Mutual Funds	1,418,436	-	-	1,418,436
Total Common Stocks	<u>\$ 11,749,944</u>	<u>\$ -</u>	<u>\$ 338,878</u>	<u>\$ 12,088,822</u>

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

Description	Beginning Balance at 01/01/2016	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 12/31/2016
a. Assets:										
Common Stock - Industrial & Misc.	\$ 339,980			\$ (1,102)						\$ 338,878

(3) Transfers between levels are recognized on the actual date of the event or change in circumstances that caused the transfer.

(4) As of December 31, 2016, the reporting entity's investments in Level 3, NAIC rated A, represents one security that is not traded in a public market and was valued based on a valuation provided by the NAIC Securities Valuation Office.

(5) The Company has no Derivative Assets or Liabilities

B. Fair Value Measurements are used for financial instruments unless specifically required by another method.

NOTES TO FINANCIAL STATEMENTS

C. The Aggregate Fair Value for all Financial Instruments and the Level within the Fair Value Hierarchy are illustrated as follows:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Bonds	\$ 247,228	\$ 248,228	\$ -	\$ 247,228	\$ -	\$ -
Common Stocks	12,088,822	12,088,822	11,749,944	-	338,878	-
Total Financial Instru	<u>\$ 12,336,050</u>	<u>\$ 12,337,050</u>	<u>\$ 11,749,944</u>	<u>\$ 247,228</u>	<u>\$ 338,878</u>	<u>\$ -</u>

D. Not Practicable to Estimate Fair Value

The Company's Financial Instruments are valued at Fair Value unless otherwise specified.

21. Other Items

- A. The Company has no Extraordinary Items.
- B. The Company has no Troubled Debt Restructuring Debtors.
- C. The Company has no other items that are not previously disclosed.
- D. The Company has no Business Interruption Insurance Recoveries.
- E. The Company has no State Transferrable Tax Credits
- F. Subprime Mortgage Related Risk Exposure

(1) The Company does not engage in direct subprime residential lending. The Company's exposure to subprime is limited to investments within the fixed income investment portfolio which contains securities collateralized by mortgages that have characteristics of subprime lending. Such characteristics include an interest rate above prime to borrowers who do not qualify for prime rate loans, borrowers with low credit ratings (FICO scores), unconventionally high initial loan-to-value ratios and borrowers with less than conventional documentation of their income and/or net assets.

The Company minimizes risk exposure by holding securities that carry higher credit ratings and by monitoring the underlying collateral performance on an ongoing basis.

(2) The Company does not engage in direct subprime residential lending.

(3) Direct exposure through other investments

The chart below summarizes the Actual Cost, Book Adjusted Carrying Value, Fair Value, and the Other than Temporary Impairment Losses Recognized of subprime mortgage related risk exposure by investment category:

	Actual Cost	Book/Adjusted Carrying Value (excluding interest)	Fair Value	Other than Temporary Impairment Losses
				Recognized
a. Residential mortgage-backed securities	\$ 12,186	\$ -	\$ 1,225	\$ -
b. Commercial mortgage-backed securities	-	-	-	-
c. Collateralized debt obligations	-	-	-	-
d. Structured securities	-	-	-	-
e. Equity investment in SCAs	-	-	-	-
f. Other assets	-	-	-	-
g. Total	<u>\$ 12,186</u>	<u>\$ -</u>	<u>\$ 1,225</u>	<u>\$ -</u>

The Company recorded no impairments in 2016 or 2015 and no realized gains on sales and pay downs of investments with subprime exposure for either year.

(4) The Company has no subprime mortgage risk exposure through Mortgage Guaranty or Financial Guaranty Insurance coverage.

G. The Company has no Insurance-Linked Securities (ILS) Contracts.

NOTES TO FINANCIAL STATEMENTS

22. Events Subsequent

Type II – Nonrecognized Subsequent Events:

	Current Year	Prior Year
A. Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the federal Affordable Care Act	NO	NO
B. ACA fee assessment payable for the upcoming year	-	-
C. ACA fee assessment paid	-	-
D. Premium written subject to ACA 9010 assessment	-	-
E. Total Adjusted Capital before surplus adjustment	-	-
F. Total Adjusted Capital after surplus adjustment	-	-
G. Authorized Control Level	-	-
H. Would reporting the ACA assessment as of Dec. 31, 2016 have triggered an RBC action level (YES/NO)?	NO	NO

There are no other subsequent events to report.

23. Reinsurance

A. Unsecured Reinsurance Recoverables

The Company does not have any unsecured aggregate recoverable for losses, paid and unpaid including IBNR, loss adjustment expenses and unearned premium with any individual reinsurers, authorized or unauthorized.

B. Reinsurance Recoverable in Dispute

The Company has no reinsurance recoverable in dispute.

