



# QUARTERLY STATEMENT

As of June 30, 2017  
of the Condition and Affairs of the

## HOME AND FARM INSURANCE COMPANY

NAIC Group Code.....46

(Current Period) (Prior Period)

Organized under the Laws of OH

Incorporated/Organized..... January 29, 1985

Statutory Home Office

Main Administrative Office

Mail Address

Primary Location of Books and Records

Internet Web Site Address

Statutory Statement Contact

NAIC Company Code..... 17639

Employer's ID Number..... 35-1630739

State of Domicile or Port of Entry OH

Country of Domicile US

Commenced Business..... March 5, 1985

One Heritage Place..... Piqua .... OH .... US .... 45356  
(Street and Number) (City or Town, State, Country and Zip Code)One Heritage Place..... Piqua .... OH .... US .... 45356  
(Street and Number) (City or Town, State, Country and Zip Code)One Heritage Place..... Piqua .... OH .... US .... 45356  
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)One Heritage Place..... Piqua .... OH .... US .... 45356  
(Street and Number) (City or Town, State, Country and Zip Code)

937-778-5000

(Area Code) (Telephone Number)

937-778-5000

(Area Code) (Telephone Number)

937-778-5000

(Area Code) (Telephone Number)

937-778-5019

(Fax Number)

### OFFICERS

Name	Title	Name	Title
1. John M. Brooks	President	2. Lisa Lyn Wesner	Secretary
3. Robert E. Bornhorst	Treasurer	4.	
Robert E. Bornhorst	Vice President		

### OTHER

### DIRECTORS OR TRUSTEES

Donald E. Benschneider  
Ralph F. Thiele

Richard J. Seitz

J. MacAlpine Smith

William L. Sweet Jr.

State of..... Ohio  
County of.... Miami

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.

(Signature) John M. Brooks 1. (Printed Name) President (Title)	(Signature) Lisa Lyn Wesner 2. (Printed Name) Secretary (Title)	(Signature) Robert E. Bornhorst 3. (Printed Name) Treasurer (Title)
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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. Number of pages attached

Yes [ X ] No [ ]

\_\_\_\_\_  
\_\_\_\_\_

**ASSETS**

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	6,599,485		6,599,485	6,586,800
2. Stocks:				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....			0	93,591
3. Mortgage loans on real estate:				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$....274,954), cash equivalents (\$.....0) and short-term investments (\$....89,479).....	364,433		364,433	296,554
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives.....			0	
8. Other invested assets.....	0		0	0
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets.....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	6,963,918	0	6,963,918	6,976,945
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	44,438		44,438	47,440
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	551,615		551,615	498,195
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	8,063		8,063	8,165
16.2 Funds held by or deposited with reinsured companies.....	2,000,000		2,000,000	2,000,000
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....	38,337		38,337	38,337
18.2 Net deferred tax asset.....	355,580	220,310	135,270	131,592
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....			0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....	117,498		117,498	45,139
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	10,079,449	220,310	9,859,139	9,745,813
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	10,079,449	220,310	9,859,139	9,745,813

**DETAILS OF WRITE-INS**

1101. ....				0
1102. ....				0
1103. ....				0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. ....				0
2502. ....				0
2503. ....				0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0	0

**HOME AND FARM INSURANCE COMPANY**  
**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Statement Date	2 December 31 Prior Year
1. Losses (current accident year \$.....179,890).	443,838	430,338
2. Reinsurance payable on paid losses and loss adjustment expenses.	427,578	364,245
3. Loss adjustment expenses.....	68,737	67,459
4. Commissions payable, contingent commissions and other similar charges.....	71,646	160,515
5. Other expenses (excluding taxes, licenses and fees).....	169,159	181,497
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	16,471	19,471
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....		
7.2 Net deferred tax liability.....		
8. Borrowed money \$.....0 and interest thereon \$.....0.		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$....207,608 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	1,069,608	1,011,382
10. Advance premium.....		
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....	113,804	100,562
13. Funds held by company under reinsurance treaties.....	300,000	300,000
14. Amounts withheld or retained by company for account of others.....		
15. Remittances and items not allocated.....		
16. Provision for reinsurance (including \$.....0 certified).....		
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....		
19. Payable to parent, subsidiaries and affiliates.....	219,644	163,948
20. Derivatives.....		
21. Payable for securities.....		
22. Payable for securities lending.....		
23. Liability for amounts held under uninsured plans.....		
24. Capital notes \$.....0 and interest thereon \$.....0.		
25. Aggregate write-ins for liabilities.....	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	2,900,485	2,799,417
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	2,900,485	2,799,417
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....	1,000,000	1,000,000
31. Preferred capital stock.....		
32. Aggregate write-ins for other than special surplus funds.....	0	0
33. Surplus notes.....		
34. Gross paid in and contributed surplus.....	7,454,463	7,454,463
35. Unassigned funds (surplus).....	(1,495,810)	(1,508,068)
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36).....	6,958,653	6,946,395
38. Totals (Page 2, Line 28, Col. 3).....	9,859,138	9,745,812

**DETAILS OF WRITE-INS**

2501. Line 15 from 2000 Annual Statement.....		
2502. ....		
2503. ....		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0
2901. Additional admitted deferred tax assets.....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201. ....		
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

