



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2017
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 OHIO, State of Domicile or Port of Entry OH

Country of Domicile United States of America

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 David Anthony Siebenburgen, 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	John Richard DeLucia, Mr. #, Vice President Claims Operations	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 Slone 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

County of Crawford

SS:

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? Yes [X] No []

b. If no,

1. State the amendment number.....

2. Date filed

3. Number of pages attached.....

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual Insurance Company

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	64,641,188		64,641,188	63,541,120
2. Stocks:				
2.1 Preferred stocks				
2.2 Common stocks	200,928,820	26,053	200,902,767	185,811,979
3. Mortgage loans on real estate:				
3.1 First liens				
3.2 Other than first liens.....				
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)	3,996,380		3,996,380	4,106,514
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$6,471,798), cash equivalents (\$) and short-term investments (\$2,344,264)	8,816,062		8,816,062	6,501,450
6. Contract loans (including \$ premium notes)				
7. Derivatives				
8. Other invested assets				
9. Receivables for securities				
10. Securities lending reinvested collateral assets				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	278,382,450	26,053	278,356,397	259,961,063
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	619,765		619,765	512,675
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	1,911,441	51,276	1,860,165	545,347
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	13,311,648		13,311,648	13,087,349
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	16,845		16,845	1,064
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	2,196,834		2,196,834	2,120,265
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software	1,581,732	1,581,732		
21. Furniture and equipment, including health care delivery assets (\$)	246,648	246,648		
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	549,401	210,829	338,572	416,704
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	298,816,764	2,116,538	296,700,226	276,644,467
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	298,816,764	2,116,538	296,700,226	276,644,467
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)				
2501. Goodwill	338,572		338,572	416,704
2502. Prepaid Expenses	210,829	210,829		
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	549,401	210,829	338,572	416,704

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual Insurance Company

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$10,340,910)	21,968,585	22,644,404
2. Reinsurance payable on paid losses and loss adjustment expenses		
3. Loss adjustment expenses	5,472,009	5,394,899
4. Commissions payable, contingent commissions and other similar charges	1,789,953	1,834,977
5. Other expenses (excluding taxes, licenses and fees)	135,363	90,423
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	20,797	39,352
7.1 Current federal and foreign income taxes (including \$5,974 on realized capital gains (losses))	2,876,255	1,200,354
7.2 Net deferred tax liability		
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$76,483,529 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)	28,179,877	26,235,477
10. Advance premium	557,704	393,091
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	12,726	44,172
13. Funds held by company under reinsurance treaties	163,772	131,583
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		215
16. Provision for reinsurance (including \$ certified)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates	635,234	1,009,524
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)	61,812,275	59,018,471
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	61,812,275	59,018,471
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)	234,887,951	217,625,996
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)	234,887,951	217,625,996
38. Totals (Page 2, Line 28, Col. 3)	296,700,226	276,644,467
DETAILS OF WRITE-INS		
2501.		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)		
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)		
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)		

STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$48,943,643)	46,255,468	40,983,983	55,650,975
1.2 Assumed (written \$118,709,386)	114,092,991	111,251,707	148,979,319
1.3 Ceded (written \$122,812,973)	117,452,803	111,472,215	149,842,019
1.4 Net (written \$44,840,056)	42,895,656	40,763,475	54,788,275
DEDUCTIONS:			
2. Losses incurred (current accident year \$24,435,485):			
2.1 Direct	22,960,571	22,459,991	30,313,969
2.2 Assumed	55,748,731	58,374,092	76,562,167
2.3 Ceded	57,470,459	59,014,012	78,026,776
2.4 Net	21,238,843	21,820,071	28,849,360
3. Loss adjustment expenses incurred	3,574,512	3,976,743	4,961,609
4. Other underwriting expenses incurred	14,723,308	14,084,463	18,842,473
5. Aggregate write-ins for underwriting deductions			
6. Total underwriting deductions (Lines 2 through 5)	39,536,663	39,881,277	52,653,442
7. Net income of protected cells			
8. Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	3,358,993	882,198	2,134,833
INVESTMENT INCOME			
9. Net investment income earned	1,179,546	1,036,582	1,388,537
10. Net realized capital gains (losses) less capital gains tax of \$5,974	12,182	110,839	100,088
11. Net investment gain (loss) (Lines 9 + 10)	1,191,728	1,147,421	1,488,625
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$40,914 amount charged off \$254,554)	(213,640)	(173,018)	(257,743)
13. Finance and service charges not included in premiums	222,375	597,205	807,495
14. Aggregate write-ins for miscellaneous income	246,414	244,941	326,045
15. Total other income (Lines 12 through 14)	255,149	669,128	875,797
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	4,805,870	2,698,747	4,499,255
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)	4,805,870	2,698,747	4,499,255
19. Federal and foreign income taxes incurred	1,733,998	928,811	1,150,678
20. Net income (Line 18 minus Line 19)(to Line 22)	3,071,872	1,769,936	3,348,577
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	217,625,996	201,340,672	201,340,672
22. Net income (from Line 20)	3,071,872	1,769,936	3,348,577
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$316,235	14,254,734	7,879,002	13,769,702
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax	392,804	677,165	287,108
27. Change in nonadmitted assets	(338,467)	(1,295,037)	(1,120,063)
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	(118,988)		
38. Change in surplus as regards policyholders (Lines 22 through 37)	17,261,955	9,031,066	16,285,324
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	234,887,951	210,371,738	217,625,996
DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page			
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)			
1401. Rental and Related Services	244,562	244,562	326,083
1402. Other Expense (Income)	1,852	379	(38)
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	246,414	244,941	326,045
3701. Correction of prior period error	(118,988)		
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page			
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)	(118,988)		