C. Reinsurance Assumed and Ceded

(1) The following table summarizes assumed and ceded unearned premiums and the related commission equity at December 31, 2016:

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates	\$ 71,147,404	\$ 12,127,720	\$ 70,932,957	\$ 12,091,165	\$ 214,447	\$ 36,555
b. All Other	-	-	190,402	217,610	(190,402)	(217,610)
c. TOTAL	<u>\$ 71,147,404</u>	<u>\$ 12,127,720</u>	<u>\$ 71,123,359</u>	<u>\$ 12,308,775</u>	<u>\$ 24,045</u>	<u>\$ (181,055)</u>
d. Direct Unearned Premium Reserve:						<u>\$ 26,211,432</u>

(2) The additional or return commission, predicated on loss experience or on any other form of profit sharing arrangements in this annual statement as a result of existing contractual arrangements is accrued as follows:

	Direct	Assumed	Ceded	Net
a. Contingent Commission	\$ -	\$ -	\$ -	\$ -
b. Sliding Scale Adjustments	-	-	-	-
c. Other Profit Commission Arrangements	18,845	-	-	18,845
d. TOTAL	<u>\$ 18,845</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 18,845</u>

(3) Not Applicable

D. Uncollectible Reinsurance

The Company has no uncollectible reinsurance.

E. Commutation of Ceded Reinsurance

The Company has not entered into an agreement to commute any reinsurance treaties.

F. Retroactive Reinsurance

The Company has no retroactive reinsurance.

G. Reinsurance Accounted for as a Deposit

The Company has no reinsurance that should be accounted for as a deposit.

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

The Company has no disclosures for the Transfers of Property and Casualty Run-off Agreements.

NOTES TO FINANCIAL STATEMENTS

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

The Company had no certified reinsurer's rating downgraded or status subject to revocation.

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

The Company had no reinsurance agreements qualifying for reinsurer aggregation.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

The Company has no retrospectively rated contracts.

25. Change in Incurred Losses and Loss Adjustment Expenses

The following table provides a reconciliation of the beginning and ending reserve balances for losses and loss adjustment expenses, net of reinsurance recoverables, for 2016 and 2015:

	<u>2016</u>	<u>2015</u>
	<i>(In Thousands)</i>	
Balance at January 1, net of reinsurance	\$ 26,182	\$ 23,791
Incurred related to:		
Current year	35,774	34,709
Prior years	<u>(1,963)</u>	<u>(2,249)</u>
Total incurred	<u>\$ 33,811</u>	<u>\$ 32,460</u>
Paid related to:		
Current year	\$ 21,807	\$ 20,864
Prior years	<u>10,147</u>	<u>9,205</u>
Total paid	<u>\$ 31,954</u>	<u>\$ 30,069</u>
Balance as of December 31, net of reinsurance	<u><u>\$ 28,039</u></u>	<u><u>\$ 26,182</u></u>

The Company's liabilities for unpaid losses and loss adjustment expenses, net of related reinsurance recoverables, at December 31, 2015 and 2014, were decreased in the subsequent year by \$1,963,000 and \$2,249,000, respectively. The favorable development experienced in 2016 for accident years 2015 and prior is due to favorable development within the Group's private passenger auto liability, auto physical damage and homeowners lines of business and was primarily within the accident year of 2015. Offsetting the favorable development during 2016 was unfavorable development within the commercial auto liability and commercial multi-peril lines of business related to accident years ranging from 2010 to 2013. The favorable development experienced in 2015 for years 2014 and prior is due to favorable development within the Group's auto liability, auto physical damage and homeowners lines of business and was primarily within the accident years of 2013 and 2014. Initial loss estimates for these years developed better than expected for these lines of business. Reserves previously established for these lines and years were reduced in the current year.

Because of the nature of the business written over the years, management believes that the Group has limited exposure to environmental claim liabilities.

26. Intercompany Pooling Arrangements

Effective January 1, 2011, the Company requested and received permission from the ODI to pool the underwriting results of the Company with those of its wholly owned subsidiaries, United Ohio and Casco. Through the Pooling Agreement, the Company, NAIC #10202, retains 27% of the group's pooled underwriting results and cedes 65% to United Ohio, NAIC #13072 and 8% to Casco, NAIC #25950. The following underwriting results were assumed/ceded between the Companies in 2016 and 2015:

	<u>2016</u>	<u>2015</u>
Premium earned assumed by Ohio Mutual from United Ohio and Casco Indemnity	\$ 148,940,274	\$ 144,158,649
Premium earned ceded back to United Ohio and Casco Indemnity	<u>(148,131,263)</u>	<u>(142,500,982)</u>
Change in premium earned due to pooling	<u>\$ 809,011</u>	<u>\$ 1,657,667</u>
Losses incurred assumed by Ohio Mutual from United Ohio and Casco Indemnity	\$ 76,562,167	\$ 74,582,206
Losses incurred ceded back to United Ohio and Casco Indemnity	<u>(78,000,122)</u>	<u>(75,025,438)</u>
Change in losses incurred due to pooling	<u>\$ (1,437,955)</u>	<u>\$ (443,232)</u>
Net loss adjustment expenses assumed by Ohio Mutual	\$ 3,914,792	\$ 2,565,220
Net other underwriting expenses assumed by Ohio Mutual	<u>9,164,515</u>	<u>9,286,078</u>
Change in expenses incurred due to pooling	<u>\$ 13,079,307</u>	<u>\$ 11,851,298</u>
Change in income before taxes due to pooling	<u>\$ (10,832,341)</u>	<u>\$ (9,750,399)</u>

27. Structured Settlements

The Company has some structured settlements and they are assigned.

28. Health Care Receivables

The Company has no health care receivables.

29. Participating Policies

The Company does not issue participating policies.

NOTES TO FINANCIAL STATEMENTS

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves	\$ <u>0</u>
2. Date of most recent evaluation of this liability	<u>1/20/2017</u>
3. Was anticipated investment income utilized in the calculations?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

31. High Deductibles

The Company has not recorded any high deductibles.

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

The Company does not discount loss or loss adjustment expense reserves.

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 () No (X)

The Company estimates the full impact of asbestos exposures by establishing full case bases reserves on all known losses.

The Company held no asbestos related reserves for each of the last five most recent year ends. There have been no losses or LAE paid related to asbestos risks during the last five years.

B. There are no ending reserves for Bulk + IBNR included in A (Loss and LAE)

C. There are no ending reserves for loss adjustment expenses included in A (Case, Bulk + IBNR)

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 () No (X)

The Company held no environmental related reserves for each of the last five most recent year ends. There have been no losses or LAE paid related to environmental risks during the last five years.

E. There are no ending reserves for Bulk + IBNR included in D (Loss & LAE)

F. There are no ending reserves for loss adjustment expenses included in D (Case, Bulk + IBNR)

34. Subscriber Savings Accounts

The Company is not a reciprocal insurer.

35. Multiple Peril Crop Insurance

The Company does not offer multiple peril crop insurance.

36. Financial Guaranty Insurance

The Company does not offer Financial Guaranty Insurance.

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual 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 [X] No []
 If yes, complete Schedule Y, Parts 1, 1A and 2

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 [X] No [] N/A []

1.3 State Regulating? Ohio

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 [X]

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. 12/31/2015

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. 12/31/2010

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). 07/26/2011

3.4 By what department or departments?
 Ohio Department of Insurance

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 [X]

3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] 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 [X]
 4.12 renewals? Yes [] No [X]

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 [X]
 4.22 renewals? Yes [] No [X]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]

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 [X]

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 [X]

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 or government, manager or attorney in fact).

1 Nationality	2 Type of Entity
------------------	---------------------

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal 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

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
 Ernst & Young, LLP
 800 Yard Street
 Suite 200
 Grandview Heights, OH 43212

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 [X]
 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 allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
 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 [X] 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?
 Thomas P. Conway
 Ernst & Young, LLP
 Willis Tower
 233 South Wacker Drive
 Chicago, IL 60606-6301

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
 12.11 Name of real estate holding company
 12.12 Number of parcels involved
 12.13 Total book/adjusted carrying value \$

12.2 If, yes provide explanation:

13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**
 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []
 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []
 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []
 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
 (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 [X]
 14.21 If the response to 14.2 is yes, provide information related to amendment(s).

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 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 [X] No []

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11	To directors or other officers.....	\$
20.12	To stockholders not officers.....	\$
20.13	Trustees, supreme or grand (Fraternal Only)	\$

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21	To directors or other officers.....	\$
20.22	To stockholders not officers.....	\$
20.23	Trustees, supreme or grand (Fraternal Only)	\$

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]

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

21.21	Rented from others.....	\$
21.22	Borrowed from others.....	\$
21.23	Leased from others	\$
21.24	Other	\$

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]

22.2 If answer is yes:

22.21	Amount paid as losses or risk adjustment \$	
22.22	Amount paid as expenses	\$
22.23	Other amounts paid	\$

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]

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

INVESTMENT

24.01 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 24.03) Yes [X] No []

24.02 If no, give full and complete information relating thereto

24.03 For security 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)

24.04 Does the Company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? Yes [] No [] N/A [X]

24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. \$

24.06 If answer to 24.04 is no, report amount of collateral for other programs. \$

24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]

24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]

24.09 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 [] N/A [X]