# HOME AND FARM INSURANCE COMPANY

## STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
<b>UNDERWRITING INCOME</b>			
1. Premiums earned:			
1.1 Direct..... (written \$....209,778).....	229,383	242,153	480,932
1.2 Assumed..... (written \$....1,157,236).....	1,099,010	1,047,080	2,091,311
1.3 Ceded..... (written \$....209,780).....	229,383	242,153	480,932
1.4 Net..... (written \$....1,157,234).....	1,099,010	1,047,080	2,091,311
DEDUCTIONS:			
2. Losses incurred (current accident year \$....618,776):			
2.1 Direct.....	314,451	83,717	96,773
2.2 Assumed.....	723,382	658,693	1,330,381
2.3 Ceded.....	314,451	83,717	96,773
2.4 Net.....	723,382	658,693	1,330,381
3. Loss adjustment expenses incurred.....	59,711	68,661	139,210
4. Other underwriting expenses incurred.....	381,103	410,693	762,253
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	1,164,196	1,138,047	2,231,844
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	(65,186)	(90,967)	(140,533)
<b>INVESTMENT INCOME</b>			
9. Net investment income earned.....	66,028	61,732	146,940
10. Net realized capital gains (losses) less capital gains tax of \$....0.....	(1,871)	1,637	12,438
11. Net investment gain (loss) (Lines 9 + 10).....	64,157	63,369	159,378
<b>OTHER INCOME</b>			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0).....	0	0	0
13. Finance and service charges not included in premiums.....			
14. Aggregate write-ins for miscellaneous income.....	0	0	0
15. Total other income (Lines 12 through 14).....	0	0	0
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	(1,029)	(27,598)	18,845
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).....	(1,029)	(27,598)	18,845
19. Federal and foreign income taxes incurred.....			777
20. Net income (Line 18 minus Line 19) (to Line 22).....	(1,029)	(27,598)	18,068
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
21. Surplus as regards policyholders, December 31 prior year.....	6,946,396	6,938,758	6,938,757
22. Net income (from Line 20).....	(1,029)	(27,598)	18,068
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$....3,267.....	6,341	13,066	5,666
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....	2,770		(343)
27. Change in nonadmitted assets.....	4,175	7,016	(15,752)
28. Change in provision for reinsurance.....			
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.....			
37. Aggregate write-ins for gains and losses in surplus.....	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37).....	12,257	(7,516)	7,639
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	6,958,653	6,931,242	6,946,396

### DETAILS OF WRITE-INS

0501.....			
0502.....			
0503.....			
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0
1401.....			
1402.....			
1403.....			
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	0	0	0
3701.....			
3702.....			
3703.....			
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0	0

Statement for June 30, 2017 of the **HOME AND FARM INSURANCE COMPANY**  
**CASH FLOW**

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>CASH FROM OPERATIONS</b>			
1. Premiums collected net of reinsurance.....	1,117,058	1,095,081	2,128,917
2. Net investment income.....	85,923	93,773	218,279
3. Miscellaneous income.....			
4. Total (Lines 1 through 3).....	1,202,981	1,188,854	2,347,196
5. Benefit and loss related payments.....	646,447	557,117	1,296,491
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	543,743	504,542	908,255
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....		17,810	22,810
10. Total (Lines 5 through 9).....	1,190,190	1,079,469	2,227,556
11. Net cash from operations (Line 4 minus Line 10).....	12,791	109,385	119,640
<b>CASH FROM INVESTMENTS</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	1,062,236	1,148,767	2,091,781
12.2 Stocks.....	100,857	5,241	6,858
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			36
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....			
12.7 Miscellaneous proceeds.....			
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	1,163,093	1,154,008	2,098,675
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	1,090,957	1,419,937	2,637,650
13.2 Stocks.....	377	2,271	4,740
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....			
13.7 Total investments acquired (Lines 13.1 to 13.6).....	1,091,334	1,422,208	2,642,390
14. Net increase or (decrease) in contract loans and premium notes.....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	71,759	(268,200)	(543,715)
<b>CASH FROM FINANCING AND MISCELLANEOUS SOURCES</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....			
16.6 Other cash provided (applied).....	(16,671)	44,800	26,205
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	(16,671)	44,800	26,205
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	67,879	(114,015)	(397,870)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	296,556	694,426	694,426
19.2 End of period (Line 18 plus Line 19.1).....	364,435	580,411	296,556

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

20.001 .....	.....	.....	.....
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**NOTES TO FINANCIAL STATEMENTS****Note 1 – Summary of Significant Accounting Policies and Going Concern****A. Accounting Practices**

	SSAP #	F/S Page	F/S Line #	Current Period	2016
<b>NET INCOME</b>					
(1) HOME AND FARM INSURANCE COMPANY state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ (1,029)	\$ 18,068
(2) State Prescribed Practice that is an increase/(decrease) from NAIC SAP					
(3) State Permitted Practice that is an increase/(decrease) from NAIC SAP					
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ (1,029)	\$ 18,068
<b>SURPLUS</b>					
(5) HOME AND FARM INSURANCE COMPANY state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 6,958,653	\$ 6,946,395
(6) State Prescribed Practice that is an increase/(decrease) from NAIC SAP					
(7) State Permitted Practice that is an increase/(decrease) from NAIC SAP					
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 6,958,653	\$ 6,946,395

**C. Accounting Policy**

6. Loaned-backed securities are stated at amortized value. The retrospective adjustment method is used to value all loan-backed securities. Non-investment grade loan-backed securities are stated at the lower of amortized value or fair value.

**D. Going Concern**

Not applicable

**Note 2 – Accounting Changes and Corrections of Errors**

No significant changes

**Note 3 – Business Combinations and Goodwill**

No significant changes

**Note 4 – Discontinued Operations**

No significant changes

**Note 5 – Investments****D. Loan-Backed Securities**

(1)

	1 Amortized Cost Basis Before Other-than-Temporary Impairment	2 Other-than-Temporary Impairment Recognized in Loss	3 Fair Value 1 – 2
<b>OTTI Recognized 1<sup>st</sup> Quarter</b>			
a. Intent to sell	\$	\$	\$
b. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis			
c. Total 1 <sup>st</sup> Quarter	\$	\$	\$
<b>OTTI Recognized 2<sup>nd</sup> Quarter</b>			
d. Intent to sell	\$	\$	\$
e. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis			
f. Total 2 <sup>nd</sup> Quarter	\$	\$	\$
<b>OTTI Recognized 3<sup>rd</sup> Quarter</b>			
g. Intent to sell	\$	\$	\$
h. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis			
i. Total 3 <sup>rd</sup> Quarter	\$	\$	\$
<b>OTTI Recognized 4<sup>th</sup> Quarter</b>			
j. Intent to sell	\$	\$	\$
k. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the			

**NOTES TO FINANCIAL STATEMENTS**

	1 Amortized Cost Basis Before Other-than-Temporary Impairment	2 Other-than-Temporary Impairment Recognized in Loss	3 Fair Value 1 – 2
amortized cost basis			
I. Total 4th Quarter		\$	
m. Annual aggregate total	XXX	\$	XXX