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	43,455,969	41,049,881	55,426,580
2. Net investment income	1,769,376	1,587,895	2,183,498
3. Miscellaneous income	255,149	669,128	875,797
4. Total (Lines 1 to 3)	45,480,494	43,306,904	58,485,875
5. Benefit and loss related payments	21,930,443	20,263,514	27,304,412
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	18,391,892	18,862,931	24,912,499
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$5,974 tax on capital gains (losses)	64,071	1,416,126	1,416,126
10. Total (Lines 5 through 9)	40,386,406	40,542,571	53,633,037
11. Net cash from operations (Line 4 minus Line 10)	5,094,088	2,764,333	4,852,838
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	6,927,476	7,145,906	12,930,554
12.2 Stocks		1,125,206	1,125,205
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	(2)	(1)	(1)
12.7 Miscellaneous proceeds			
12.8 Total investment proceeds (Lines 12.1 to 12.7)	6,927,474	8,271,111	14,055,758
13. Cost of investments acquired (long-term only):			
13.1 Bonds	8,447,029	8,892,792	15,654,466
13.2 Stocks	521,579	2,333,444	2,963,906
13.3 Mortgage loans			
13.4 Real estate	66,210	43,029	43,029
13.5 Other invested assets			
13.6 Miscellaneous applications			
13.7 Total investments acquired (Lines 13.1 to 13.6)	9,034,818	11,269,265	18,661,401
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)	(2,107,344)	(2,998,154)	(4,605,643)
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)	(672,132)	212,633	431,895
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(672,132)	212,633	431,895
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)	2,314,612	(21,188)	679,090
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	6,501,450	5,822,360	5,822,360
19.2 End of period (Line 18 plus Line 19.1)	8,816,062	5,801,172	6,501,450

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

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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 and surplus between NAIC Statutory Accounting Practices and practices prescribed and permitted by the State of Ohio is shown below:

	SSAP #	F/S Page	F/S Line #	09/30/2017	12/31/2016
NET INCOME					
(1) Ohio Mutual Insurance Company state basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 3,071,872	\$ 3,348,577
(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	\$ 3,071,872	\$ 3,348,577
SURPLUS					
(5) Ohio Mutual Insurance Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 234,887,951	\$ 217,625,996
(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	\$ 234,887,951	\$ 217,625,996

B. Use of Estimates in the Preparation of the Financial Statements – No Change

C. Accounting Policy – No Change

D. Going Concern

Management has evaluated the financial statements and determined that there are no going concern issues to report.

2. Accounting Changes and Corrections of Errors – No Change

3. Business Combinations and Goodwill – No Change

4. Discontinued Operations – No Change

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 within the loan backed securities portfolio for the quarter ended September 30, 2017.
- (4) All temporarily impaired securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss in 2017 are as follows:
 - a. The aggregate amount of unrealized losses:

1. Less than 12 Months	\$ (63,943)
2. 12 Months or Longer	\$ (28,436)
 - b. The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months	\$ 5,012,663
2. 12 Months or Longer	\$ 1,411,820

NOTES TO FINANCIAL STATEMENTS

- (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 within the loaned backed securities portfolio 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 and/or securities lending transactions.
 I. The Company has no Working Capital Finance Investments.
 J. The Company has no Offsetting and Netting of Assets and Liabilities.

6. Joint Ventures, Partnerships and Limited Liability Companies – No Change

7. Investment Income – No Change

8. Derivative Instruments – No Change

9. Income Taxes – No Change

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 2017, the Company reimbursed its subsidiary, United Ohio, \$12,049,900, and received from its subsidiary, Casco, \$842,267, under the terms of the Reinsurance Pooling Agreement between the entities.
- D. As of September 30, 2017, the Company owes United Ohio \$1,030,948 and Casco \$21,975 under the terms of the Reinsurance Pooling Agreement. As of September 30, 2017, United Ohio owes the Company \$417,689 under the terms of the Cost Sharing Agreement.
- E. The Company has no guarantees or undertakings at September 30, 2017.
- 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 \$172,888,703.

Based on the Company's ownership percentage of United Ohio, the statutory statement value of United Ohio assets and liabilities as of September 30, 2017 were \$338,519,216 and \$165,630,513, 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

NOTES TO FINANCIAL STATEMENTS

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	25,051	-	25,051
United Premium Budget Service Inc.	100.0	1,002	-	1,002
Total SSAP No. 97 8b(ii) Entities	XXX	26,053	-	26,053
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	26,053	-	26,053
f. Aggregate Total (a+e)	XXX	26,053	-	26,053

(2) NAIC Filing Response Information

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

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 – No Change

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans – No Change

13. Capital and Surplus, Dividend Restrictions and Quasi-reorganizations – No Change

14. Liabilities, Contingencies and Assessments – No Change

15. Leases – No Change

16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk – No Change

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 – No Change

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators – No Change

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	\$ -	\$ 249,007	\$ -	\$ 249,007
Common Stock				
Industrial and Misc	11,580,199	-	338,878	11,919,077
Mutual Funds	1,593,096	-	-	1,593,096
Total Common Stock	\$ 13,173,295	\$ -	\$ 338,878	\$ 13,512,173
Derivative assets	-	-	-	-
Total Assets at Fair Value	\$ 13,173,295	\$ 249,007	\$ 338,878	\$ 13,761,180
b. Liabilities at fair value				
Derivative liabilities	\$ -	\$ -	\$ -	\$ -
Total Liabilities at Fair Value	\$ -	\$ -	\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

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

	Balance at 12/31/2016	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 and settlements	Balance at 09/30/2017
Common Stock - Ind & Misc.	\$ 338,878	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 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 September 30, 2017, 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.

C. The Aggregate Fair Value for all Financial Instruments and the Level within the Fair Value Hierarchy

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Bonds	249,007	249,007	-	249,007	-	-
Common Stocks	13,512,173	13,512,173	13,173,295	-	338,878	-

D. Not Practicable to Estimate Fair Value

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

21. Other Items – No Change

22. Events Subsequent – None

23. Reinsurance – No Change

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination – No Change

25. Change in Incurred Losses and Loss Adjustment Expenses

The Company's portion of pooled loss reserves as of December 31, 2016 was \$28.0 million. On a pooled basis as of September 30, 2017, \$9.3 million has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Pooled reserves remaining for prior years are now \$14.9 million. There has been a \$3.8 million favorable prior-year development, on a pooled basis, from December 31, 2016 to September 30, 2017 as a result of re-estimation of unpaid claims and claim adjustment expenses principally on homeowners, farmowners, and personal auto liability lines of insurance. The decrease is generally the result of 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 any retrospectively rated policies which would be included in the favorable development.