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

24.10 For the reporting entity's security lending program state the amount of the following as December 31 of the current year:

24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$
24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$
24.103 Total payable for securities lending reported on the liability page.	\$

25.1 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 21.1 and 24.03). Yes [X] No []

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

25.21 Subject to repurchase agreements	\$
25.22 Subject to reverse repurchase agreements	\$
25.23 Subject to dollar repurchase agreements	\$
25.24 Subject to reverse dollar repurchase agreements	\$
25.25 Placed under option agreements	\$
25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock	\$
25.27 FHLB Capital Stock	\$
25.28 On deposit with states	\$
25.29 On deposit with other regulatory bodies	\$
25.30 Pledged as collateral - excluding collateral pledged to an FHLB	\$
25.31 Pledged as collateral to FHLB - including assets backing funding agreements	\$
25.32 Other	\$

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A []
If no, attach a description with this statement.

27.1 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]

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

28. 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 []

28.01 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
Fifth Third Bank	38 Fountain Square Plaza Cincinnati, OH 45263

28.02 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)
.....

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? Yes [] No [X]

28.04 If yes, give full and complete information relating thereto:

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

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

28.05 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. 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
New England Asset Management	U.....

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets?..... Yes [X] No []

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets?..... Yes [] No [X]

28.06 For those firms or individuals listed in the table for 28.05 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
105900	New England Asset Management	KUR85E5PS4GQFZTFC130	New England Asset Management is an SEC registered Investment advisor	NO.....

29.1 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 [X] No []

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
922908-76-9	VANGUARD US TOTAL STOCK MKT	1,418,436
29.2999 - Total		1,418,436

29.3 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
VANGUARD US TOTAL STOCK MKT	APPLE INC.	35,461	12/31/2016 ..
VANGUARD US TOTAL STOCK MKT	ALPHABET INC.	28,369	12/31/2016 ..
VANGUARD US TOTAL STOCK MKT	MOCROSOFT CORP.	28,369	12/31/2016 ..
VANGUARD US TOTAL STOCK MKT	EXXON MOBIL CORP.	22,695	12/31/2016 ..
VANGUARD US TOTAL STOCK MKT	BERKSHIRE HATHAWAY INC.	18,440	12/31/2016 ..

30. 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 (+)
30.1 Bonds	66,017,042	66,218,664
30.2 Preferred stocks		201,622
30.3 Totals	66,017,042	66,218,664
		201,622

30.4 Describe the sources or methods utilized in determining the fair values:

Fair values are based on values either published by the NAIC's Security Valuation Office (SVO) or from an independent pricing service vendor such as BofA Merrill Lynch indices, Reuters, S&P, Bloomberg, Bloomberg Valuation Service, Markit, Markit iBoxx, PricingDirect or Interactive Data Corp. Under certain circumstances, if neither an SVO price or vendor price is available, a price may be obtained from a broker. Short term securities and cash equivalents are valued at amortized cost.

31.1 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]

31.2 If the answer to 31.1 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 []

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

Not Applicable

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?..... Yes [X] No []

32.2 If no, list exceptions:

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$137,333

33.2 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
Automobile Insurance Plan Service Office	37,162

34.1 Amount of payments for legal expenses, if any?\$32,209

34.2 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
Bricker & Eckler LLP	26,218

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?\$

35.2 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
.....

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND 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 Current Year 2 Prior Year
2.1	Premium Numerator	
2.2	Premium Denominator	54,788,275 52,705,843
2.3	Premium Ratio (2.1/2.2) .....	.0.000 0.000
2.4	Reserve Numerator .....	.757 1,666
2.5	Reserve Denominator	54,274,780 50,804,375
2.6	Reserve Ratio (2.4/2.5) .....	.0.000 0.000
3.1	Does the reporting entity issue both participating and non-participating policies?	Yes [] No [X]
3.2	If yes, state the amount of calendar year premiums written on:	3.21 Participating policies \$ 3.22 Non-participating policies \$
4.	For mutual reporting Entities and Reciprocal Exchanges Only:	
4.1	Does the reporting entity issue assessable policies?	Yes [] No [X]
4.2	Does the reporting entity issue non-assessable policies?	Yes [X] No []
4.3	If assessable policies are issued, what is the extent of the contingent liability of the policyholders?	%
4.4	Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.	\$
5.	For Reciprocal Exchanges Only:	
5.1	Does the Exchange appoint local agents?	Yes [] No []
5.2	If yes, is the commission paid:	5.21 Out of Attorney's-in-fact compensation..... Yes [] No [] N/A [] 5.22 As a direct expense of the exchange..... Yes [] No [] N/A []
5.3	What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?	.....
5.4	Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred?	Yes [] No []
5.5	If yes, give full information	.....