## (3) Recognized OTTI securities

CUSIP	Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI	Present Value of Projected Cash Flows	Recognized Other-Than- Temporary Impairment	Amortized Cost After Other-Than- Temporary Impairment	Fair Value at Time of OTTI	Date of Financial Statement Where Reported
	\$	\$	\$	\$	\$	
Total			\$			

## (4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a. The aggregate amount of unrealized losses:	1. Less than 12 Months	\$ 6,157
	2. 12 Months or Longer	1,320
b. The aggregate related fair value of securities with unrealized losses:	1. Less than 12 Months	\$ 761,996
	2. 12 Months or Longer	75,024

## (5)

## E. Repurchase Agreements and/or Securities Lending Transactions

Not applicable

## I. Working Capital Finance Investments

Not applicable

## J. Offsetting and Netting of Assets and Liabilities

Not applicable

**Note 6 – Joint Ventures, Partnerships and Limited Liability Companies**

No significant changes

**Note 7 – Investment Income**

No significant changes

**Note 8 – Derivative Instruments**

No significant changes

**Note 9 – Income Taxes**

No significant changes

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

Marias Technology Inc., a wholly subsidiary of Buckeye State Mutual Insurance Company was sold effective June 30, 2017.

**Note 11 – Debt**

Not applicable

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

Not applicable

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

No significant changes

**Note 14 – Liabilities, Contingencies and Assessments**

No significant changes

**Note 15 – Leases**

No significant changes

**Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk**

**NOTES TO FINANCIAL STATEMENTS**

No significant changes

**Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities**

## B. Transfer and Servicing of Financial Assets

Not applicable

## C. Wash Sales

- (1) In the course of the Company's asset management, securities may be sold and reacquired within 30 days of the sale date to enhance the yield on investments
- (2) There were no securities with an NAIC designation 3 or below that were sold during the year and reacquired within 30 days of the sale.

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

No significant changes

**Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators**

No significant changes

**Note 20 – Fair Value Measurements**

## A.

## (1) Fair Value Measurements at Reporting Date

	Level 1	Level 2	Level 3	Total
Assets at Fair Value				
	\$	\$	\$	\$
Total	\$	\$	\$	\$
Liabilities at Fair Value				
	\$	\$	\$	\$
Total	\$	\$	\$	\$

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

	Ending Balance as of Prior Quarter End	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	Settlem-ents	Ending Balance for Current Quarter End
a. Assets										
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
b. Liabilities										
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

## (3)

## (4)

## (5)

## B.

## C.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
	\$	\$	\$	\$	\$	\$

## D. Not Practicable to Estimate Fair Value

Type of Class or Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
	\$	%		

**Note 21 – Other Items**

No significant changes

**Note 22 – Events Subsequent**

No significant changes

**Note 23 – Reinsurance**

No significant changes

**Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination**

## F. Risk Sharing Provisions of the Affordable Care Act

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**NOTES TO FINANCIAL STATEMENTS**

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(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions  
Yes [ ] No [X]

**Note 25 – Change in Incurred Losses and Loss Adjustment Expenses**

Reserves as of December 31, 2016 were \$499,000. As of June 30, 2017, \$296,000 has been paid for incurred losses and loss adjusting expense attributable to insured events of prior years. Reserves remaining for prior years are now \$306,000 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore there has been a \$103,000 unfavorable prior year development since December 31, 2016 to June 30, 2017. The increase is generally the result on ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. The Company does not have retrospectively rated policies.

**Note 26 – Intercompany Pooling Arrangements**

No significant changes

**Note 27 – Structured Settlements**

No significant changes

**Note 28 – Health Care Receivables**

No significant changes

**Note 29 – Participating policies**

No significant changes

**Note 30 – Premium Deficiency Reserves**

No significant changes

**Note 31 – High Deductibles**

No significant changes

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

No significant changes

**Note 33 – Asbestos/Environmental Reserves**

No significant changes

**Note 34 – Subscriber Savings Accounts**

No significant changes

**Note 35 – Multiple Peril Crop Insurance**

No significant changes

**Note 36 – Financial Guaranty Insurance**

The company does not transact this type of business.

# HOME AND FARM INSURANCE COMPANY

## GENERAL INTERROGATORIES

### PART 1 - COMMON INTERROGATORIES

#### GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [ ] No [X]

1.2 If yes, has the report been filed with the domiciliary state? Yes [ ] No [ ]

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 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 and 1A.

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [X] No [ ]

3.3 If the response to 3.2 is yes, provide a brief description of those changes.

Marias Technology Inc., a wholly subsidiary of Buckeye State Mutual Insurance Company was sold effective June 30, 2017.

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

4.2 If yes, provide name of 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	2 NAIC Company Code	3 State of Domicile
Name of Entity		

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?

If yes, attach an explanation. Yes [ ] No [X] N/A [ ]

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2015

6.2 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. 12/31/2015

6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 05/29/2017

6.4 By what department or departments?

Indiana

6.5 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]

6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [ ] No [ ] N/A [X]

7.1 Has this 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]

7.2 If yes, give full information:

8.1 Is the company a subsidiary of a bank holding company regulated with 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 the 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

9.1 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.