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:

	09/30/2017	12/31/2016
Premium earned assumed by Ohio Mutual from United Ohio and Casco	\$ 114,060,315	\$ 148,940,274
Premium earned ceded back to United Ohio and Casco	(115,977,145)	(148,131,263)
Change in premium earned due to pooling	<u>\$ (1,916,830)</u>	<u>\$ 809,011</u>
Losses incurred assumed by Ohio Mutual from United Ohio and Casco	\$ 55,748,731	\$ 76,562,167
Losses incurred ceded back to United Ohio and Casco	(57,423,539)	(78,000,122)
Change in losses incurred due to pooling	<u>\$ (1,674,808)</u>	<u>\$ (1,437,955)</u>
Net loss adjustment expenses assumed by Ohio Mutual	\$ 2,702,304	\$ 3,914,792
Net other underwriting expenses assumed by Ohio Mutual	6,302,383	9,164,515
Change in expenses incurred due to pooling	<u>\$ 9,004,687</u>	<u>\$ 13,079,307</u>
Change in income before taxes due to pooling	<u>\$ (9,246,709)</u>	<u>\$ (10,832,341)</u>

27. Structured Settlements – No Change

28. Health Care Receivables – No Change

29. Participating Policies – No Change

30. Premium Deficiency Reserves – No Change

31. High Deductibles – No Change

32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses – No Change

33. Asbestos/Environmental Reserves – No Change

34. Subscriber Savings Accounts – No Change

NOTES TO FINANCIAL STATEMENTS

35. Multiple Peril Crop Insurance – No Change

36. Financial Guaranty Insurance – No Change

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual 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 [X] No []

2.2

If yes, date of change:

08/09/2017

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?
If yes, complete Schedule Y, Parts 1 and 1A.

Yes [X] No []

3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes [] No [X]

3.3

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

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 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

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 [] N/A [X]

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).

05/19/2017

6.4

By what department or departments?
Ohio Department of Insurance

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 [X] N/A []

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 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

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual Insurance Company

GENERAL INTERROGATORIES

- 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? (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships; (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity; (c) Compliance with applicable governmental laws, rules and regulations; (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and (e) Accountability for adherence to the code.

Yes [X] No []
- 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 [] No [X]
- 10.2

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

\$

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:

\$
13.

Amount of real estate and mortgages held in short-term investments:

\$
- 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:
- | | 1 | 2 |
|---|---|--|
| | Prior Year-End Book/Adjusted Carrying Value | Current Quarter Book/Adjusted Carrying Value |
| 14.21 Bonds | \$ | \$ |
| 14.22 Preferred Stock | \$ | \$ |
| 14.23 Common Stock | \$173,749,208 | \$187,416,648 |
| 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) | \$173,749,208 | \$187,416,648 |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | \$ | \$ |
- 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? If no, attach a description with this statement.

Yes [] No []

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual Insurance Company

GENERAL INTERROGATORIES

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1

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

\$
- 16.2

Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

\$
- 16.3

Total payable for securities lending reported on the liability page.

\$

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 ☒ No ☐

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

1 Name of Custodian(s)	2 Custodian Address
Fifth Third Bank	38 Fountain Square Plaza, Cincinnati, Ohio 45263

- 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 Name(s)	2 Location(s)	3 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 ☒

- 17.4 If yes, give full information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 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 Name of Firm or Individual	2 Affiliation
New England Asset Management	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 ☒ 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 ☐ 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 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

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes ☒ No ☐

- 18.2 If no, list exceptions:

GENERAL INTERROGATORIES

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?
If yes, attach an explanation.

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

Yes [] No [X]
- 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:

			TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
1	2	3	4	5	6	7	8	9	10	11
Line of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL
TOTAL										

5.

Operating Percentages:

5.1 A&H loss percent(7.341)%

5.2 A&H cost containment percent%

5.3 A&H expense percent excluding cost containment expenses5.793%
- 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\$.....
- 6.3

Do you act as an administrator for health savings accounts?

Yes [] No [X]
- 6.4

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

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual Insurance Company

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

[illegible]

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual Insurance Company

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

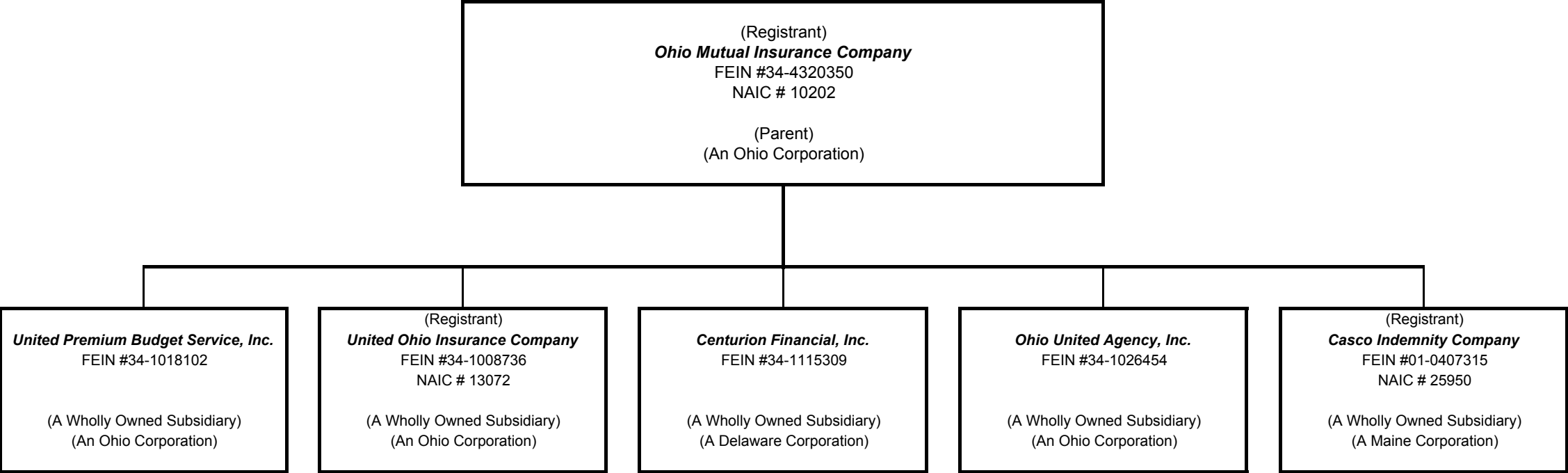
Current Year to Date - Allocated by States and Territories							
States, etc.	1 Active Status	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
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	48,943,643	43,653,902	23,057,228	19,864,992	19,605,753	18,891,887
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	48,943,643	43,653,902	23,057,228	19,864,992	19,605,753	18,891,887
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 (other than their state of domicile - see DSLI); (D) DSLI - Domestic Surplus Lines Insurer (DSLI) - 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.