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND 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?
The Company does not write workers' compensation insurance.

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 Company's probable maximum loss is determined by JLT Re using both the AIR model and the RMS model.

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 Company's primary protection from an excessive loss arising from a concentration of risk is a comprehensive catastrophe reinsurance program with top quality reinsurers. In addition, the Company utilizes an internal concentration of risks metric that should not be exceeded in a given geographic area. The Company has also implemented predictive software to better access the potential risk before and after an 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 this 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 ratio 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 noncancelable 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 32 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 []

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND 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 which is secured by letters of credit, collateral, and other funds \$

12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes [] No [] N/A [X]

12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
12.41 From %
12.42 To %

12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? Yes [X] No []

12.6 If yes, state the amount thereof at December 31 of the current year:
12.61 Letters of credit \$ 1,000
12.62 Collateral and other funds \$

13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$ 500,000

13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes [] No [X]

13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. 1

14.1 Is the company 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:
The Company and its affiliates cede reinsurance independently under a group reinsurance agreement.

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 [X] No []

14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [] No []

14.5 If the answer to 14.4 is no, please explain:
.....

15.1 Has the reporting entity guaranteed any financed premium accounts? Yes [] No [X]

15.2 If yes, give full information
.....

16.1 Does the reporting entity write any warranty business? Yes [] No [X]
If yes, disclose the following information for each of the following types of warranty coverage:

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

* Disclose type of coverage:
.....

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that it excludes from Schedule F - Part 5? Yes [] No [X]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F - Part 5. Provide the following information for this exemption:

17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 excluded from Schedule F - Part 5	\$
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	\$

Provide the following information for all other amounts included in Schedule F - Part 3 and excluded from Schedule F - Part 5, not included above.

17.18 Gross amount of unauthorized reinsurance in Schedule F - Part 3 excluded from Schedule F - Part 5	\$
17.19 Unfunded portion of Interrogatory 17.18	\$
17.20 Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$
17.21 Case reserves portion of Interrogatory 17.18	\$
17.22 Incurred but not reported portion of Interrogatory 17.18	\$
17.23 Unearned premium portion of Interrogatory 17.18	\$
17.24 Contingent commission portion of Interrogatory 17.18	\$

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 funds administered as of the reporting date. \$

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual 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 2016	2 2015	3 2014	4 2013	5 2012
Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	67,997,945	63,275,813	62,265,447	58,574,062	56,200,496
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	63,165,725	59,627,369	57,244,958	54,365,260	51,915,408
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	79,473,488	77,018,457	74,625,522	71,465,068	61,638,313
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	3,173	4,828	6,468	7,910	8,368
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)	210,640,331	199,926,467	194,142,394	184,412,300	169,762,584
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	18,325,436	17,051,754	16,783,144	15,794,120	15,143,832
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	16,880,142	15,924,423	15,238,107	14,499,390	13,787,516
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	21,195,056	20,566,871	19,915,761	19,111,725	16,368,754
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	857	1,304	1,746	2,136	2,259
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12. Total (Line 35)	56,401,491	53,544,352	51,938,758	49,407,370	45,302,362
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	2,134,833	1,770,983	1,233,149	66,309	(226,771)
14. Net investment gain or (loss) (Line 11)	1,488,625	1,509,004	1,367,187	1,571,313	1,542,366
15. Total other income (Line 15)	875,797	884,723	1,015,926	998,311	933,156
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	1,150,678	1,283,332	1,178,264	811,007	118,084
18. Net income (Line 20)	3,348,577	2,881,378	2,437,998	1,824,926	2,130,667
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	276,644,467	256,826,670	239,669,081	227,434,167	222,711,419
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	545,347	621,052	739,567	752,492	494,688
20.2 Deferred and not yet due (Line 15.2)	13,087,349	11,792,408	11,441,483	10,693,858	9,798,811
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	59,018,471	55,485,998	52,164,559	49,661,921	57,484,155
22. Losses (Page 3, Line 1)	22,644,404	21,098,651	19,103,261	19,335,122	18,181,288
23. Loss adjustment expenses (Page 3, Line 3)	5,394,899	5,083,463	4,687,890	4,487,007	4,352,880
24. Unearned premiums (Page 3, Line 9)	26,235,477	24,622,261	23,783,752	22,300,260	20,249,344
25. Capital paid up (Page 3, Lines 30 & 31)					
26. Surplus as regards policyholders (Page 3, Line 37)	217,625,996	201,340,672	187,504,522	177,772,246	165,227,264
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	4,852,838	6,901,848	4,111,278	5,447,655	5,579,766
Risk-Based Capital Analysis					
28. Total adjusted capital	217,625,996	201,340,672	187,504,522	177,772,246	165,227,264
29. Authorized control level risk-based capital	17,006,935	16,528,674	14,221,011	8,680,057	7,731,167
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0					
30. Bonds (Line 1)	24.4	25.4	25.1	24.2	25.8
31. Stocks (Lines 2.1 & 2.2)	71.5	70.4	70.4	70.6	67.1
32. Mortgage loans on real estate (Lines 3.1 and 3.2)					
33. Real estate (Lines 4.1, 4.2 & 4.3)	1.6	1.8	2.0	2.2	2.3
34. Cash, cash equivalents and short-term investments (Line 5)	2.5	2.4	2.5	3.0	4.9
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)					
38. Receivables for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)	173,749,208	160,601,890	149,316,816	142,949,174	131,032,760
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	173,749,208	160,601,890	149,316,816	142,949,174	131,032,760
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)	79.8	79.8	79.6	80.4	79.3