9.11 If the response to 9.1 is No, please explain:

9.2 Has the code of ethics for senior managers been amended? Yes [ ] No [X]

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [ ] No [X]

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

#### FINANCIAL

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

**GENERAL INTERROGATORIES****PART 1 - COMMON INTERROGATORIES**

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

\$ 117,498**INVESTMENT**

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [ ] No [X]

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

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$ 013. Amount of real estate and mortgages held in short-term investments: \$ 0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [X] No [ ]

14.2 If yes, please complete the following:

14.21 Bonds  
 14.22 Preferred Stock  
 14.23 Common Stock  
 14.24 Short-Term Investments  
 14.25 Mortgage Loans on Real Estate  
 14.26 All Other  
 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)  
 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above

1	2
Prior Year End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
\$ 0	\$ 0
0	0
0	0
0	0
0	0
0	0
\$ 0	\$ 0
\$ 0	\$ 0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [ ] No [X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [ ]

If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of current statement date:

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0  
 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0  
 16.3 Total payable for securities lending reported on the liability page: \$ 0

17. 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 [ ]17.1 For all agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1	2
Name of Custodian(s)	Custodian Address
US BANK	425 Walnut Street, Cincinnati, OH 45202

17.2 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	2	3
Name(s)	Location(s)	Complete Explanation(s)

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [ ] No [X]

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

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

17.5 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	2
Name of Firm or Individual	Affiliation
Prime Investment Advisors	U

17.5097 For those firms/individuals listed in the table for Question 17.5, 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 [ ]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets? Yes [X] No [ ]

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
107680	Prime Investment Advisors		SEC	NO

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

18.2 If no, list exceptions:

**GENERAL INTERROGATORIES (continued)****PART 2 – PROPERTY & CASUALTY INTERROGATORIES**

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? Yes [ ] No [X] N/A [ ]  
If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? Yes [ ] No [X]  
If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? Yes [ ] No [X]

3.2 If yes, give full and complete information thereto:

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see *Annual Statement Instructions* pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero? Yes [ ] No [X]

4.2 If yes, complete the following schedule:

1 Line of Business	2 Maximum Interest	3 Disc. Rate	Total Discount				Discount Taken During Period			
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 Total	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 Total
Total	XXX	XXX	0	0	0	0	0	0	0	

5.1 Operating Percentages:

5.1 A&H loss percent	0.000%
5.2 A&H cost containment percent	0.000%
5.3 A&H expense percent excluding cost containment expenses	0.000%

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

6.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$ 0

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

6.4 If yes, please provide the amount of funds administered as of the reporting date. \$ 0

**HOME AND FARM INSURANCE COMPANY**  
**SCHEDULE F - CEDED REINSURANCE**

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
<b>U.S. Insurers</b>						
22043.....	04-1543470.....	Liberty Mutual Insurance Company.....	MA.....	Authorized.....	3.....	.....03/08/2017
10227.....	13-4924125.....	Munich Reinsurance America, Inc.....	NJ.....	Authorized.....	2.....	.....10/19/2016

## **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

### Current Year to Date - Allocated by States and Territories

#### DETAILS OF WRITE-INS

(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 (other than their state of domicile see DSLI); (D) - DSLI - Domestic Surplus Lines Insurer

(DSL) - Reporting entities authorized to write Surplus Lines in the state of domicile; (N) - None of the above - Not allowed to write business in the state.

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

**Sch. Y - Pt. 1**  
**NONE**

**Sch. Y - Pt. 1A**  
**NONE**

**HOME AND FARM INSURANCE COMPANY**  
**PART 1 - LOSS EXPERIENCE**

Lines of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....			.000	
2. Allied lines.....			.000	
3. Farmowners multiple peril.....			.000	
4. Homeowners multiple peril.....			.000	
5. Commercial multiple peril.....			.000	
6. Mortgage guaranty.....			.000	
8. Ocean marine.....			.000	
9. Inland marine.....			.000	
10. Financial guaranty.....			.000	
11.1 Medical professional liability - occurrence.....			.000	
11.2 Medical professional liability - claims-made.....			.000	
12. Earthquake.....			.000	
13. Group accident and health.....			.000	
14. Credit accident and health.....			.000	
15. Other accident and health.....			.000	
16. Workers' compensation.....			.000	
17.1 Other liability-occurrence.....	229,381	314,450	137.087	34.572
17.2 Other liability-claims made.....			.000	
17.3 Excess workers' compensation.....			.000	
18.1 Products liability-occurrence.....			.000	
18.2 Products liability-claims made.....			.000	
19.1, 19.2 Private passenger auto liability.....			.000	
19.3, 19.4 Commercial auto liability.....			.000	
21. Auto physical damage.....			.000	
22. Aircraft (all perils).....			.000	
23. Fidelity.....			.000	
24. Surety.....			.000	
26. Burglary and theft.....			.000	
27. Boiler and machinery.....			.000	
28. Credit.....			.000	
29. International.....			.000	
30. Warranty.....			.000	
31. Reinsurance-nonproportional assumed property.....	XXX.....	XXX.....	XXX.....	XXX.....
32. Reinsurance-nonproportional assumed liability.....	XXX.....	XXX.....	XXX.....	XXX.....
33. Reinsurance-nonproportional assumed financial lines.....	XXX.....	XXX.....	XXX.....	XXX.....
34. Aggregate write-ins for other lines of business.....	0	0	.000	
35. Totals.....	229,381	314,450	137.087	34.572

**DETAILS OF WRITE-INS**

3401. ....			.000	
3402. ....			.000	
3403. ....			.000	
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	.0	0	.000	XXX.....
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	.0	0	.000	

**PART 2 - DIRECT PREMIUMS WRITTEN**

Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date	
1. Fire.....				
2. Allied lines.....				
3. Farmowners multiple peril.....				
4. Homeowners multiple peril.....				
5. Commercial multiple peril.....				
6. Mortgage guaranty.....				
8. Ocean marine.....				
9. Inland marine.....				
10. Financial guaranty.....				
11.1 Medical professional liability - occurrence.....				
11.2 Medical professional liability - claims made.....				
12. Earthquake.....				
13. Group accident and health.....				
14. Credit accident and health.....				
15. Other accident and health.....				
16. Workers' compensation.....				
17.1 Other liability-occurrence.....		88,624	209,778	257,381
17.2 Other liability-claims made.....				
17.3 Excess workers' compensation.....				
18.1 Products liability-occurrence.....				
18.2 Products liability-claims made.....				
19.1, 19.2 Private passenger auto liability.....				
19.3, 19.4 Commercial auto liability.....				
21. Auto physical damage.....				
22. Aircraft (all perils).....				
23. Fidelity.....				
24. Surety.....				
26. Burglary and theft.....				
27. Boiler and machinery.....				
28. Credit.....				
29. International.....				
30. Warranty.....				
31. Reinsurance-nonproportional assumed property.....	XXX.....	XXX.....	XXX.....	XXX.....
32. Reinsurance-nonproportional assumed liability.....	XXX.....	XXX.....	XXX.....	XXX.....
33. Reinsurance-nonproportional assumed financial lines.....	XXX.....	XXX.....	XXX.....	XXX.....
34. Aggregate write-ins for other lines of business.....	0	0	0	0
35. Totals.....	88,624	209,778	209,778	257,381