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

Ohio Mutual Insurance Group



STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual Insurance Company

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

[illegible]

Asterisk	Explanation

PART 1 - LOSS EXPERIENCE

Line 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	2, 134, 032	538, 683	25. 2	20. 1
2.	Allied Lines				
3.	Farmowners multiple peril	1, 921, 328	371, 320	19. 3	18. 3
4.	Homeowners multiple peril	10, 338, 073	4, 733, 509	45. 8	48. 5
5.	Commercial multiple peril				
6.	Mortgage guaranty				
8.	Ocean marine				
9.	Inland marine	12, 295	1, 190	9. 7	
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	193, 259	22, 611	11. 7	35. 4
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	16, 817, 657	9, 732, 543	57. 9	67. 2
19.3,19.4	Commercial auto liability				
21.	Auto physical damage	14, 769, 957	7, 553, 586	51. 1	54. 9
22.	Aircraft (all perils)				
23.	Fidelity				
24.	Surety				
26.	Burglary and theft	68, 867	7, 129	10. 4	32. 6
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				
35.	Totals	46, 255, 468	22, 960, 571	49. 6	54. 8
DETAILS OF WRITE-INS					
3401.	.....			
3402.	.....			
3403.	.....			
3498.	Summary of remaining write-ins for Line 34 from overflow page				
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)				

PART 2 - DIRECT PREMIUMS WRITTEN

Line of Business		1	2	3
		Current Quarter	Current Year to Date	Prior Year Year to Date
1.	Fire	560, 137	1, 767, 215	1, 851, 069
2.	Allied Lines			
3.	Farmowners multiple peril	512, 543	2, 324, 857	1, 427, 961
4.	Homeowners multiple peril	4, 323, 494	11, 480, 761	9, 950, 866
5.	Commercial multiple peril			
6.	Mortgage guaranty			
8.	Ocean marine			
9.	Inland marine	3, 999	12, 906	13, 366
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	62, 891	192, 005	199, 869
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	6, 401, 881	17, 564, 335	16, 054, 586
19.3,19.4	Commercial auto liability			
21.	Auto physical damage	5, 690, 574	15, 535, 317	14, 085, 735
22.	Aircraft (all perils)			
23.	Fidelity			
24.	Surety			
26.	Burglary and theft	20, 547	66, 247	70, 450
27.	Boiler and machinery			
28.	Credit			
29.	International			
30.	Warranty			
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business			
35.	Totals	17, 576, 066	48, 943, 643	43, 653, 902
DETAILS OF WRITE-INS				
3401.	.....		
3402.	.....		
3403.	.....		
3498.	Summary of remaining write-ins for Line 34 from overflow page			
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)			

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual Insurance Company

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1+2)	2017 Loss and LAE Payments on Claims Reported as of Prior Year-End	2017 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2017 Loss and LAE Payments (Cols. 4+5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7+8+9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12)
1. 2014 + Prior	3,945	3,366	7,311	2,647	6	2,653	2,329	25	2,049	4,403	1,031	(1,286)	(255)
2. 2015	3,859	2,919	6,778	1,856	7	1,863	2,348	47	1,634	4,029	345	(1,231)	(886)
3. Subtotals 2015 + Prior	7,804	6,285	14,089	4,503	13	4,516	4,677	72	3,683	8,432	1,376	(2,517)	(1,141)
4. 2016	7,092	6,858	13,950	4,649	119	4,768	3,664	49	2,775	6,488	1,221	(3,915)	(2,694)
5. Subtotals 2016 + Prior	14,896	13,143	28,039	9,152	132	9,284	8,341	121	6,458	14,920	2,597	(6,432)	(3,835)
6. 2017	XXX	XXX	XXX	XXX	16,128	16,128	XXX	5,339	7,182	12,521	XXX	XXX	XXX
7. Totals	14,896	13,143	28,039	9,152	16,260	25,412	8,341	5,460	13,640	27,441	2,597	(6,432)	(3,835)
8. Prior Year-End Surplus As Regards Policyholders	217,626										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. 17.4	2. (48.9)	3. (13.7)
											Col. 13, Line 7 As a % of Col. 1 Line 8		
		4. (1.8)											

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual 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.

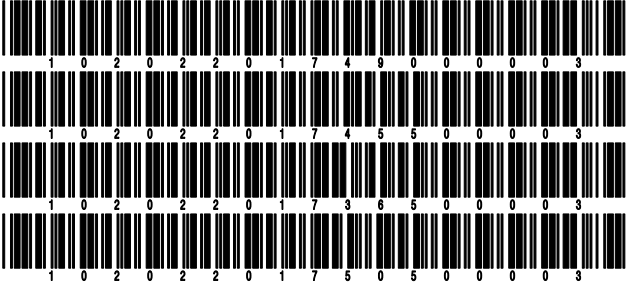
	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3. Will the Medicare Part D Coverage Supplement be filed with the state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

Explanations:

1.
2.
3.
4.