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2016	2 2015	3 2014	4 2013	5 2012
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)	13,769,702	10,922,019	7,005,527	10,574,538	11,191,746
52. Dividends to stockholders (Line 35)					
53. Change in surplus as regards policyholders for the year (Line 38)	16,285,324	13,836,150	9,732,276	12,544,982	11,013,628
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	36,713,187	36,014,880	36,098,571	28,759,057	28,963,790
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	32,213,782	32,283,327	32,927,241	31,211,028	32,684,056
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	32,212,169	27,093,795	35,909,134	36,172,555	37,747,703
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	635	845	10,900	4,696	14,453
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59. Total (Line 35)	101,139,773	95,392,847	104,945,846	96,147,336	99,410,002
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	9,912,560	9,724,018	9,605,861	7,764,945	7,820,223
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)	8,697,718	8,716,356	8,885,315	8,409,539	8,060,605
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	8,693,158	7,313,143	9,694,238	9,713,678	9,176,304
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	171	228	2,943	1,268	3,902
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65. Total (Line 35)	27,303,607	25,753,745	28,188,357	25,889,430	25,061,035
Operating Percentages (Page 4) (Line 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)	52.7	52.6	55.4	57.1	57.5
68. Loss expenses incurred (Line 3)	9.1	8.9	8.6	8.7	10.2
69. Other underwriting expenses incurred (Line 4)	34.4	35.1	33.6	34.1	32.9
70. Net underwriting gain (loss) (Line 8)	3.9	3.4	2.4	0.1	(0.5)
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	31.9	32.9	30.7	30.6	30.4
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	61.7	61.6	64.0	65.8	67.7
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)	25.9	26.6	27.7	27.8	27.4
One Year Loss Development (000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11)	(1,601)	(1,801)	(2,580)	(3,027)	(2,913)
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)	(0.8)	(1.0)	(1.5)	(1.8)	(1.9)
Two Year Loss Development (000 omitted)					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	(1,996)	(3,250)	(4,847)	(4,684)	(4,013)
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)	(1.1)	(1.8)	(2.9)	(3.0)	(2.6)

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:

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX	(7)		13				9	.6	XXX	
2. 2007	39,655	3,154	36,501	22,373	1,599	706	.39	2,282	28	1,168	23,695	XXX	
3. 2008	43,797	3,464	40,333	28,956	5,390	1,156	202	2,281	29	1,206	26,772	XXX	
4. 2009	45,851	4,030	41,821	27,738	3,819	1,004	.57	2,398	34	1,412	27,230	XXX	
5. 2010	47,697	3,250	44,447	27,672	1,162	1,255	.39	2,597	16	1,531	30,307	XXX	
6. 2011	48,457	3,054	45,403	32,678	3,994	1,387	.157	2,706		1,284	32,620	XXX	
7. 2012	48,818	4,076	44,742	35,984	9,960	1,567	491	2,987		1,164	30,087	XXX	
8. 2013	51,017	3,661	47,356	28,636	1,538	1,123	.38	2,944		1,138	31,127	XXX	
9. 2014	54,691	4,235	50,456	27,207	1,078	847	.20	2,892		1,348	29,848	XXX	
10. 2015	56,701	3,995	52,706	22,825	.115	592	.1	2,859		1,380	26,160	XXX	
11. 2016	58,902	4,114	54,788	19,295	402	282	1	2,635		763	21,809	XXX	
12. Totals	XXX	XXX	XXX	273,357	29,057	9,932	1,045	26,581	107	12,403	279,661	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.	56												56	XXX		
2. 2007														XXX		
3. 2008	15		8				1						24	XXX		
4. 2009	9	1	5				1			4			18	XXX		
5. 2010	141	3	236				73			5			452	XXX		
6. 2011	106		95	4			85			6			288	XXX		
7. 2012	314		226	1			131			19			689	XXX		
8. 2013	1,306	.194	.532	106			369			.75			1,982	XXX		
9. 2014	2,336	.138	.818	50			.712			.126			3,804	XXX		
10. 2015	4,475	.617	.1,742	219			1,110			.284			6,775	XXX		
11. 2016	7,400	308	5,122	657			1,177			1,216			13,950	XXX		
12. Totals	16,158	1,261	8,784	1,037			3,659			1,735			28,038	XXX		