**DETAILS OF WRITE-INS**

3401. ....			
3402. ....			
3403. ....			
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	.0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	.0	0	0

**PART 3 (000 omitted)****LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE**

Years in Which Losses Occurred	1 Prior Year-End Known Case Loss and LAE Reserves	2 Prior Year-End IBNR Loss and LAE Reserves	3 Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	4 2017 Loss and LAE Payments on Claims Reported as of Prior Year-End	5 2017 Loss and LAE Payments on Claims Unreported as of Prior Year-End	6 Total 2017 Loss and LAE Payments (Cols. 4 + 5)	7 Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year-End	8 Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year-End	9 Q.S. Date IBNR Loss and LAE Reserves	10 Total Q.S. Loss and LAE Reserves (Cols. 7 + 8 + 9)	11 Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 4 + 7 minus Col. 1)	12 Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	13 Prior Year-End Total Loss and LAE Reserve Developed (Savings)/Deficiency (Cols. 11 + 12)
1. 2014 + Prior.....	48	16	64	29		29	28	1	10	39	9	(5)	4
2. 2015.....	78	54	132	64	4	68	29	5	39	73	15	(6)	9
3. Subtotals 2015 + Prior.....	126	70	196	93	4	97	57	6	49	112	24	(11)	13
4. 2016.....	171	132	303	172	27	199	70	30	94	194	71	19	90
5. Subtotals 2016 + Prior.....	297	202	499	265	31	296	127	36	143	306	95	8	103
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	473	473	XXX.....	133	74	207	XXX.....	XXX.....	XXX.....
7. Totals.....	297	202	499	265	504	769	127	169	217	513	95	8	103
8. Prior Year-End's Surplus As Regards Policyholders											Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7
											1. ....31.987 %	2. ....3.960 %	3. ....20.641 %
													Col. 13, Line 7 Line 8
													4. ....1.483 %

**HOME AND FARM INSURANCE COMPANY  
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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

	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO _____
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO _____
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO _____
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO _____

**Explanation:**

1. The data for this supplement is not required to be filed.
2. The data for this supplement is not required to be filed.
3. The data for this supplement is not required to be filed.
4. The data for this supplement is not required to be filed.

**Bar Code:**

**HOME AND FARM INSURANCE COMPANY**  
**Overflow Page for Write-Ins**

**NONE**

Statement for June 30, 2017 of the **HOME AND FARM INSURANCE COMPANY**  
**SCHEDULE A - VERIFICATION**

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	.....0	.....
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	.....	.....
2.2 Additional investment made after acquisition.....	.....	.....
3. Current year change in encumbrances.....	.....	.....
4. Total gain (loss) on disposals.....	.....	.....
5. Deduct amounts received on disposals.....	.....	.....
6. Total foreign exchange change in book/adjusted carrying value.....	.....	.....
7. Deduct current year's other-than-temporary impairment recognized.....	.....	.....
8. Deduct current year's depreciation.....	.....	.....
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....	.....0	.....0
10. Deduct total nonadmitted amounts.....	.....	.....
11. Statement value at end of current period (Line 9 minus Line 10).....	.....0	.....0

**NONE**

**SCHEDULE B - VERIFICATION**

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....	.....0	.....
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	.....	.....
2.2 Additional investment made after acquisition.....	.....	.....
3. Capitalized deferred interest and other.....	.....	.....
4. Accrual of discount.....	.....	.....
5. Unrealized valuation increase (decrease).....	.....	.....
6. Total gain (loss) on disposals.....	.....	.....
7. Deduct amounts received on disposals.....	.....	.....
8. Deduct amortization of premium and mortgage interest points and commitment fees.....	.....	.....
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....	.....	.....
10. Deduct current year's other-than-temporary impairment recognized.....	.....	.....
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	.....0	.....0
12. Total valuation allowance.....	.....	.....
13. Subtotal (Line 11 plus Line 12).....	.....0	.....0
14. Deduct total nonadmitted amounts.....	.....	.....
15. Statement value at end of current period (Line 13 minus Line 14).....	.....0	.....0

**SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	.....0	.....23
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	.....	.....
2.2 Additional investment made after acquisition.....	.....	.....
3. Capitalized deferred interest and other.....	.....	.....
4. Accrual of discount.....	.....	.....
5. Unrealized valuation increase (decrease).....	.....	.....
6. Total gain (loss) on disposals.....	.....13	.....13
7. Deduct amounts received on disposals.....	.....	.....36
8. Deduct amortization of premium and depreciation.....	.....	.....
9. Total foreign exchange change in book/adjusted carrying value.....	.....	.....
10. Deduct current year's other-than-temporary impairment recognized.....	.....	.....
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	.....0	.....0
12. Deduct total nonadmitted amounts.....	.....	.....
13. Statement value at end of current period (Line 11 minus Line 12).....	.....0	.....0

**SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	.....6,680,392	.....6,162,675
2. Cost of bonds and stocks acquired.....	.....1,091,337	.....2,642,390
3. Accrual of discount.....	.....1,026	.....5,043
4. Unrealized valuation increase (decrease).....	.....9,608	.....8,584
5. Total gain (loss) on disposals.....	.....(1,871)	.....12,429
6. Deduct consideration for bonds and stocks disposed of.....	.....1,163,086	.....2,098,639
7. Deduct amortization of premium.....	.....17,919	.....52,090
8. Total foreign exchange change in book/adjusted carrying value.....	.....	.....
9. Deduct current year's other-than-temporary impairment recognized.....	.....	.....
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	.....6,599,487	.....6,680,392
11. Deduct total nonadmitted amounts.....	.....	.....
12. Statement value at end of current period (Line 10 minus Line 11).....	.....6,599,487	.....6,680,392