Bar Codes:

1. Trusteed Surplus Statement [Document Identifier 490]
2. Supplement A to Schedule T [Document Identifier 455]
3. Medicare Part D Coverage Supplement [Document Identifier 365]
4. Director and Officer Supplement [Document Identifier 505]



OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	4,106,514	4,303,560
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	66,210	43,029
2.2 Additional investment made after acquisition		
3. Current year change in encumbrances		
4. Total gain (loss) on disposals	(2,673)	
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	173,671	240,075
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	3,996,380	4,106,514
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)	3,996,380	4,106,514

SCHEDULE B - VERIFICATION

Mortgage Loans

	1	2
	Year to Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
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 investment and commitment fees		
9. Total foreign exchange change in book value/recorded investment including 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)		
12. Total valuation allowance		
13. Subtotal (Line 11 plus Line 12)		
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
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 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)		
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	249,379,150	231,138,779
2. Cost of bonds and stocks acquired	8,968,608	18,618,372
3. Accrual of discount	12,509	15,993
4. Unrealized valuation increase (decrease)	14,570,969	14,090,324
5. Total gain (loss) on disposals	20,831	150,337
6. Deduct consideration for bonds and stocks disposed of	6,927,476	14,055,759
7. Deduct amortization of premium	454,582	578,896
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)	265,570,009	249,379,150
11. Deduct total nonadmitted amounts	26,053	26,051
12. Statement value at end of current period (Line 10 minus Line 11)	265,543,956	249,353,099

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
BONDS								
1. NAIC 1 (a)	62,871,731	8,164,616	7,250,560	(148,182)	62,592,290	62,871,731	63,637,605	62,410,220
2. NAIC 2 (a)	3,347,506		250,000	(248,569)	3,596,003	3,347,506	2,848,937	3,359,593
3. NAIC 3 (a)	248,598			250,312	247,598	248,598	498,910	247,228
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	66,467,835	8,164,616	7,500,560	(146,439)	66,435,891	66,467,835	66,985,452	66,017,041
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	66,467,835	8,164,616	7,500,560	(146,439)	66,435,891	66,467,835	66,985,452	66,017,041

(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 \$ 2,344,264 ; NAIC 2 \$; NAIC 3 \$ NAIC 4 \$; NAIC 5 \$; NAIC 6 \$.

SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year-to-Date	Paid for Accrued Interest Year-to-Date
9199999 Totals	2,344,264	xxx	2,344,264		

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	1,476,227	486,514
2. Cost of short-term investments acquired	13,593,750	35,913,309
3. Accrual of discount		
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
6. Deduct consideration received on disposals	12,725,713	34,923,596
7. Deduct amortization of premium		
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	2,344,264	1,476,227
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	2,344,264	1,476,227

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of
Derivatives

N O N E

SCHEDULE E - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	999,694	2,099,945
2. Cost of cash equivalents acquired		999,657
3. Accrual of discount	288	91
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals	(2)	(1)
6. Deduct consideration received on disposals	999,980	2,099,998
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)		999,694
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)		999,694

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual Insurance Company

SCHEDULE A - PART 2

Showing All Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

1 Description of Property	Location		4 Date Acquired	5 Name of Vendor	6 Actual Cost at Time of Acquisition	7 Amount of Encumbrances	8 Book/Adjusted Carrying Value Less Encumbrances	9 Additional Investment Made After Acquisition
	2 City	3 State						
Land	Bucyrus .....	..OH.....	..07/07/2017.....	Committed Builders Ltd .....	..3,100.....		..2,997.....	
Building	Bucyrus .....	..OH.....	..08/08/2017.....	Continental Office .....	..4,420.....		..4,273.....	
Building	Bucyrus .....	..OH.....	..08/08/2017.....	Grau Electric LTD .....	..4,833.....		..4,511.....	
Building	Bucyrus .....	..OH.....	..08/31/2017.....	J&B Acoustical, Inc. ....	..1,090.....		..1,085.....	
Land	Bucyrus .....	..OH.....	..09/01/2017.....	Wyss' Asphalt Preservation LLC .....	..15,150.....		..14,308.....	
0199999. Acquired by Purchase					28,593		27,174	
.....								
.....								
.....								
.....								
0399999 - Totals					28,593		27,174	

SCHEDULE A - PART 3

Showing All Real Estate DISPOSED During the Quarter, Including Payments During the Final Year on "Sales Under Contract"

1 Description of Property	Location		4 Disposal Date	5 Name of Purchaser	6 Actual Cost	7 Expended for Additions, Permanent Improvements and Changes in Encum- brances	8 Book/ Adjusted Carrying Value Less Encum- brances Prior Year	Change in Book/Adjusted Carrying Value Less Encumbrances					14 Book/ Adjusted Carrying Value Less Encum- brances on Disposal	15 Amounts Received During Year	16 Foreign Exchange Gain (Loss) on Disposal	17 Realized Gain (Loss) on Disposal	18 Total Gain (Loss) on Disposal	19 Gross Income Earned Less Interest Incurred on Encum- brances	20 Taxes, Repairs and Expenses Incurred
	2 City	3 State						9 Current Year's Depre- ciation	10 Current Year's Other Than Temporary Impairment Recognized	11 Current Year's Change in Encum- brances	12 Total Change in Book/ Adjusted Carrying Value (11-9-10)	13 Total Foreign Exchange Change in Book/ Adjusted Carrying Value							
Land	Bucyrus .....	..OH.....	..09/01/2017.....	Disposed .....	..18,560.....		..4,812.....	..2,139.....			..(2,139).....		..2,673.....			..(2,673).....	..(2,673).....		
0199999. Property Disposed					18,560		4,812	2,139			(2,139)		2,673			(2,673)	(2,673)		
.....																			
.....																			
.....																			
.....																			
.....																			
.....																			
.....																			
0399999 - Totals					18,560		4,812	2,139			(2,139)		2,673			(2,673)	(2,673)		