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX			XXX	.56	
2. 2007	25,361	1,666	23,695	.64.0	52.8	.64.9					
3. 2008	32,417	5,621	26,796	.74.0	162.3	.66.4				23	1
4. 2009	31,159	3,911	27,248	.68.0	97.0	.65.2				13	5
5. 2010	31,979	1,220	30,759	.67.0	37.5	.69.2				374	.78
6. 2011	37,063	4,155	32,908	.76.5	136.1	.72.5				197	.91
7. 2012	41,228	10,452	30,776	.84.5	256.4	.68.8				539	150
8. 2013	34,985	1,876	33,109	.68.6	51.2	.69.9				1,538	444
9. 2014	34,938	1,286	33,652	.63.9	30.4	.66.7				2,966	838
10. 2015	33,887	952	32,935	.59.8	23.8	.62.5				5,381	1,394
11. 2016	37,127	1,368	35,759	.63.0	33.3	.65.3				11,557	2,393
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	22,644	5,394

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

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016	11 One Year	12 Two Year
1. Prior	7,808	5,263	4,393	3,815	3,716	3,611	3,577	3,567	3,583	3,603	20	36
2. 2007	25,470	23,369	22,118	21,987	21,664	21,488	21,478	21,440	21,444	21,441	(3)	1
3. 2008	XXX	27,354	25,326	25,088	24,622	24,571	24,516	24,587	24,540	24,544	.4	(43)
4. 2009	XXX	XXX	27,795	26,079	25,519	25,286	24,936	24,883	24,876	24,880	.4	(3)
5. 2010	XXX	XXX	XXX	31,030	29,630	29,030	28,514	28,032	27,923	28,173	250	141
6. 2011	XXX	XXX	XXX	XXX	33,544	31,796	30,990	30,457	30,223	30,196	(27)	(261)
7. 2012	XXX	XXX	XXX	XXX	XXX	30,188	28,932	28,157	28,040	27,770	(270)	(387)
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	31,217	30,457	30,281	30,090	(191)	(367)
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31,747	30,616	30,634	18	(1,113)
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31,198	29,792	(1,406)	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31,908	XXX	XXX
										12. Totals	(1,601)	(1,996)

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	10 2016		
1. Prior	000	1,758	2,730	3,195	3,405	3,485	3,493	3,491	3,541	3,547	XXX	XXX
2. 2007	14,776	18,975	20,386	21,034	21,286	21,383	21,400	21,437	21,433	21,441	XXX	XXX
3. 2008	XXX	16,994	21,232	22,699	23,847	24,210	24,314	24,386	24,494	24,520	XXX	XXX
4. 2009	XXX	XXX	17,359	21,943	23,330	24,161	24,476	24,675	24,744	24,866	XXX	XXX
5. 2010	XXX	XXX	XXX	18,894	24,164	25,983	27,024	27,433	27,601	27,726	XXX	XXX
6. 2011	XXX	XXX	XXX	XXX	22,388	26,639	28,284	29,236	29,758	29,914	XXX	XXX
7. 2012	XXX	XXX	XXX	XXX	XXX	18,847	23,823	25,803	26,718	27,100	XXX	XXX
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	18,886	24,998	26,673	28,183	XXX	XXX
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19,560	24,658	26,956	XXX	XXX
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,449	23,301	XXX	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19,174	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										10
	1 2007	2 2008	3 2009	4 2010	5 2011	6 2012	7 2013	8 2014	9 2015	2016	
1. Prior	4,442	1,744	733	205	118	28	9	3	1		
2. 2007	5,310	2,270	808	479	138	41	20				
3. 2008	XXX	5,164	1,941	988	313	164	96	.96	.16	.9	
4. 2009	XXX	XXX	4,780	1,803	.928	.407	172	.73	.40	.6	
5. 2010	XXX	XXX	XXX	5,790	2,771	1,598	894	.314	.148	.309	
6. 2011	XXX	XXX	XXX	XXX	5,583	2,664	1,135	.582	.265	.176	
7. 2012	XXX	XXX	XXX	XXX	XXX	5,263	2,174	1,042	.579	.356	
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	5,601	2,763	.1,614	.795	
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,703	.2,493	.1,480	
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.5,698	.2,633	
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,642	