**SCHEDULE D - PART 1B**

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. NAIC 1 (a).....	5,645,532	605,520	475,010	(6,395)	5,645,532	5,769,647		5,758,798
2. NAIC 2 (a).....	921,021			(1,703)	921,021	919,318		855,166
3. NAIC 3 (a).....						0		
4. NAIC 4 (a).....						0		
5. NAIC 5 (a).....						0		
6. NAIC 6 (a).....						0		
7. Total Bonds.....	6,566,553	605,520	475,010	(8,098)	6,566,553	6,688,965	0	6,613,964
<b>PREFERRED STOCK</b>								
8. NAIC 1.....						0		
9. NAIC 2.....						0		
10. NAIC 3.....						0		
11. NAIC 4.....						0		
12. NAIC 5.....						0		
13. NAIC 6.....						0		
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	6,566,553	605,520	475,010	(8,098)	6,566,553	6,688,965	0	6,613,964

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$....89,479; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

**HOME AND FARM INSURANCE COMPANY**  
**SCHEDULE DA - PART 1**

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999.....	89,479	.XXX.....	.89,479	.69	

**SCHEDULE DA - VERIFICATION**

Short-Term Investments

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	.27,163	.517,833
2. Cost of short-term investments acquired.....	.724,996	.2,368,762
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....	.662,680	.2,859,432
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	.89,479	.27,163
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	.89,479	.27,163

**Sch. DB - Pt. A - Verification**  
**NONE**

**Sch. DB - Pt. B - Verification**  
**NONE**

**Sch. DB - Pt. C - Sn. 1**  
**NONE**

**Sch. DB - Pt. C - Sn. 2**  
**NONE**

**Sch. DB - Verification**  
**NONE**

**Sch. E - Verification**  
**NONE**

**Sch. A - Pt. 2**  
**NONE**

**Sch. A - Pt. 3**  
**NONE**

**Sch. B - Pt. 2**  
**NONE**

**Sch. B - Pt. 3**  
**NONE**

**Sch. BA - Pt. 2**  
**NONE**

**Sch. BA - Pt. 3**  
**NONE**

**SCHEDULE D - PART 3**

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator (a)
<b>Bonds - U.S. Government</b>									
912828 X8 8	US TREASURY N/B.....		06/02/2017.....	BARCLAYS AMERICAN.....		142,592	140,000	208	1.....
0599999. Total - Bonds - U.S. Government.....						142,592	140,000	208	XXX.....
<b>Bonds - Industrial and Miscellaneous</b>									
02582J HG 8	AMXCA 2017-4 A.....		05/22/2017.....	RBCCM.....		99,984	100,000		1FE.....
0258M0 EG 0	AMERICAN EXPRESS CREDIT.....		06/09/2017.....	SUNTRUST.....		101,109	100,000	758	1FE.....
23242M AD 3	CWL 2006-S3 A4.....		06/30/2017.....	Par Adjustment.....		.47	.47		1FM.....
3899999. Total - Bonds - Industrial and Miscellaneous.....						201,140	200,047	758	XXX.....
8399997. Total - Bonds - Part 3.....						343,732	340,047	966	XXX.....
8399999. Total - Bonds.....						343,732	340,047	966	XXX.....
<b>Common Stocks - Money Market Mutual Funds</b>									
922906 30 0	VANGUARD FED MONEY MKT.....		04/28/2017.....	US BANK.....		.490		XXX	L.....
9399999. Total - Common Stocks - Money Market Mutual Funds.....						0	XXX	0	XXX.....
9799997. Total - Common Stocks - Part 3.....						0	XXX	0	XXX.....
9799999. Total - Common Stocks.....						0	XXX	0	XXX.....
9899999. Total - Preferred and Common Stocks.....						0	XXX	0	XXX.....
9999999. Total - Bonds, Preferred and Common Stocks.....						343,732	XXX	966	XXX.....

(a) For all common stock bearing NAIC market indicator "U" provide the number of such issues:.....0.