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

N O N E

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

N O N E

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual Insurance Company

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
199861-AU-8	COMANCHE CNTY OK EDUCNL FACS		07/19/2017	DA DAVIDSON		612,821	550,000		1FE
594615-BX-3	MICHIGAN ST BLDG AUTH REVENUE		08/23/2017	SIEBERT BRANFORD		289,343	250,000	4,618	1FE
3199999. Subtotal - Bonds - U.S. Special Revenues						902,164	800,000	4,618	XXX
756250-AC-3	BECKITT BENCKISER TSY	D	08/01/2017	US BANCORP		998,890	1,000,000	2,507	1FE
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						998,890	1,000,000	2,507	XXX
8399997. Total - Bonds - Part 3						1,901,054	1,800,000	7,125	XXX
8399998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX
8399999. Total - Bonds						1,901,054	1,800,000	7,125	XXX
8999997. Total - Preferred Stocks - Part 3							XXX		XXX
8999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks							XXX		XXX
9799997. Total - Common Stocks - Part 3							XXX		XXX
9799998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX
9799999. Total - Common Stocks							XXX		XXX
9899999. Total - Preferred and Common Stocks							XXX		XXX
9999999 - Totals						1,901,054	XXX	7,125	XXX

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

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual Insurance Company

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the 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	Consid- eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other Than Temporary Impairment Recogn- ized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	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 Con- tractual Maturity Date	NAIC Desig- nation or Market In- dicator (a)
3620AU-TE-4	GOVERNMENT NATL MTG ASSOC #740449		09/01/2017	PAYDOWN		9,502	9,502	9,885	9,553		(51)		(51)		9,502				282	11/15/2040	1FE
3620AW-TA-8	GOVERNMENT NATL MTG ASSOC #742245		09/01/2017	PAYDOWN		1,709	1,709	1,709	1,709						1,709				44	01/15/2041	1FE
3620C6-YU-3	GOVERNMENT NATL MTG ASSOC #750523		09/01/2017	PAYDOWN		887	887	887	887		(3)		(3)						24	11/15/2040	1FE
38373Q-GX-3	GOVERNMENT NATIONAL MORTGAGE A 03 34 PM		09/01/2017	PAYDOWN		2,386	2,386	2,462	2,395		(9)		(9)		2,386				64	04/20/2033	1FE
38373V-7A-2	GOVERNMENT NATIONAL MORTGAGE A 02 75 LA		09/01/2017	PAYDOWN		2,952	2,952	3,051	2,969		(17)		(17)		2,952				88	10/20/2032	1FE
38374T-LA-0	GOVERNMENT NATIONAL MORTGAGE A 09 15 NK		09/01/2017	PAYDOWN		1,067	1,067	1,097	1,076		(9)		(9)		1,067				32	12/20/2038	1FE
38376F-LH-3	GOVERNMENT NATIONAL MORTGAGE A 09 66 EJ		09/01/2017	PAYDOWN		1,918	1,918	2,000	1,931		(13)		(13)		1,918				53	07/16/2039	1FE
38376G-DN-7	GOVERNMENT NATIONAL MORTGAGE A 10 18 C		09/01/2017	PAYDOWN		939	939	985	944		(5)		(5)		939				27	03/16/2051	1FE
38376T-BF-8	GOVERNMENT NATIONAL MORTGAGE A 10 12 DA		09/01/2017	PAYDOWN		2,195	2,195	2,271	2,206		(11)		(11)		2,195				68	01/16/2040	1FE
38377V-2M-7	GOVERNMENT NATIONAL MORTGAGE A 11 71 OE		09/01/2017	PAYDOWN		9,277	9,277	9,711	9,385		(109)		(109)		9,277				213	09/16/2040	1FE
0599999.Subtotal - Bonds - U.S. Governments						32,832	32,832	34,094	33,058		(227)		(227)		32,832				895	XXX	XXX
93974D-NK-0	WASHINGTON ST		07/01/2017	PREREFUNDED		185,000	185,000	195,660	185,653		(653)		(653)		185,000				9,250	07/01/2020	1FE
1799999.Subtotal - Bonds - U.S. States, Territories and Possessions						185,000	185,000	195,660	185,653		(653)		(653)		185,000				9,250	XXX	XXX
130333-CB-1	CALIFORNIA ST HSG FIN AGY RSOL		09/01/2017	SINK FUND PAYMENT		4,449	4,449	4,432	4,447		2		2		4,449				85	02/01/2042	1FE
20774U-WR-2	CONNECTICUT ST HLTH & EDUCNL		07/01/2017	MATURITY		250,000	250,000	262,198	255,267		(5,267)		(5,267)		250,000				12,500	07/01/2017	1FE
3128LX-C3-2	FEDERAL HOME LN MTG CORP #G01890		09/01/2017	PAYDOWN		4,361	4,361	4,569	4,399		(38)		(38)		4,361				132	10/01/2035	1FE
3128MJ-RJ-1	FEDERAL HOME LN MTG CORP #G08488		09/01/2017	PAYDOWN		9,926	9,926	10,146	9,944		(18)		(18)		9,926				231	04/01/2042	1FE
3128MI-AS-2	FEDERAL HOME LN MTG CORP #G18016		09/01/2017	PAYDOWN		1,673	1,673	1,706	1,677		(4)		(4)		1,673				55	10/01/2019	1FE
3128MI-LD-3	FEDERAL HOME LN MTG CORP #G18323		09/01/2017	PAYDOWN		2,686	2,686	2,764	2,701		(15)		(15)		2,686				81	09/01/2024	1FE
31294K-YB-5	FEDERAL HOME LN MTG CORP #E01606		09/01/2017	PAYDOWN		3,141	3,141	3,191	3,147		(5)		(5)		3,141				94	04/01/2019	1FE
3132GS-GM-5	FEDERAL HOME LN MTG CORP #Q07104		09/01/2017	PAYDOWN		2,178	2,178	2,227	2,180		(2)		(2)		2,178				51	04/01/2042	1FE