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1 Active Status	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	N							
2. Alaska	AK	N							
3. Arizona	AZ	N							
4. Arkansas	AR	N							
5. California	CA	N							
6. Colorado	CO	N							
7. Connecticut	CT	L							
8. Delaware	DE	N							
9. District of Columbia	DC	N							
10. Florida	FL	N							
11. Georgia	GA	N							
12. Hawaii	HI	N							
13. Idaho	ID	N							
14. Illinois	IL	N							
15. Indiana	IN	L							
16. Iowa	IA	L							
17. Kansas	KS	L							
18. Kentucky	KY	N							
19. Louisiana	LA	N							
20. Maine	ME	L							
21. Maryland	MD	N							
22. Massachusetts	MA	N							
23. Michigan	MI	N							
24. Minnesota	MN	L							
25. Mississippi	MS	N							
26. Missouri	MO	N							
27. Montana	MT	N							
28. Nebraska	NE	L							
29. Nevada	NV	N							
30. New Hampshire	NH	L							
31. New Jersey	NJ	N							
32. New Mexico	NM	N							
33. New York	NY	N							
34. North Carolina	NC	N							
35. North Dakota	ND	N							
36. Ohio	OH	L	59,429,796	55,650,975		26,908,447	30,313,969	19,702,409	807,495
37. Oklahoma	OK	N							
38. Oregon	OR	L							
39. Pennsylvania	PA	N							
40. Rhode Island	RI	L							
41. South Carolina	SC	N							
42. South Dakota	SD	N							
43. Tennessee	TN	L							
44. Texas	TX	N							
45. Utah	UT	N							
46. Vermont	VT	L							
47. Virginia	VA	L							
48. Washington	WA	N							
49. West Virginia	WV	N							
50. Wisconsin	WI	L							
51. Wyoming	WY	N							
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	(a)	15	59,429,796	55,650,975		26,908,447	30,313,969	19,702,409	807,495
DETAILS OF WRITE-INS									
58001.		XXX							
58002.		XXX							
58003.		XXX							
58998. Summary of remaining write-ins for Line 58 from overflow page		XXX							
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX							

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

Explanation of basis of allocation of premiums by states, etc.

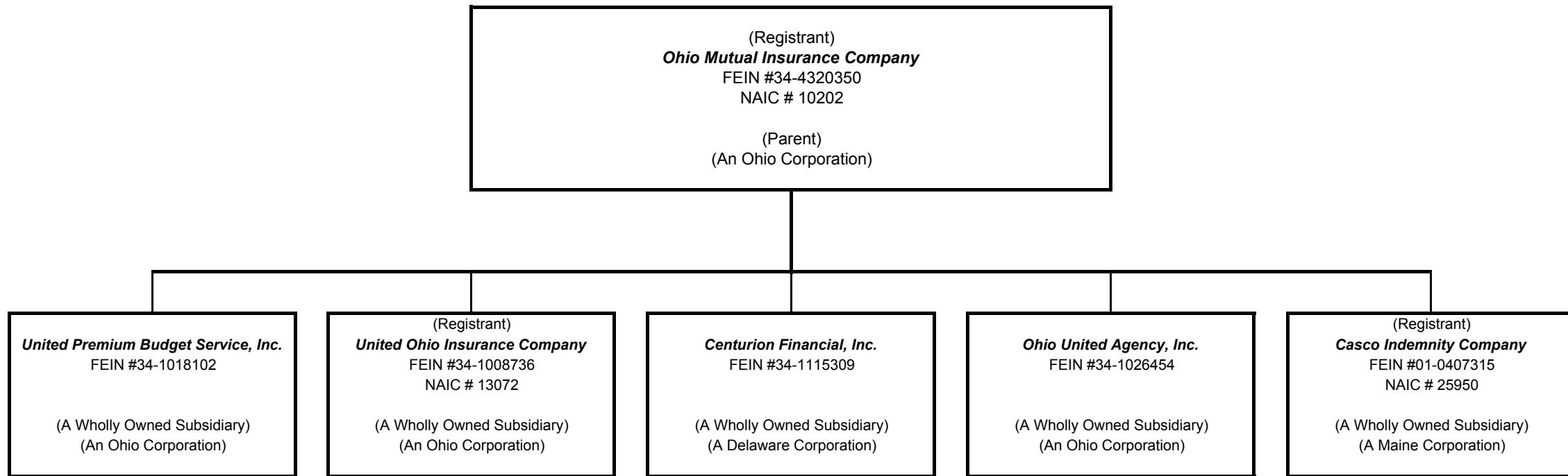
Property premiums are determined by location covered.

Casualty premiums are determined by insured address.

(a) Insert the number of L responses except for Canada and Other Alien.

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

Ohio Mutual Insurance Group



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE Ohio Mutual Insurance Company
OVERFLOW PAGE FOR WRITE-INS

NONE

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