QE04

**SCHEDULE D - PART 4**

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1 CUSIP Identification	2 Description	3 F o r e i g n Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consideration	7 Par Value	8 Actual Cost	9 Prior Year Book/Adjusted Carrying Value	10 Unrealized Valuation Increase (Decrease)	Change in Book/Adjusted Carrying Value					16 Book/Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest / Stock Dividends Received During Year	21 Stated Contractual Maturity Date	22 NAIC Designation or Market Indicator (a)	
										11 Current Year's Amortization / Accretion	12 Other-Than-Temporary Impairment Recognized	13 Current Year's Other-Than-Temporary Impairment Recognized	14 Total Change in B/A.C.V. (11+12-13)	15 Total Foreign Exchange Change in B/A.C.V.								
36290S CK 5	GNMA #615774	.. 06/01/2017.	MBS PMT.			.739	.739	.720	.738		1		1		.739				0	12	09/15/2018.	1.....
38376G ZU 7	GNMA 2011-9 C.	.. 06/01/2017.	MBS PMT.			.635	.635	.661	.641		(7)		(7)		.635				0	9	09/16/2041.	1.....
38378T AL 4	GNMA 2013-71 LA.	.. 06/01/2017.	MBS PMT.			1,509	1,509	1,549	1,511		(3)		(3)		1,509				0	19	10/20/2042.	1.....
0599999.	Total - Bonds - U.S. Government.					2,883	2,883	2,930	2,890	0	(9)	0	(9)	0	2,883	0	0	0	40	XXX	XXX	
<b>Bonds - U.S. Government</b>																						
3128KT D8 0	FHLMC A62827	.. 06/01/2017.	MBS PMT.			23	23	23	23					0	23				0	1	06/01/2037.	1.....
3128M5 GU 8	FHLMC G03511	.. 06/01/2017.	MBS PMT.			7	7	7	7					0	7				0		10/01/2037.	1.....
3128MB XH 5	FHLMC G13180	.. 06/01/2017.	MBS PMT.			476	476	473	476					0	476				0	12	06/01/2023.	1.....
3128MC FJ 9	FHLMC G13569	.. 06/01/2017.	MBS PMT.			628	628	646	629		(1)		(1)		628				0	13	04/01/2024.	1.....
3128MC GH 2	FHLMC G13600	.. 06/01/2017.	MBS PMT.			380	380	390	381					0	380				0	7	06/01/2024.	1.....
3128MJ V2 3	FHLMC G08632	.. 06/01/2017.	MBS PMT.			2,414	2,414	2,531	2,420		(7)		(7)		2,414				0	36	03/01/2045.	1.....
3128MJ XK 1	FHLMC G08681	.. 06/01/2017.	MBS PMT.			2,239	2,239	2,335	2,243		(5)		(5)		2,239				0	33	12/01/2045.	1.....
3128MM KX 0	FHLMC G18309	.. 06/01/2017.	MBS PMT.			339	339	344	339					0	339				0	6	05/01/2024.	1.....
3128PQ NX 5	FHLMC J11306	.. 06/01/2017.	MBS PMT.			656	656	672	657		(1)		(1)		656				0	10	12/01/2024.	1.....
3128PR JW 0	FHLMC J12077	.. 06/01/2017.	MBS PMT.			394	394	410	394		(1)		(1)		394				0	7	04/01/2025.	1.....
3128PS L9 6	FHLMC J13052	.. 06/01/2017.	MBS PMT.			1,439	1,439	1,479	1,441		(2)		(2)		1,439				0	21	09/01/2025.	1.....
3132L6 AK 7	FHLMC V80910	.. 06/01/2017.	MBS PMT.			2,265	2,265	2,410	2,274		(8)		(8)		2,265				0	37	12/01/2043.	1.....
3136A1 X8 3	FNMA 2011-115 KE	.. 06/01/2017.	MBS PMT.			721	721	730	721					0	721				0	8	10/25/2039.	1.....
3136AB LF 8	FNMA 2012-148 KB	.. 06/01/2017.	MBS PMT.			2,641	2,641	2,679	2,642		(2)		(2)		2,641				0	23	03/25/2042.	1.....
3136AG DN 9	FNMA 2013-97 EK	.. 06/01/2017.	MBS PMT.			1,402	1,402	1,446	1,404		(2)		(2)		1,402				0	18	11/25/2028.	1.....
3136AG QM 7	FNMA 2013-M13 A	.. 06/01/2017.	MBS PMT.			2,065	2,065	2,060	2,064					0	2,065				0	14	05/25/2018.	1.....
3136AH 6H 8	FNMA 2014-6 VA	.. 06/26/2017.	VARIOUS			34,129	33,748	34,001	33,930		5		5		33,936		193	193	429	07/25/2025.	1.....	
3136AK XS 7	FNMA 2014-M9 ASQ2	.. 04/01/2017.	MBS PMT.			2,180	2,180	2,202	2,185		(5)		(5)		2,180				0	11	04/25/2017.	1.....
3136AP EE 8	FNMA 2015-47 GA	.. 06/01/2017.	MBS PMT.			1,756	1,756	1,804	1,759		(3)		(3)		1,756				0	22	06/25/2044.	1.....
31371L AB 5	FNMA #254802	.. 06/01/2017.	MBS PMT.			276	276	282	277					0	276				0	5	07/01/2018.	1.....
31371L AP 4	FNMA #254814	.. 06/01/2017.	MBS PMT.			240	240	241	240					0	240				0	4	07/01/2018.	1.....
31371L BH 1	FNMA #254840	.. 06/01/2017.	MBS PMT.			456	456	463	456					0	456				0	8	08/01/2018.	1.....
31371L DY 2	FNMA #254919	.. 06/01/2017.	MBS PMT.			334	334	328	334					0	334				0	6	09/01/2018.	1.....
3137A6 TB 8	FHLMC 3812 LV	.. 06/01/2017.	MBS PMT.			6,022	6,022	6,466	6,061		(39)		(39)		6,022				0	110	04/15/2022.	1.....
3137B0 3W 2	FHLMC K502 A2	.. 06/01/2017.	MBS PMT.			9,627	9,627	9,690	9,633		(6)		(6)		9,627				0	69	08/25/2017.	1.....
3137BD CQ 7	FHLMC 4377 LC	.. 06/01/2017.	MBS PMT.			1,572	1,572	1,629	1,576		(4)		(4)		1,572				0	20	04/15/2039.	1.....
3138EG HR 8	FNMA #AL0239	.. 06/01/2017.	MBS PMT.			2,119	2,119	2,122	2,119					0	2,119				0	33	04/01/2041.	1.....
3138YR 6Y 9	FNMA #AZ0886	.. 06/01/2017.	MBS PMT.			1,916	1,916	1,986	1,920		(4)		(4)		1,916				0	24	07/01/2030.	1.....
31398K A5 9	FHLMC 3589 PA	.. 06/01/2017.	MBS PMT.			278	278	286	278					0	278				0	5	09/15/2039.	1.....
31402F B5 3	FNMA #727360	.. 06/01/2017.	MBS PMT.			528	528	536	528					0	528				0	13	08/01/2018.	1.....
31402H RC 7	FNMA #729583	.. 06/01/2017.	MBS PMT.			301	301	300	301					0	301				0	6	07/01/2018.	1.....
31410G 5Q 2	FNMA #889255	.. 06/01/2017.	MBS PMT.			230	230	232	230					0	230				0	5	03/01/2023.	1.....
31414F GG 0	FNMA #964699	.. 06/01/2017.	MBS PMT.			357	357	367	357					0	357				0	9	08/01/2023.	1.....
31416W 6G 2	FNMA #AB1770	.. 06/01/2017.	MBS PMT.			770	770	738	768		2		2		770				0	9	11/01/2025.	1.....
31417S BP 4	FNMA #AC5445	.. 06/01/2017.	MBS PMT.			737	737	796	740		(3)		(3)		737				0	16	11/01/2039.	1.....
31417Y TC 1	FNMA #MA0546	.. 06/01/2017.	MBS PMT.			1,018	1,018	1,055	1,021		(3)		(3)		1,018				0	15	10/01/2025.	1.....