3132GS-K8-1	FEDERAL HOME LN MTG CORP #Q07219		09/01/2017	PAYDOWN		9,298	9,298	9,504	9,317		(19)		(19)		9,298				236	04/01/2042	1FE
3132MA-NN-7	FEDERAL HOME LN MTG CORP #Q29697		09/01/2017	PAYDOWN		8,297	8,297	8,619	8,320		(23)		(23)		8,297				197	11/01/2044	1FE
3132LJ-6N-8	FEDERAL HOME LN MTG CORP #Q30876		09/01/2017	PAYDOWN		20,846	20,846	21,898	20,907		(61)		(61)		20,846				480	01/01/2045	1FE
3136A7-GW-6	FANNIE MAE 12 67 KA		09/01/2017	PAYDOWN		14,430	14,430	15,196	14,561		(131)		(131)		14,430				336	05/25/2041	1FE
3136A7-QU-9	FANNIE MAE 12 86 CF		09/25/2017	PAYDOWN		16,537	16,537	16,558	16,541		(4)		(4)		16,537				151	04/25/2039	1FE
3136AD-EF-2	FANNIE MAE 13 36 AG		09/01/2017	PAYDOWN		7,123	7,123	7,270	7,140		(18)		(18)		7,123				140	12/25/2036	1FE
3136AJ-GB-7	FANNIE MAE 14 27 NV		09/01/2017	PAYDOWN		4,310	4,310	4,458	4,324		(13)		(13)		4,310				86	06/25/2027	1FE
3136AK-DG-5	FANNIE MAE 14 36 QB		09/01/2017	PAYDOWN		7,124	7,124	7,290	7,142		(18)		(18)		7,124				141	09/25/2033	1FE
3136AK-P4-9	FANNIE MAE 14 54 PN		09/01/2017	PAYDOWN		8,472	8,472	8,824	8,498		(27)		(27)		8,472				202	08/25/2043	1FE
3136AL-MX-6	FANNIE MAE 14 73 PJ		09/01/2017	PAYDOWN		9,275	9,275	9,580	9,313		(38)		(38)		9,275				185	12/25/2043	1FE
31376K-GX-8	FEDERAL NATIONAL MTG ASSOC #357614		09/01/2017	PAYDOWN		2,873	2,873	2,927	2,880		(7)		(7)		2,873				96	09/01/2019	1FE
31376K-LZ-7	FEDERAL NATIONAL MTG ASSOC #357744		09/01/2017	PAYDOWN		3,742	3,742	3,693	3,732		10		10		3,742				112	04/01/2020	1FE
3137B9-BZ-7	FHLMC MULTIFAMILY STRUCTURED P KF03 A		09/25/2017	PAYDOWN		9,620	9,620	9,620	9,620						9,620				71	01/25/2021	1FE
3137BC-R6-7	FREDDIE MAC 4374 CE		09/01/2017	PAYDOWN		10,092	10,092	10,548	10,150		(58)		(58)		10,092				236	12/15/2043	1FE
3137BD-ZX-7	FREDDIE MAC 4387 KG		09/01/2017	PAYDOWN		8,004	8,004	8,452	8,172		(168)		(168)		8,004				222	02/15/2039	1FE
3138EV-2N-8	FEDERAL NATIONAL MTG ASSOC #AL6180		09/01/2017	PAYDOWN		36,924	36,924	39,636	37,090		(166)		(166)		36,924				916	01/01/2045	1FE
3138EP-W5-9	FEDERAL NATIONAL MTG ASSOC #AL6956		09/01/2017	PAYDOWN		23,400	23,400	24,332	23,456		(56)		(56)		23,400				558	06/01/2045	1FE
3138M9-PE-5	FEDERAL NATIONAL MTG ASSOC #AP5820		09/01/2017	PAYDOWN		19,154	19,154	20,166	19,257		(103)		(103)		19,154				367	11/01/2042	1FE
3138W1-GD-3	FEDERAL NATIONAL MTG ASSOC #AR3795		09/01/2017	PAYDOWN		2,513	2,513	2,587	2,516		(4)		(4)		2,513				50	02/01/2043	1FE
3138W4-M2-4	FEDERAL NATIONAL MTG ASSOC #AR6676		09/01/2017	PAYDOWN		53,763	53,763	55,745	53,907		(144)		(144)		53,763				1,057	02/01/2043	1FE
31393C-SR-0	FANNIE MAE 03 66 MB		09/01/2017	PAYDOWN		1,435	1,435	1,468	1,442		(7)		(7)		1,435				33	05/25/2023	1FE
31393R-TE-0	FREDDIE MAC 2631 DA		09/01/2017	PAYDOWN		1,214	1,214	1,203	1,212		2		2		1,214				29	06/15/2033	1FE
31394K-L3-6	FREDDIE MAC 2682 TF		09/15/2017	PAYDOWN		9,964	9,964	10,042	9,973		(9)		(9)		9,964				86	10/15/2033	1FE
31394R-Y6-0	FREDDIE MAC 2761 QB		09/01/2017	PAYDOWN		2,785	2,785	2,851	2,800		(15)		(15)		2,785				70	12/15/2033	1FE
31396Y-SH-6	FANNIE MAE 08 17 DP		09/01/2017	PAYDOWN		1,894	1,894	1,979	1,913		(19)		(19)		1,894				59	02/25/2038	1FE
31397C-V5-5	FREDDIE MAC 3239 EF		09/15/2017	PAYDOWN		5,322	5,322	5,331	5,323		(1)		(1)		5,322				43	11/15/2036	1FE
31398C-D4-7	FREDDIE MAC 3527 DA		09/01/2017	PAYDOWN		1,501	1,501	1,556	1,514		(13)		(13)		1,501				40	04/15/2029	1FE
31398S-OH-4	FANNIE MAE 10 122 AC		09/01/2017	PAYDOWN		3,262	3,262	3,414	3,281		(19)		(19)		3,262				77	08/25/2022	1FE
31398V-YJ-9	FREDDIE MAC 3653 KN		09/01/2017	PAYDOWN		2,301	2,301	2,362	2,317		(15)		(15)		2,301				66	08/15/2038	1FE
31402C-V7-4	FEDERAL NATIONAL MTG ASSOC #725238		09/01/2017	PAYDOWN		1,493	1,493	1,399	1,481		13		13		1,493				49	03/01/2034	1FE
31402W-VS-4	FEDERAL NATIONAL MTG ASSOC #740525		09/01/2017	PAYDOWN		2,377	2,377	2,430	2,382		(6)		(6)		2,377				79	10/01/2018	1FE
31417S-AP-5	FEDERAL NATIONAL MTG ASSOC #AC5413		09/01/2017	PAYDOWN		5,414	5,414	5,605	5,454		(40)		(40)		5,414				162	10/01/2024	1FE
31418N-QV-5	FEDERAL NATIONAL MTG ASSOC #AD1367		09/01/2017	PAYDOWN		31,290	31,290	32,649	31,546		(256)		(256)		31,290				886	03/01/2025	1FE
31418P-6M-2	FEDERAL NATIONAL MTG ASSOC #AD2675		09/01/2017	PAYDOWN		2,255	2,255	2,307	2,307		(53)		(53)		2,255				67	03/01/2025	1FE
31418P-K7-9	FEDERAL NATIONAL MTG ASSOC #AD2117		09/01/2017	PAYDOWN		5,120	5,120	5,342	5,170		(50)		(50)		5,120				165	03/01/2025	1FE
60416Q-GB-4	MINNESOTA ST HSG FIN AGY HOME		09/01/2017	SINK FUND PAYMENT		9,479	9,479	9,479	9,479						9,479				189	11/01/2044	1FE

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE Ohio Mutual Insurance Company

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the 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 Ident- ification	Description	For- eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid- eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other Than Temporary Impairment Recog- nized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	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 Con- tractual Maturity Date	NAIC Desig- nation or Market In- dicator (a)	
60534R-YW-3	MISSISSIPPI ST DEV BANK SPL OB		08/03/2017	RAMIREZ & CO INC		260,937	250,000	250,000	250,000						250,000		10,938	10,938	10,227	03/01/2024	2FE	
613349-2F-5	MONTGOMERY CNTY MD HSG OPPORTU		07/01/2017	SINK FUND PAYMENT		15,000	15,000	16,119	15,124		(123)		(123)		15,000				600	01/01/2031	1FE	
65901M-EJ-9	NORTH DAKOTA ST WTR COMMISSION		07/01/2017	PREREFUNDED		200,000	200,000	207,170	200,440		(439)		(439)		200,000				10,000	07/01/2022	1FE	
92818H-AH-4	VIRGINIA ST PUBLIC SCH AUTH SC		08/24/2017	HILLTOP SECURITIES		295,297	250,000	303,250	289,438		(4,444)		(4,444)		284,993		10,303	10,303	13,472	08/01/2022	1FE	
3199999. Subtotal - Bonds - U.S. Special Revenues						1,412,551	1,356,317	1,444,138	1,403,201		(11,889)		(11,889)		1,391,310		21,241	21,241	55,467	XXX	XXX	
14041N-DT-5	CAPITAL ONE MULTI-ASSET 07 A5 A5		09/15/2017	PAYDOWN		250,000	250,000	246,895	249,658		341		341		250,000				1,925	07/15/2020	1FE	
14313N-AD-4	CARMAX AUTO OWNER TRUST 13 3 A4		09/15/2017	PAYDOWN		53,192	53,192	53,190	53,191		1		1		53,192				527	01/01/2019	1FE	
17320D-AC-2	CITIGROUP COMMERCIAL MORT 13 GC11 A2		09/01/2017	PAYDOWN		37	37	37	37						37				1	04/10/2046	1FM	
61766C-AA-7	MORGAN STANLEY CAPITAL I TR 16 UBS9 A1		09/01/2017	PAYDOWN		9,862	9,862	9,862	9,862						9,862				113	03/15/2049	1FM	
79548K-LV-8	SALOMON BROTHERS MORTGAGE 97 HUD1 B3		09/01/2017	PAYDOWN			1,539												63	12/25/2030	1FM	
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						313,091	314,630	309,984	312,748		342		342		313,091				2,629	XXX	XXX	
8399997. Total - Bonds - Part 4						1,943,474	1,888,779	1,983,876	1,934,660		(12,427)		(12,427)		1,922,233		21,241	21,241	68,241	XXX	XXX	
8399998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999. Total - Bonds						1,943,474	1,888,779	1,983,876	1,934,660		(12,427)		(12,427)		1,922,233		21,241	21,241	68,241	XXX	XXX	
8999997. Total - Preferred Stocks - Part 4							XXX													XXX	XXX	
8999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks							XXX													XXX	XXX	
9799997. Total - Common Stocks - Part 4							XXX													XXX	XXX	
9799998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999. Total - Common Stocks							XXX													XXX	XXX	
9899999. Total - Preferred and Common Stocks							XXX													XXX	XXX	
9999999 - Totals						1,943,474	XXX	1,983,876	1,934,660		(12,427)		(12,427)		1,922,233		21,241	21,241	68,241	XXX	XXX	

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

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open
N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open
N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made
N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To
N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned
N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned
N O N E

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
					First Month	Second Month	Third Month	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date				*
Citizens Bank Providence, Rhode Island	SD					2	2	.XXX.
Fifth Third Bank Cincinnati, Ohio	SD		641		1	1		.XXX.
Fifth Third Bank Cincinnati, Ohio			2,015		13	1	1	.XXX.
United Bank, N.A. Bucyrus, Ohio			3,023		5,466,270	5,764,444	6,471,295	.XXX.
0199998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX						XXX
0199999. Totals - Open Depositories	XXX	XXX	5,679		5,466,284	5,764,448	6,471,298	XXX
0299998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX						XXX
0299999. Totals - Suspended Depositories	XXX	XXX						XXX
0399999. Total Cash on Deposit	XXX	XXX	5,679		5,466,284	5,764,448	6,471,298	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	500	500	500	XXX
0599999. Total - Cash	XXX	XXX	5,679		5,466,784	5,764,948	6,471,798	XXX

Schedule E - Part 2 - Cash Equivalents - Investments Owned End of Current Quarter

N O N E