**SCHEDULE D - PART 4**

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	For eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase (Decrease)	Current Year's Amortization / Accretion	Other-Than- Temporary Impairment Recognized	Total Change in B/A.C.V. (11+12-13)	Total Foreign Exchange Change in B/A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)
31418A AK 4	FNMA #MA0909.....		06/26/2017.	VARIOUS.....		32,203	31,319	32,606	32,124	(196)		(196)		31,927		276	276	504	11/01/2021.	1.....	
3199999.	Total - Bonds - U.S. Special Revenue and Special Assessments.				115,138	113,873	116,765	114,952	0	(285)	0	(285)	0	114,669	0	469	469	1,569	XXX	XXX	
<b>Bonds - Industrial and Miscellaneous</b>																					
14041N EY 3	COMET 2015-A5 A5.....		05/22/2017.	HSBC.....		75,094	75,000	74,996	74,998		1		1		74,999		95	95	533	05/17/2021.	1FE.....
23242M AD 3	CWL 2006-S3 A4.....		06/26/2017.	MBS PMT.....		26	26	18	26				0		26		0	0	1	01/25/2029.	1FM.....
34530Q AD 2	FORDO 2015-A A3.....		06/09/2017.	VARIOUS.....		17,307	17,318	17,317	17,320		(2)		(2)		17,318		(11)	(11)	106	09/15/2019.	1FE.....
36962G 3H 5	GENERAL ELEC CAP CORP.....		06/02/2017.	JP MORGAN.....		50,570	50,000	54,476	51,513		(928)		(928)		50,585		(15)	(15)	2,047	09/15/2017.	1FE.....
58772P AD 0	MBART 2015-1 A3.....		06/16/2017.	MBS PMT.....		5,855	5,855	5,854	5,852		3		3		5,855		0	0	37	12/16/2019.	1FE.....
65473D AD 4	NALT 2015-A A3.....		06/15/2017.	MBS PMT.....		22,915	22,915	22,913	22,913		2		2		22,915		0	0	132	06/15/2018.	1FE.....
3899999.	Total - Bonds - Industrial and Miscellaneous.				171,767	171,114	175,572	172,622	0	(924)	0	(924)	0	171,698	0	69	69	2,856	XXX	XXX	
8399997.	Total - Bonds - Part 4.....				289,788	287,870	295,267	290,464	0	(1,218)	0	(1,218)	0	289,250	0	538	538	4,465	XXX	XXX	
8399999.	Total - Bonds.....				289,788	287,870	295,267	290,464	0	(1,218)	0	(1,218)	0	289,250	0	538	538	4,465	XXX	XXX	
<b>Common Stocks - Mutual Funds</b>																					
256210 10 5	DODGE & COX INCOME FD.....		05/17/2017.	US BANK.....	1,729,785	23,872	XXX	23,288	23,318	(220)			(220)		23,288		584	584	172	XXX	L.....
577125 10 7	MATTHEWS ASIA DIV.....		05/17/2017.	US BANK.....	1,566,361	27,897	XXX	21,169	24,277	(3,144)			(3,144)		21,169		6,728	6,728	.37	XXX	L.....
921908 20 8	VANGUARD PREC MTL & MIN.....		05/17/2017.	US BANK.....	2,274,855	23,499	XXX	38,797	21,379	17,412			17,412		38,797		(15,297)	(15,297)	5	XXX	L.....
921935 10 2	VANGUARD WELLINGTON INV.....		05/17/2017.	US BANK.....	609,827	24,631	XXX	19,384	23,680	(4,440)			(4,440)		19,384		5,247	5,247	144	XXX	L.....
9299999.	Total - Common Stocks - Mutual Funds.				99,899	XXX	102,638	92,654	9,608	0	0	0	0	102,638	0	(2,738)	(2,738)	358	XXX	XXX	
<b>Common Stocks - Money Market Mutual Funds</b>																					
922906 30 0	VANGUARD FED MONEY MKT.....		05/31/2017.	US BANK.....	939,010	939	XXX	939	937				0	939		0	0	18	XXX	L.....	
9399999.	Total - Common Stocks - Money Market Mutual Funds.					939	XXX	939	937	0	0	0	0	939	0	0	0	0	18	XXX	XXX
9799997.	Total - Common Stocks - Part 4.....				100,838	XXX	103,577	93,591	9,608	0	0	0	0	103,577	0	(2,738)	(2,738)	.376	XXX	XXX	
9799999.	Total - Common Stocks.....				100,838	XXX	103,577	93,591	9,608	0	0	0	0	103,577	0	(2,738)	(2,738)	.376	XXX	XXX	
9899999.	Total - Preferred and Common Stocks.....				100,838	XXX	103,577	93,591	9,608	0	0	0	0	103,577	0	(2,738)	(2,738)	.376	XXX	XXX	
9999999.	Total - Bonds, Preferred and Common Stocks.....				390,626	XXX	398,844	384,055	9,608	(1,218)	0	0	8,390	0	392,827	0	(2,200)	(2,200)	4,841	XXX	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues: 1.

**Sch. DB - Pt. A - Sn. 1**  
**NONE**

**Sch. DB - Pt. B - Sn. 1**  
**NONE**

**Sch. DB - Pt. D - Sn. 1**  
**NONE**

**Sch. DB - Pt. D - Sn. 2**  
**NONE**

**Sch. DL - Pt. 1**  
**NONE**

**Sch. DL - Pt. 2**  
**NONE**

**HOME AND FARM INSURANCE COMPANY**  
**SCHEDULE E - PART 1 - CASH**

## Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	

**Open Depositories**

Fifth Third Bank (K).....	Piqua, OH.....							XXX
MainSource Bank.....	Troy, OH.....							XXX
Unity National Bank.....	Piqua, OH.....							XXX
MainSource Bank.....	Troy, OH.....							XXX
Unity National Bank.....	Piqua, OH.....							XXX
Unity National Bank.....	Piqua, OH.....							XXX
Fifth Third Bank (S).....	Piqua, OH.....							XXX
MainSource Bank.....	Troy, OH .....			.1				XXX
0199999. Total Open Depositories.....	XXX	XXX	.1	.0	325,397	434,395	274,954	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	.1	.0	325,397	434,395	274,954	XXX
0599999. Total Cash.....	XXX	XXX	.1	.0	325,397	434,395	274,954	XXX

**SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Show Investments Owned End of Current Quarter

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
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**NONE**